REGIONAL PARTNERSHIP GRANTS NATIONAL CROSS-SITE EVALUATION (RPG-5 AND RPG-6)

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PREFACE

The data for *Regional Partnership Grants National Cross-Site Evaluation (RPG-5 and RPG-6)* have been given to the National Data Archive on Child Abuse and Neglect (NDACAN) for public distribution by Juliette Henke, Angela D'Angelo, Yange Xue, Betsy Keating and Claire Smither Wulsin. Funding for the project was provided by U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau (Award Number(s): HHSP233201500035I/75P00119F37046, #47QRAA18D00BQ/75ACF121F80035).

ACKNOWLEDGEMENT OF SOURCE

Authors should acknowledge the National Data Archive on Child Abuse and Neglect (NDACAN) and the original collector(s) of the data when publishing manuscripts that use data provided by the Archive. Users of these data are urged to follow some adaptation of the statement below.

The data used in this publication were made available by the National Data Archive on Child Abuse and Neglect and have been used with permission. Data from *Regional Partnership Grants National Cross-Site Evaluation (RPG-5 and RPG-6)* were originally collected by: Juliette Henke, Angela D'Angelo, Yange Xue, Betsy Keating and Claire Smither Wulsin. Funding for the project was provided by U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau (Award Number(s): HHSP233201500035I/75P00119F37046, #47QRAA18D00BQ/75ACF121F80035, (#47QRAA18D00BQ\140D0422F0989). The collector(s) of the original data, the funder(s), NDACAN, Duke University, Cornell University and their agents or employees bear no responsibility for the analyses or interpretations presented

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PUBLICATION SUBMISSION REQUIREMENT

In accordance with the terms of the *Data License* for this dataset, users of these data are required to notify the National Data Archive on Child Abuse and Neglect of any published work or report based wholly or in part on these data. A copy of any completed manuscript, thesis abstract, or reprint should be emailed to <u>NDACANsupport@cornell.edu</u>. Such copies will be used to provide our funding agency with essential information about the use of NDACAN resources and to facilitate the exchange of information about research activities among data users and contributors.

ABSTRACT

To address the far-reaching consequences of adult substance use disorders on families and children, Congress authorized competitive grants to support partnerships among child welfare, substance abuse treatment, and related organizations. Children's Bureau (CB) within the Administration for Children and Families, Administration on Children, Youth, and Families at the U.S. Department of Health and Human Services established the Regional Partnership Grant (RPG) program, and awarded a total of 56 5-year grants across 4 cohorts to implement programs to meet the needs of this target population.

CB funded Mathematica, along with its subcontractor Walter R. MacDonald & Associates (WRMA), to conduct a cross-site evaluation of the grant recipients' RPG projects. Mathematica/WRMA designed a cross-site evaluation to address the following research questions:

- 1. Which partners were involved in each RPG project and how did they work together?
- 2. How did the child welfare and substance use treatment agencies work together to achieve the goals of RPG?
- 3. What referral sources did RPG projects use? Did referral sources change over time?
- 4. What are the characteristics of families who enrolled in RPG?
- 5. To what extent did RPG projects reach their focal populations?
- 6. What core services were provided and to whom?
- 7. Were core services that families received different from the services proposed in grant recipient applications? If so, what led to the changes in planned services?
- 8. How engaged were participants with the services provided?
- 9. Which agencies (grant recipients and their partners) provided services?
- 10. What proportion of families exited RPG?
- 11. What plans and activities did RPG projects undertake to maintain the implementation infrastructure and processes during and after the grant period?
- 12. What plans and activities did RPG projects undertake to maintain the organizational infrastructure and processes after the grant period?
- 13. To what extent were RPG projects prepared to sustain services after the grant period?
- 14. What plans and activities did RPG projects undertake to develop funding strategies and secure resources needed after the grant period?
- 15. How did the federal, state, and local context affect RPG projects and their efforts to sustain RPG services?
- 16. What were the well-being, permanency, safety, recovery, and family functioning outcomes for children and adults who enrolled in RPG projects?
- 17. What were the impacts of RPG projects on children and adults who enrolled in RPG?

The cross-site evaluation uses several data sources to answer these research questions: (1) a partner study, (2) enrollment and services data, (3) outcomes data, (4) site visits, and (5) an improvement and sustainability survey. See the attached design report executive summary for more details on this evaluation.

STUDY OVERVIEW

Study Identification

Regional Partnership Grants National Cross-Site Evaluation (RPG-5 and RPG-6)

Principal Investigator(s):

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Funded By:

U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau

Award Number(s):

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Purpose of the Study

To address the far-reaching consequences of adult substance use disorders on families and children, Congress authorized competitive grants to support partnerships among child welfare, substance abuse treatment, and related organizations. Children's Bureau (CB) within the Administration for Children and Families, Administration on Children, Youth, and Families at the U.S. Department of Health and Human Services established the Regional Partnership Grant (RPG) program, and awarded 18 5-year grants across 2 cohorts to implement programs to meet the needs of this target population.

