



# State of Kansas Child Maltreatment Prevention Plan

2019-2023



Kansas Department of Health and Environment | Bureau of Health Promotion

In coordination with the Kansas Children's Service League Prevent Child Abuse Kansas Chapter, Wichita State University Community Engagement Institute, KDHE Bureau of Family Health and Bureau of Community Health Systems

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**Special thanks to the businesses working on Family Friendly Workplaces in Year One:**

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- New Age Industrial
- Norton Correctional Facility
- Norton County Hospital
- Evergy - Jeffrey Energy Center

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## **Kansas Power of the Positive (KPoP) Coalition**

Vision: All Kansas children live in safe, stable, nurturing relationships and environments

### Aligned

American Academy of Pediatrics, Kansas Chapter  
Child Advocacy Centers of Kansas  
Child Care Aware of Kansas  
Children's Alliance of Kansas  
Children's Mercy Hospital  
Family Conservancy  
Florence Crittenton  
Greater Kansas City Chamber of Commerce  
Junior League of Wichita  
K State Research and Extension  
Kansas Action for Children  
Kansas Association of Workforce Boards  
Kansas Breastfeeding Coalition  
Kansas Children's Cabinet and Trust Fund  
Kansas Children's Service League  
Kansas Coalition against Sexual & Domestic Violence (KCSDV)  
Kansas Department for Aging and Disability Services  
Kansas Department for Children and Families  
Kansas Department of Commerce  
Kansas Department of Health and Environment  
Kansas Head Start Association  
Kansas State Department of Education  
Nonprofit Chamber of Service  
Norton County Hospital  
Pine Ridge Prep  
REACH Healthcare Foundation  
Reaching Out From Within  
Saint Francis Ministries  
Society for Human Resource Management  
University of Kansas Center for Public Partnerships and Research  
University of Kansas Medical Center  
WSU Community Engagement Institute

In attendance between 3/28/2017 and 8/22/2019

# Guiding Principles for Child Maltreatment Prevention Planning

## Primary Prevention

The Kansas Power of the Positive (KPoP) Coalition focuses on primary prevention of childhood adversity. While we acknowledge that mitigation efforts are valuable, the focus of coalition work is creating safe, stable, nurturing relationships and environments for Kansas children to prevent adversity from happening in the first place.

## Community and Societal Level Work

KPoP seeks to create population-level results by focusing efforts at the outer layers of the social ecology. We believe child maltreatment is a product of conditions in which families live. Interventions at the individual and relationship level are vital, but there are other funding streams devoted to that work. Interventions at the community and societal level are best performed by coalitions.

## Public Health Strategy

This prevention plan approach starts by measuring the characteristics of childhood adversity. Next, we identify the related risk and protective factors at the social/environmental level. In this document we outline the interventions intended to increase protective factors and decrease risk factors. Finally, we monitor indicators to evaluate effectiveness and impact.

## Collective Impact

KPoP seeks to assure effective systems change by building on the five conditions of Collective Impact.<sup>1</sup> The coalition agreed on a common agenda at its inception in 2014. The Evaluation Team introduced indicators for measuring impact in 2019. We engage a diverse set of stakeholders in our planned activities. The common agenda and data gathering give us a framework for structured communication. And finally, we rely on dedicated staff to provide ongoing support, alignment and advancement.

