1. Grant Number: 90-CB-0136

2. Grantee Name and Address: University of Oklahoma Health Sciences Center Center on Child Abuse and Neglect, CHO 3B-3406 Department of Pediatrics 940 NE 13th Street Oklahoma City, OK  73104

3. Project Title: The Oklahoma Infants Assistance Program

4. Period of Performance: 4-1-08 to 9-29-08

5. Approved Project Period: 9/30/04 through 9/29/08

    Second Semi-Annual Report _______ X _______

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10. Date of Report: 10/10/08


12. Name of Federal Project Officer: Patricia Campiglia

13. Date Reviewed by Federal Project Officer:

14. Comments:
I

MAJOR ACTIVITIES AND ACCOMPLISHMENTS

**Objective A.** To maintain a free community-based, comprehensive, single-site treatment program for infants and young children at risk of being abandoned and their families. A minimum of 7 disciplines and 4 community organizations will remain actively and cooperatively involved in the treatment of these families.

1. Establish the commitment of at least 4 separate community organizations to be actively involved in the OIAP on a weekly basis at the University of Oklahoma Health Sciences Center. Specifically, these agencies will include those specializing in substance abuse treatment, family planning, domestic violence, and child welfare.
2. Establish a staff of at least 7 separate disciplines that is actively involved in the OIAP on a weekly basis at the University of Oklahoma Health Sciences Center. Specifically, these disciplines will include 7 of the following: psychology, substance abuse counseling, social work, medicine, family planning, domestic violence, psychiatry, case management, physical therapy, speech therapy, and/or nursing.
3. Continually maintain the involvement of the above organizations and disciplines in the OIAP.
4. Provide a full range of services, including parent training, home visitation, risk assessment, substance abuse treatment, and medical/developmental infant evaluations.
5. Provide such services free to stated number of families (225 participants over 4 years).

**Accomplishments:**
1. Completed.
2. Completed.
3. Completed.
5. Due to the program ending no new clients entered the OIAP between 4/1/08 and 9/29/08. We have provided services to 193 clients over the course of the grant. However, because 2 of these clients refused to participate in the research, data are restricted to those who signed IRB research consents.

**Objective B.** To continue to provide childcare while parents attend therapy groups.

**Accomplishments:**
Completed.
**Objective C.** To begin using an empirically validated parenting program (The Incredible Years; Webster-Stratton, 2001) and supplement this with specialized parenting instruction specific to drug-exposed infants and parents with substance abuse difficulties.

*Accomplishments:*
Completed.

**Objective D.** To provide a manualized treatment protocol with strong empirical support for women with co-occurring substance dependence and trauma symptoms (“Seeking Safety”; Najavits, 2002) to a randomly selected half of the women. To assess the impact of this protocol on retention, sobriety, and treatment adherence in a sample of primarily child welfare involved women, under strong coercion to obtain treatment.

1. Randomized women to either the Seeking Safety group or the treatment as usual group.
2. Provide the Seeking Safety protocol to those women assigned to the group.
3. Video tape the groups for treatment integrity.
4. Collect and record data on group attendance, progress in the program, and urine drug screen results.

*Accomplishments:*
1. Completed.
2. Completed.
3. Completed.

**Objective E.** To create a Spirituality Group.

*Accomplishments:*
Completed.

**Objective F.** To continue to provide services to the fathers of infants with prenatal drug exposure, including the fathers’ support/parenting group.

*Accomplishments:*
Completed.

**Objective G.** To continue to utilize home-based services, such that every family enrolled in the OIAP receives a *minimum* of one visit per month, with most families receiving weekly visits.

*Accomplishments:*
Completed.

**Objective H.** To continue to provide culturally appropriate services, so that every participating family has at least one key person on the treatment team who is of similar cultural and ethnic background, and so that at least 15% of families involved are of primarily Native American descent. In addition, some bilingual services will be made available (Spanish/English).

1. Establish a staff of diverse ethnic and cultural backgrounds.
2. Match OIAP clients with key staff members of similar ethnic and cultural background.
3. Establish a base of Native American referrals through relationships with Indian Health Services and Indian Child Welfare.
4. Translate OIAP brochure and other important papers into Spanish.
5. Obtain Spanish materials for therapeutic services
6. Recruit Spanish speaking clients.

