



COUNTY PREVENTION PLAN 2021-22

Yuba County Child Abuse Prevention Council



Table of Contents

CHILD ABUSE PREVENTION COUNCIL VISION & GOAL	1
Vision	1
Overarching Goal	1
NEEDS ASSESSMENT	2
County Needs.....	2
Secondary and Local Data	2
Yuba County Community Survey	4
Focus Groups	5
Identifying Priorities.....	6
GOAL 1: INCREASE PARENT COMPETENCY	7
Specific Drivers.....	7
Outcomes	7
Community Needs	7
Potential Strategies & Activities.....	8
GOAL 2: INCREASE ACCESS TO BEHAVIORAL HEALTH	9
Specific Drivers.....	9
Outcomes	9
Community Needs	9
Potential Strategies & Activities.....	9
GOAL 3: IMPROVE MATERNAL AND CHILD PERINATAL HEALTH	11
Specific Drivers.....	11
Outcomes	11
Community Needs	11
Potential Strategies & Activities.....	11
PROPOSED WORKGROUPS FOR PRIORITY ACTIVITIES.....	13
Activity Monitoring in Year 1.....	14
APPENDIX A: GOAL SNAPSHOTS	16
Goal 1: Increase Parent Competence	16
Goal 2: Increase Access to Behavioral Health.....	17
Goal 3: Improve Maternal, Paternal, and Child Perinatal Health	18

Child Abuse Prevention Council Vision & Goal

In 2021-22, the Child Abuse Prevention Council (CAPC) of Yuba County partnered with Applied Survey Research (ASR) to conduct a **needs assessment** of relevant risk factors in our community, and help the Council agree on **goal and strategies** to prevent child abuse in Yuba County.

The vision and overarching goal of Yuba County CAPC are as follows:

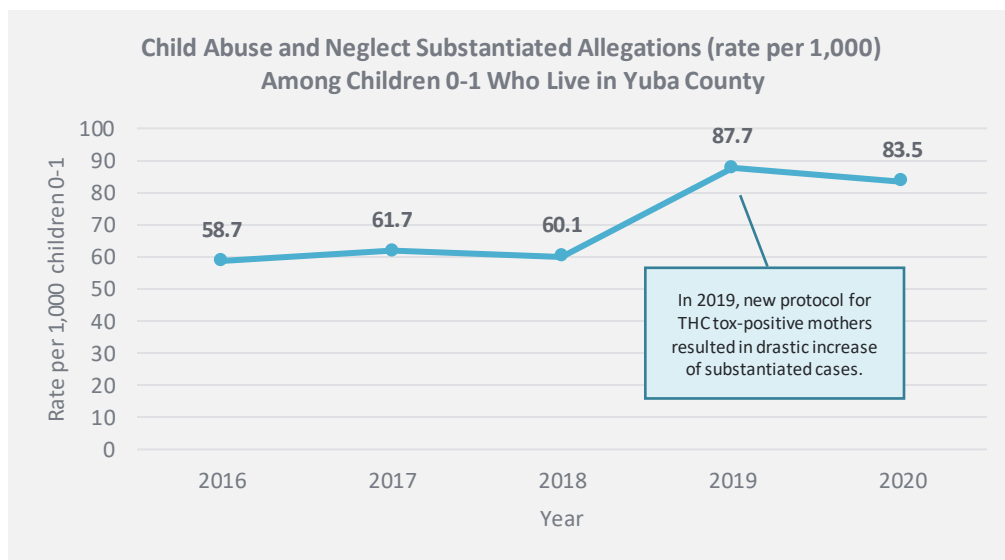
VISION

End child abuse and neglect in Yuba County by empowering all families with the skills and access to resources that will help them thrive and promote their child's health and safety.

OVERARCHING GOAL

Increase prevention efforts to promote the reduction of child abuse and neglect **substantiations** (rate per 1,000) among **children 0-1 who live in Yuba County** from 2020 baseline.

The Overarching Goal is focused on helping reduce the rate of substantiated maltreatment amongst infants because of the alarming increase in recent years. Secondly, strengthening the families of infants would logically result in reduced risk of maltreatment amongst their children in later years.



Needs Assessment

COUNTY NEEDS

The CAPC of Yuba County partnered with ASR to conduct a **needs assessment** to look at local community indicator data to identify relevant risk factors in our community. This included the collection of secondary data and local data into an [online interactive data dashboard](#), as well as focus groups with community members of professionals from family-serving organizations and agencies.

Secondary and Local Data

- Outcomes: maltreatment allegations, substantiations, and foster care entry rates.
- Population: population characteristics by race/ethnicity for adults, children, and by zip code.
- Risk Factors: characteristics of children and families that are associated with increased risk such as special health care needs, poverty, employment, education, rates of domestic violence, substance use, etc.
- Local Data: includes trend and location-based data from Child & Adult Protective Services, First 5 Yuba County, Yuba County Office of Education, Adult and Juvenile Probation, Substance Use Prevention, data on homelessness, living wage estimates, and incidents of child deaths (children 0-5 where negligence may have contributed).