## Sustainability

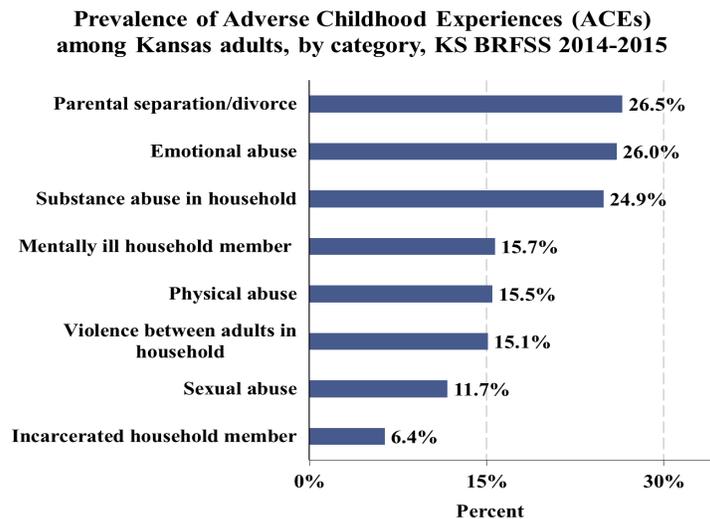
This coalition intends to sustain child maltreatment prevention by hard-wiring into existing structures support for conditions that lead to safety, stability and nurturing relationships. This plan outlines formalized changes on the part of strategic partners to implement, support or fund state plan priorities. Increased awareness and general commitment to address societal factors will create enduring public will and guide future policy. Demonstrated impact will also sustain effective strategies.

# Data Gathered That Informs the State Plan

2014-2015 Kansas Behavioral Risk Factor Surveillance System (BRFSS)

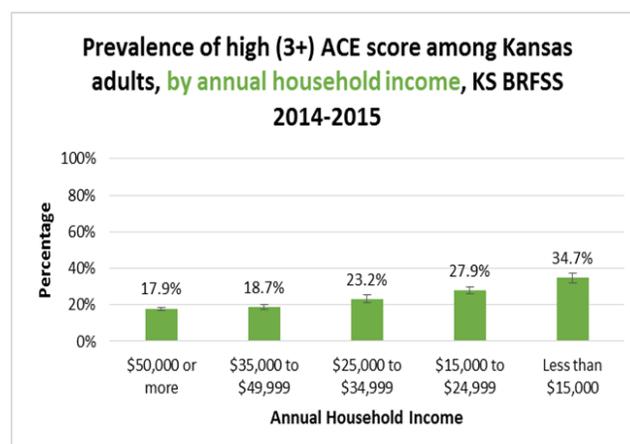
## Prevalence of Adverse Childhood Experiences (ACE):

Data from the 2014-2015 Kansas Behavioral Risk Factor Surveillance System (chart below) shows that about one in four Kansas adults 18 years or older have experienced parental separation/divorce, emotional abuse, or substance abuse by a household member, and one in 10 have been sexually abused. Approximately 15.7% of Kansas adults reported that they have lived with someone who is mentally ill. Similar distribution was found for those reported experiencing physical abuse (15.5%) and violence between adults in the household (15.1%).



## High ACE score and annual household income

The 2014-2015 Kansas BRFSS data showed that a high ACE score (3+) was more prevalent among households with lower annual income. One in three Kansas adults with annual household income less than \$15,000 had at least three ACEs. About 27.9% of Kansas adults have a high ACE score.



## Family Friendly Workplace Indicators

From the set of conditions that decrease risk factors and increase protective factors for child maltreatment, the KPoP Kids Are Good Business workgroup identified a subset that only workplaces can create. These workplace conditions taken together describe a Family Friendly Workplace. The following indicators were prioritized to measure Family Friendly Workplace Conditions in Kansas.

### Family Friendly Workplace

The conditions of a Family Friendly Workplace were identified during meetings of the KPoP Kids Are Good Business workgroup from July 2015 to May 2018.