CB funded Mathematica, along with its subcontractor WRMA, to conduct a cross-site evaluation of the grant recipients' RPG projects. Mathematica/WRMA designed a cross-site evaluation to address the following research questions:

1. Which partners were involved in each RPG project and how did they work together?

2. How did the child welfare and substance use treatment agencies work together to achieve the goals of RPG?

3. What referral sources did RPG projects use? Did referral sources change over time?

4. What are the characteristics of families who enrolled in RPG?

5. To what extent did RPG projects reach their focal populations?

6. What core services were provided and to whom?

7. Were core services that families received different from the services proposed in grant recipient applications? If so, what led to the changes in planned services?

8. How engaged were participants with the services provided?

9. Which agencies (grant recipients and their partners) provided services?

10. What proportion of families exited RPG?

11. What plans and activities did RPG projects undertake to maintain the implementation infrastructure and processes during and after the grant period?

12. What plans and activities did RPG projects undertake to maintain the organizational infrastructure and processes after the grant period?

13. To what extent were RPG projects prepared to sustain services after the grant period?

14. What plans and activities did RPG projects undertake to develop funding strategies and secure resources needed after the grant period?

15. How did the federal, state, and local context affect RPG projects and their efforts to sustain RPG services?

16. What were the well-being, permanency, safety, recovery, and family functioning outcomes for children and adults who enrolled in RPG projects?

17. What were the impacts of RPG projects on children and adults who enrolled in RPG?

Study Design

The cross-site evaluation has five main components used to answer these research questions: (1) enrollment; (2) services; (3) partnerships; (4) outcomes; and (5) sustainability.

The enrollment and services components examine the implementation of the 18 RPG5 and RPG6 projects, focusing on factors shown in the research literature to be associated with quality implementation (research questions 3 through 10). These components include data collected from the web-based RPG Evaluation Data System (EDS). Grant recipient staff use this system to record individual-level data, including demographic information about RPG case members at enrollment, enrollment and exit dates for each case that enrolls in the RPG project, and information on each service delivery contact for any service funded by the grant or considered fundamental to the project's success.

The partnership study provides a description of partnerships formed among each of the 10 RPG5 grant recipients (research questions 1 and 2). Each grant recipient developed a roster of partner organizations and a web-based partner survey was administered to each organization. The individual within the organization who was most knowledgeable about RPG served as the respondent. The survey collects data about each grant recipient's partnership and asks questions about organizational characteristics, how partners communicate and collaborate, goals of the partnership, and the types and roles within the partnership. The survey contains "network data" prompts that allow respondents to describe how each of the organizations in the partnership interacted with each other.

The outcomes study describes the characteristics of, and changes over time, in children, adults, and families who participate in the RPG programs (research questions 16 and 17). The study reports participant outcomes in five domains of interest to Congress and Children's Bureau: child well-being; permanency; safety; adult recovery; and family functioning/stability. To assess change over time, standardized assessments were given at program entry and program exit. In addition, for each participant, grant recipients collected administrative data from state and local agencies for the lifetime of the members of the case.

The sustainability study provides a description of efforts by the 8 RPG6 grant recipients to improve and sustain their RPG services (research questions 11 through 15). Each project director developed a list of organizations knowledgeable about those efforts, and a web-based improvement and sustainability survey was administered to each organization. The individual within the organization who was most knowledgeable about RPG served as the respondent.

Date(s) of Data Collection

RPG5: 3/1/2019- 5/19/2023 RPG6: 10/1/2020 - 3/15/2024

Geographic Area

USA

Unit of Observation

Enrollment, services, and outcomes: Case records (multiple per grant recipient); individual records (multiple per case); service logs (multiple per case); service providers (multiple per log) Partner and sustainability: individual respondent (many per grant recipient)

Sample

The RPG cross-site evaluation comprises four components that utilize data collected and submitted from all grant recipients: (1) enrollment; (2) services; (3) outcomes; (4) partnership; and (5) sustainability. The cross-site evaluation draws its sample from 18 grant recipients. However, the data sources differ across studies.

The enrollment and services components collect demographic data on all individuals enrolling in RPG, as well as information on the services they receive. Specifically, the enrollment data includes background demographics on all children and adults in a case. The services data includes detailed implementation data on services provided to cases enrolled in the project. Specifically, separate service log entries provide detailed information on each contact with a case, such as the length of the interaction, the focus of the interaction, who attended the service, and their engagement.