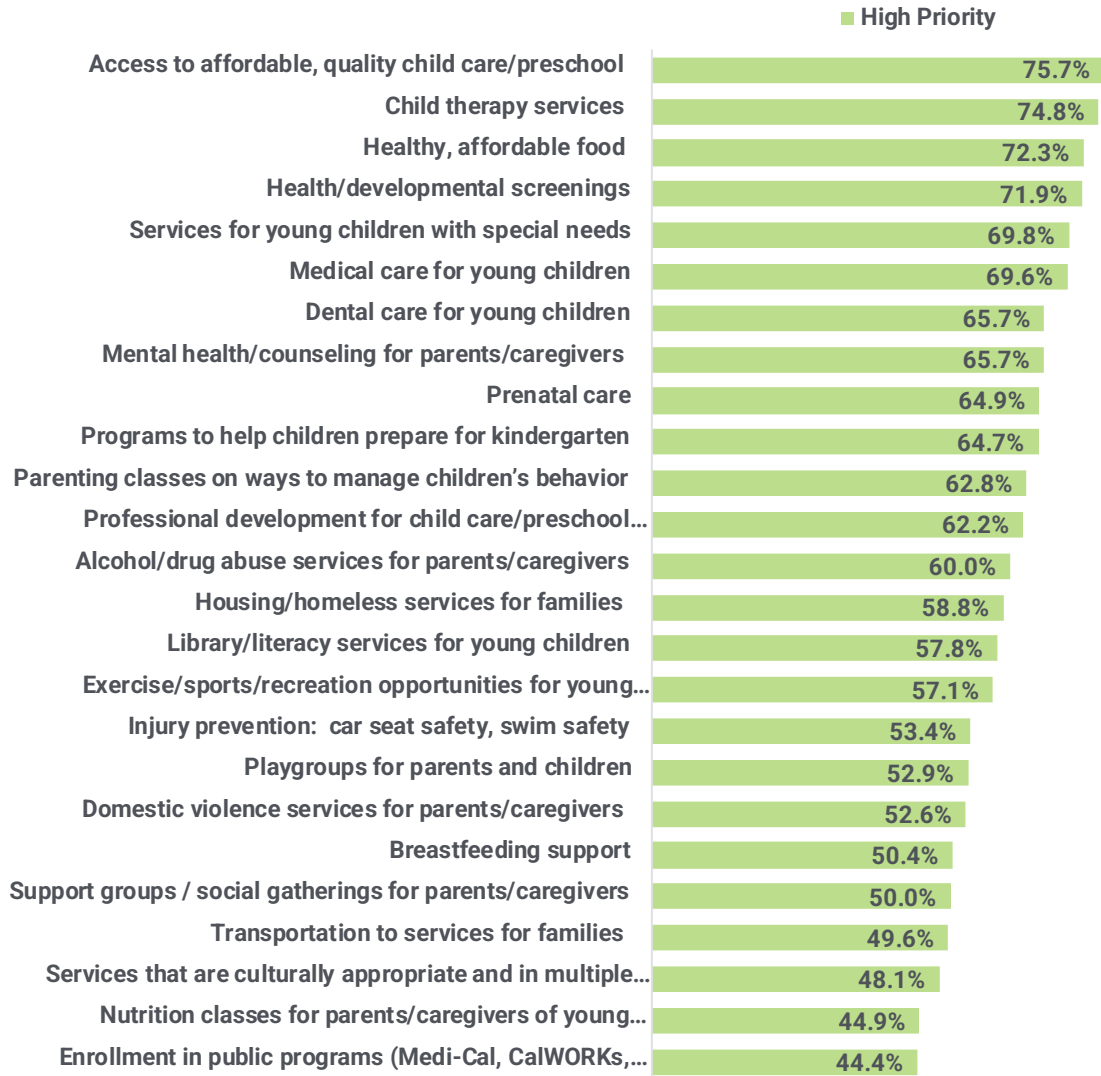
Highlighted Findings

Outcomes	<ul style="list-style-type: none"> • The rate of child maltreatment allegations per 1,000 children in Yuba County is higher than rates statewide. Rates of allegations in Yuba County showed a steady decline between 2017 through 2019, and a similar trend was observed statewide. However, in 2020 the rate of allegations decreased in California while the rate increased in Yuba County.
	<ul style="list-style-type: none"> • Rates of allegations among Black children and infants (under 1 year old) were disproportionately represented in Yuba County in 2020.
	<ul style="list-style-type: none"> • The rate of substantiated allegations among infants under 1 is four times the statewide rate in 2020.
Population	<ul style="list-style-type: none"> • The population in Yuba County is predominately White (57%) and Hispanic (27%). The most diverse zip codes are in the southern part of the county and include 95961, 95903, and 95901.
Risk Factors for Children	<ul style="list-style-type: none"> • Nearly 15% of children have special health care needs, and the rate of children enrolled in special education shows a slight increase each year reaching about 17% in 2019.
	<ul style="list-style-type: none"> • About 13% of children under 18 in Yuba County are living in poverty. The zip codes with the highest rates of children living in poverty include 95977, 95961, 95919, 95901, and 95925.
Risk Factors for Adults/Families	<ul style="list-style-type: none"> • The unemployment rate in Yuba County is almost 8%. In zip code 95925 the unemployment rate is almost 11% and is the highest in zip code 95941 at 53%.
	<ul style="list-style-type: none"> • In Yuba County about 25% of adults are high school graduates and an additional 18% have less than a high school equivalent. Rates of low educational attainment are highest in two zip codes: 95961 and 95935.
	<ul style="list-style-type: none"> • The California Department of Justice collects information about domestic violence-related calls for assistance which shows that the rate per 1,000 population is higher in Yuba County than California and has been steadily rising between 2016 and 2020. Trends from the Greater Sacramento Region MIHA report show that nearly 8% of pregnant women experience intimate partner violence during pregnancy.
	<ul style="list-style-type: none"> • In 2020, 20% of adults needed support for mental health needs or alcohol/drug use in Yuba County.
Child and Adult Protective Services	<ul style="list-style-type: none"> • In 2021, 200 out of 1,256 allegations cases were substantiated cases of maltreatment. Of the 674 cases that were evaluated out, only 33% (225) were referred to additional services.
First 5 Strategic Plan	<ul style="list-style-type: none"> • The percent of children 0-5 living in poverty in Yuba County has declined since 2016 (from 31% to 25%) based on multiyear estimates. However, there are disparities between ethnic groups.
	<ul style="list-style-type: none"> • The percent of cost-burdened households paying more than 30% for housing in Yuba County is steadily decreasing, from 46% in 2014 to 39% in 2018.

