Regional Partnership Grant Cross-Site Evaluation: Annual Report, October 2023–September 2024

April 2025

Betsy Keating, Angela D'Angelo, and Zoe Michaelson

This page has been left blank for double-sided copying.

Contents

Tables

Figures

This page has been left blank for double-sided copying.

I.   Introduction

Substance use among caregivers is a key factor in many cases of child abuse and neglect (Box I.1). To address this issue, Congress has authorized competitive Regional Partnership Grants (RPG) since 2006.[1] Using interagency collaboration and program integration, RPG-funded projects are designed to increase the well-being of, improve the permanency outcomes for, and enhance the safety of children who are in or at risk of out-of-home placement because of a parent or caregiver's substance use.

The Children's Bureau (CB) of the Administration on Children, Youth, and Families at the U.S. Department of Health and Human Services (HHS) has awarded seven rounds of RPG as of 2022. In addition to serving their communities, grant recipients must collect and report performance data, conduct local evaluations of their projects, and participate in a cross-site evaluation of all RPG projects within each cohort of grant recipients.

> **Box I.1. Cause for concern**
>
> Substance use disorder, specifically the misuse of opioids, is a leading contributor to children entering foster care (Radel et al. 2018). In addition, higher rates of drug overdose deaths and drug-related hospitalizations correspond to higher child welfare caseloads (Radel et al. 2018). Higher rates of serious substance use–related issues might make it more difficult for child welfare systems to support and strengthen families, keep children at home, or return them quickly from out-of-home care. Among the children entering foster care in 2022, 33 percent were removed from their home because of parental drug use and 6 percent were removed from their home because of parental alcohol use (HHS 2024). ◢

To support the RPG project teams and their partners in developing, implementing, and evaluating their projects, CB contracted with two technical assistance (TA) providers: (1) the Center for Children and Family Futures (CFF) for project-related TA[2] and (2) Mathematica for evaluation TA. Mathematica is also conducting the cross-site evaluation for the current cohorts of grant recipients. In September 2024, CB also contracted with Mathematica on the RPG-Innovations project, which will identify and pilot test potential innovations to the design and implementation of the cross-site evaluation over the next three years.

This report describes the major annual activities and accomplishments related to the cross-site evaluation and evaluation TA across two RPG cohorts from October 2023 through September 2024. This period was the fifth and final year of Mathematica's cross-site evaluation and evaluation TA for the sixth cohort (RPG6) and the second year for the seventh cohort (RPG7) (Table I.1).

---

[1] The Child and Family Services Improvement Act of 2006 (P.L. 109–288) authorized the RPG project, and the Child and Family Services Improvement and Innovation Act of 2011 (P.L. 112–34) reauthorized it.

[2] This work is part of the contract for the CFF to manage the National Center on Substance Abuse and Child Welfare, supported through an intra-agency agreement between the Substance Abuse and Mental Health Services Administration and the Administration for Children and Families.

This report focuses on RPG6 and RPG7 projects. We start with a brief history of the RPG cohorts and information on their projects. We then describe the RPG cross-site evaluation, the evaluation TA and support provided to RPG projects during this period, highlights from the past year of the contract, and next steps.

Table I.1. Grant year for each RPG cohort across fiscal years

Grant cohort	Fiscal year (October–September)				
	2019–2020	**2020–2021**	**2021–2022**	**2022–2023**	**2023–2024**
RPG6	Grant Year 1	Grant Year 2	Grant Year 3	Grant Year 4	Grant Year 5
RPG7				Grant Year 1	Grant Year 2

RPG = Regional Partnership Grant.

II. Brief History of RPG and Snapshot of the Current Cohorts

From 2007 through 2022, CB awarded seven cohorts of RPGs, two of which participated actively in the cross-site evaluation in 2023–2024 (Figure II.1), the focus of this report. The period of performance for RPG projects is typically five years. Cohorts range in size from four to 53 projects, based on the size of the awards. The two cohorts featured in this report (RPG6 and RPG7) account for 26 projects.

Figure II.1. Overview of RPG cohorts, highlighting the active cohorts in 2023–2024
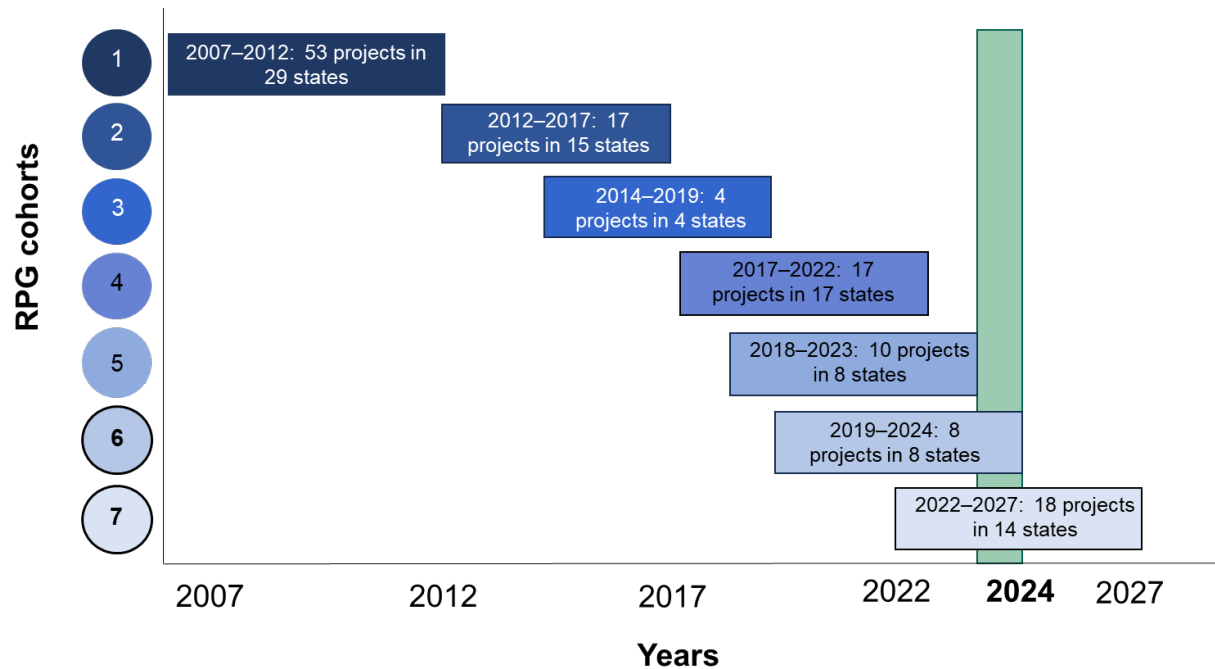
RPG = Regional Partnership Grant.