### Flexible Work Schedule

Flexibility in work scheduling, working hours and workplace location provides workers with a predictable pattern of work and/or allow for adaptability within the work environment.<sup>2</sup> Flexible and consistent schedules (i.e., work-life fit) are associated with lower rates of depression and stress, both of which are risk factors for child physical abuse and neglect.<sup>2</sup>

### Predictable Work Schedule

Inconsistent schedules or shiftwork can make it challenging to balance work and family responsibilities, which includes obtaining stable child care and access to child care assistance.<sup>2</sup> For example, parents who work irregular shift times, in contrast with those with more standard, regular shift times, experience greater work-family conflict and are more likely to be stressed, which is a risk factor for child physical abuse and neglect.<sup>2</sup>

### Child Care

Quality child care and early childhood education can improve children's cognitive and socioemotional development and increase the likelihood that children will experience safe, stable, nurturing relationships and environments (SSNRE), both in the child care and education settings and at home.<sup>2</sup> Access to affordable, quality child care is associated with reduced parental stress and maternal depression, both of which are risk factors for child abuse and neglect.<sup>2</sup>

### Paid Parental Leave

Paid maternity leave increases the frequency and duration of breastfeeding. Breastfeeding, in turn, is potentially protective against child abuse and neglect.<sup>2</sup> Paid family leave is also significantly associated with reductions in hospitalizations for abuse head trauma.<sup>2</sup>

### Continued Breastfeeding

Breastfeeding benefits both mothers and infants.<sup>2,3</sup> Infant neglect by mothers is independently associated with breastfeeding duration.<sup>2</sup> This may be due to breastfeeding stimulating maternal oxytocin release, which is associated with reduced anxiety and elevated mood, a blunted physiological stress response, and more attuned patterns of maternal behavior.<sup>2</sup> Non-breastfed children had a 3.8 times greater risk and

children breastfed  $\leq 4$  months had a 2.6 times greater risk of experiencing child abuse and neglect by their mothers relative to those breastfed for  $\geq 4$  months.<sup>2</sup>

### **Comprehensive Employee Wellness**

Depression is prevalent among women, and parental depression is associated with negative and poor parenting skills and psychological aggression towards children.<sup>5,6</sup> Children with depressed parents are less likely to be healthy and more likely to develop behavioral problems.<sup>6,7</sup> To reduce the risk of child maltreatment, effective intervention for depression should be provided to parents, which can be addressed by an employee assistance program.<sup>6</sup>

### **Stronger Family Bonds**

Nurturing relationships between parents or caregivers and their child reduces the child's fear in new situations, allowing the child to explore their world with confidence.<sup>8</sup> Early nurturing relationships contribute to the growth of a broad range of skills, competencies and personality characteristics that children use throughout their lives, including their interest in and capacity for learning, self-worth, social skills, and an understanding of important building blocks of human relationships such as emotions, commitment, and morality.<sup>8</sup>

### **Livable Wages**

Fifty-nine percent of salaried workers in the U.S. earn minimum wage; 76% of these are 20 years or older.<sup>8</sup> Twenty-six percent of low wage workers come from low income families with children.<sup>8</sup> Livable wages allow working parents enough income to cover the costs of living and provide for their children's basic needs (e.g., food, shelter, appropriate child and medical care), reducing the risk of child maltreatment and poor child health outcomes.<sup>2,8</sup> Its impacts on parental mental health can improve parenting behaviors.<sup>2,8</sup>