	<ul style="list-style-type: none"> The teen birth rate for women has also declined since 2013-2015, with rate at 24 per 1,000 women aged 15-19 in 2016-18. However, percent of mothers who received adequate and adequate plus prenatal care has declined slightly from 2013-15 through 2016-18. Similarly, in this same period, the percent of children born low birth weight has slightly increased from 6.4% to 7.4%. Breastfeeding rates increased across the county, but not for African Americans. The rates for prenatal and postpartum depressive symptoms across the greater Sacramento region are about 12% and are slightly lower compared to those for statewide rates when looking at 2013-15. The percentage of children aged 3-4 in preschools in Yuba County initially increased but has since decreased to 42% in 2018. At the same time, the number of licensed childcare center spaces for children 0-5 has declined from 1,111 in 2014. In the most recent year, however, childcare spaces have increased from 785 in 2017 to 918 in 2019. Adults in households with children in Yuba County experienced fewer ACEs in the period 2011-2017 compared to that of the state. However, babies born countywide held slightly fewer average assets compared to babies born statewide. First 5 Yuba County has substantially increased developmental screenings (ASQ-3) from 113 screenings in 2017 to 310 screenings in 2021. About 22% of screenings conducted in 2021 revealed a developmental need for a child 0-5 years of age.
Education	<ul style="list-style-type: none"> In 2020-21, school districts in Yuba County have higher rates of chronic absenteeism and dropout rates than statewide averages. The highest rates of chronic absenteeism and dropout rates are found in Yuba County Office of Education which serves students in alternative sites. In 2020-21 school year there were 360 active SARB cases (School Attendance Review Board) for students who were absent for more than 10% of the school year. There were 237 students who improved their attendance and received certificates.
Adult and Juvenile Probation	<ul style="list-style-type: none"> In February 2022, there were 394 individuals on probation (juvenile and adult) in Yuba County and 90% of them are from two zip codes in the south part of the county (95901 and 95961).
Substance Use Prevention Monitoring	<ul style="list-style-type: none"> First Steps is an intensive treatment program for substance abusing mothers. Since the onset of the pandemic, there has been an increase in new assignments in First Steps (unduplicated) in 2020 and 2021, accounting for nearly double the count of participants in 2019. The overall participation in Options for Change is much higher than First Steps, but participation since the onset of the pandemic shows a drastic decrease (from 291 unduplicated new assignments in 2019 to 193 in 2020 and 188 in 2021).
Living Wage	<ul style="list-style-type: none"> MIT's Living Wage Calculator shows that in Yuba County for households with two adults and two children, each adult would need to earn \$23.48/hr. to make a living wage. That is double the minimum wage level, and the disparity increases for each additional child. According to MIT's Living Wage Calculator the typical childcare expenses in Yuba County are about \$8,348 per child. For families with two children this accounts for 25% of the median income for families in Yuba County.
Homelessness	<ul style="list-style-type: none"> The most recent year of data available (2021) shows a 63% increase in the population of people experiencing homelessness. Of the 697 people experiencing homelessness in 2021, 80% (556) were not sheltered. In 2021, 30% of people experiencing homelessness were under 18 accounting for 207 children. Only 39 of them were sheltered. The most common reasons that people were experiencing homelessness in 2021 was due to lost job or unemployment, inability to pay rent/mortgage, family conflict, and eviction/foreclosure. Substance use, divorce, and family illness/death were also notable reasons for experiencing homelessness.
Child Death Review Team	<ul style="list-style-type: none"> Deaths for children 5 and younger over the past five years were analyzed to better understand opportunities for preventing incidents that were potentially related to child abuse and neglect. The number of child deaths for children 5 and younger that were potentially preventable with child abuse and neglect prevention strategies have decreased since 2019. Out of 21 cases, 10 involve drug use during pregnancy, and 5 involve asphyxiation due to unsafe infant sleep practices.

Yuba County Community Survey

In August 2020, a community survey was distributed online by First 5 Yuba and garnered 139 responses. Among other questions, residents were given a list of needs and asked, “How much of a priority are the following service needs for young children (ages 0-5) and families in Yuba County?” As seen below, respondents felt that the highest priority need for families with young children was *affordable quality childcare*, followed by *child therapy*, *healthy food*, *health and developmental screenings*, and *services for children with special needs*.



Source: Yuba Community Survey 2020. N=133-139.

Focus Groups

ASR conducted focus groups with professionals and community members who can review current county trends in child abuse and identify the most pressing child abuse prevention needs to address any gaps present in these systems within Yuba County. Focus group participants were asked three key questions:

- What do you see in this county-level trend data? Are we getting better? Getting worse? Are there some ages or ethnic groups experiencing more maltreatment than others?
- Why are these trends happening? What are the causes or “drivers” of maltreatment in Yuba County?
- Given finite resources, what are the top 3 most important strategies that YUBA CAPC can support in order to prevent child maltreatment in Yuba County?

This information was summarized by ASR to identify the “drivers” of maltreatment and the potential strategies for consideration in the countywide prevention plan.

	Community Members	Professionals	Themes
Drivers	<ul style="list-style-type: none"> • Stressors related to the pandemic (employment, childcare, parent as educator, full-time parenting) • Parents lack skills and need additional support (especially during pandemic) • Postpartum depression/anxiety • Identification of mental health issues within systems that result in punitive responses • Substance use 	<ul style="list-style-type: none"> • Lack of services due to the pandemic • Lack of public engagement and lack of awareness about support/programs • Lack of awareness among professionals across systems to effectively respond to family needs without involving CPS • Barriers to accessing mental health services and primary care • Other: domestic violence, economic security, generational trauma, and homelessness 	<ul style="list-style-type: none"> • Pandemic impact • Lack of skills • Barriers to care
Strategies	<ul style="list-style-type: none"> • Reduce barriers to participating in parenting education (childcare, transportation, virtual, night/weekend classes, audiobooks) • Strengths-based, positive supports to increase parenting skills in a way that can “empower and lift families up” (Financial literacy, No Drama Discipline, Focus on special needs) • Leverage social media and online spaces to advertise and make resources readily available • Increase after-school programs and activities to manage child behavior and time (not tied to school, affordable, available in low-income communities) 	<ul style="list-style-type: none"> • Reinstate prevention services that were impacted by the pandemic. • Increase parent engagement in peer mentoring and parent education opportunities • Empower and support education and health providers to better understand how to support families and avoid unnecessary entry to CPS. • Reduce the barriers to services such as formal assessments, paperwork for intake, and eligibility criteria (“no wrong door”) • Ensure that the prevention plan is messaged to community leaders, measured, and sustained. 	<ul style="list-style-type: none"> • Pandemic response • Empower families • Increase access • Sustainability

IDENTIFYING PRIORITIES

The Yuba County CAPC reviewed all data collected as part of the countywide needs assessment to begin to identify unmet needs of families that are potentially the “drivers” of maltreatment. Once the drivers were identified, the CAPC identified prevention **strategies and activities** to address those unmet needs. To make the prevention plan concise and manageable, these drivers and strategies are organized below by **priority area**.