A range of organizations lead the RPG6 and RPG7 projects (Table II.1). The following is a breakdown of the types of organizations that are leading the 26 projects in the two cohorts:

- Service providers that offer both substance use treatment and mental health care (we refer to these as behavioral health service providers) lead eight projects.

- Providers of family support services lead four projects, one of which is led by a Tribal organization, and substance use treatment services lead two projects.

- State agencies lead six projects, including agencies that oversee the state's behavioral health system (three projects), the state's judicial system (two projects), and the state's child welfare agency (one project).

- The contracted service provider that manages behavioral health service providers leads one project.

- University hospitals or clinics lead two projects, youth advocacy associations lead two projects, and a university leads one project.

Across the RPG6 and RPG7 cohorts, four organizations are leading projects in both rounds: Youth Network Council, Preferred Family Healthcare Inc., Oklahoma Department of Mental Health and Substance

Abuse Services, and Prestera Center for Mental Health Services Inc. More information on the projects, such as their populations of interest and services, is available in Appendix A.

Table II.1. RPG6 and RPG7 grant recipients

Grant recipient organization and state	Organization type
RPG6	
Colorado Judicial Department, State Court Administrator's Office, Colorado	Court or judicial agency
Georgia State University Research Foundation Inc., Georgia	University
Youth Network Council, dba Illinois Collaboration on Youth, Illinois	Youth advocacy association
Preferred Family Healthcare Inc., Missouri	Behavioral health service provider
Mary Hitchcock Memorial Hospital, dba Dartmouth-Hitchcock Medical Center, New Hampshire	University hospital or clinic
Acenda Inc., New Jersey	Behavioral health service provider
Oklahoma Department of Mental Health and Substance Abuse Services, Oklahoma	State mental health and substance use services agency
Prestera Center for Mental Health Services Inc., West Virginia	Behavioral health service provider
RPG7	
Cook Inlet Tribal Council Inc., Alaska	Family support service provider (Tribal organization)
State of Connecticut Department of Children and Families, Connecticut	State child welfare agency
Broward Behavioral Health Coalition Inc., Florida	Contracted entity to oversee the network of behavioral health services providers
Centerstone of Illinois Inc., Illinois	Behavioral health service provider
Youth Network Council, dba Illinois Collaboration on Youth, Illinois	Youth advocacy association
Judiciary Courts for the State, Iowa	Court or judicial agency
Florence Crittenton Home of Sioux City, Iowa	Family support service provider
Mountain Comprehensive Care Center, Kentucky	Behavioral health service provider
Volunteers of America Southeast Louisiana Inc., Louisiana	Substance use treatment provider
Preferred Family Healthcare Inc., Missouri	Behavioral health service provider
CPR of the Ozarks, Missouri	Family support service provider
Montefiore Medical Center, New York	University hospital or clinic
Oklahoma Department of Mental Health and Substance Abuse Services, Oklahoma	State mental health and substance use services agency
Health Federation of Philadelphia, Pennsylvania	Family support service provider
Helen Ross McNabb Center, Tennessee	Behavioral health service provider
Tennessee Department of Mental Health and Substance Abuse Services, Tennessee	State mental health and substance use services agency
Prestera Center for Mental Health Services Inc., West Virginia	Behavioral health service provider
Meta House Inc., Wisconsin	Substance use treatment provider

Note: For this table, substance use treatment providers are entities that offer only addiction recovery services. Behavioral health service providers offer an array of behavioral health services, including substance use treatment and mental health care. Family support service providers primarily offer social services rather than behavioral health care.

dba = doing business as; RPG = Regional Partnership Grant.

III. RPG Cross-Site Evaluation

The RPG authorizing legislation requires CB to collect performance data and report on the services provided and activities conducted with RPG funds. To address the legislation's goals and contribute knowledge to the fields of child welfare and substance use disorder (SUD) treatment programming, CB requires and supports a cross-site evaluation. Mathematica designed the cross-site evaluation, in collaboration with CB, to answer key questions of interest to CB and the broader field (Box III.1 provides an overview of the cross-site evaluation; data sources and outcome measures appear in Appendices B and C). RPG projects share data on participants' characteristics, receipt of RPG services, and outcomes data collected at program entry and exit by using the RPG Evaluation Data System (RPG-EDS). This evaluation complements evaluations of previous RPG cohorts (HHS 2016, 2020, 2022, 2023).

The timing of the cross-site evaluation varies by cohort:

- The RPG6 cross-site evaluation began in September 2020, after a one-year planning period for the grant recipients. It concluded in September 2024. The final results for RPG6 will be available in the ninth Report to Congress.

- The RPG7 cross-site evaluation began as early as May 2023 for some grant recipients, after a six-month planning period. Other grant recipients in RPG7 did not begin the cross-site evaluation until October 2023, after a one-year planning period. The final evaluation results for RPG7 will be available after the grants end. However, CB might release interim findings, when available, in the biannual Reports to Congress.

Box III.1. Overview of the cross-site evaluation

Through the cross-site evaluation of RPG6 and RPG7, CB seeks to better understand the partnerships that form the basis of each project—including who was served, how they were served, partnership outcomes, and project impacts. The cross-site evaluation addresses the following research questions:

Partnerships. Which partners were involved in each RPG project, and how did they work together? How did the child welfare and SUD treatment agencies work together to achieve the goals of RPG? How do RPG program participants' past experiences and circumstances factor into their current involvement with the child welfare system? How do adults enrolled in RPG projects describe their experiences participating in program services?

Families served. What referral sources did RPG projects use? What were the characteristics of families who enrolled in RPG? To what extent did RPG projects reach their intended populations?

Services. What core services—the services the RPG team defines as fundamental to its project—were provided and to whom? How engaged were participants with the services provided? Which agencies (grant recipients and their partners) provided services? What were the reasons for exiting RPG?

Improvement and sustainability. What plans and activities did RPG projects undertake to maintain the implementation infrastructure and processes during and after the grant period? How will RPG projects maintain the organizational infrastructure and processes after the grant period? To what extent were RPG project teams prepared to sustain services after the grant period? How will RPG projects fund strategies and secure resources after the grant period? How did the federal, state, and local contexts affect RPG projects and their efforts to sustain services?