The outcomes study includes information on the changes that occur in children, adults, and families enrolled in RPG. The broad RPG target population is families with a child in, or at-risk of, out of home placement due to an adult with a substance-use problem. Each grant recipient defined a more specific, local target population for enrollment into RPG. The outcomes examined are drawn from five domains of interest to Congress and Children's Bureau: child well-being; permanency; safety; adult recovery; and family functioning/stability. Standardized instruments were administered by grant recipients to operationalize outcomes in several domains – specifically family functioning, child well-being, and two outcomes in the recovery domain. These data were obtained at program entry and program exit. Administrative data from child welfare agencies and state-funded substance abuse treatment agencies were used to operationalize data from other domains – specifically safety, permanency, and one aspect of adult recovery. These data were obtained for the lifetime of the children in the case (safety and permanency) and lifetime of the adults in the case (recovery).

The partnership study includes data from the partner survey, which was administered to all 10 RPG5 grant recipients and their primary partner organizations. That is, the organizations who participate in the RPG project and play a crucial role in planning and coordinating services for families across service-delivery systems. The purpose of the partner survey is to collect information on the characteristics and relationships among the partner organizations.

The sustainability study includes data from the improvement and sustainability survey, which was administered to all 8 RPG6 grant recipients and their partner organizations who have knowledge about the project's plans for sustainability or their use of data to inform continuous quality improvement efforts.

Data Collection Procedures

For the enrollment and services components, grant recipients enter data into the web-based reporting system, the RPG Evaluation Data System (EDS).

The outcome study includes administrative data (covering the adult recovery, child safety, and child permanency outcome domains), as well as standardized instrument data (covering the family functioning, child well-being, and adult recovery domains). Grant recipients and their local evaluators obtained administrative data from state child welfare agencies and state funded substance abuse treatment providers. Grant recipients and their local evaluators collected standardized instrument from adults (who also reported about children in their care), at program entry and program exit. Grant recipients then uploaded all outcome data (standardized instrument and administrative data) to RPG EDS.

The partnership study uses partner surveys, which were administered to grant recipients and partner organizations via Confirmit, a web-based questionnaire software.

The sustainability study uses improvement and sustainability surveys, which were administered to grant recipients and partner organizations via Confirmit, a web-based questionnaire software.

Response Rates

The enrollment data required demographic information about case members at enrollment– therefore, there is a response rate of 100 percent for this set of information, as it is the full population for cases and individuals in the cross-site evaluation. However, there may have been non-response for the services data– grant recipients may not have entered complete data. Unfortunately, the cross-site evaluation cannot determine the extent of non-response for the services data.

The partner survey had a response rate of 75 percent.

The improvement and sustainability survey had a response rate of 64 percent.

The outcome study had standardized instrument response rates that ranged from 28 percent to 50 percent across outcomes, where respondents are considered as individuals with valid data at both baseline and follow-up assessments, relative to the population of individuals who were eligible to respond at both time points. The administrative data response rates were 100 percent among eligible sample members.

Sources of Information

There are five components to the cross-site evaluation: (1) enrollment; (2) services; (3) outcomes; (4) partnerships; and (5) sustainability. We describe the data associated with each component separately.

Enrollment

Grant recipients collect enrollment data on all cases that are offered services. Demographics are collected for all individuals within a case. Grant recipients submit these data to the cross-site evaluation through the web-based RPG Evaluation Data System (EDS).

Services

Grant recipients collect data on the services provided to members of the case. Grant recipients submit these data to the cross-site evaluation through the web-based RPG Evaluation Data System (EDS).

Partnerships

Study staff administered the partnership survey to RPG5 grant recipients and their primary partners, including those who provide services to Regional Partnership Grant (RPG) families, refer families to the RPG project, and play other key roles. The lead staff member for RPG, within each partner organization, completed the partner survey online. Study staff collected data from the online survey software, Confirmit. Only RPG5 grant recipients contributed to this survey.

Outcomes

The outcomes study includes two types of data; administrative records and standardized instruments. Grant recipients collect administrative records directly from child welfare agencies and state-funded substance abuse treatment agencies. Grant recipients administer assessments using a set of standardized instruments to adults (who also answered questions about children) enrolled in RPG. Grant recipients then submit both types of data to the cross-site evaluation by uploading the information to RPG-EDS.

Sustainability

Study staff administered the sustainability survey to RPG6 grant recipients and their primary partners, including those who provide services to Regional Partnership Grant (RPG) families, refer families to the RPG project, and play other key roles. The sample was anyone from partner organizations that were knowledgeable about the RPG project's plans for sustainability or their use of data to inform continuous quality improvement efforts. This included the RPG project director or other staff members at the grant recipient organizations that were knowledgeable about these topics, as well as individuals from partner organizations. The project directors nominated partner staff to complete the survey. Study staff collected data from the online survey software, Confirmit. Only RPG6 grant recipients contributed to this survey.