Drivers

Lack of parent knowledge or understanding of positive parenting approaches, child development, and available resources or supports.



Lack of self-sufficiency leads to frustration and increased parenting stress.



Lack of access to services due to bureaucratic barriers.



Lack of access to mental health supports.



Lack of access to substance use intervention supports.



Lack of parent knowledge or understanding about safe sleep practices for infants.



High prevalence of infant deaths due to unsafe sleep practices and/or substance exposure.



Lack of integration across systems to support new parents who are at-risk for experiencing parental stress.



Strategies & Activities

PREVENTION

Parent education

- Outreach to prenatal and pediatric providers; Education campaigns.
- Include safe sleep practices.
- Include substance use.
- Range of offerings (e.g., Triple P).
- Virtual and in-person; Access to audiobooks.
- Access for all families; not just court mandated.

EARLY INTERVENTION

Cross-systems navigation

- Case manager not tied to any one system, but knowledgeable about all supports; can break through bureaucratic barriers to connect families to services/resources.
- Offers case management for several months if needed.

Increase availability of mental health services

- Reduce eligibility barriers by expanding services.
- Increase staffing and professional development for specialized therapy services.

DEEPER INTERVENTION

Home visiting

- Perinatal focused (before and after birth).
- Offers case management.
- Weaves in Safe Sleep messages and substance use prevention.

Outcomes

Increase Parent Competence

- Improved understanding of child development/ developmentally appropriate expectations.
- Parents have skills to manage parenting stress.
- Parents are empowered and know where to find resources.
- Improved connections to concrete resources in times of need.

Increase Access to Behavioral Health

- Improved knowledge of mental health and coping techniques.
- Improved access to mental health resources.
- Improved access to substance use intervention services.

Improve Maternal and Child Perinatal Health

- Improved birth outcomes (weight and term).
- Reduced exposure to substances.
- Improved sleep practices.

Goal 1: Increase Parent Competency

SPECIFIC DRIVERS

- Lack of parent knowledge or understanding of positive parenting approaches, child development, and available resources or supports.
- Lack of self-sufficiency leads to frustration and increased parenting stress.

OUTCOMES

- Improved understanding of child development/ developmentally appropriate expectations.
- Parents have skills to manage parenting stress.
- Parents are empowered and know where to find resources.
- Improved connections to concrete resources in times of need.

COMMUNITY NEEDS

The needs assessment conducted by the YUBA CAPC revealed the following needs:

- The rate of child maltreatment allegations per 1,000 children in Yuba County is higher than rates statewide. **In 2020 the rate of allegations decreased in California while the rate increased in Yuba County.** This recent spike in allegations in Yuba County could be explained by a **change in policy which requires health systems to report suspected cases of child abuse and neglect to the Child and Adult Protective Services agency for substance exposure during pregnancy for marijuana use.** Although marijuana is now a legal substance and is often used to alleviate feelings of anxiety and depression, it is a danger to pregnant mothers and their babies.
- The rate of **substantiated allegations among infants under 1 is four times the statewide rate in 2020.** This underscores the need to support families who are “new parents” or who have a newborn in the household. There is a lot of **stress and potentially postpartum anxiety and depression** associated with the first year of life.
- In 2020, 20% of adults needed support for mental health needs or alcohol/drug use in Yuba County. **Mental and behavioral health supports are needed** for one-fifth of the adult population, and 66% of parents surveyed for the Yuba County Community Survey indicated that **mental health and counseling for parents/caregivers** is a “high priority.”
- Deaths for children 5 and younger over the past five years were analyzed to better understand opportunities for preventing incidents that were potentially related to child abuse and neglect. Out of 21 cases, 10 involve **drug use during pregnancy**, and 5 involve **asphyxiation due to unsafe infant sleep practices.**
- Other sources of **parental stress may derive from financial stability.** About 13% of children under 18 in Yuba County are living in poverty. The unemployment rate in Yuba County is almost 8%. There is a lot of variation of financial stability across Yuba County’s geography, indicating a higher need in the foothill communities.
- Parents with children who have special health care needs (15% of children), or parents of children who are enrolled in special education (17%) are also likely dealing with **stress associated with managing care and managing expectations.** First 5 Yuba County has substantially increased developmental screenings (ASQ-3) for children 0-5 years of age and about 22% of screenings conducted in 2021 revealed a developmental need for intervention and support. The Yuba County Community Survey also revealed that parents are interested in **accessing child therapy services, health/developmental screenings, and services for children with special needs** as a top priority.
- The Yuba County Community Survey shows that 63% of parents feel that **parenting classes on ways to manage children’s behavior** should be a “high priority” to support families.

- Focus groups with community members and professionals working in child- and family-serving systems agreed that the **pandemic has exacerbated parental stressors and created new stressors**. Stress in combination with a **lack of skills or awareness about support programs** were perceived as being significant factors that may contribute to child maltreatment in Yuba County.