**Table 1 | Workplace Indicators**

|   |  |
|---|--|
| <p><b>Flexible Work Schedule</b></p>          | <p>Among new Kansas mothers who did not get prenatal care or did not get prenatal care as early as desired, <b>5.0%</b> (95%CI: 1.9-12.8) gave as a reason, “I couldn’t take time off from work or school”<sup>1</sup></p> <p>Currently shared on the Workplace Indicator Dashboard</p>  |
| <p><b>Predictable Work Schedule</b></p>       | <p><i>Indicators for Predictable Work Schedule are not yet identified. The Data Team is working with Kansas Power of the Positive coalition partners to identify a source of data.</i></p>   |
| <p><b>Child Care</b></p>                      | <p>In Kansas homes with a child 0-5 years-old, <b>4.9%</b> (95%CI: 2.9, 8.0) indicated that someone in their family had to quit a job, not take a job, or greatly change their job because of problems with child care for the child during the past 12 months.<sup>2</sup></p> <p>Currently shared on the Workplace Indicator Dashboard</p>   |
| <p><b>Paid Parental Leave</b></p>             | <p><i>Indicators for Paid Parental Leave are not yet identified. The Data Team is working with Kansas Power of the Positive coalition partners to identify a source of data.</i></p>   |
| <p><b>Continued Breastfeeding</b></p>         | <p>Of Kansas WIC participants who were breastfeeding and introduced formula, <b>4.9%</b> (95%CI: 4.5, 5.4) indicated that it was because of work/school.<sup>3</sup></p> <p>Currently shared on the Workplace Indicator Dashboard</p>  |
| <p><b>Comprehensive Employee Wellness</b></p> | <p>Of new mothers who reported they thought they needed counseling for depression,</p> <ul style="list-style-type: none"> <li>• <b>13.0%</b> (95%CI: 10.4, 16.0) didn’t get it. Of those:</li> <li>• <b>46.1%</b> (95%CI: 34.6, 58.0) indicated the reason, “I did not have time because of a job, child care or another commitment.”</li> <li>• <b>56.9%</b> (95%CI: 44.8, 68.3) indicated the reason, “I was worried about the cost or could not afford it.”<sup>1</sup></li> </ul> <p>Currently shared on the Workplace Indicator Dashboard</p> |
| <p><b>Stronger Family Bonds</b></p>           | <p>In Kansas homes with a child 6-17 years-old, <b>85.8%</b> (95% CI: 77.0, 91.5) always or usually had a parent participate in the child’s events/activities.<sup>4</sup></p> <p>Currently shared on the Workplace Indicator Dashboard</p>  |
| <p><b>Livable Wages</b></p>                   | <p>In Kansas, among households with a child 0-17 years-old, <b>22.8%</b> found it somewhat or very often hard to get by on family income to afford basics like food or housing since the child was born<sup>4</sup></p> <p>Currently shared on the Workplace Indicator Dashboard</p>   |

## **Table 1 Data Sources:**

- 1) 2017 Kansas PRAMS, Bureau of Epidemiology and Public Health Informatics, KDHE
- 2) 2016-2017 Child and Adolescent Health Measurement Initiative. 2017 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health supported by Cooperative Agreement U59MC27866 from the U.S. Department of Health and Human Services, Health Resources and Services Administration's Maternal and Child Health Bureau (HRSA MCHB).
- 3) 2019 Kansas Women, Infants and Children, Nutrition and WIC Services Section, KDHE
- 4) 2017 Child and Adolescent Health Measurement Initiative. 2017 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health supported by Cooperative Agreement U59MC27866 from the U.S. Department of Health and Human Services, Health Resources and Services Administration's Maternal and Child Health Bureau (HRSA MCHB).

The Workplace Indicator Dashboard is available at [www.kansaspowerofthepositive.org](http://www.kansaspowerofthepositive.org).

## **Description of Data Sources:**

### **Behavioral Risk Factor Surveillance System (BRFSS)**

The BRFSS is a random digit dial telephone survey of non-institutionalized adults 18 years and older living in private residence or college housings with landline and/or cell phone service. Kansas BRFSS data is easily accessible by KDHE injury epidemiologist. ACE data from 2014 and 2015 Kansas BRFSS have been used to understand of the burden of ACE among Kansas adults. Future data will continually be analyzed if ACE optional module is included in BRFSS survey in the survey year. The ACE supplement module, the protective childhood experiences (PCE), is introduced the first time in 2020 Kansas BRFSS and will be analyzed to study the protective factors of child abuse and neglect.

### **Kansas Pregnancy Risk Assessment Monitoring System (PRAMS)**

The PRAMS is a survey for women who have given birth in the past six months. Kansas PRAMS data are accessible to KDHE PRAMS epidemiologist, and the 2017 data have been used for workplace indicators, flexible work schedules, and comprehensive employee wellness. In the future, opioid use disorder (OUD) questions will be included in the survey to be used to evaluate the OUD burden among pregnant and postpartum women in Kansas. Workplace leave questions will also be included in the survey to evaluate amount of paid and unpaid leave as well as overall feeling about the amount of time the person was able to take off from work after the birth of baby.

