

# Advancing a Family-Centered Approach:

Lessons from the Prevention and Family Recovery (PFR) Initiative

PUTTING IDEAS INTO ACTION - KNOWLEDGE APPLICATION SERIES | AUGUST 2021



## LESSON 7: Integrating a Truly Family-Centered Approach Requires Several Paradigm Shifts

This lesson is one of a set of nine lessons from the Prevention and Family Recovery (PFR) initiative. The other PFR lessons and an overview of the complete Knowledge Application Series can be accessed [here](#).



Advancing the capacity of family treatment court teams to provide a comprehensive family-centered approach that improves child, parent, and family outcomes

## LESSON 7:

### Integrating a Truly Family-Centered Approach Requires Several Paradigm Shifts



#### The What: A Family-Centered Approach Defined

Family treatment court (FTC) professionals and the broader social services field increasingly recognize that families affected by substance use disorders and child maltreatment are served best using a comprehensive, collaborative family-centered approach. However, currently, a universal definition of a family-centered approach

does not exist. Efforts to define and provide a family-centered approach have occurred primarily at the direct service level (e.g., implementing parenting training) or within an individual service system (e.g., substance use disorder treatment or child welfare).<sup>1</sup>

A true family-centered approach requires more than offering substance use disorder treatment, specific evidence-based interventions, or other singular services to a parent or child individually, in isolation of one another. A family-centered approach even extends beyond providing a comprehensive array of clinical treatment and related support services that meet the needs of the entire family unit.



“When I look back now, I remember at the beginning feeling, ‘Well, of course we’re family-centered and child-centered. We’re a family treatment court.’ Until we started doing this work, I] certainly didn’t get how far we needed to go to really become family centered. We’ve come a long way and still have continued to work on it.”

– Grantee team member

<sup>1</sup> The National Center on Substance Abuse and Child Welfare (NCASCW) recently released a series of three modules on [Implementing a Family-Centered Approach for Families Affected by Substance Use Disorders and Involved with Child Welfare Services](#). The series is designed for partners at the state, county, and agency levels that are striving to improve systems, services, and outcomes for children and families affected by substance use disorders.

More broadly, family-centeredness must embody the overall context within which services are provided and how all individuals and agencies collectively work with families and each other. Parents and children live within the context of a larger family system, and families exist within the context of their community and culture. Therefore, a family-centered approach must be grounded in effective cross-systems collaboration and practices, policies, and services that consider this context. The paradigm shift to a family-centered approach is developmental in nature and takes time.

One grantee team member described the parent experience prior to the PFR initiative as analogous to getting on a factory conveyor belt and getting passed from one service agency to another, “like a widget,” and then to the judge. This team member described the change with the FTC team’s shift to a family-centered approach: “We are now at a round table where no one’s getting passed [around]. The client is in the middle of that table [and is] addressed by everyone about everything. It’s such a “180” from what we were doing before. Our systems change has great consequences for the parents who participate.”

A family-centered approach is essential and attainable, whether an FTC operates as a parallel or integrated model.<sup>2</sup> Regardless of the FTC model, a parent participates in an FTC with the hope of preserving or reunifying their family. The specific strategies and methods to implement a family-centered approach may vary somewhat according to jurisdiction and community context. However, in all settings, strong collaborative relationships, effective communication, and mutual trust comprise a foundation fundamental to making the shift (as described in [Lesson 1](#)).



All Prevention and Family Recovery (PFR) grantees in round 2 said that advancing a family-centered approach at this broader level was an area in which their FTC teams made significant—perhaps the most—progress. Grantees reported

2 In an integrated FTC, one judge oversees both the parent’s progress in substance use disorder treatment and the child welfare case (often referred to as “one family, one judge”). In a parallel FTC, one judge (the dependency court judge) oversees the child welfare part of the family’s case, while another judge (the presiding FTC judge) oversees the parent’s substance use disorder treatment progress. In a parallel model, the FTC judge helps identify and coordinate services for the family but does make any orders regarding the child welfare case. For more information on the models, refer to Casey Family Programs and Children and Family Futures (2021). [What are family treatment courts and how do they improve outcomes for children and families?](#) Seattle, WA: Casey Family Programs.