POTENTIAL STRATEGIES & ACTIVITIES

In addition to current strategies implemented throughout the county (Appendix A), the Yuba CAPC has identified new opportunities or programs that can be expanded to better serve families. To achieve desired outcomes to increase parent competency, strategies may include (* indicates prioritized for implementation):

- ▶ **Parent Education:** Ensure families are connected to **a range of educational opportunities that are available to all families** and not only those who are court mandated to attend.
 - Proposed New/Expanded Programs:
 - * Expand parenting education opportunities that are already in place to **recruit all families** and specifically seek opportunities to **engage fathers**.
 - * **Increase access to trainings** for professionals that work with parents.
 - * Increase access to educational materials through **audiobooks** and provide education courses in **virtual and in-person** environments (Family Resource Centers).
- ▶ **Cross-systems Navigation:** For families with signs of early intervention, **connect families to services and resources in times of need** by supporting case managers and Family Resource Centers who are not tied to any one system, but knowledgeable about all supports.
 - Proposed New/Expanded Programs:
 - * Fund and sustain **Family Navigators** that act as case managers to support families to identify relevant resources from across the service spectrum and help address access barriers. Family Navigators should represent the cultural make-up of families in Yuba County and will be trained to implement trauma-informed and culturally competent practices.
 - * Leverage **existing resource lists** to support the Family Navigator, Family Resource Centers, and other case managers working with children and families throughout the county. This includes training staff to utilize PACEs, FindHelp, and existing resource lists from community partners.
 - Increase capacity of **Help Me Grow to help families navigate support systems and obtain the services they need**. Grantees and Help Me Grow staff can determine whether families have a primary medical home, and if not, can offer referrals for Medi-Cal enrollment and related transportation services.
- ▶ **Home Visiting:** For families with needs for deeper intervention, **offer ongoing and intensive case management to support families in times of need**.
 - Proposed New/Expanded Programs:
 - * Increase capacity to serve all families by **increasing the availability of general referral spaces** to existing home visiting programs.
 - Explore opportunities to **expand evidence-based training** for home visitors (e.g., Parents as Teachers).
 - Increase **outreach to ensure families are connected** to home visiting programs.
 - Explore **modalities complementary** to currently used evidence-based practices.
 - * Train home visitors and Family Resource Center staff to support families like the **Family Navigators** to locate relevant services and supports in a way that helps to overcome barriers to services.

* Indicates strategies that are prioritized for the first year of implementation.

Goal 2: Increase Access to Behavioral Health

SPECIFIC DRIVERS

- Lack of access to services due to bureaucratic barriers.
- Lack of access to mental health supports.
- Lack of access to substance use intervention supports

OUTCOMES

- Improved knowledge of mental health and coping techniques.
- Improved access to mental health resources.
- Improved access to substance use intervention services.

COMMUNITY NEEDS

The needs assessment conducted by the YUBA CAPC revealed the following needs:

- Focus groups with the community and professionals in child- and family-serving organizations revealed that postpartum depression and anxiety, substance use and a lack of identification of substance use disorders, and barriers to care or a lack of awareness about how to get support to address these needs likely to be associated with child maltreatment in Yuba County. Furthermore, the pandemic resulted in many services being shut down and have yet to be restored in the community.
- In 2020, 20% of adults needed support for mental health needs or alcohol/drug use in Yuba County. **Mental and behavioral health supports are needed** for one-fifth of the adult population, and parents surveyed for the Yuba County Community Survey indicated that **mental health and counseling for parents/caregivers** and **child therapy services** should be a “high priority” to support families.
- The rates for prenatal and postpartum depressive symptoms across the greater Sacramento region are about 12% and are slightly lower compared to those for statewide rates when looking at 2013-15. Nonetheless, that still indicates **1 in 10 mothers are experiencing depressive symptoms** during prenatal or postpartum period.
- First Steps is an intensive **treatment program for substance abusing mothers that has had nearly double the count of participants since the onset of the pandemic.**
- Parents surveyed for the Yuba County Community Survey indicated that **prenatal care** and **medical/dental care for children** should be a “high priority” to support families. Doctor’s offices should be accessible to all families and are an important place to share educational materials and resources.
- In 2021, 200 out of 1,256 allegations cases were substantiated cases of maltreatment. Of the 674 cases that were evaluated out, only 33% (225) were referred to additional services in the community. This represents an opportunity to support families through cross-systems navigation to address unmet needs.

POTENTIAL STRATEGIES & ACTIVITIES

In addition to current strategies implemented throughout the county (Appendix A), the Yuba CAPC has identified new opportunities or programs that can be expanded to better serve families.

To achieve desired outcomes to increase access to behavioral health services, strategies may include:

- ▶ **Parent Education:** Create stand-alone sessions about behavioral health or weave in messaging about behavioral health in existing parenting education programs. Ensure all families are recruited to participate in parent education classes and making parenting education resources available in-person, virtually, or by audiobook.

– Proposed New/Expanded Programs:

- **Integrate messaging about behavioral health** into existing parenting education programs.
- Create **educational campaigns to reduce stigma** around accessing services for mental health and substance use.
- * Create reference materials (infographic) for community members to readily identify **available resources that may have eligibility restrictions**. Includes specific services, supports, and messaging for parents and youth to improve access to services.

- ▶ **Cross-systems Navigation:** Case manager not tied to any one system, but knowledgeable about all supports; can break through bureaucratic barriers to connect families to behavioral health services/resources. Offers case management for several months if needed.

– Proposed New/Expanded Programs:

- Host a **Community Resource Fair** for family- and child-serving agencies and organizations to share information with other providers in the county about their services and eligibility requirements.
- * Increase access to behavioral health services by **embedding services within partner agencies (Family Resource Centers, Schools, Health Care)**.
- Increase capacity at Open Access to **retain Family Navigators to connect families to services who are not eligible or when lacking capacity** to serve families.
- Develop a **shared resource list that is updated regularly** (annually) to support the Family Navigator, Family Resource Centers, and other case managers working with children and families throughout the county. **The resource lists should be comprehensive to include contact information and eligibility requirements.**

- ▶ **Increase Availability of Mental Health Services:** Reduce eligibility barriers by expanding services. Increase staffing and professional development for specialized therapy services.

– Proposed New/Expanded Programs:

- **Provide direct transportation** to reach providers who offer mental and behavioral health services.
- Offer **telehealth counseling** through Zoom to increase access to care.
- * Increase opportunities for **peer-led therapy groups**. These opportunities provide parents the opportunity to engage with other community members and expand their network of support.
- Train and recruit **therapists to support maternal mental health** specifically.
- * Train and recruit **specialized therapists to support parents to engage children 5 years of age or younger**.

- ▶ **Home Visiting:** Weave in behavioral health messaging in existing home visiting programs.

– Proposed New/Expanded Programs:

- * Train home visitors to identify **signs and symptoms of perinatal or postpartum mood and anxiety disorder (PMAD)**.