Type of Data Collected

Survey, Administrative, Enrollment and services data, Standardized Instrument records

<u>Measures</u>

Adult-Adolescent Parenting Inventory (AAPI)

- Bavolek, S. J. (1984). *Handbook for the AAPI (adult-adolescent parenting inventory)*. Park City, Utah: Family Development Resources, Inc. Retrieved from: <u>http://www.nurturingparenting.com/</u>
- Bavolek, S.J., Kline, D.F., McLaughlin, J.A., & Publicover, P.R. (1979). Primary prevention of child abuse and neglect: Identification of high risk adolescents. *Child Abuse and Neglect*, 3(3-4), 1071-1080. doi: 10.1016/0145-2134(79)90152-2

Addiction Severity Index (ASI)-Self-Report Form

The Addiction Severity Index (ASI), Self-Report Form (McLellan et al. 1992) is a tool widely used in the addiction field and comprises 36 self-report items that assess problems in six areas: (1) medical status, (2) employment/support status, (3) drug/alcohol use, (4) legal status, (5) family/social relationships, and (6) psychiatric status. Most questions ask the parent in a yes/no or open-ended format to report on his or her activities in the past 30 days. Examples of questions on the ASI include "How many days have you experienced employment problems in the past 30?" and "How many days have you been treated in an outpatient setting for alcohol or drugs in the past 30?" Administration time for the ASI Self Report is 10 to 15 minutes, and a paraprofessional can administer the report. Items are comparable to the full ASI, but the selfreport version eliminates questions on family history and interviewer ratings. Internal consistency reliability for the full ASI is generally acceptable across studies, ranging from a low of 0.44 (Luo et al. 2010) to 0.89 (Leonhard et al. 2000). The psychiatric status, medical status, and drug/alcohol use subscales generally have higher reliability than the other subscales (Makela 2004). Makela (2004) also notes that many of the lower reliabilities come from studies of the homeless or patients with mental health issues, or from studies in Europe using translated versions of the ASI. The authors report that concurrent and discriminative validities were demonstrated with respect to a number of other measures for both composite scores and severity ratings. They also note that the ASI demonstrates good specificity and sensitivity (McLellan et al. 1980). The norming sample was made up of adults and represented a range of socioeconomic and marital statuses, living situations, and ethnicities; the participants abused a range of substances (McLellan et al. 1980). The ASI is widely used in clinical settings and by the Drug Evaluation Network System (DENS), a project that aims to gather clinical information on patients presenting for substance abuse treatment and the treatment programs they attend (Carise et al. 1999). DENS has collected more than 38,000 ASIs from about 100 treatment programs in 20 U.S. states. The ASI was also used in RPG1.

- McLellan, A. T., Kushner, H. Metzger, D., Peters, R., Smith, I., Grissom, G., Pettinati, H., & Argeriou, M. (1992). The fifth edition of the addiciton severity index. *Journal of Substance Abuse Treatment*, *9*(3), 199-213. doi: https://doi.org/10.1016/0740-5472(92)90062-S
- Carise, D., McLellan, A. T., Gifford, L. S., & Kleber, H. D. (1999). Developing a national addiction treatment information system: an introduction to the drug evaluation network system. *Journal of Substance Abuse Treatment*, 17(1-2), 67-77. doi: https://doi.org/10.1016/S0740-5472(98)00047-6

- Leonhard, C., Mulvey, K., Gastfriend, D. R., & Shwartz, M. (2000). The Addiction Severity Index A field study of internal consistency and validity. *Journal of Substance Abuse Treatment*, 18(2), 129-135. doi: https://doi.org/10.1016/S0740-5472(99)00025-2
- Luo, W., Wu, Z., & Wei, X. (2010). Reliability and validity of the Chinese version of the addiction severity index. *Journal of Acquired Immune Deficiency Syndromes*, 53, S121-S125. doi: https://doi.org/10.1097/QAI.0b013e3181c7dfca
- Mäkelä, K. (2004). Studies of the reliability and validity of the addiction severity index. *Addiction*, 99(4), 398-410. doi: https://doi.org/10.1111/j.1360-0443.2003.00665.x
- McLellan, A. T., Luborsky, L., Woody, G. E., & O'Brien, C. P. (1980). An improved diagnostic evaluation instrument for substance abuse patients: The Addiction Severity Index. *Journal* of Nervous and Mental Disease, 168(1), 26-33. doi: <u>http://dx.doi.org/10.1097/00005053-198001000-00006</u>

Child Behavior Checklist for Ages 11/2-5 (CBCL 1.5-5)

