

STRONG COMMUNITIES *for Children*

- In the mid-1990s, the U.S. Advisory Board on Child Abuse and Neglect developed a new neighborhood-based strategy for child protection; this strategy was grounded in the belief that, to be effective, child protection must be a part of everyday life
- The first large-scale implementation of this approach occurred in a portion of metropolitan Greenville, SC, in 2002-08, when STRONG COMMUNITIES *for Children* was designed, implemented, and evaluated; service area was diverse in population density, ethnicity, and wealth
- In an area with a population of about 125,000 at the time, **hundreds of organizations**—e.g., churches, fire and police departments, civic organizations, neighborhood associations, businesses, and schools—**and thousands of volunteers participated; more than 60,000 hours of volunteer service** (probably a very conservative estimate of actual service generated by the initiative) were recorded
- **Mobilized by a small number of outreach workers (roughly one per town), they pledged to ensure that every child and every parent would know that if they had reason to celebrate, worry, or grieve, someone would notice, and someone would care**
- The goal was to develop **new norms of family support** and thereby to build new norms of parental care; **people shouldn't have to ask, and no family should be left outside**
- For example, volunteers created new Family Activity Centers within existing community facilities (e.g., churches; schools; fire stations), with universally available parents' nights out, play groups, family activities, financial counseling, and chats with family advocates
 - **In the first year, about 3,000 families enrolled; many thousands more participated**
 - **In the first two years, there were at least 1,300 activities, with 25,000 instances of participation**
 - **The benefits spilled over to a much larger number of families who witnessed new norms of mutual assistance and new evidence of collective efficacy** (communities being able to make a difference for families)
- **The communities themselves were stronger**
 - Much creative engagement at both personal and organizational levels in strengthening community ties and enhancing family support
 - Volunteers acted from altruistic motives
 - Star volunteers reported personal transformations
 - The initiative bridged gender, age, ethnicity, class, politics, and theology
 - The initiative engaged many organizations that typically are not associated with child protection
 - Change was greatest in the communities with the greatest need
- Over time and in comparison with matched communities, the communities in the STRONG COMMUNITIES service area built **stronger families** and achieved **greater safety for children**
 - **Fewer founded reports of child maltreatment**
 - For children aged 2 and under, ↓ 11% in the service area; ↑ 85% in comparison communities
 - For children aged 4 and under, ↓ 41% in the service area; ↑ 49% in the comparison communities

- **Fewer emergency room visits and hospitalizations for injuries to children**
 - For injuries related to neglect, ↓ 68% in the service area; ↓ 19% in the comparison communities
 - For maltreatment-related injuries of children aged 2 and under, ↓ 23% in the service area; ↓ 6% in the comparison communities
 - For maltreatment-related injuries of children aged 4 and under, ↓ 38% in the service area; ↓ 13% in the comparison communities
- Teachers, parents, and children in elementary schools reported
 - **Greater safety at school and en route to and from school**
 - **More welcoming responses to parents at the schools**
- Parents in the service area reported
 - **Less parental stress, greater social support, and more frequent help from others**
 - **Greater sense of parental and collective efficacy**
 - **More frequent positive parental behavior and more frequent use of household safety devices (e.g., baby gates)**
 - **Less frequent disengaged (inattentive) parenting and less frequent neglect**
- The results have been reported in a special issue of *Family and Community Health* (published in 2008), a special section of *Child Abuse and Neglect* (now in review), an edited book (soon to go to press), and several book chapters and individual articles

For an overview, see: Melton, G. B. (2014). Strong Communities for Children: A community-wide approach for prevention of child maltreatment. In J. E. Korbin & R. D. Krugman (Eds.), *Handbook of child maltreatment* (pp. 329-339). Dordrecht, The Netherlands: Springer.

- **Replications are needed** to demonstrate the effectiveness of the approach in various communities with initiatives under different auspices
 - With support from the Haruv Institute, Tel Aviv University, and the Tel Aviv municipal government, a Strong Communities initiative is underway in the Bob Shapell School of Social Work at TAU
 - We expect to initiate a similarly structured initiative in the coming months in multiple colleges at University of Colorado Colorado Springs
 - Initial agreement is in place for a health-center-based trial in NE Denver/N Aurora; funding is being sought
- Initial evidence suggests that the Strong Communities approach is **remarkably cost-effective**
 - The salary of one outreach worker with appropriate training, supervision, and consultation may result in greater safety for thousands of children; optimal ratio is estimated to be 1 outreach worker to 10,000 residents
 - It is plausible that this number could be increased with supplementation by medical students or other trained volunteers or pre-professionals
 - Support is also needed for faculty and senior professional staff to recruit communities for participation, to provide training and consultation to outreach staff, develop training and educational materials for use in diverse settings (e.g., health centers; religious organizations), and provide program evaluation and monitoring

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