* Indicates strategies that are prioritized for the first year of implementation.

Goal 3: Improve Maternal and Child Perinatal Health

SPECIFIC DRIVERS

- Lack of access to substance use intervention supports.
- Lack of parent knowledge or understanding about safe sleep practices for infants.
- High prevalence of infant deaths due to unsafe sleep practices and/or substance exposure.
- Lack of integration across systems to support new parents who are at-risk for experiencing parental stress.

OUTCOMES

- Improved birth outcomes (weight and term).
- Reduced exposure to substances.
- Improved sleep practices.

COMMUNITY NEEDS

The needs assessment conducted by the YUBA CAPC revealed the following needs:

- There is a specific need to support parents and families with young children, specifically infants. The rate of **substantiated allegations among infants under 1 is four times the statewide rate** in 2020.
- Deaths for children 5 and younger over the past five years were analyzed to better understand opportunities for preventing incidents that were potentially related to child abuse and neglect. While the total number of child deaths for children 5 and younger that were potentially preventable with child abuse and neglect prevention strategies have decreased since 2019, it is notable that about half of these cases involve **drug use during pregnancy**, and 5 involve **asphyxiation due to unsafe infant sleep practices**.
- The Yuba County Community Survey shows that 65% of parents feel that **prenatal care** should be a “high priority” to support families. In addition, 60% feel that **alcohol/drug abuse services for parents/caregivers** should be a “high priority.”
- Focus groups with the community and professionals in child- and family-serving organizations revealed that there are **barriers to care** including access to **mental and behavioral health services**, or **primary care**. In addition, there are concerns about revealing information about mental or behavioral health needs within systems that result in punitive action.

POTENTIAL STRATEGIES & ACTIVITIES

In addition to current strategies implemented throughout the county (Appendix A), the Yuba CAPC has identified new opportunities or programs that can be expanded to better serve families.

To achieve desired outcomes to improve maternal and child perinatal health, strategies may include:

- ▶ **Parent Education:** Outreach to prenatal and pediatric providers; Education campaigns. Include safe sleep practices. Include substance use.

- Proposed New/Expanded Programs:

- Implement a county-wide education campaign about **safe sleep practices for infants** to reduce the number of sleep-related deaths. Disseminate information about safe sleep practices through pediatric and prenatal providers.

- * Implement a county-wide education campaign about the **impact of using substances during pregnancy**. This campaign should highlight the impact of marijuana use and materials should be disseminated in partnership with local dispensaries as well as prenatal and pediatric providers. This is in response to the recent uptick in allegations of maltreatment related to substance use during pregnancy.
- * Implement a county-wide education campaign about **maternal and paternal mental wellness**, particularly for parents of young children. Disseminate information about recognizing signs of mental health needs, reducing stigma, and available services/supports.
- ▶ **Cross-systems Navigation:** Provide navigation to ensure pregnant and new parents are connected to primary care providers.
 - Proposed New/Expanded Programs:
 - Expand Family Navigators to **connect families and new parents to additional supports** in the community.
 - * **Mobile Wellness Team** to support mothers during pregnancy to provide therapy and navigation services. Mothers with a history of substance use or identified for current substance use would be prioritized for this support service.
- ▶ **Home Visiting:** Perinatal focused (before and after birth). Offers case management. Weaves in Safe Sleep messages.
 - Proposed New/Expanded Programs:
 - * Train home visitors to provide education and **information about safe sleep practices**.
 - Train home visitors to identify **signs and symptoms of perinatal or postpartum mood and anxiety disorder (PMAD)**.
 - Implement the **Welcome Baby home visiting program** to support all new parents up to four weeks postpartum. Home visitors will be able to connect families to support parents with mental or behavioral health needs.
 - * **Expand availability of general home visiting spaces** (including Differential Response) to support families without a documented suspected child abuse report (SCAR).
 - **Support and fund programs so that services can be provided to all families** and are not limited to those who meet eligibility requirements or have otherwise restricted access to services.

* Indicates strategies that are prioritized for the first year of implementation.

Proposed Workgroups for Priority Activities

	Parent Education	Cross-systems Navigation	Increase Availability of Mental Health Services	Home Visiting
<ul style="list-style-type: none"> ■ Goal 1 Increase Parent Competency ■ Goal 2 Increase Access to Behavioral Health ■ Goal 3 Improve Maternal and Child Perinatal Health 	<ul style="list-style-type: none"> ■ Expand parenting education opportunities that are already in place to recruit all families and specifically seek opportunities to engage fathers. ■ Increase access to trainings for professionals that work with parents. ■ Increase access to educational materials through audiobooks and provide education courses in virtual and in-person environments (Family Resource Centers). ■ Create reference materials (infographic) for community members to readily identify available resources that may have eligibility restrictions. Includes specific services, supports, and messaging for parents and youth to improve access to services. ■ Implement a county-wide education campaign about the impact of using substances during pregnancy. This campaign should highlight the impact of marijuana use and materials should be disseminated in partnership with local dispensaries as well as prenatal and pediatric providers. This is in response to the recent uptick in allegations of maltreatment related to substance use during pregnancy. ■ Implement a county-wide education campaign about maternal and paternal mental wellness, particularly for parents of young children. Disseminate information about recognizing signs of mental health needs, reducing stigma, and available services/supports. 	<ul style="list-style-type: none"> ■ Fund and sustain Family Navigators that act as case managers to support families to identify relevant resources from across the service spectrum and help address access barriers. Family Navigators should represent the cultural make-up of families in Yuba County and will be trained to implement trauma-informed and culturally competent practices. ■ Leverage existing resource lists to support the Family Navigator, Family Resource Centers, and other case managers working with children and families throughout the county. This includes training staff to utilize PACEs, FindHelp, and existing resource lists from community partners. ■ Increase access to behavioral health services by embedding services within partner agencies (Family Resource Centers, Schools, Health Care). ■ Mobile Wellness Team to support mothers during pregnancy to provide therapy and navigation services. Mothers with a history of substance use or identified for current substance use would be prioritized for this support service. 	<ul style="list-style-type: none"> ■ Increase opportunities for peer-led therapy groups. These opportunities provide parents the opportunity to engage with other community members and expand their network of support. ■ Train and recruit specialized therapists to support parents to engage children 5 years of age or younger. 	<ul style="list-style-type: none"> ■ Increase capacity to serve all families by increasing the availability of general referral spaces to existing home visiting programs. ■ Train home visitors and Family Resource Center staff to support families like the Family Navigators to locate relevant services and supports in a way that helps to overcome barriers to services. ■ Train home visitors to identify signs and symptoms of perinatal or postpartum mood and anxiety disorder (PMAD). ■ Train home visitors to provide education and information about safe sleep practices. ■ Expand availability of general home visiting spaces (including Differential Response) to support families without a documented suspected child abuse report (SCAR).
Chairperson(s):	Yuba County Office of Education	Health and Human Services	Sutter/Yuba BH Youth for Change	First 5 Yuba Youth for Change
Recruited Supports:	Probation First 5 Yuba Victim Services Peach Tree CAPS Behavioral Health YCOE Behavioral Consultation WIC?			