that they shifted their goal from parent recovery to whole family recovery. They now discuss cases in the context of the family and review the status and needs of children and other family members. They also transitioned from individual treatment plans with multiple agencies to integrated case planning for the whole family. Overall, the FTC teams now apply a family-centered lens that is informed by their knowledge of family dynamics, child development, healthy parent-child

"It takes more time, effort, and creativity to really think of how do we engage this family? Where's the behavior coming from? What are we missing? How do we get this? It takes a different level of understanding and responsibility on the side of the professionals to make sure we're doing everything we can to meet this family where they're at and give them what they need."

– Grantee team member



relationships, and the effects of trauma on overall family well-being. Grantees say their family-centered improvements have become standard practice for the FTC team.

In Gila River Indian Community, the family-centered shift is also evident in the Children's Court, where the judges are learning to "look outside of our box of just the parents" to ask more questions about the children, referrals, and services, and try to engage the whole family.

The PFR grantees acknowledged that becoming truly family centered requires hard work and commitment to continuous improvement. As one grantee team member said: "Every year we get better, but we can't rest on our laurels. There are always improvements [to be] made, which always supports the family. The better we get, the better the families get." FTC leaders, team members, community partners, and other key stakeholders will likely need to shift from a "business as usual" approach and adopt new ways of thinking and talking about families, themselves, and their systems. Grantees acknowledged the return on this investment is well worth it both in strengthening the FTC's overall operations and improving how families engage with the FTC program and team. The ultimate benefit, grantees noted, is that the family-centered approach helps prevent families from returning to the system, which can break the cycle of substance use disorders and child maltreatment for future generations.

"[Family-centered care] will stop the cycle of them returning to the system, returning to substance use, and in turn, improve future generations of children being raised healthy. In turn, it actually creates a healthy community."

– Grantee team member



The second round of PFR grantees expanded on the lessons of the first round of grantees. Round 2 grantees' experiences allowed them to delve deeper into what it means to be family centered. Their work solidified that a family-centered approach is multidimensional, spanning several different levels of collaborative practice: individual, direct service, FTC program operations, and systems. Each level of practice is described more fully in the next section.

In addition, a set of guiding principles emerged from the grantees' experiences, which help operationalize a family-centered approach across these various levels of practice. These principles are briefly highlighted in the subsequent section and explored more fully in [\*Guiding Principles for Establishing a Family-Centered Approach in Family Treatment Courts and Beyond\*](#).

"It's more than just services—it's how you pull it all together."

– Grantee team member



## The Where: A Family-Centered Approach is Applied at All Practice Levels

A family-centered approach is complex and must be ingrained in multiple levels of practice.

- ▶ At the **Individual Level**, each FTC team member must believe that a family-centered approach is essential to best meet families' needs and preserve families' connections. The shared family-centered mindset drives how each professional interacts with families, both within their defined role and as part of the collective FTC team. Each team member must think critically about how they can share their expertise and knowledge to advance a family-centered approach. Individuals at all levels (director, management, frontline) must assume a leadership role to actively encourage and challenge others to adopt family-centered practices.
- ▶ At the **Direct Service Level**, each distinct intervention, treatment, and service component—such as substance use disorder treatment, evidence-based parenting training,

a children's therapeutic intervention—needs to be family centered. This requires the FTC team to ensure that each service or program is an appropriate fit for a family's background, culture, circumstances, responsibilities, needs, and overall readiness. It also means the team removes any identified barriers to participation and sets clear expectations for families. Moreover, particularly in tribal communities, being family centered requires shaping the specific service or program to the community's culture, values, and traditions.

- ▶ At the **FTC Program Operations Level**, a family-centered approach is embedded in the day-to-day operations of the FTC and its partner agencies. Implementing a family-centered approach extends beyond the necessary cross-agency training that helps partners understand each other's systems. To make abstract concepts concrete, family-centered practice is integrated, standardized, and formalized in the FTC's various policies, procedures, and processes. Family-centered practices are reflected in core program and agency operations, including:

- participant handbooks
- intake processes
- reporting forms
- pre-court staffings
- court hearings
- FTC phasing structure
- responses to behaviors
- staff training and orientation

This allows all current and new FTC team members and partners to apply and sustain a family-centered approach to their everyday practice. (See the section, "PFR Grantee Program and Practice Improvements to Strengthen a Family-Centered Approach," for selected examples of how the teams improved their core FTC operations.)

