What "Prevention" Means for San Diego
(Prevention Definition)

> **Prevention means** families thrive in a *connected community* that enhances and restores nurturing and responsive relationships and environments. It involves aligning impact on multiple levels so that all *children* are safe and cherished, all *families* are nurtured to build up protective factors, and *systems/structures* create equitable pathways to wellness. In San Diego, the focus is on primary prevention. Our shared approach will reflect the innovation required to meet the evolving priorities and needs of children, families and communities.

Why We Need a Shared Definition of Prevention

At the kickoff for Partners in Prevention, it was discovered that many people did not see the work they are doing as prevention. A definition that is clear and inclusive can create a "bigger tent" where all involved can collectively think about prevention as not living in a single sector, system or agency, rather as a shared community responsibility. This shared definition helps people to see themselves in one or more aspects of the work, while pointing to what we do and also how we do it.

Unpacking our Shared Definition of Prevention

The language and core elements constitute a *working* definition that was developed through a "learning community" approach, and may evolve to reflect new learning and emerging trends going forward. For now:

Enhancing and restoring – Because trauma is widespread and pervasive, much of our work is about restoring and helping heal relationships. The "enhance" part of our prevention approach recognizes that individuals and families have existing strengths and capacities to build on.

Responsive and connected community – the notion of prevention being a community response, a shift from seeing families as abusive and neglectful to thinking about families as worthy of support and caring attention. Speaks to the idea that anyone in our community can reach out/ access support and receive a sensitive and timely response to what is asked for or needed.

We are intentional about **aligning levels of impact** –what is happening at the individual level, family level, systems level, and structural level are all connected. We foster hope and resilience when we lift up and leverage each other's efforts.

Towards a Shared Understanding of "Prevention"
(How we got to a shared definition)

Since a key goal of Partners in Prevention (PiP) is to collaboratively build shared understanding and a shared definition of "prevention", we initiated a learning community approach to the task. The context/background provided below lays out the thought progression for the path PiP has been on. Through a series of structured discussions and joint exploration, we have begun to build shared understanding.

Prevention Context:

The starting place: ***Helping families to thrive through a connected community*** is PiP's tagline based on the core proposal. It was intended to offer key considerations to build on.

Guiding questions: The guiding questions were offered to build a dialog based on open exchange, and to encourage deep reflection regarding current systems and practice.

1. *What does it mean to be a partner in prevention?*
2. *What language/terminology resonates for defining and describing our Partners in Prevention work?*
3. *What beliefs (about families, the system, the role of cross-sector partners) must one hold to do the work effectively? (Note: The concrete actions and supports that help families thrive through a connected community logically flow out of these beliefs and values.)*

Food for thought: This set of questions guided the learning community to explore and share the implications of prevention for each partner's role and organization.

1. *What does "prevention" mean to you now?*
2. *How do you approach it within your organization?*
3. *If you were to fully align your day-to-day work with the PiP definition of prevention, would it require a shift in policy or practice?*

County, State and Federal perspectives on "prevention":

- **San Diego**: "Prevention occurs when the amount and intensity of protective factors outweigh the amount of risk factors. Prevention means strengthening families and communities before child abuse and neglect occur."

- **California (OCAP):** Definition of prevention adapted from healthcare model that seeks to build protective factors through community and natural supports while mitigating risk factors. Primary prevention activities are directed at the general population to strengthen communities and improve child well-being by focusing on the social determinants of health.

- **Federal (CW Info Gateway):** The current approach to child maltreatment prevention relies on enhancing the role of communities in strengthening protective factors in a child's environment and providing prevention services targeted toward different segments of the population.

Emerging concepts from the Partners in Prevention (PiP) Advisory Committee:

- **Promotion/Building**:
    - Value and promotion of building family strengths
    - Prevention means building protective capacity

- **Level: Primary Prevention**
    - Truly thinking about prevention as primary prevention – Outcomes look different than direct service. There is an advocacy aspect; these are systemic outcomes
    - Organizationally we are focused more on the 'primary' (general, universal) prevention definition(s)

- **Proactive vs Reactive communities**:
    - Something related to community- responsive communities – in the context in the of a more connected or responsive community vs reactive (Mandated Reporter)
    - …thriving families through a connected community

- **Opportunity to shift perspective/increase equity/reduce stigma:**
    - When is intervention needed and worthy of resources – we have a legacy of taking a *punitive approach*
    - Prevention may look different based on the area/region you live in. I would love to see more universal "prevention", in line with the discussion around *equity*.
    - Healthy Steps – newborn visit, regular touchpoints, visits include developmental and behavior screenings; stay in front that the idea that children with disabilities have a higher risk for abuse; we have an opportunity to *shift perception*
    - Consideration: the *terminology 'at-risk'* which included things like poverty, young parent, etc. is challenging. It touches on *biases* which are baked into systems already in operation. (Somewhat like the 'Hard to Count' term for the Census... for individuals in communities identified that way--even if it is by data--the perception is from the outside in... I doubt they'd call themselves hard to count...) Using the term 'at-risk' just seems to take the humanity out of the scenario, feels presumptuous and label-y, and not necessarily setting families up for success.

Prevention Background:

The passage of the Adoption and Safe Families Act (ASFA) in 1997 marked a major shift in federal policy and thinking towards child welfare. The focus that followed emphasized children's safety, permanency and well-being over the preservation of biological family ties at all cost. In more recent years, the U.S. Department of Health and Human Services, Administration for Children and Families has articulated a vision of reshaping child welfare in the United States to focus on strengthening families through primary prevention of child maltreatment and unnecessary parent-child separation[1].

The following are widely recognized as the foundation for prevention policy and practice:

1. **Emerging research on brain science and child development** that show critical periods for healthy development, and the extreme impact of toxic stress over life course development[2];

2. **Principles and Premises of Family Support[3]** developed by Family Support America, which helped promote family support as a nationally recognized movement to strengthen and support families;

3. **The Strengthening Families™ Approach, Protective Factors Framework** developed by the Center for the Study of Social Policy[4], a research-based approach that illustrates protective factors (characteristics needed by all families) can buffer the impact of child abuse and neglect;

4. **Essentials for Childhood[5]** developed by the CDC, promotes safe, stable, nurturing relationships and environments that help prevent child abuse and neglect through the comprehensive efforts and action by many sectors; and

5. **The Pair of Aces and Community Resilience Model[6]** describe the interconnection between adverse childhood experiences, and adverse community environments, and how the root cause of trauma present in the community must be transformed to promote wellness.

> **Partners in Prevention Approach** Taken together, this implies that the optimal timeframe for prevention services is in early childhood, that the work must be based on equality and respect, and that building protective factors in families and resilience in communities helps to prevent child maltreatment. The adoption of evidence-based family strengthening principles and practices, including the protective factors framework coupled with community transformation work represents a significant trend in supporting the wellness of families and ultimately supporting the resilience of communities.

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[1] https://www.acf.hhs.gov/sites/default/files/cb/im1805.pdf
[2] https://developingchild.harvard.edu/resources/inbrief-the-impact-of-early-adversity-on-childrens-development/
[3] Family Support America website, 2002, http://www.familysupportamerica.org/
[4] https://cssp.org/wp-content/uploads/2018/11/About-Strengthening-Families.pdf
[5] https://www.cdc.gov/violenceprevention/pdf/essentials-for-childhood-framework508.pdf
[6] https://publichealth.gwu.edu/sites/default/files/downloads/Redstone-Center/Resource%20Description_Pair%20of%20ACEs%20Tree.pdf