**Accomplishments:**
1. Completed.
2. Completed.
3. Completed.
5. Completed.
6. We partnered with the Oklahoma City Latino Agency to assist us with recruiting families and providing services (e.g., for the OIAP Spanish speaking clients any services regarding domestic violence can be completed at the Latino Agency). The Latino Agency has a positive relationship with Spanish speaking families and has earned their trust. To date, however, this collaboration with the OIAP and the Latino Agency has not helped the OIAP in our recruitment process. Several presentations to area hospitals/WIC clinics serving a high percentage of Latino patients have been made, but no referrals have been obtained from these sources to date. Child Welfare continues to refer all substance exposed infants to the OIAP, and reports that they have not received referrals on Spanish-only speaking families.

**Objective I.** To continue to coordinate access to faith-based organizations for those families who voluntarily choose this option.

**Accomplishments:**
Completed.

**Objective J.** To continue to partner with GED/educational organizations and job training and placement agencies such that families can more easily gain educational services and job training and begin part-time then full-time employment.

**Accomplishments:**
Completed.

**Objective K.** To continue to provide at least 4 seminars on working with infants at risk for being abandoned and their families during each fiscal year to relevant professionals nationally and statewide. In addition, 4 public service talks will be given each fiscal year to public schools, hospitals, prenatal care agencies, etc. regarding the dangers of substance abuse during pregnancy and/or the availability of services for affected families.

**Accomplishments:**

**National and State Professionals:**

- **April 3**
  Presentation to Indian Child Welfare workers in Okmulgee and site visit with mental health providers from the Cherokee Nation

- **April 2**
  Training with medical residents related to children with prenatal substance exposure

- **April 7-11**
  CIT training for therapists, including Parent Child Interaction Therapy (PCIT) for children with prenatal exposure to alcohol and other drugs.

- **April 16**
  Training with medical resident related to children with prenatal substance exposure

- **May 7-9**
  Advanced PCIT training for local and community therapists, including application for children with prenatal substance exposure

- **May 12**
  Training with medical resident related to children with prenatal substance exposure

- **May 12**
  Advanced “Train the Trainer” training, including application for children with prenatal substance exposure

- **June 19-20**
  PCIT training for local and community therapists including application for children with prenatal substance exposure
**Objective L.** To continue to gather comprehensive data regarding the functioning of these families across a wide range of areas, including substance use, parenting skills, parent-child interaction, child maltreatment, client satisfaction, criminal activity, and child development.

*Accomplishments:*
Completed.

**Objective M.** To conduct outcome evaluation of these services with empirically validated assessment techniques. To provide data regarding the use and effectiveness of utilizing the Seeking Safety protocol with a coerced population.

1. Establish a formal plan for conducting process and outcome evaluation of the OIAP.
2. Develop all data collection instruments for conducting process and outcome evaluation.
3. Construct and continually update sophisticated relational database.
4. Complete required forms in a timely manner and key-enter into database.
5. Generate bi-annual process evaluation reports.
6. Report to AIA National Resource Center, when requested, all appropriate data in required format.
7. Report formal outcome analyses annually.

*Accomplishments:*

1. Completed
2. Completed.
3. Completed.
5. Completed, please see attached.
6. Past data have been reported as requested, all requested data will be sent at the next data collection reporting period.
7. Completed, please see attached.

**Objective N.** To submit at least two manuscripts each year to peer-reviewed journals based on OIAP data.

*Accomplishments:*
No manuscripts were submitted this reporting period.
Objective O. To create a reunification workbook to use with parents who, due to their drug use, have been separated from their children.

Accomplishments:
This work is on-going.

II
PROBLEMS
Clinical challenges were faced with the closing of the OIAP and the issues raised by current clients. These issues were addressed and all clients were referred to other agencies to complete their treatment.

III
SIGNIFICANT FINDINGS AND EVENTS
The OIAP has ended. All active clients were evaluated and referred to various area agencies to meet their treatment needs. The clients, their CPS workers, judges, and assistant district attorneys were notified of the program ending, the client’s progress to date, and areas where further treatment was deemed helpful.

IV
DISSEMINATION ACTIVITIES
Multiple presentations were made at conferences and to area agencies and treatment centers (see professional and public service talk sections for details).

VI
ACTIVITIES PLANNED FOR NEXT REPORTING PERIOD
Not applicable as grant has ended.