"This journey has forced me to really look at all of the challenges a family faces being back together to sustain recovery. I will not be satisfied to just let the systems float along doing 'business as usual.' [I will speak] out to the issues [and] systems I see not being effective."

– Grantee team member

- ▶ At the **Systems Level**, the value and philosophy of a collaborative family-centered approach is mirrored and supported in systemwide policies, priorities, funding, legislation, training and certification, and shared outcomes. The family-centered approach extends beyond individual agency operations to encompass larger systems (and cross-systems) initiatives—at the county, state, and tribal level—that improve outcomes for all families.<sup>3</sup>

3 Module 3 of the NCSACW's [\*Implementing a Family-Centered Approach for Families Affected by Substance Use Disorders and Involved with Child Welfare Services\*](#) describes collaborative efforts and policy-level activities to ensure the implementation and sustainability of a family-centered approach.



The PFR grantee teams, for example, strived to expand cross-systems data collection and monitoring of shared outcomes that reflect the progress and well-being of the whole family served by multiple systems. (This is in contrast to simply tracking whether the parent completed the FTC program.) In Milwaukee County, the FTC judge and other core team members testified and presented data to the state legislature to successfully support passage of legislation to expand FTCs throughout Wisconsin.

At the federal level, the Family First Prevention Services Act of 2018 (Family First Act) and several Administration for Children and Families (ACF) information memorandums (IMs) recently issued to state and tribal child welfare administrative agencies emphasize the need to advance a preventive, family-centered approach.<sup>4</sup> PFR grantees have positioned themselves to leverage funding under the Family First Act by participating in broader county and state workgroups and advisory teams, or by expanding to serving an in-home population (see also [Lesson 9](#)).

"My 'aha moment' is that data represent families and their lives, and we have to be sure that the outcomes we are measuring truly represent the challenges and triumphs they experience in FTC. I'll take with me that we have to continue to be innovative with our data collection and analysis to ensure policymakers and practitioners have the evidence they need to make the best decisions for the program and families."

– Grantee team member

4 Refer to [Children and Family Futures](#) and the [National Center on Substance Abuse and Child Welfare](#) for more information and resources on the Family First Act and the 2016 amendments to the Child Abuse Prevention and Treatment Act, which also emphasizes family-centered prevention. Also refer to the ACF IMs. The January 2021 IM ([ACYF-CB-IM-21-01](#)) discusses how to achieve permanency in a way that prioritizes children's well-being. The April 2020 IM ([ACYF-CB-IM-20-06](#)) describes how foster care is used to support families. The February 2020 IM ([ACYF-CB-IM-20-02](#)) focuses on quality parenting time. The August 2019 IM ([ACYF-CB-IM-19-03](#)) discusses how to use the family's and youth's voices to drive child welfare case planning and system improvement efforts.





## The How: 10 Guiding Principles for a Family-Centered Approach

Given the multidimensional nature of a family-centered approach, the nuances of how to operationalize this approach may vary somewhat by individual team member (e.g., intake worker, case manager, or attorney). They may also vary within a given agency or service setting (e.g., courtroom or substance use disorder treatment facility). Still, all FTC team members need to be aligned in how they define “family-centered,” what their shared goals are, and why they need to collaborate effectively to provide a family-centered approach.

The 10 guiding principles set out below serve as the anchor for helping FTC team members promote a consistent vision, coordinated policies and practices, joint resource sharing, and collective learning. Following these principles will advance a more holistic and integrated approach to serving families.

