DRUG ENDANGERED CHILD

KANSAS CHILDREN'S SERVICE LEAGUE

The Drug Endangered Child program supports mothers working to overcome substance abuse and helps them make lasting changes to how their family functions. The program includes early identification of parents who are abusing substances and offers intensive (weekly) support through case management and home visits.

STRATEGIES

- Intensive, comprehensive home visiting and case management
- Substance abuse treatment assistance
- Parent education and child development training
- Medical home assistance
- Resource and referral

“Sometimes it’s us coming in and just being able to listen, and be patient, so you understand the barriers, and why certain tasks are so hard.”

- Amber Miller, Supervisor, Drug Endangered Child program

Serving families of young children with a parent who has a history of substance abuse
CHALLENGES
• Shawnee County has no other options for mothers and children seeking this type of help. There are no other programs of this kind serving the zero to five age range.
• Shawnee County has one of the highest rates of children in out-of-home placement.
• Parental substance abuse is the primary reason children in Shawnee County are placed in custody of the Kansas Department for Children and Families.

SOLUTIONS
• Work with hospital intake centers and one obstetrics/ gynecology office to screen new moms while still in the hospital, reaching them as early as possible.
• Help families access treatment services and concrete supports in order to build positive social support systems.
• Provide home visiting services to enhance parent-child interaction and overall family functioning.
• Offer connections to postpartum and pediatric care.

SPECIAL POPULATION OUTREACH
• Provided services and outreach specifically to children and parents impacted by addiction.
• Ensured that participants complete the Adverse Childhood Experiences (ACE) questionnaire to help case managers provide better services to those affected by ACEs. More than half of the parents served had four or more ACEs.
• Served a high number of children exposed to substances in utero, putting them at higher risk for developmental delays.
• Served many families who were living with relatives or did not have a place of their own.

EVIDENCE BASE
Emerging and Evidence Informed: The Drug Endangered Child (DEC) program uses the Partners for a Healthy Baby curriculum, a nationally recognized and evidence-informed program.

COLLABORATION
• Served on the Fetal Infant Mortality Review Board in Shawnee County to review cases and recommended changes to the community’s service delivery system to reduce infant mortality.
• Coordinated services with all local substance abuse treatment and ensured the progression of client treatment plans.
• Increased outreach to homeless population by working closely with local homeless shelters and the Topeka Housing Authority.
• Provided referrals to Women, Infants, and Children (WIC) program, immunization clinics, and newborn health visits.

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The number of families who scored a three or above increased between pre- and post-test on the following subscales of the PFS-2 (n = 31):

- Family Functioning/Resilience by 52%*
- Social Supports by 38%*
- Caregiver/Practitioner Relationship by 15%**
- Nurturing and Attachment by 11%*

*Results significant at the (p < .01) level
**Results significant at the (p < .05) level

TOTAL FUNDING: $199,474

CBG $142,299
ECBG $35,575
MATCH $21,600

“There are crises that occur, there are stressors, there are barriers – [families] cope with that. I think that builds strong families.”

- Amber Miller, Supervisor
Drug Endangered Child program