ACTIVITY MONITORING IN YEAR 1

Activity	Status	Due Date	Notes/Update <i>MM/DD/YYYY – Enter Notes</i>
PARENT EDUCATION			
Expand parenting education opportunities that are already in place to recruit all families and specifically seek opportunities to engage fathers.			
Increase access to trainings for professionals that work with parents.			
Increase access to educational materials through audiobooks and provide education courses in virtual and in-person environments (Family Resource Centers).			
Create reference materials (infographic) for community members to readily identify available resources that may have eligibility restrictions. Includes specific services, supports, and messaging for parents and youth to improve access to services.			
Implement a county-wide education campaign about the impact of using substances during pregnancy. This campaign should highlight the impact of marijuana use and materials should be disseminated in partnership with local dispensaries as well as prenatal and pediatric providers. This is in response to the recent uptick in allegations of maltreatment related to substance use during pregnancy.			
Implement a county-wide education campaign about maternal and paternal mental wellness, particularly for parents of young children. Disseminate information about recognizing signs of mental health needs, reducing stigma, and available services/supports.			
CROSS-SYSTEMS NAVIGATION			
Fund and sustain Family Navigators that act as case managers to support families to identify relevant resources from across the service spectrum and help address access barriers. Family Navigators should represent the cultural make-up of families in Yuba County and will be trained to implement trauma-informed and culturally competent practices.			
Leverage existing resource lists to support the Family Navigator and other case managers working with children and families throughout the county. This includes training staff to utilize PACEs, FindHelp, and existing resource lists from community partners.			
Increase access to behavioral health services by embedding services within partner agencies (Family Resource Centers, Schools, Health Care).			
Mobile Wellness Team to support mothers during pregnancy to provide therapy and navigation services. Mothers with a history of substance use			

Activity	Status	Due Date	Notes/Update <i>MM/DD/YYYY – Enter Notes</i>
or identified for current substance use would be prioritized for this support service.			
INCREASE AVAILABILITY OF MENTAL HEALTH SERVICES			
Increase opportunities for peer-led therapy groups. These opportunities provide parents the opportunity to engage with other community members and expand their network of support.			
Train and recruit specialized therapists to support parents to engage children 5 years of age or younger.			
HOME VISITING			
Increase capacity to serve all families by increasing the availability of general referral spaces to existing home visiting programs.			
Train home visitors to support families like the Family Navigators to locate relevant services and supports in a way that helps to overcome barriers to services.			
Train home visitors to identify signs and symptoms of perinatal or postpartum mood and anxiety disorder (PMAD).			
Train home visitors to provide education and information about safe sleep practices.			
Expand availability of general home visiting spaces (including Differential Response) to support families without a documented suspected child abuse report (SCAR).			

Appendix A: Goal Snapshots

GOAL 1: INCREASE PARENT COMPETENCE

<p>NEED & SPECIFIC DRIVERS</p>	<ul style="list-style-type: none"> Lack of parent knowledge or understanding of positive parenting approaches, child development, and available resources or supports. Lack of self-sufficiency leads to frustration and increased parenting stress. 		
<p>OUTCOME: <i>The change we can make</i></p>	<ul style="list-style-type: none"> Improved understanding of child development/ developmentally appropriate expectations. Parents have skills to manage parenting stress. Parents are empowered and know where to find resources. Improved connections to concrete resources in times of need. 		
<p>STRATEGIES & ACTIVITIES</p>	<p>Parent education</p> <ul style="list-style-type: none"> Range of offerings (e.g., Triple P). Virtual and in-person; Access to audiobooks. Access for all families; not just court mandated. 	<p>Sample Programs</p> <ul style="list-style-type: none"> Positive Discipline Strengthening Families, Parenting Curriculum Nurtured Heart Child Development Playgroups Love & Logic (& Trauma Informed) Parent Project (teens) Loving Solutions (middle school) BEST Parenting for Teen Parents Whole Brain Child (AlphaBITS) Conscious Discipline MJUSD CD program (preschool setting TK-K) Parent Child Interactive Therapy (PCIT) Probation Victims Services Program Parent Project (juvenile justice) School Readiness <ul style="list-style-type: none"> 1, 2, 3 Grow MJUSD School Readiness program ABC Sprout 	<p>Proposed New/Expanded Programs</p> <ul style="list-style-type: none"> Father Engagement and Parenting Increase access to trainings for professionals that work with parents Increase parent ed opportunities (virtual and FRCs for in-person) Increase access to audiobooks
	<p>Cross-systems navigation</p> <ul style="list-style-type: none"> Case manager not tied to any one system, but knowledgeable about all supports; can connect families to services/resources in times of need. 	<p>Sample Programs</p> <ul style="list-style-type: none"> Help Me Grow FRC Network YFC/CAPS/Probation Family & Child Team Meetings Differential Response Navigators DYMT Displaced Youth Multid Team YCAT Yuba County Assessment Team CalWORKS Home Visiting 	<p>Proposed New/Expanded Programs</p> <ul style="list-style-type: none"> Family Navigators (culturally competent) Shared resource list (updated annually) Help Me Grow
	<p>Home visiting</p> <ul style="list-style-type: none"> Offers ongoing and intensive case management to support families in times of need. 	<p>Sample Programs</p> <ul style="list-style-type: none"> CalWORKS Home Visiting Behavioral Consultation Program (in-home service) Parent Child Interactive Therapy (PCIT) Probation Victims Services Program 	<p>Proposed New/Expanded Programs</p> <ul style="list-style-type: none"> Increase availability of general referral spaces Expand evidence-based training for home visitors (e.g., Parents as Teachers) Ensure families are connected to home visiting programs Explore other evidence-based practices Home visitors as family navigators