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

Impacts. What were the impacts of RPG projects on children and adults enrolled in RPG? ◢

IV. Local Evaluations

As with previous cohorts, CB requires each RPG6 and RPG7 project team to work with an evaluator (either internal or third party) to evaluate their project. RPG project teams, with their evaluator, plan and conduct an evaluation that assesses the effectiveness of their activities and services. They also evaluate project implementation to help interpret the findings from the local impact evaluations and inform the field and future RPG projects.

Of the 26 grant recipients, 22 plan to examine the effects of the project by conducting an impact study. Impact studies measure whether a given program changes participant outcomes. Such studies include a treatment group, which receives the services of interest, and a comparison group, which does not receive those services. The comparison group represents what would have happened to people in the treatment group if they had not received the services. RPG project teams could form treatment groups by using a random process for a randomized controlled trial (RCT) or a nonrandom process, such as self-selection or staff assignment, for a quasi-experimental design (QED).

By using data collected directly from treatment and comparison groups, six grant recipients are conducting an RCT, 13 are conducting a QED, and one is conducting both an RCT and a QED. In addition, two grant recipients are conducting a QED using administrative data to create a comparison group; four others are conducting a descriptive study only. More information is available in Appendix A.

The cross-site evaluation is designed to conduct an impact study for each cohort by pooling data across those grant recipients with RCT or QED evaluations, which collected data directly from treatment and comparison groups—see, for example, the impact study conducted on the RPG3 cohort (Cole et al. 2021).[3] Selected grant recipients will contribute data on both their program and comparison groups to the impact study.

---

[3] The cross-site evaluation is currently conducting an impact study for the RPG5 cohort. For other completed cohorts (including RPG6), the cross-site evaluation did not conduct a pooled impact study due to small comparison group sizes and low response rates among the grant recipients conducting the impact studies.

V.   Evaluation TA

To support RPG6 and RPG7 projects with designing and executing their local evaluations and participating in the cross-site evaluation, CB contracted with Mathematica to provide TA on evaluation design and operations. Mathematica assigned a cross-site liaison (CSL) to each RPG project to work closely with the programmatic TA providers—that is, the change liaisons from CFF—and the federal project officers (FPOs). Together, they form a TA team that works with each RPG project.

This team provides regular TA to each RPG project through monthly meetings, supplemental TA sessions, site visits, and evaluation working sessions. Mathematica also supports grant recipients' evaluation activities through TA presentations, trainings, and tools. Finally, the cross-site evaluation team staffs a help desk to support grant recipients in collecting data for the cross-site evaluation.

Sections A through C below describe the TA team's regular meetings, group TA through presentations and trainings, and TA tools. Section D describes Mathematica's help desk support to grant recipients.

A.   Ongoing TA with individual grant recipients

Monthly, hour-long meetings between the grant recipient team and the TA team were the primary source of regular TA this year. Typically, representatives from the grant recipient and local evaluator attended these calls. Some projects also invited partner staff to attend. During the calls, RPG project staff provided updates on project and evaluation planning and implementation from the past month, asked questions, voiced concerns, and solicited input. The TA team provided support and suggestions, as needed. In addition to the monthly calls with the grant recipient, the TA team for each RPG project held a monthly check-in to prepare for the monthly TA call with the project team. Occasionally, a member of the TA team or the grant recipient requested another call outside of the monthly TA call to further discuss an issue or challenge.

Outside of the monthly calls, the CSLs also participated in several ongoing TA activities this year:

- **Supplemental TA sessions.** CSLs concluded a pilot of supplemental TA activities this year.[4] CSLs led a series of 90-minute supplemental TA calls with one RPG6 project. During the meetings, the CSLs and grant recipient focused on a particular challenge the grant recipient was facing, such as lower than expected enrollment into the evaluation for the comparison group. Drawing on Mathematica's Learn, Innovate, Improve (LI[2]) framework and human-centered design activities, the CSLs helped the RPG team better understand the root causes of their challenges, brainstorm potential solutions to address them, and test these potential solutions, using data to assess how well the potential solution worked.

- **Evaluation working sessions.** The CSLs held evaluation working sessions with some RPG7 projects, which included in-depth discussions about evaluation design and planning issues.[5]

---

[4] The pilot initially called these "intensive TA sessions." Based on feedback from pilot participants, CB and Mathematica changed the name to "supplemental TA sessions."

[5] CSLs held evaluation working sessions with grant recipients that had ongoing evaluation design issues.

- **Site visits.** The change liaison led a virtual or in-person site visit to three RPG7 projects this year. The CSLs participated in calls for planning these site visits and participated in some of the sessions at each site visit.

Across the regular monthly TA calls, supplemental TA, site visits, and evaluation working sessions, the CSLs completed 511 calls from October 2023 through September 2024, or about 20 calls per RPG project for the year. Specifically, CSLs participated in 137 calls about RPG6 projects and 374 calls about RPG7 projects. The average was 43 calls per month across projects. Table V.1 provides the number of calls across each activity.

Table V.1. Number of evaluation TA calls, October 2023–September 2024

	Monthly TA	TA team check-ins	Call initiated by FPO or TA provider	Call initiated by RPG project team	Supplemental TA	Evaluation working session	Site visit planning and site visit sessions	All
Total calls	256	212	14	18	5	4	3	511
Average calls per month	21	18	1	1.5	0.4	0.3	0.25	43

Source: CSL call log, October 2023–September 2024.

Note: TA teams consist of a change liaison, an FPO, and a CSL.

CSL = cross-site liaison; FPO = federal project officer; RPG = Regional Partnership Grant; TA = technical assistance.

RPG project staff and TA teams discussed a wide range of programmatic and evaluation-related topics on TA calls (Table V.2). The three most common topics were the data that grant recipients collected (175 calls), administrative data (118 calls), and program implementation (105 calls).

Table V.2. Most commonly discussed topics during evaluation TA calls, October 2023–September 2024

Topic	Number of calls discussing topic
Data that grant recipient collected	175
Administrative data	118
Program implementation	105
Intake, study consent, and enrollment processes	86
Staffing	78
Tracking of sample members	68
Formation of treatment and comparison groups	53
Sample size	43
Analysis methods and technical questions	32
Institutional review board	31
Outcomes	24

Source: CSL call log, October 2023–September 2024.

Note: Several topics were discussed during calls; therefore, the total number of topics does not equal the number of calls during the same period. Several topics were covered in fewer than 20 calls and are not listed in the table: baseline equivalence (19 calls), sample attrition (19 calls), consent (16 calls), systems-level or collaboration outcomes (10 calls), fidelity (8 calls), and random assignment (3 calls).