- 1 The parent defines “**family**.”
- 2 The FTC team recognizes the family as an essential collaborative partner with an **equal voice** in the case planning, decision-making, and program improvement processes.
- 3 The FTC team recognizes participants are parents and **strong parental capacity** is an integral part of family recovery and well-being.
- 4 The FTC team uses a **holistic, integrated approach** to serve the family together as a unit rather than treating the individual parent or child separately.
- 5 The FTC team recognizes and seeks to **engage resource parents** (foster parents and kinship caregivers)<sup>5</sup> as a valuable support for the family.
- 6 The FTC team uses a supportive, nurturing, **strengths-based** approach rather than a punitive one.
- 7 The FTC and partner agencies are **trauma responsive** to parents, children, and families.
- 8 The FTC team is **culturally responsive** to families at the individual staff, broader organizational, program design, and implementation levels.
- 9 The FTC team defines and measures parent and family progress and success in terms of desired **behavioral changes** (not solely compliance and attendance).
- 10 A family-centered approach needs to be a **cross-systems effort** involving all partners, rather than simply a court endeavor.

“We have all of these ideas about how we’re going to make it better for everyone. Ultimately, it’s the perception of the [family] that makes the difference. For those who are living it, breathing it, how does it feel to them at the end of the day?”

– Grantee team member

5 At the local, state, and national level, many professionals now refer to foster parents and kinship caregivers as “resource parents.” This language shift supports a family-centered approach and reflects the critical role these caregivers have in the lives of families involved in the child welfare system and courts.



"That was one of my lived experiences. Knowing the person that's got your kid, and knowing that they are for you, not against you, and pulling for you is big. That shared parenting piece is crucial."

- Grantee team member | Peer support specialist

For specific examples of how grantees leveraged resource parents to improve parenting time, see the sidebar, *Improving Parenting Time with the Help of Resource Parents: Lessons from Selected Grantees*.



The companion resource, [\*Guiding Principles for Establishing a Family-Centered Approach in Family Treatment Courts and Beyond\*](#), discusses the 10 guiding principles in more detail and includes key questions that FTC teams can discuss to assess and build their family-centered capacity.

## PFR Grantee Program and Practice Improvements to Strengthen a Family-Centered Approach

Throughout their PFR grant period, the FTC teams implemented various program and practice improvements to strengthen their family-centered approach. Some improvements were tailored to the specific situation and circumstances of the individual grantee. However, grantees also employed several common strategies to enhance their family-

centered practice and put the guiding principles into practice.

//////

The Gila River Family Healing to Wellness Court team implemented a milestones approach and purposefully integrated culture into each phase to strengthen community, reconnect participants to values and traditions, help participants establish relationships with tribal elders and cultural leaders, and teach parents to teach their children culture and traditions. One grantee team member recounted how the restructured phasing "was probably our biggest improvement. It made what [participants] were working for attainable, it wasn't just this abstract thing. It's very specific."

//////



## Restructured FTC Phasing

Grantees shifted to, or enhanced, a behavioral-based milestones structure to focus on a participant's individualized needs and goals, and better align with progress toward reunification and whole family recovery. The team's emphasis no longer was simply on parental substance use disorder treatment and sobriety. Grantees noted that FTC phasing improvements have:

- ▶ Served as an effective outreach tool to educate participants and their families about the FTC program services and expectations
- ▶ Provided participants with a clearer understanding of how to make progress in and complete the FTC program
- ▶ Helped identify appropriate community and family supports to help participants better connect and successfully transition to the community upon program discharge



## Enhanced Case Staffings and Team Meetings

To prioritize and embed a family-centered approach into team discussions, grantees now:

- ▶ Raise children's health, well-being, education, service needs, and progress upfront in staffing sessions
- ▶ Focus on a participant's progress in services and the behavioral changes that demonstrate improvements in parenting capacity and family functioning
- ▶ Discuss parenting time directly, focusing on the quality of the parent-child interaction, instead of simply whether and when parenting time occurred (see related strategy: Improved Quality Parenting Time)

"We've been trying really hard to move into a more family-centered court staffing and team meeting. When you ask, 'How are the kids doing?' and the answer is, 'Fine,' we need to go deeper than that. When we ask how the parents are doing in treatment, and the answer is, 'Fine. Good attendance this week,' we're not solving anything. We're not helping these families move forward and get to a place that they can reunify if we're not being transparent with them and having those serious discussions, positive and negative, that are about the whole family and not just about the parents sitting in front of us."