GOAL 2: INCREASE ACCESS TO BEHAVIORAL HEALTH

<p>NEED & SPECIFIC DRIVERS</p>	<ul style="list-style-type: none"> Lack of access to services due to bureaucratic barriers. Lack of access to mental health supports. Lack of access to substance use intervention supports. 		
<p>OUTCOME: <i>The change we can make</i></p>	<ul style="list-style-type: none"> Improved knowledge of mental health and coping techniques. Improved access to mental health resources. Improved access to substance use intervention services. 		
<p>STRATEGIES & ACTIVITIES</p>	<p>Parent education</p> <ul style="list-style-type: none"> Create stand-alone sessions about behavioral health or weave in messaging about behavioral health in existing parenting education programs. Virtual and in-person; Access to audiobooks. Access for all families; not just court mandated. 	<p>Sample Programs</p> <ul style="list-style-type: none"> Mental Health First Aid First Steps (women - substance use) 	<p>Proposed New/Expanded Programs</p> <ul style="list-style-type: none"> Integrate messaging into existing Parenting Ed programs (see above) Campaigns to reduce stigma Campaign around available resources (matrix on eligibility)
	<p>Cross-systems navigation</p> <ul style="list-style-type: none"> Case manager not tied to any one system, but knowledgeable about all supports; can break through bureaucratic barriers to connect families to behavioral health services/resources. Offers case management for several months if needed. 	<p>Sample Programs</p> <ul style="list-style-type: none"> FSP & Parent Partner Navigator Differential Response Navigators Super CAT Foster care/Probation youth (Short Term Residential Therapeutic Program STRTP's) CalWORKS Home Visiting 	<p>Proposed New/Expanded Programs</p> <ul style="list-style-type: none"> Host Community Resource Fair for providers to share information about programs Increase behavioral health embedment (not necessarily SYBH) in partner agencies Campaign around available resources (matrix on eligibility) Increase capacity at Open Access to retain family navigators to connect families to services who are not eligible or when lacking capacity to serve families Shared resource list (updated annually)
	<p>Increase availability of mental health services</p> <ul style="list-style-type: none"> Reduce eligibility barriers by expanding services. Increase staffing and professional development for specialized therapy services. 	<p>Sample Programs</p> <ul style="list-style-type: none"> MHSA 	<p>Proposed New/Expanded Programs</p> <ul style="list-style-type: none"> Provide direct (not public transit) transportation Peer-led therapy groups Telehealth (Zoom) counseling Train and recruit therapists to support maternal mental health Train and recruit therapists to support parents to engage children 0-5
	<p>Home visiting</p> <ul style="list-style-type: none"> Weave in behavioral health messaging in existing home visiting programs. 	<p>Sample Programs</p> <ul style="list-style-type: none"> 	<p>Proposed New/Expanded Programs</p> <ul style="list-style-type: none"> PMAD Trainings for home visitors

GOAL 3: IMPROVE MATERNAL, PATERNAL, AND CHILD PERINATAL HEALTH

<p>NEED & SPECIFIC DRIVERS</p>	<ul style="list-style-type: none"> • Lack of access to substance use intervention supports. • Lack of parent knowledge or understanding about safe sleep practices for infants. • High prevalence of infant deaths due to unsafe sleep practices and/or substance exposure. • Lack of integration across systems to support new parents who are at-risk for experiencing parental stress. 		
<p>OUTCOME: <i>The change we can make</i></p>	<ul style="list-style-type: none"> • Improved birth outcomes (weight and term). • Reduced exposure to substances. • Improved sleep practices. 		
<p>STRATEGIES & ACTIVITIES</p>	<p>Parent education</p> <ul style="list-style-type: none"> • Outreach to prenatal and pediatric providers; Education campaigns. • Include safe sleep practices. • Include substance use. 	<p>Sample Programs</p> <ul style="list-style-type: none"> • Campaigns for safe sleep and abusive head trauma • First Steps (women - substance use) • Perinatal Services Program (PSP) Peach Tree Health 	<p>Proposed New/Expanded Programs</p> <ul style="list-style-type: none"> • County Wide Educational Campaign about safe sleep • Campaign to educate parents about the impact of substance use during pregnancy (marijuana specifically) • Outreach through pediatric and prenatal providers • Outreach to dispensary locations • Maternal Mental Wellness
	<p>Cross-systems navigation</p> <ul style="list-style-type: none"> • Provide navigation to ensure pregnant and new parents are connected to primary care providers. 	<p>Sample Programs</p> <ul style="list-style-type: none"> • Perinatal Services Program (PSP) Peach Tree Health 	<p>Proposed New/Expanded Programs</p> <ul style="list-style-type: none"> • Navigators that can connect families/parents to additional supports • Mobile Wellness Team to support mothers with SUD history
	<p>Home visiting</p> <ul style="list-style-type: none"> • Perinatal focused (before and after birth). • Offers case management. • Weaves in Safe Sleep messages. 	<p>Sample Programs</p> <ul style="list-style-type: none"> • Voluntary CPS involvement for prenatal drug use (drug treatment, education and supports) • Differential Response 	<p>Proposed New/Expanded Programs</p> <ul style="list-style-type: none"> • More messaging during supervised visits • PMAD Trainings for home visitors • Welcome Baby- HV offered to all New Parents in Hospital up to 4 weeks postpartum. • Expand home visiting to support families without SCAR. Accept referrals. • Support (fund) programs that can serve all families (not eligibility/restricted access)