CSL = cross-site liaison; TA = technical assistance.

In addition to these TA calls, RPG project teams may request additional assistance, such as specialized TA by their CSL or another member of the cross-site evaluation team (for example, a survey expert). They may also request materials and tools, such as examples of consent forms or tools to calculate statistical power. From October 2023 through September 2024, the CSLs fielded two such requests. One request was on developing substance use recovery profiles using administrative data on substance use treatment and Medicaid claims. The other was on obtaining formative feedback from families served by the RPG program.

B.   Group TA through presentations and trainings

During fiscal year 2024, Mathematica completed several presentations, facilitated peer learning calls, and held office hours and question-and-answer sessions (Table V.3). These activities addressed RPG project teams in larger groups than the individualized support provided through the regular TA meetings.

- **Evaluation peer learning collaborative calls (December 2023 to September 2024).** Mathematica held six evaluation peer learning calls for RPG6 and RPG7 grant recipients and their local evaluators. The calls covered the following topics: collecting and analyzing administrative data, addressing evaluation challenges related to staff turnover and workforce shortages, assessing baseline equivalence, using a data dashboard or tracker to monitor program and evaluation metrics, using Bayesian analysis techniques for impact studies with small samples, and improving data collection processes. At all six sessions, Mathematica staff members presented information and then facilitated discussion and peer learning across the grant recipients.

- **Evaluation office hours (July to September 2024).** Mathematica invited all RPG teams to attend three one-hour office hour sessions, during which Mathematica staff encouraged teams to ask questions about their analyses. The sessions did not have a formal agenda; the topics that grant recipients were most interested in drove the discussion. Although any RPG team was welcome to join these calls, Mathematica staff specifically geared them to RPG6 projects that were finalizing their analyses at the end of their grant period.

- **Question-and-answer sessions on RPG-EDS and cross-site evaluation requirements (March 2024).** Mathematica held two one-hour question-and-answer sessions for RPG7 projects to address project teams' questions after watching training webinars. The training webinars focused on obtaining administrative data and uploading outcomes data to RPG-EDS, including providing information on the updated process for uploading safety and permanency administrative data.

- **RPG annual conference (June 2024).** CB, Mathematica, and CFF together held an in-person annual conference in Washington, DC that included presentations and peer learning for the RPG6 and RPG7 cohorts. At this conference, Mathematica focused on supporting RPG6 and RPG7 grant recipients with their evaluation needs.[6] At one session, Mathematica staff presented information on new TA resources, including the new RPG cross-site evaluation website. In addition, Mathematica organized a plenary presentation focused on incorporating behavioral design in child welfare research. Mathematica also led two breakout sessions for grant recipients, one of which covered

---

[6] During the annual conference, CFF also led programmatic TA-related presentations or activities. This report does not describe those presentations and activities because CFF's project-related TA is beyond this report's scope.

implementation evaluations and the other covered preliminary findings from the cross-site evaluation's pilot collecting qualitative data from RPG participants.

Table V.3. Group TA with RPG6 and RPG7 projects held by Mathematica

Group TA activity	Number of events
Evaluation peer learning collaborative calls	6
Evaluation office hours	3
Question-and-answer sessions on RPG-EDS and cross-site evaluation requirements	2
Breakout sessions at RPG annual conference	2
Facilitated presentations at RPG annual conference	2

Note: We held all group TA events virtually except for the breakout discussions and presentation at the in-person RPG annual conference. The table does not include webinars and in-person presentations delivered solely by CFF.

CFF = Center for Children and Family Futures; RPG = Regional Partnership Grant; RPG-EDS = RPG Evaluation Data System; TA = technical assistance.

C.   TA tools

Mathematica produces written TA information and tools for RPG project teams throughout the course of their evaluations. The information complements our TA activities, as described in the previous sections.

- **Data dashboards.** The cross-site evaluation team developed a new, individualized data dashboard for each RPG6 and RPG7 grant recipient to visually summarize the data that the grant recipient team has entered into RPG-EDS. The dashboards present the project's progress toward their total program and comparison group enrollment goals, demographic data about the enrolled families, and the number of families with services and outcomes data. The CSL discussed the data dashboard with the grant recipient team to identify successes and areas to improve related to enrollment and data collection.

- **Provided data quality snapshots.** High-quality data are essential to the success of the cross-site and grant recipients' local evaluations. The cross-site evaluation team provided individualized data quality snapshots for each RPG6 and RPG7 project in every quarter of this fiscal year. The snapshots showed indicators of data quality in RPG-EDS, such as the prevalence of missing data from families at enrollment and whether grant recipients reported on all RPG services offered through the project. After sending the grant recipient's snapshot to the project team, the CSL discussed the data with the team to determine if there were issues and, if so, strategies to resolve them.

- **Released a TA brief on implementation evaluations.** The cross-site evaluation team developed and released a brief that gave step-by-step guidance on designing an implementation evaluation. The brief guided readers through the process for developing a plan for an implementation evaluation, including developing research questions, identifying data sources, and planning for analysis and reporting the findings.

D.   Help desk for cross-site evaluation data collection

The help desk for the cross-site evaluation receives detailed questions about specific data collection issues. RPG project teams may submit questions through a designated help desk email, toll-free telephone number, or their CSLs. Over the year, the help desk received 269 questions. Questions covered a range of topics, such as outcomes data collected through standardized instruments and administrative data, entry of enrollment and services data into RPG-EDS, and institutional review board concerns. The help desk team consulted with members of the cross-site evaluation team as needed and responded to each question.

VI. Milestones and Major Activities During the Reporting Period

In addition to the evaluation TA activities described in Chapter V, key milestones and major activities from October 2023 through September 2024 follow.

Collecting, analyzing, and reporting data for cross-site evaluation

☑ **Concluded the cross-site evaluation for RPG6 and continued the cross-site evaluation for RPG7.** RPG6 grant recipients completed outcomes data collection for the cross-site evaluation in March 2024. In all, 2,372 people (1,356 children and 1,016 adults) were enrolled in the RPG6 cross-site evaluation. All but one RPG7 project began or continued to enroll families in the cross-site evaluation. As of September 2024, 1,789 people (1,030 children and 759 adults) had enrolled in the RPG7 cross-site evaluation. The RPG7 projects first submitted outcomes data to RPG-EDS in April 2024.