– Grantee team member



- ▶ Discuss a parent's housing, employment, physical health, and other related basic needs, in addition to their substance use disorder treatment
- ▶ Involve new service providers and other agency partners in regular case or treatment staffings to obtain a more complete picture of a family's progress, strengths, and barriers
- ▶ Focus on problem-solving rather than problem-reporting
- ▶ Use standardized reporting processes to streamline and focus staffing discussions on the needs and progress of the whole family

Overall, the PFR grantees say improvements to how their team staffs and discusses families have become business as usual. One grantee team member remarked: "The changes we initially made now feel more routine and comfortable. Everyone's on board with this model of thinking, so our communication feels more effective. Initially, it felt a little bit clunky, but it doesn't feel that way anymore. Everyone's expecting for these to be the things we talk about in staffing."



### Improved Quality Parenting Time<sup>6</sup>

An essential change is that the FTC team ensures that quality parenting time is provided as a necessary and critical support service for the family. Parenting time is not used as a response for a parent's compliance or non-compliance with the program expectations.

To strengthen parenting time observation, reporting, and decision-making processes, Jefferson and Milwaukee counties:

- ▶ Implemented objective criteria to assess and measure the progress of parent-child interactions and behaviors that increase parental protective factors and safety.
- ▶ Enhanced standardized documentation and reporting of specific behaviors during parenting time, including how well the children respond to their parent's efforts.
- ▶ Ensured individuals monitoring parenting time consistently provide objective and adequate observation notes and documentation to inform decisions and case plan adjustments.
- ▶ Leveraged the role of resource parents to strengthen parenting time. (See related sidebar, *Improving Parenting Time with the Help of Resource Parents: Lessons from Selected Grantees.*)

<sup>6</sup> A growing number of jurisdictions have reframed the language related to "visitation." These communities are instead using "parenting time" or "family time," which affirms the importance of the parent-child relationship and the need to facilitate frequent and quality time to heal and strengthen the relationship. Lessons from the first round of PFR grantees were referenced in the February 2020 Children's Bureau IM ([ACYF-CB-IM-20-02](#)) on the importance of parenting time for children in out-of-home care. The IM provides information on research, best practices, resources, and recommendations for providing quality parenting time that strengthens the family, expedites reunification, and improves parent and child well-being.



## IMPROVING PARENTING TIME WITH THE HELP OF RESOURCE PARENTS: LESSONS FROM SELECTED GRANTEEES

Jefferson and Milwaukee counties not only implemented objective parenting time models, they also leveraged their resource parents to strengthen parenting time. For example:

- ▶ The Milwaukee County FTC collaborated with the Quality Parenting Initiative to train kinship and foster caregivers in an evidence-informed, attachment-based model to supervise parenting time. The caregivers are now involved in the majority of supervised parenting time. They provide the FTC with a minimum of monthly reports on the children's health, development, eating, and sleeping patterns, as well as behaviors before and after parenting time. They also report on progress, strengths, and challenges with co-parenting.
- ▶ Jefferson County instituted a formal kinship contract for parenting time. This agreement helps ensure that the parent and kinship caregiver have a shared understanding of expectations prior to supervised parenting time and helps to better support kin in their expanded role. The FTC hopes that establishing these agreements will also promote increased parenting time in a more natural environment and strengthen kinship providers' ability to report on parenting time successes and concerns in a productive and meaningful manner.

Raising the standards on quality parenting time helped Jefferson and Milwaukee counties reap many benefits. Their FTC teams now:

- ▶ Have a shared language and understanding across systems to strengthen communication about parenting time at team staffing and treatment meetings.
- ▶ Share more comprehensive information on how parents are responding to and bonding with their children and, moreover, how children are responding to their parents.
- ▶ Provide both the parent and FTC team with concrete examples of parenting strengths and issues requiring additional work. The judge can discuss these specifics with the parent during court hearings, while other team members can integrate this information into ongoing substance use disorder treatment and other services to help coach parents.
- ▶ Make more informed and structured decisions about the family's readiness for changes in the frequency of parenting time and the level of supervision.
- ▶ Develop more systematic responses to strengthen the parent-child relationship and manage any relationship and parenting time concerns.