The Child Behavior Checklist–Preschool and Child Behavior Checklist–School-Age are part of the Achenbach System of Empirically Based Assessment (ASEBA) and use information collected from parents to assess the behavior and emotional and social functioning of children. The preschool forms assess children ages 18 months to 5 years and. Primary caregivers rate children on each item, indicating whether it is not true, somewhat or sometimes true, or very or often true, now or in the past six months. The 99 items in the preschool CBCL are organized into two broad groupings of seven syndromes. The internalizing group includes subscales that assess whether the child is emotionally reactive, anxious/depressive, withdrawn, or has somatic complaints. The externalizing group includes subscales that assess whether the child has attention problems or exhibits aggressive behavior. A third set of items on the preschool version assesses whether the child has sleep problems. The items are also organized into five Diagnostic and Statistical Manual of Mental Disorders (DSM)-oriented scales (American Psychiatric Association 2000). Scales are normed on a national sample of 700 children. Both versions of the CBCL are widely used and have received an assessment rating of "A-Reliability and Validity Demonstrated" from the California Evidence-Based Clearinghouse for Child Welfare.

Achenbach, T. M., & Rescorla, L. A. (2000). *Manual for the ASEBA preschool forms & profiles*. Burlington, VT: University of Vermont, Research Center for Children, Youth, & Families.

Child Behavior Checklist for ages 6-18 (CBCL 6-18)

The Child Behavior Checklist–Preschool and Child Behavior Checklist–School-Age are part of the Achenbach System of Empirically Based Assessment (ASEBA) and use information collected from parents to assess the behavior and emotional and social functioning of children. The school-age forms assess children ages 6 to 17 years. Primary caregivers rate children on each item, indicating whether it is not true, somewhat or sometimes true, or very or often true, now or in the past six months. The internalizing group includes subscales that assess whether the child is emotionally reactive, anxious/depressive, withdrawn, or has somatic complaints. The externalizing group includes subscales that assess whether the child has attention problems or exhibits aggressive behavior. The school-age form provides information on 20 competencies covering children's activities, social relations, and school performance through 113 items that describe specific behavioral and emotional problems. The items are also organized into six DSM-oriented scales based on factor analyses of parents' ratings of 4,994 clinically referred children; the scales were normed on 1,753 children ages 6 to 18. The school-age normative sample represented the 48 contiguous states for socioeconomic status, ethnicity, region, and urban-suburban-rural residence. Both versions of the CBCL are widely used and have received an assessment rating of "A-Reliability and Validity Demonstrated" from the California Evidence-Based Clearinghouse for Child Welfare.

Achenbach, T. M., & Rescorla, L. A. (2001). *Manual for the ASEBA school-age forms & profiles: Child Behavior Checklist for Ages 6-18*. University of Vermont. Retrieved from: <u>https://store.aseba.org/</u>

Center for Epidemiologic Studies Depression Scale (CES-D)

Designed to measure self-reported symptoms associated with depression experienced in the past week. The (CES-D) includes 20 items comprising six scales reflecting major dimensions of depression: depressed mood, feelings of guilt and worthlessness, feelings of helplessness and hopelessness, psychomotor retardation, loss of appetite, and sleep disturbance.

Radloff, L. S. (1977). The CES-D Scale: A self-report depression scale for research in the general population. *Applied Psychological Measurement*, 1(3), 385-401. doi: http://dx.doi.org/10.1177/014662167700100306

Infant-Toddler Sensory Profile (ITSP)

The ITSP provides a standard method for measuring a child's sensory processing abilities and profiling the effect of sensory processing on functional performance in a child's daily life. The profile is designed for children from birth to 36 months. Each item in this primary caregiver-report questionnaire describes children's responses to various sensory experiences. Together, the 58 items assess six types of processing: (1) general, (2) auditory, (3) visual, (4) tactile, (5) vestibular, and (6) oral sensory. Certain patterns of performance are indicative of difficulties with sensory processing and performance. Internal consistency has a wide range, with alpha coefficients from 0.17 to 0.83. Test-retest reliability ranged from 0.74 to 0.86. Validity is acceptable as measured against the Infant-Toddler Symptom Checklist (ITSC; DeGangi et al. 1995). The ITSP was normed on a sample of 589 children of primary Caucasian descent, with approximately 100 children in each six-month age span. This assessment is used widely with diverse populations and is appropriate for children enrolled in RPG projects, because children who have experienced trauma can display sensory deficits.

Dunn, W. (2002). *The infant/toddler sensory profile manual*. Pearson Education, Inc. Retrieved from: <u>https://www.pearsonclinical.com/therapy/products/100000389/infanttoddler-sensory-profile.html</u>

Dunn, W. & Daniels, D.B. (2002). Initial development of the infant/toddler sensory profile. *Journal of Early Intervention*, 25(1), 27-41. doi: https://doi.org/10.1177/105381510202500104

DeGangi, G. A., Poisson, S., Sickel, R. Z., & Santman Wiener, A. (1995). *Infant-Toddler* Symptom Checklist: a screening tool for parents. San Antonio, TX: Psychological Corp.