☑ **Revised the eighth Report to Congress.** CB, the Substance Abuse and Mental Health Services Administration, the Centers for Disease Control and Prevention, the National Institutes of Health, and the Office of General Counsel at HHS provided feedback on the draft eighth Report to Congress. In response, Mathematica updated the draft to prepare the report for eventual public release.

☑ **Drafted the ninth Report to Congress, using data from site visits, a qualitative data collection pilot, a sustainability survey, semiannual progress reports, and RPG-EDS data.** Mathematica submitted the first draft of the ninth Report to Congress, which presents findings from data provided by the RPG projects through RPG-EDS or collected by the cross-site evaluation team. The ninth Report to Congress includes the final cross-site evaluation findings for RPG5 and RPG6 and an introduction to RPG7.

☑ **Conducted impact analysis of data from RPG5 projects.** Mathematica conducted an impact analysis of RPG5 projects. The team drafted a journal article summarizing the findings.

☑ **Finalized the RPG7 design report.** Mathematica drafted the RPG7 design report and prepared it for publication. The report presents an overview of the design for the RPG7 cross-site evaluation, including a conceptual framework to guide the evaluation, research questions, data sources, and data collection methods.

☑ **Developed and launched the RPG cross-site evaluation (CSE) website.** Mathematica developed content for a new RPG-CSE website, which serves as a central repository of information on the cross-site evaluation and resources developed by the cross-site evaluation team. Working closely with Administration for Children and Families staff, Mathematica obtained an Authority to Operate (ATO) for the RPG-CSE website. Following the ATO, the website went live before the annual meeting.

☑ **Conducted special topics analysis.** Mathematica analyzed the associations between service receipt and outcomes for adults and children. Measures of service receipt included completion of RPG services and the number of sessions attended. Mathematica prepared a presentation to deliver at the 2024 Association for Public Policy Analysis and Management (APPAM) Fall Research Conference.

☑ **Enhanced RPG-EDS process for uploading safety and permanency administrative data and trained RPG grant recipients on the change.** The team developed and implemented a simplified process for RPG projects to upload safety and permanency administrative data to RPG-EDS. The team shared a recorded training on the new process with all RPG7 grant recipients before their first data outcomes upload period in April 2024.

Providing support to grant recipients on their evaluation activities

☑ **Developed and shared new data dashboards using RPG-EDS data.** The cross-site evaluation team developed a new data dashboard template that visually summarizes data entered into RPG-EDS for each project. The cross-site evaluation team created a dashboard for each project and shared the dashboard with each RPG6 and RPG7 project team.

☑ **Held annual evaluation status meeting with CB and completed evaluation status summaries for grant recipients.** In November 2023, the cross-site evaluation team and CB held the fourth annual evaluation status meeting. During this meeting, Mathematica and CB staff reflected on each grant recipient's local evaluation successes and challenges and considered implications for the cross-site evaluation. The meeting also covered lessons learned from the RPG5 cohort, which ended in September 2023. After the meeting, Mathematica developed an evaluation summary for each RPG6, which described the conclusions from that meeting, including areas and strategies for improvement. Mathematica shared the evaluation summary with each RPG6 project team.

☑ **Continued to share quarterly evaluation updates.** Mathematica shared quarterly evaluation updates with CB for each RPG6 and RPG7 project. The updates summarized the most pressing challenges each RPG project faced for their evaluation, such as low enrollment into the evaluation or low response rates on follow-up data collection. The updates also described steps the RPG team took to address the challenges and future steps to guide TA. Mathematica also continued to update a quarterly dashboard for CB, which summarizes challenges across all RPG6 and RPG7 projects. This tool helps CB better understand the prevalence of challenges across RPG projects.

☑ **Developed Bayesian tool.** Mathematica drafted a tool for grant recipients to use Bayesian analysis techniques for their outcome evaluations. Mathematica also created an accompanying resource to help grant recipients use the tool.

☑ **Prepared plan for supplemental TA and identified first RPG7 grant recipient to work with.** Mathematica concluded the supplemental TA pilot with RPG6 projects and prepared a plan to implement similar supplemental TA with RPG7 grant recipients. CSLs identified grant recipients to work with in the next contract year.

VII. Major Activities Planned for the Next Period

The cross-site evaluation has passed several major milestones—such as completing the cross-site evaluation for RPG6—and has several more in the upcoming year (Figure VII.1). We plan to conduct several key activities from October 2024 through September 2025, including the following:

- Continue to collect enrollment, services, and outcomes data with the RPG7 grant recipients.

- Continue supporting project data collection through the help desk, webinars, data dashboards, and data quality snapshots.

- Develop additional content for the RPG-CSE website to share cross-site evaluation findings.

- Continue monthly TA calls with project teams to monitor and support their progress on local evaluations and cross-site data collection and respond to their evaluation-related questions and concerns.

- Facilitate TA site visits.

- Hold supplemental TA sessions with selected RPG7 projects.

- Continue holding evaluation peer learning collaborative calls.

- Present findings from the special topics analysis at APPAM and submit a journal article describing the findings.

- Develop additional tools for grant recipients related to Bayesian analysis methods for impact studies.

- Renew the Office of Management and Budget approval for the cross-site evaluation.

- Revise the eighth and ninth Reports to Congress to prepare for eventual public release.

- Develop and distribute TA tools to address common evaluation challenges.

- Coordinate with the RPG-Innovations project team as they conduct analyses with existing RPG data and engage with experts, including RPG7 project staff and local evaluators.