## LESSON 7

INTEGRATING A TRULY FAMILY-CENTERED APPROACH REQUIRES SEVERAL PARADIGM SHIFTS



"The way the team rallies for [families] when there's a need and that they are listening and the way our judge listens to them instead of just dismisses them, that is a treatment approach. We are applauding improvements, not perfection. We are looking at treatment in a way that it should be looked at. There's not this shame-blame myth going on. Handcuffs aren't being brought out every time we turn around. It is a whole different feel."

– Grantee team member



### Strengthened their Capacity to Account for Trauma

Grantees invested significant effort to ensure the FTC and its partner agencies are trauma-responsive and use trauma-informed practices in their daily operations and work with families. To build this capacity, grantees:

- ▶ Engaged in facilitated onsite trauma walkthroughs<sup>7</sup> and related training to identify and implement needed trauma-responsive systems improvements
- ▶ Implemented domestic violence policies, protocols, and supports to benefit participants affected by domestic violence and increase the FTC team's capacity to manage this need
- ▶ Strengthened the use of therapeutic responses and eliminated jail as a sanction to encourage behavioral changes and improve participant engagement, retention, and outcomes

<sup>7</sup> A trauma walkthrough is an organizational assessment and change process that includes all levels of staff from the FTC and its partners. It helps organizations and individuals examine how trauma responsive they are by identifying potential practices and procedures that may retraumatize clients and implementing strategies to mitigate them. Refer to Brown, V. B., Harris, M., & Fallot, R. (November 2013). Moving toward trauma-informed practice in addiction treatment: A collaborative model of agency assessment. *J Psychoactive Drugs*, 45(5), 386–393. Also refer to Brown, V. B. (2018.) *Through a trauma lens: Transforming health and behavioral health systems*. New York, NY: Routledge.

Elimination of jail as a sanction is “a huge deal for [families] to feel comfortable. Until we made the change, I didn't realize how uncomfortable it made parents to have jail as a possibility. It allows the kids to trust more about our system too, so the kids are more bought-in. I have far fewer children talking to me about how little they trust the system.”

– Grantee team member



### Created Opportunities to Obtain Participant Input

To ensure that the voices of parents and families are continually integrated into FTC program improvements and case planning, grantees used strategies that included:

- ▶ Implementing regularly scheduled roundtable discussions, listening sessions, or other informal meetings with participants to obtain their feedback
- ▶ Establishing care team meetings, held in the community (not the courthouse), where parents lead the discussion among their team about their family's progress and challenges and provide input into their case plan
- ▶ Creating feedback loops by conducting participant surveys and focus groups to obtain input on parents' overall experiences, their perceptions of the program, and participation benefits and barriers, among other relevant topics

- ▶ Instituting peer-led support groups in which participants have a safe space to discuss challenges they are facing in their case, talk about what is working (and not working) with the FTC, and provide support to others

The Milwaukee County FTC instituted quarterly roundtables with participants to obtain their feedback on program improvements and other topics in an organic, informal setting. The FTC judge explained: “I would come down off the bench and sit in a circle with the participants. I wouldn't necessarily guide the conversation. I would let them tell me what they want, what they think they need. That would allow for a very frank discussion. It gave us insight sometimes in terms of what we were missing. It made us better. It really helped me fine-tune the process of the day of court.”



## STRENGTHENING FAMILY SUPPORT: HOW FAMILY CIRCLES CAN SUPPORT ENGAGEMENT AND RETENTION

In year three, the Gila River Indian Community Family Healing to Wellness Court (FHWC) implemented Family Circles to involve kin and extended family members as an essential support in the parent's recovery and reunification processes. A cultural consultant with expertise in Gila River's traditions facilitates the Family Circles.

During the first Family Circle, the FHWC team introduces themselves to the family, reviews the FHWC program and participant expectations, and discusses how the family can help the parent meet their recovery and reunification goals. The second Family Circle occurs as reunification and graduation are drawing near to develop a plan for aftercare and continued support to the parent and their children. The FHWC conducts additional Family Circles as needed.