### **National Survey of Children's Health (NSCH)**

The NSCH is a national survey to collect physical and emotional health data on non-institutionalized children 0-17 years-old. Survey data collected since 2016 can be accessed by anyone on the website of Data Resource Center for Child and Adolescent Health. The 2016 and 2017 NSCH data have been abstracted for the indicators of child care and livable wages.

### **Kansas Women, Infants and Children (WIC)**

Data of breastfeeding were and will be provided by Kansas WIC program to the KPOP Evaluation and Data Team. Kansas 2019 WIC data were calculated for the workplace indicator of continued breastfeeding.

### **Additional Sources**

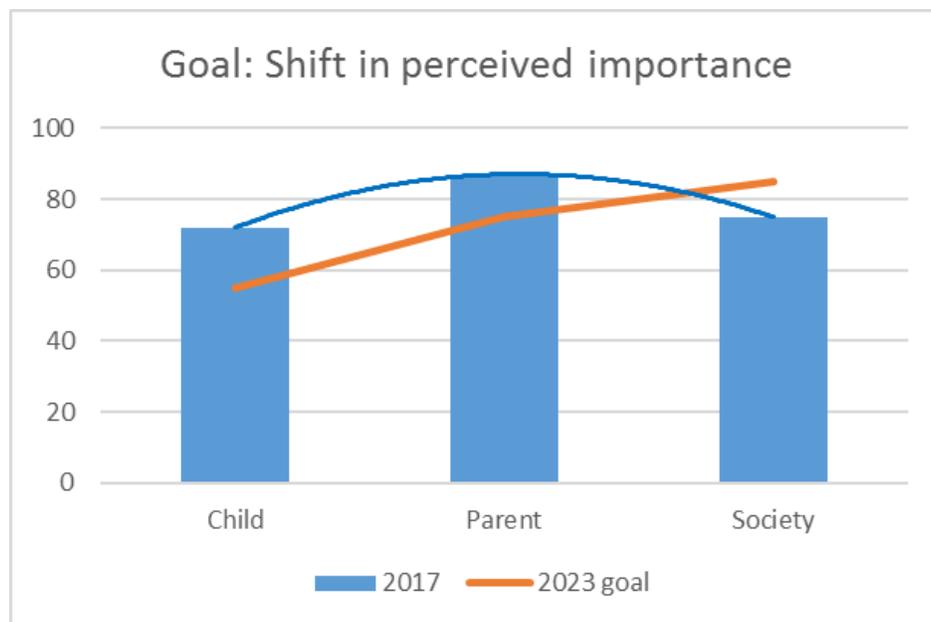
More data sources will be explored to evaluate child abuse and neglect prevention efforts towards the SSNRE for Kansas children. The KPOP Data Team is going to select risk and protective factors from easily accessible databases including National Immunization Survey (NIS), American Communities Survey (ACS), U.S. Department of Health and Human Services (DHHS) Child Maltreatment Report, National Women’s Law Center, Urban Institute Welfare Rules Database (WRD), Living Wage Calculator, Tax Credits for Working Family, Kansas Bureau of Investigation (KBI) Domestic Violence, Stalking, and Sexual Assault report, Kansas Department of Children and Family (DCF) Administrative Report, Kansas Trauma Registry, Kansas Hospital Association Hospital Discharge (HD) and Emergency Department Visit (EDV) Database, and Kansas Violent Death Reporting System (KSVDRS). All indicators will be described and visualized in the public KPOP dashboard that can inform data-driven decisions among stakeholders or coalition members, and educate the public the importance of SSNRE for child abuse and neglect prevention.