Trauma Symptom Checklist (TSC-40)

The Trauma Symptom Checklist-40 measures aspects of post-traumatic stress and other symptom clusters in adults who have experienced childhood or adult traumatic experiences. The TSC-40 is a self-administered questionnaire for parents/caregivers, and their scores form six subscales: (1) anxiety, (2) depression, (3) dissociation, (4) Sexual Abuse Trauma Index (SATI), (5) sexual problems, (6) sleep disturbance. The questionnaire also tabulates a total score. Parents/caregivers are asked to rate each item based on how frequently it has occurred over the past two months, using a four-point Likert scale ranging from 0 (never) to 3 (often). The adults are asked "How often have you experienced each of the following in the last two months?" and then are asked to identify the frequency with which symptoms such as "headaches," "sadness," or "anxiety attacks" have been occurring. The TSC-40 is a 40-item inventory that requires approximately 10 to 15 minutes to complete. The subscale alphas range from 0.66 to 0.77, with reliabilities for the full scale averaging between 0.89 and 0.91 (Elliott and Briere 1992). The TSC-40 displays predictive, criterion-related, and convergent validity (Zlotnick et al. 1996; Gold et al. 1994). Elliott and Briere (1992) have studied the TSC-40 in a large sample of professional women (N=2,963). The authors found that the measure discriminates between women who have and have not been abused as children, which held across all subscales and the total scale. Similarly, Gold et al. (1994) administered the TSC-40 to 669 female college students, divided into groups with no sexual assault or abuse (N=438), and those who had experienced sexual abuse or trauma as a child, adult, or both. They found that the measure discriminated between all groups and showed significant differences except on the sleep disturbance subscale.

- Briere, J., & Runtz, M. (1989). The Trauma Symptom Checklist (TSC-33): Early data on a new scale. *Journal of Interpersonal Violence*, *4*, 151-163. doi: https://doi.org/10.1177/088626089004002002
- Elliott, D., & Briere, J. (1992). Sexual abuse trauma among professional women: validating the trauma symptom checklist-40 (TSC-40). *Child Abuse and Neglect*, *16*, 391-398. doi: https://doi.org/10.1016/0145-2134(92)90048-V

RPG 5 & 6: Permanency Data

Permanency data, information about where children reside following removal from the home, is one type of administrative data requested from grant recipients. Grant recipients requested information on permanency of children directly from state child welfare agencies. Grant recipients provided child welfare agencies a list of children that they had enrolled in RPG, and asked the organization to provide permanency information on this subset of children. This data returned to grant recipients contained information on dates of removal, dates of placement into different settings, and whether removals ultimately ended in permanency.

Henke, J., D'Angelo, A. Keating, B., Xue, Y., & Smither Wulsin, C. (2014). *RPG-5/6 permanency data [instrument]*. Princeton, NJ: Mathematica Policy Research.

RPG 5 & 6: Recovery Data

Recovery data, information about whether an adult had participated in a state-funded substance use disorder treatment program, is one type of administrative data requested from grant recipients. Grant recipients requested information on recovery of adults enrolled in RPG from state substance abuse departments. Grant recipients provided state substance abuse departments a list of adults that they had enrolled in RPG, and asked the organization to provide recovery information on this subset of adults. This data returned to grant recipients contained information on dates of substance use treatment enrollment and program completion (if applicable).

Henke, J., D'Angelo, A., Keating, B., Xue, Y., & Smither Wulsin, C. (2014). *RPG-5/6 recovery data [instrument]*. Princeton, NJ: Mathematica Policy Research.

RPG 5 & 6: Safety data

Safety data, information about the maltreatment of children, is one type of administrative data requested from grant recipients. Grant recipients requested information on maltreatment of children (instances of abuse, neglect, and other maltreatment) directly from state child welfare agencies. Grant recipients provided child welfare agencies a list of children that they had enrolled in RPG, and asked the organization to provide maltreatment information on this subset of children. This data returned to grant recipients contained information on the dates of maltreatment investigations, the type of maltreatment, and whether it was substantiated or not. Using this data, the cross-site evaluation team created person-level indicator variables for whether a given incident of maltreatment occurred in a particular period. Period of interest was the lifetime data (from birth to present day) for children who are part of the RPG case.

Henke, J., D'Angelo, A., Keating, B., Xue, Y., & Smither Wulsin, C. (2014). *RPG-5/6 safety data [instrument]*. Princeton, NJ: Mathematica Policy Research.