Figure VII.1. Past and upcoming cross-site evaluation milestones for RPG6 and RPG7
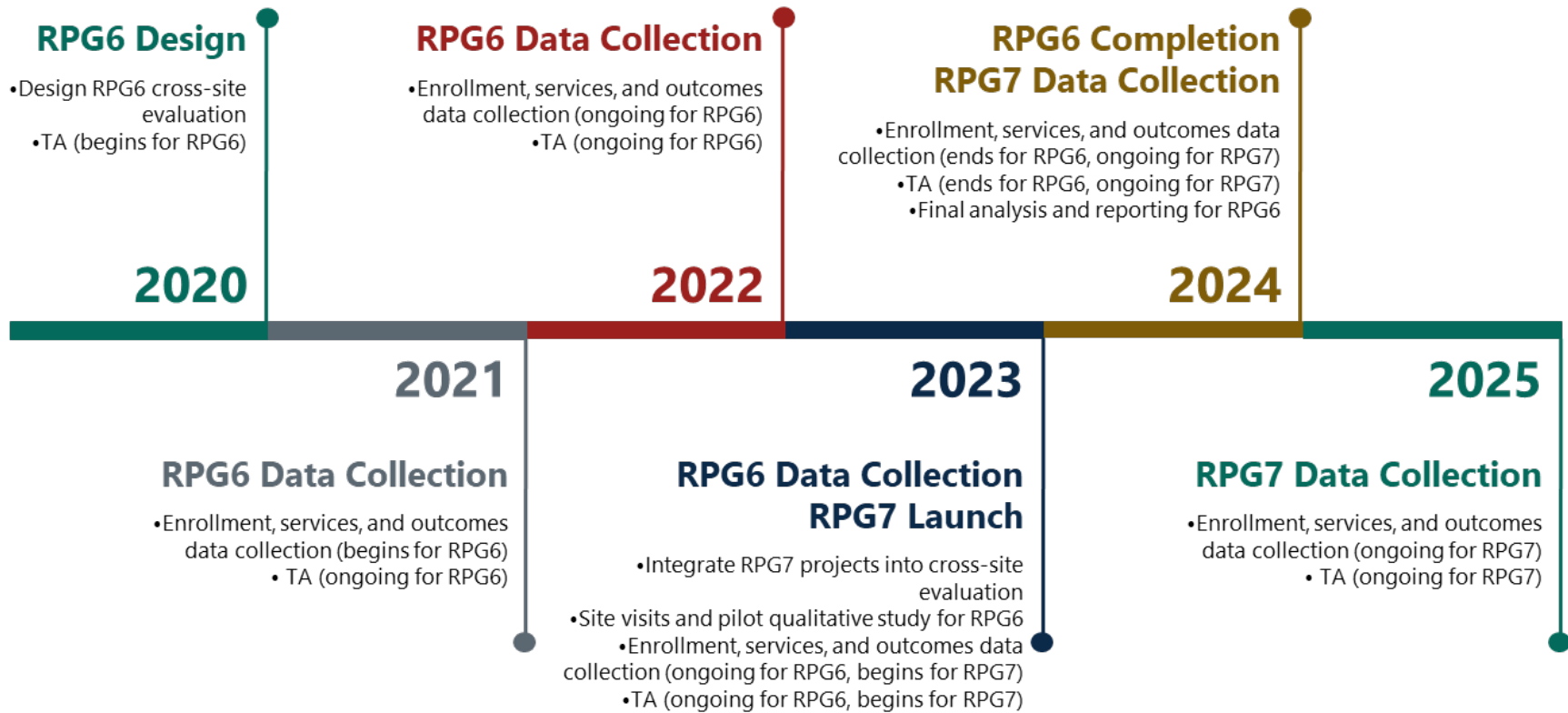
RPG = Regional Partnership Grant; RPG-EDS = RPG Evaluation Data System; TA = technical assistance.

References

Cole, R., A. Burnett, and D. Strong. "The Impact of the Regional Partnership Grant Program on Adult Recovery and Well-Being, and Child Safety, Permanency, and Well-Being Outcomes." *Child Abuse & Neglect,* vol. 117, 2021.

Radel, L., M. Baldwin, G. Crouse, R. Ghertner, and A. Waters. "Substance Use, the Opioid Epidemic, and the Child Welfare System: Key Findings from a Mixed-Methods Study." Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services, 2018. https://bettercarenetwork.org/sites/default/files/SubstanceUseChildWelfareOverview.pdf. Accessed October 31, 2024.

U.S. Department of Health and Human Services. "2012 and 2014 Regional Partnership Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Substance Abuse: Third Annual Report to Congress." Administration for Children and Families, Administration on Children, Youth, and Families, Children's Bureau, 2016. https://rpg-cse.acf.hhs.gov/resource-detail/744. Accessed November 15, 2024.

U.S. Department of Health and Human Services. "Emerging Findings from the 2012–2017 National Cross-Site Evaluation of the Regional Partnership Grant (RPG) Program." Administration for Children and Families, Administration on Children, Youth, and Families, Children's Bureau, and Mathematica, 2020. https://rpg-cse.acf.hhs.gov/resource-detail/736. Accessed November 15, 2024.

U.S. Department of Health and Human Services. "2014 and 2017 Regional Partnership Grants to Increase the Well-Being of and to Improve the Permanency Outcomes for Children Affected by Substance Abuse: Sixth Report to Congress." Administration for Children and Families, Administration on Children, Youth, and Families, Children's Bureau, 2022. https://rpg-cse.acf.hhs.gov/resource-detail/729. Accessed November 15, 2024.

U.S. Department of Health and Human Services. "Regional Partnership Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Substance Abuse: Seventh Report to Congress." Administration for Children and Families, Administration on Children, Youth, and Families, Children's Bureau, 2023. https://rpg-cse.acf.hhs.gov/resource-detail/720. Accessed November 15, 2024.

U.S. Department of Health and Human Services. "Adoption and Foster Care Analysis and Reporting System (AFCARS) Report #30." Administration for Children and Families, Administration on Children, Youth, and Families, Children's Bureau, 2024.

Appendix A.

RPG6 and RPG7 Grant Recipients and Their Local Evaluations

Table A.1. RPG6 and RPG7 grant recipients and their local evaluations

Grant recipient organization	Intended population	Treatment group services	Evaluation design	Comparison group services
RPG6				
Colorado Judicial Department, State Court Administrator's Office, Colorado	Families involved in dependency and neglect court cases with children who are in or at risk of out-of-home placement because of parental substance use	Circle of Parents in Recovery, a voluntary, parent-led self-help support group for parents to share parenting and child development tips and techniques	QED using administrative data only	Business-as-usual services within the Dependency and Neglect System Reform court case management program; this program includes family treatment drug court principles for child welfare–involved families with SUD or co-occurring mental health issues
Georgia State University Research Foundation Inc., Georgia	Families referred to the courts by the Georgia Department of Family and Children's Services with substantiated maltreatment and suspected parental SUD, including families with children who have already been removed from the home	Cognitive Behavioral Interventions for Family Relationships, which focuses on strengthening clients' parenting and family relationships, in addition to the business-as-usual services offered by treatment group Family Treatment Courts	QED	Business-as-usual services offered by comparison group Family Treatment Courts
Youth Network Council, dba Illinois Collaboration on Youth, Illinois	Families referred by child welfare to divert an out-of-home placement, with parental SUD indicated	Intact Family Services enhanced with a recovery coordinator for specialized case management	QED	Business-as-usual Intact Family Services
Preferred Family Healthcare Inc., Missouri	Families with children in or at imminent risk of out-of-home care because of parental substance use, with a case plan goal of reunification	Two treatment groups: Both receive Preferred Family Healthcare's usual behavioral health services enhanced with a family advocate for outreach and advocacy, individualized service planning, and either the Helping Men Recover/Helping Women Recover trauma education program (Treatment Group 1) or the Living in Balance relapse prevention program (Treatment Group 2)	RCT	Preferred Family Healthcare's business-as-usual behavioral health services