## Two Approaches

The Centers for Disease Control and Prevention identified strategies for preventing child maltreatment.<sup>2</sup> The State of Kansas has prioritized two approaches associated with the strategies:

### 1. Public engagement and education campaign

Through a public engagement and education campaign, we seek to increase public awareness and commitment to address societal factors that lead to safe, stable, nurturing relationships and environments. In order to increase commitment to addressing societal factors, Kansans need to understand the importance of the conditions in which families live. In 2017, Wichita State University conducted a survey measuring Kansans' perceptions about which factors are important for explaining why children struggle and learned that blame is mostly assigned to attributes of parents. The goal of the public engagement and education campaign conducted by the Kansas Children's Service League is to shift perceived importance from parental toward societal attributes.



### 2. Family friendly work policies

Family friendly workplaces support a parent's ability to provide a safe, stable, nurturing environment for their children. The Kids Are Good Business campaign asks workers about workplace conditions that are important for parents. It also measures worker's perceptions about how well workplaces meet the needs of working parents. The campaign supports workplaces in making prioritized changes to increase protective factors and decrease risk factors for child maltreatment.

## Five Priority Areas

These five priority areas will provide strategic direction for coalition work over the next four years:

### **Priority Area 1:**

Identify and leverage resources/programs/policies that bolster efforts to create Family Friendly Workplaces in Kansas.

### **Priority Area 2:**

Partner with employers to create Family Friendly Workplaces in Kansas.

### **Priority Area 3:**

Build commitment to creating conditions that lead to safe, stable and nurturing relationships and environments.

### **Priority Area 4:**

Increase support-seeking behavior in pregnant and postpartum women with Opioid Use Disorder (OUD).

### **Priority Area 5:**

Increase use of state-level data related to child maltreatment prevention.

## Planned Activities

The planned activities in this Child Maltreatment Prevention Plan represent the coalition's current strategic first steps with the expectation that additional steps will emerge.

## Priority Area 1:

Identify and leverage resources/programs/policies that bolster efforts to create Family Friendly Workplaces in Kansas.

| Which Strategic Partner                     | Planned Activity  | Tracking Progress  | Anticipated Completion |
|---|---|--|------------------------|
| Kansas Department of Health and Environment | Track workplace indicators<br>Monitor disparities<br>Increase public awareness and commitment to addressing societal factors that lead to safe, stable, nurturing relationships and environment | Published dashboard<br>Completed demographic analysis<br>Published public awareness campaign | February 2020          |
| Kansas Department of Commerce               | Create a suite of resources available to communities working on family friendly workplace conditions  | Resource guide shared with KPoP Coalition partners   | February 2020          |
| Kansas Association of Workforce Boards      | Support community partnerships that enhance access to child care  | New partnerships between workforce boards and child care coalitions                          | May 2020               |
| Kansas Children's Service League            | Secure resources for efforts to create Family Friendly Workplaces in Kansas   | New resources such as grants, in-kind contributions or volunteer time                        | August 2020            |

**Focus on health disparities:** Lack of family friendly workplace conditions fall disproportionately to low-wage workers. For example, low-wage workers are less likely to have paid parental leave or predictable work schedules. Creating family friendly workplace conditions where they are absent should impact low-wage workers.

**Focus on sustainability:** Formalized changes in resources, programs, or policies are intended to create systems that intentionally and persistently bolster family friendly workplaces.

### Planned Activities

These planned activities were identified in an August 2019 meeting of the Kansas Power of the Positive.