RPG 5 & 6: Enrollment and Services Data

Grant recipients collected the enrollment and services data related to the enrollment of cases and implementation of RPG services. The information collected includes (1) demographic data for each RPG case at enrollment, including enrollment date for the RPG case, as well as demographic information, (2) information about case closure, (3) data related to service delivery, including topics covered and the engagement of clients in programming, and (4) birth outcomes on babies born to women during their time enrolled in RPG services. The Enrollment and Service data was created to capture participant demographics and detailed data on features of service delivery.

Henke, J., D'Angelo, A. Keating, B., Xue, Y., & Smither Wulsin, C. (2014). *RPG-5/6 enrollment and services data [instrument]*. Princeton, NJ: Mathematica Policy Research.

RPG 5: Partner Survey

The purpose of the Partner Survey is to collect partner-level data on the characteristics of the partner organization, how partners communicate and collaborate, goals of the partnership, and the types of organizations and roles within the partnership. The partner survey was administered to RPG5 grant recipients and their primary partners, including those who provide services to RPG families, refer families to the RPG projects, and play other key roles on the RPG projects. The survey includes questions about organizational characteristics, and also contains "network data" prompts that allow respondents to describe how each of the organizations in the partnership interact with each other. Specifically, the survey contains the following sections and corresponding information: A. Your Organization- description; activities conducted; programs provided; funding; resources B. Partner goals- partner goals; relationships/communication systems; status of collaboration among RPG partner organizations; organizational levels of collaboration; RPG programming C. Partnership Outputs- questions regarding clients receiving RPG programming; RPG services specific to the organization The Partner Survey was created specifically for this study.

Henke, J., D'Angelo, A., Keating, B., Xue, Y., & Smither Wulsin, C. (2014). *RPG-5/6 partner survey [instrument]*. Princeton, NJ: Mathematica Policy Research.

RPG 6 : Improvement and Sustainability Survey

The purpose of the improvement and sustainability survey is to collect information on RPG projects' use of data for continuous improvement and their sustainability planning activities. The improvement and sustainability survey was administered to RPG6 grant recipients and their partners that were involved in program implementation, evaluation activities, and cross-systems collaboration activities. The project director identified partner organizations and the relevant respondent from each partner to complete the survey. Each project director identified between 7 or 14 potential respondents. The survey asks about the project's plans for sustaining the RPG program and partnership after grant funding ends, as well as how the project uses data to improve RPG project services. Specifically, the survey has the following sections and corresponding information: A. Organization Characteristics - organization description; role on RPG project B. Plans for Sustaining RPG Project – timing and extent of sustainability planning; organization's involvement in sustainability planning; services the project plans to sustain; sources of data used in sustainability planning; service-related barriers to sustainability Ca. Implementation Supports to Improve RPG Services - presence of processes and structures to support current program implementation and partnership; use of data related to referrals, enrollment, and outcomes Cb. Implementation Supports to Sustain RPG Services - presence of processes and structures to sustain program implementation and partnership; plans to use data after the grant period ends D. Funding and Resources for Sustainability - plans to finance RPG partnership after grant period; organization's plans to provide in-kind and financial support to sustain partnership E. Federal, State, and Local Context – federal, state, and local policies that

have affected sustainability planning; patterns of substance use in service area since grant started The Sustainability Survey was created specifically for this study.

Henke, J., D'Angelo, A., Keating, B., Xue, Y., & Smither Wulsin, C. (2014). RPG-5/6 Improvement and Sustainability Survey [instrument]. Princeton, NJ: Mathematica Policy Research.

Related Publications and Final Reports

Users are strongly encouraged to review published works, based upon these data, before doing analyses. To view a complete list of publications for this dataset, please visit our online citations collection called "canDL" at: or go to the <u>child abuse and neglect Digital</u> <u>Library (canDL) NDACAN webpage</u>.

Analytic Considerations

Missing data is coded as such on a variable by variable basis within the value labels field. Some missing data are coded as system missing. In variables that are designated as being "string" or "character", system missing data may appear as blank values.

The following user-defined missing value codes were used throughout the dataset: -8888 = Logical Skip -9999 = Item Non-Response 98 = Don't know

Confidentiality Protection

There are no names or addresses included in this upload. All individuals have been associated with a unique identifier that masks any personally identifiable information. While there are dates in this data set, dates of birth have been masked to always represent the 15th day of the month of a given event.

Extent of Collection

Document file name	Brief description	Data File(s) to which the
		document is relevant
ES_DataDocumentation	Describes the layout of the	Rpg_case_level,
	enrollment and services data files,	Rpg_person_level,
	along with descriptions of how key	Rpg_provider_level,
	variables were constructed and how	Rpg_session_level
	some analyses were conducted as	
	part of the cross-site evaluation (i.e.	
	replication instructions).	