Grant recipient organization	Intended population	Treatment group services	Evaluation design	Comparison group services
Mary Hitchcock Memorial Hospital, dba Dartmouth-Hitchcock Medical Center, New Hampshire	Families with children from birth through age 17 who are in or at risk of out-of-home care because of parental substance use	Wraparound services from a care coordinator, including intensive case management, service coordination, and support groups or workshops	QED	Business-as-usual services from community partners and child welfare agencies
Acenda Inc., New Jersey	Families with children from birth through age 18 who are at risk of maltreatment or neglect because of parental substance use	In-home family therapy by a licensed social worker or counselor using Motivational Interviewing; Attachment, Regulation, and Competency; Seeking Safety; and peer support before or after SUD treatment	QED	Business-as-usual SUD treatment through outpatient or intensive outpatient level of care
Oklahoma Department of Mental Health and Substance Abuse Services, Oklahoma	Pregnant women with high-risk pregnancies who are substance affected and whose children are at risk of removal	RCT: High-risk pregnancy care with Substance Use Treatment and Access to Resources and Supports (STAR) clinic services plus a modified version of the Attachment Biobehavioral Catchup (ABC) home visiting model for parents with infants QED: High-risk pregnancy care with STAR clinic services (a social worker, peer support, and developmental pediatric consult); following delivery, usual pediatric services enhanced with developmental pediatric consultation and legal aid	RCT and QED	RCT: High-risk pregnancy care with STAR clinic services QED: Business-as-usual prenatal care available in the community
Prestera Center for Mental Health Services Inc., West Virginia	Families with children from birth through age 12 who are involved with child welfare because of parental substance use	Wraparound services from a care coordinator, peer recovery coach, and/or a family therapist, with services including Seeking Safety, eco-systemic structural family therapy, and Motivational Interviewing	Descriptive study	Not applicable

Grant recipient organization	Intended population	Treatment group services	Evaluation design	Comparison group services
RPG7				
Cook Inlet Tribal Council Inc., Alaska	Alaska Native and American Indian caregivers with children from birth through age 17 are in or at risk of out-of-home placement because of parental substance use	Nurturing Parenting for Families in Substance Abuse Treatment and Recovery: a trauma-informed, evidence-based program that uses psychoeducational and cognitive behavioral approaches with parents and children; intensive case management; peer recovery support; family contact (visitation) support; and optional services including a trauma support group and community-based activities for the family	Descriptive study	Not applicable
State of Connecticut Department of Children and Families, Connecticut	Pregnant or parenting adults with a child from birth through age 5 who are at risk of involvement with child welfare, or in or at risk of out-of-home placement because of parental substance use	Multidimensional Family Therapy and Recovery, an intensive, home-based approach to outpatient behavioral health treatment that serves the family unit and incorporates components to address parental substance use, co-occurring mental health problems, family functioning, and healthy relationships	RCT	Business-as-usual outpatient behavioral health treatment
Broward Behavioral Health Coalition Inc., Florida	Pregnant women using substances who are at risk of involvement with child welfare for the current pregnancy	Home visiting services, including prenatal and parenting education; stress management; care coordination; screenings for perinatal depression, intimate partner violence, tobacco use, substance use, and child development; an individualized plan of care; a family support plan; Broward Healthy Start Coalition Behavioral Health Program model from a peer and services specialist; and peer navigation approach that uses motivational interviewing to engage mothers in the recovery process and other needed services, including substance use treatment	QED	Business-as-usual home visiting and the Broward Healthy Start Coalition Behavioral Health Program from a peer and services specialist

Grant recipient organization	Intended population	Treatment group services	Evaluation design	Comparison group services
Centerstone of Illinois Inc., Illinois	Families with a child from birth through age 17 who is in or at risk of out-of-home care because of parental substance use	Nurturing Parenting Program for Families Involved in Substance Abuse Treatment and Recovery, and trauma-informed cognitive behavioral therapy for the family's children	RCT	Strengthening Families Program, an evidence-based program focused on family skill building, and trauma-informed cognitive behavioral therapy for the children in the family
Youth Network Council, dba Illinois Collaboration on Youth, Illinois	Families with children from birth through age 17 at risk of out-of-home care because of parental substance use	Standard child welfare case management services through Intact Family Services, enhanced with a recovery coordinator for specialized case management	Descriptive study	Not applicable
Florence Crittenton Home of Sioux City, Iowa	Children and youth ages 9 to 21 in out-of-home care due to parent or caregiver substance use and other behavioral health conditions	Emergency shelter housing and at least one of the following services: Attachment, Self-Regulation, and Competency (ARC); enhanced therapeutic supervised visits between children in congregate care and their families, kin, or foster families; Teaching Family Model; and cognitive behavioral therapy models	Descriptive study	Not applicable
Judiciary Courts for the State, Iowa	Families with children from birth through age 8 that have been affected prenatally or environmentally by substance exposure and are at risk of involvement with child welfare, in or at risk of out-of-home care, or in adoptive families	A new Family Resource Center (FRC) that (1) screens children for medical and developmental risks; (2) conducts a comprehensive child assessment (with social, medical, and developmental history, a medical exam, and developmental or psychological assessment); (3) develops a treatment plan, with clinicians receiving tele-mentoring support to develop the plan; (4) refers families to services based on the treatment plan; and (5) holds follow-up appointments with families based on the family's needs	RCT	All FRC services offered to the treatment group except tele-mentoring support for the clinicians