## Priority Area 2:

Partner with employers to create Family Friendly Workplaces in Kansas

| Which Strategic Partner          | Planned Activity  | Tracking Progress   | Anticipated Completion |
|----------------------------------|---|---|------------------------|
| Kansas Children's Service League | Recruit employer partners to participate in the Kids Are Good Business survey and plan improvement of selected family friendly workplace conditions | The Kids Are Good Business campaign will be tracked by the Community QI System which will capture: <ul style="list-style-type: none"> <li>• How many workplaces participated</li> <li>• How many survey respondents</li> <li>• Ratings of the 19 Family Friendly Workplace conditions</li> <li>• Planned quality improvement</li> </ul> | August 2020            |
| Kansas Breastfeeding Coalition   | Provide breastfeeding policy guidance. Recognize Kansas employers that provide workplace support for nursing employees                              | KBC tracks and publishes employers who earn the Gold, Silver and Bronze level Breastfeeding Employee Support Award  | November 2020          |
| Kansas Action for Children       | Make the case to different constituencies about how paid family leave benefits both workplaces and families   | KAC tracks number of presentations and conversations with stakeholders, state and federal legislators related to paid family leave.   | August 2020            |

**Focus on health disparities:** In 2019, the Kids Are Good Business campaign worked to build a record of success with influential employers. In 2020 through 2023, we will recruit employers of low-wage workers.

**Focus on sustainability:** The Kids Are Good Business campaign has built-in peer-to-peer support. This will allow the campaign to scale without requiring campaign staff to provide all the technical support.

### Planned Activities

These planned activities were identified in March and June 2019 meetings of the Kansas Power of the Positive.

### Priority Area 3:

Build commitment to creating conditions that lead to safety, stability and nurturing relationships

| Which Strategic Partner   | Planned Activity  | Tracking Progress  | Anticipated Completion |
|---|---|--|------------------------|
| Kansas Children's Service League  | Mobilize local child abuse prevention coalitions' capacity for messaging at the societal level  | Documented coalition activities  | May 2020               |
| <ul style="list-style-type: none"> <li>• Kansas Children's Service League</li> <li>• Kansas Department of Health and Environment</li> <li>• WSU Community Engagement Institute</li> <li>• Child Advocacy Center of Sedgwick County</li> <li>• Employer partners</li> <li>• Head Start</li> <li>• Local Health Departments</li> <li>• Kansas Head Start Association</li> </ul> | Deliver "The Business Case for Prevention" presentation to employers, state and community organizations, coalitions, faith communities, policy makers and human resource professionals.   | Presenters will turn in report forms to Kansas Children's Service League   | August 2020            |
| Wichita Coalition for Child Abuse Prevention  | <ul style="list-style-type: none"> <li>• Plan child abuse prevention month (April 2020) community awareness activities</li> <li>• Raise Safe Haven Awareness</li> <li>• Help media outlets focus child abuse reporting on community-level supports</li> </ul> | <ul style="list-style-type: none"> <li>• Session evaluations</li> <li>• Creation and dissemination of a Safe Haven toolkit</li> <li>• Media instances</li> </ul> | May 2020               |
| Child Advocacy Center of Sedgwick County  | Facilitate a screening of Resilience during the 2019 Governor's Conference for the Prevention of Child Abuse and Neglect  | Session evaluations  | October 2019           |
| Kansas Department of Health and Environment   | Create a workplace indicators dashboard   | Dashboard available at <a href="http://www.kansaspowerof-thepositive.org">www.kansaspowerof-thepositive.org</a>  | August 2019            |

**Focus on health disparities:** We believe an important first step to addressing health disparities is acknowledging the societal conditions that support all families rather than focusing on direct services to certain families.

**Focus on sustainability:** Ongoing sustainability for this priority area comes from building the capacity of existing coalitions and organizations to deliver messaging intended to build commitment. Capacity-building includes training of trainers, coalition facilitation, and materials development.