Table 1. List of documents included in dataset, in addition to the User's Guide

Rpg_case_level_codebook	Contains the variable name, variable label, and value label(s) information for the data file.	Rpg_case_level
Rpg_person_level_codebo ok	Contains the variable name, variable label, and value label(s) information for the data file.	Rpg_person_level
Rpg_provider_level_codeb ook	Contains the variable name, variable label, and value label(s) information for the data file.	Rpg_provider_level
Rpg_session_level_codebo ok	Contains the variable name, variable label, and value label(s) information for the data file.	Rpg_session_level
EDS_DataDictionary_ AdministrativeIndicators_ RPG56	The purpose of this document is to briefly describe the variables for the administrative data elements as part of the RPG National Cross-Site Evaluation. This serves as a data dictionary for the accompanying administrative data elements.	outcomes_permanency_file, outcomes_recovery_file, outcomes_safety_file
EDS_DataDictionary_Stan dardizedInstruments_RPG 56	The purpose of this document is to briefly describe the variables for the standardized instrument data elements as part of the RPG National Cross-Site Evaluation.	outcomes_aapi2_file, outcomes_asi_file, outcomes_cbcl_file, outcomes_cesd_file, outcomes_itsp_file, outcomes_tsc_40_file
Outcomes Replication Instructions_RPG56	The purpose of this document is to outline the data preparation and analysis steps used by the cross-site evaluation team to produce the cross-site results shown in the Ninth Report to Congress.	outcomes_permanency_file, outcomes_recovery_file, outcomes_safety_file, outcomes_aapi2_file, outcomes_asi_file, outcomes_cbcl_file, outcomes_cesd_file, outcomes_itsp_file, outcomes_tsc_40_file
outcomes_aapi2_codebook	Contains the variable name, variable label, and value label(s) information for the data file.	outcomes_aapi2_file
outcomes_asi_codebook	Contains the variable name, variable label, and value label(s) information for the data file.	outcomes_asi_file
outcomes_cbcl_codebook	Contains the variable name, variable label, and value label(s) information for the data file.	outcomes_cbcl_file
outcomes_cesd_codebook	Contains the variable name, variable label, and value label(s) information for the data file.	outcomes_cesd_file

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outcomes_itsp_codebook	Contains the variable name, variable	outcomes_itsp_file
	label, and value label(s) information	
	for the data file.	
outcomes_permanency_co	Contains the variable name, variable	outcomes_permanency_file
debook	label, and value label(s) information	
	for the data file.	
outcomes recovery codeb	Contains the variable name, variable	outcomes_recovery_file
ook	label, and value label(s) information	
	for the data file.	
outcomes_safety_codeboo	Contains the variable name, variable	outcomes_safety_file
k	label, and value label(s) information	
	for the data file.	
outcomes tsc 40 codeboo	Contains the variable name, variable	outcomes_tsc_40_file
k	label, and value label(s) information	
	for the data file.	
Partner	Describes the Social Network	partner survey file
Survey DataDictionary S	Variables, which provided	
NA Variables	information about how a respondent	
	organization is connected to other	
	organizations in the partnership.	
partner survey codebook	Contains the variable name, variable	partner_survey_file
	label, and value label(s) information	
	for the data file.	
sustainability_survey_code	Contains the variable name, variable	sustainability_survey_file
book	label, and value label(s) information	
	for the data file.	

Extent of Processing

NDACAN produced the User's Guide, 508 compliant versions of the Codebooks, the SPSS, Stata, and SAS native and program import files, and text data files.

DATA FILE INFORMATION

File Specifications

There are 15 data files pertaining to each of the data collection efforts, surveys, and assessments administered during the course of the study.

Data File Notes

One grant recipient did not contribute enrollment, services, or outcomes data.

ACRONYMS AND ABBREVIATIONS

Commonly used abbreviations in the study documentation and data files: AAPI-2: Adult-Adolescent Parenting Inventory 2 ASI: Addiction Severity Index **CBCL:** Child Behavior Checklist CES-D: Center for Epidemiologic Studies-Depression Scale CWR: Child Well-being Reporter EDS: Evaluation Data System ES: Enrollment and Services FC: Focal child FFA: Family Functioning Adult ITSP: Infant – Toddler Sensory Profile **RDA:** Recovery Domain Adult **RPG: Regional Partnership Grants** SUB: Substantiated TSC-40: Trauma Symptom Checklist UNSUB: Unsubstantiated WRMA: Walter R. MacDonald & Associates

Technical support for this dataset is provided by NDACAN.

Please send your inquiries to NDACANsupport@cornell.edu

Visit the User Support page of the NDACAN website for help documents and videos (<u>(https://www.ndacan.acf.hhs.gov/user-support/user-support.cfm</u>).