The grantee reports that Family Circles have been one of the most effective strategies to increase open communication between the participant and their family, engage other family members in the process, and build trust. Moreover, the FHWC team gained more confidence that with Family Circles, parents will have the continued support needed to sustain recovery.





This lesson is one of a set of nine lessons from the Prevention and Family Recovery (PFR) initiative. The other PFR lessons and an overview of the complete Knowledge Application Series can be accessed [here](#).

#### LESSON 1:

Increased, renewed, and continued focus on **Cross-Systems Collaboration** is needed to achieve and sustain systems change

#### LESSON 2:

The effectiveness of parenting and children's services is integrally linked to **Timely and Effective Substance Use Disorder Treatment**

#### LESSON 3:

A **Formal Governance Structure** is necessary to prioritize, oversee, and sustain the FTC

#### LESSON 4:

FTC teams need to maintain a consistent and strong focus on **FTC Participant Recruitment, Timely Engagement, and Retention**

#### LESSON 5:

Developing the **Evidence-Based Program Capacity** of sites is a complex undertaking

#### LESSON 6:

FTC teams need to **Build Bridges to Connect Families** to services and service providers to each other

#### LESSON 7:

Integrating a **Truly Family-Centered Approach** requires several paradigm shifts

#### LESSON 8:

**Building Data Capacity** to advance a family-centered approach involves moving beyond just numbers

#### LESSON 9:

Achieving larger systems change requires understanding and adapting to the changing **Contextual Environment**



The Prevention and Family Recovery (PFR) initiative was generously supported by the Doris Duke Charitable Foundation and The Duke Endowment.

For more information about the PFR initiative, visit the [PFR home page](#) or email Children and Family Futures at [contact@cffutures.org](mailto:contact@cffutures.org)



## Children and Family Futures

Strengthening Partnerships, Improving Family Outcomes

Children and Family Futures (CFF) is a national nonprofit organization based in Lake Forest, California that focuses on the intersections among child welfare, mental health, substance use disorder treatment, and court systems. CFF has over two decades of experience in practice, policy, and evaluation arenas to support tribes, states, regions, and communities in their efforts to improve outcomes for children and families. We believe parents with mental health and substance use disorders should maintain hope of achieving recovery and family stability so they can care for their children. While no single system or agency working by itself can help parents achieve that goal, we recognize that recovery happens within the context of the family and that professionals from a variety of agencies and systems must work together to meet the needs of families.

Children and Family Futures provides a full range of consulting, technical assistance, strategic planning, and evaluation services for substance use disorder treatment, child welfare, courts, and the communities they serve. To learn more about CFF, visit [www.cffutures.org](http://www.cffutures.org).

**The mission of Children and Family Futures is to prevent child abuse and neglect while improving safety, permanency, well-being, and recovery outcomes with equity for all children, parents, and families affected by trauma, substance use, and mental disorders.**



The mission of the Doris Duke Charitable Foundation is to improve the quality of people's lives through grants supporting the performing arts, environmental conservation,

child well-being, and medical research, and through preservation of the cultural and environmental legacy of Doris Duke's properties. The mission of the foundation's Child Well-being Program is to promote children's healthy development and protect them from abuse and neglect. To that end, DDCF takes a funding approach that centers on intergenerational work that bolsters culturally, geographically, and locally relevant programs with and for communities to foster the long-term well-being of families. To learn more, visit [www.ddcf.org](http://www.ddcf.org).

THE DUKE ENDOWMENT

Based in Charlotte and established in 1924 by industrialist and philanthropist James B. Duke, The Duke Endowment is a private foundation that strengthens communities in North Carolina and South Carolina by nurturing children, promoting health, educating minds, and enriching spirits. Since its founding, The Duke Endowment has distributed more than \$4 billion in grants. The Endowment shares a name with Duke University and Duke Energy, but all are separate organizations. To learn more about the Endowment, visit [www.dukeendowment.org](http://www.dukeendowment.org).