## Priority Area 4:

Increase support-seeking behavior in pregnant and postpartum women with Opioid Use Disorder (OUD)

| Which Strategic Partner  | Planned Activity  | Tracking Progress  | Anticipated Completion |
|--|---|--|------------------------|
| KDHE Bureau of Health Promotion  | Develop and monitor a communications campaign aimed at increasing the support-seeking behavior in pregnant and postpartum women with OUD  | Campaign tracking  | August 2020            |
| KPoP OUD Support-seeking Workgroup                                     | Identify and engage strategic partners needed to conduct the communications campaign  | Completion of an asset map   | May 2020               |
| WSU Community Engagement Institute<br>Kansas Children's Service League | Convene child welfare stakeholders to learn about the connection between OUD and child maltreatment, recognize the barriers to treatment, and access resources for supporting the opioid exposed dyad | Session evaluations  | October 2019           |
| Kansas Connecting Communities  | Improve the mental health and well-being of pregnant and postpartum women through increased screening, referral, treatment and recovery support services.   | Participating providers will enter data into the existing MCH shared measurement system, Data Application and Integration Solution for the Early Years (DAISEY). | November 2020          |
| Kansas Perinatal Quality Collaborative                                 | Train birth center personnel on communicating with the Department for Children and Families and reducing stigma when identifying pregnant and postpartum women with OUD                               | Session evaluations  | November 2020          |

**Focus on health disparities:** Fatal drug overdoses affect African American and Hispanic populations disproportionately. It's important to communicate clearly about treatment and recovery support services, especially during the critical perinatal period.

**Focus on sustainability:** Ongoing sustainability for this priority area comes from building the capacity of existing organizations to deliver messaging intended to increase support-seeking. Capacity-building includes training of trainers and materials development.

### Planned Activities

Some of these planned activities were identified in a March 2019 meeting of the Kansas Power of the Positive. Others were developed during a July 2019 meeting of the KPoP OUD Support-seeking Workgroup.

## Priority Area 5:

Increase use of State-level data related to child maltreatment prevention

| Which Strategic Partner                   | Planned Activity  | Tracking Progress   | Anticipated Completion |
|---|---|---|------------------------|
| KDHE Injury & Violence Prevention Program | <p>Interpret and communicate key results during KPoP coalition meetings</p> <p>Publish a dashboard including:</p> <ul style="list-style-type: none"> <li>• Workplace indicators</li> <li>• Opioid indicators</li> <li>• Outcome indicators</li> </ul> | Use of data will be tracked annually in a survey of Kansas Power of the Positive coalition partners | May 2020               |
| KDHE Nutrition and WIC Services           | Develop data-sharing agreement between the WIC office and Injury & Violence Prevention Programs to measure the extent to which work is a barrier to continued breastfeeding   | Annual report in Workplace Indicator Dashboard  | May 2020               |
| Prescription Drug Overdose prevention     | Work with Injury & Violence Prevention Program to analyze BRFSS data for any association between OUD and childhood adversity  | Completed analysis  | May 2020               |

**Focus on health disparities:** Where possible, we will track demographic data and look for patterns of disparity and use the results to focus strategic activities.

**Focus on sustainability:** Sustainability in this priority area comes from new data collected and new data sharing agreements. Increased evaluation raises awareness, demonstrates impact, and creates the case for continued action.

### Planned Activities

These planned activities were identified during the July 2019 meeting of the KPoP Data Workgroup.

## Reference:

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[www.kansaspowerofthepositive.org](http://www.kansaspowerofthepositive.org)

[www.familyfriendlyks.org/](http://www.familyfriendlyks.org/)

Thanks to the WSU The Community Engagement Institute for development of this state plan. The Community Engagement Institute:

- **Promotes best practices in organizations and communities** interested in improving people's lives. We provide technical and practical capacity building, trainings, coaching, project management, and related supports.
- **Fosters meaningful connections and engagement** with community partners to create positive change. Our staff connect with community partners to spark new ideas and innovations to address challenges in organizations and communities.
- **Provides applied learning opportunities** for students interested in meaningful community and organizational experiences. These opportunities enhance student experiences at WSU and greatly expand our capacity to serve communities and organizations.
- **Conducts high-impact, state-of-the-art applied research and evaluation** with diverse organizations, communities, and systems.