Grant recipient organization	Intended population	Treatment group services	Evaluation design	Comparison group services
Mountain Comprehensive Care Center, Kentucky	Families with children from birth through age 17 in or at risk of out-of-home care because of parental substance use	Intensive outpatient program for SUD treatment, including integrated mental health care, trauma-informed care, case management, recovery peer supports, parenting and life skills training, and continuing care (services during early recovery and maintenance stages)	QED	Business-as-usual SUD services, including residential, outpatient, and drug court programs. Some comparison group families might not receive any services
Volunteers of America Southeast Louisiana Inc., Louisiana	Families who have a child from birth through age 12 that is at risk of out-of-home care due to parental substance use	Residential SUD services and after-care services, along with community-based, outpatient SUD services, care coordination, and peer support	QED	Group 1: Business-as-usual residential SUD and after-care services offered by another service provider Group 2: Same community-based, outpatient SUD services, care coordination, and peer support as the treatment group, but no residential SUD services or after-care services
CPR of the Ozarks, Missouri	Families with children from birth through age 18 at risk of involvement with child welfare, or in or at risk of out-of-home care due to caregiver substance use or dual-diagnosis concerns	Family support specialist guides family through services based on their needs, using home visiting, comprehensive treatment planning, parent education, and screenings and assessments; additional needs-based services could include SUD treatment, anger management classes, employment assistance, additional parent education, skills education, individual and family therapy, and case management	QED	Business-as-usual basic treatment planning, parent education classes, anger management classes, drug testing, SUD assessment, SUD treatment, teen parenting classes, independence skills training for teens, individual therapy, and family therapy

Grant recipient organization	Intended population	Treatment group services	Evaluation design	Comparison group services
Preferred Family Healthcare Inc., Missouri	Families with children from birth through age 17 at risk of child welfare involvement because of parental substance use	Core services (trauma-informed, comprehensive, strengths-based screening and assessment of needs; enhanced case management from a family peer advocate; parenting support; peer recovery mentoring; SUD treatment; three evidence-based programs: (1) Living in Balance and Helping Men/Women Recover; (2) Trust-Based Relational Intervention Care-Giver Training; and (3) the Stress Management and Resiliency Training program; additional needs-based services could include financial and transportation assistance and access to employment and job-training or skill-building services	RCT	All core services offered to the treatment group except the Stress Management and Resiliency Training program
Montefiore Medical Center, New York	Fathers with at least one child from birth through age 18 who is at risk of child welfare involvement or out-of-home placement and someone in the family has or is at risk of an SUD	Father-specific parenting education and employment training program, case management, Motivational Enhancement Therapy, and contingency management	RCT	Business-as-usual community and SUD treatment services
Oklahoma Department of Mental Health and Substance Abuse Services, Oklahoma	Pregnant and parenting families with a child up to age 2 who is at risk of child welfare involvement, or in or at risk of out-of-home placement due to parental substance use	Training and support for behavioral health treatment providers to (1) implement Parent-Child Assistance Program and Family Care Plans and (2) build a collaborative cross-system implementation team to strengthen referral pathways (including to birthing hospitals)	QED	Business-as-usual services from behavioral health and substance use treatment providers

Grant recipient organization	Intended population	Treatment group services	Evaluation design	Comparison group services
Health Federation of Philadelphia, Pennsylvania	Pregnant and parenting families with children from birth through age 5 who live in a residential SUD treatment site and are involved or at risk of involvement with the child welfare system	Peer recovery services, Mothering from the Inside Out integrated with Child-Parent Psychotherapy, and residential SUD treatment	QED	Mothering from the Inside Out integrated with Child-Parent Psychotherapy and residential SUD treatment
Helen Ross McNabb Center, Tennessee	Families with children from birth through age 5 at risk of child welfare involvement or in or at risk of out-of-home care because of parental substance use	Prenatal plans of safe care and family-centered treatment using practices including Seeking Safety, Eye Movement Desensitization and Reprocessing, Nurturing Parenting Program, Circle of Security, and Child-Parent Psychotherapy	QED using administrative data only	Business-as-usual SUD treatment services
Tennessee Department of Mental Health and Substance Abuse Services, Tennessee	Families with children from birth through age 18 in or at risk of out-of-home care	HOMEBUILDERS, which provides intensive in-home family preservation services	QED	Business-as-usual family preservation services
Prestera Center for Mental Health Services Inc., West Virginia	Families with children from birth through age 18 who are at risk of child welfare involvement, or in or at risk of out-of-home care because of parental substance use	Wraparound services from a care coordinator, peer recovery coach, and/or a family therapist, with services including Seeking Safety, eco-systemic structural family therapy, and motivational interviewing	QED	Business-as-usual child welfare, behavioral health, and SUD treatment services
Meta House Inc., Wisconsin	Women with children from birth through age 17 whose children are in or at risk of child welfare involvement because of parental substance use, with parental rights that have not been terminated	Recovery supportive housing program for women and their children, including intensive child and family services, peer support services, and Meta House's business-as-usual outpatient SUD treatment program	QED	Meta House's business-as-usual outpatient SUD services

Note: This information reflects grant recipients' plans as of October 2024. The description of some grant recipients' intended populations or services may evolve over time as their plans change.

dba = doing business as; QED = quasi-experimental design; RCT = randomized controlled trial; RPG = Regional Partnership Grant; SUD = substance use disorder.

This page has been left blank for double-sided copying.

Appendix B.

Data Sources for the Cross-Site Evaluation

This page has been left blank for double-sided copying.

Table B.1. Data sources for the cross-site evaluation, by research question topic

Data source	Partnerships	Families served	Services	Improve-ment and sustain-ability	Outcomes	Impacts
Project documents (grant recipients' applications, semiannual progress reports, memoranda of understanding)	X	X	X	X		
Improvement and sustainability survey	X			X		
Site visits and telephone interviews	X		X	X		
Qualitative data from program participants	X	X	X			
Enrollment and service data		X	X			
Outcomes data (standardized data and administrative records)		X			X	X

Data sources. Mathematica will use several sources and methods to collect quantitative and qualitative data to answer the research questions for the cross-site evaluation. The data sources will include the following:

- **Document review.** We will review documents that describe project activities and structures. These documents will include grant applications and semiannual progress reports that project teams submit to the Children's Bureau as a condition of their grants.

- **Improvement and sustainability survey.** We administered a survey to RPG6 grant recipients and their selected partners in summer 2023. This survey collected information about supports within the partnership that could improve and sustain RPG services, such as the use of data for continual service improvement and the resources needed and available after grant funding ends. We will administer the survey to RPG7 projects later in their grant period.

- **Site visits and key informant interviews.** For RPG6, we conducted site visits and telephone interviews in winter and spring 2023 to collect information from each project team on its planning process for RPG, goal-setting collaboration with partners, implementation plans, service selection process, referral processes to and from services, staffing roles and perceptions, internal evaluation and continuous quality improvement, and the potential for sustaining RPG services. Seven of the site visits were virtual and one was in person. For RPG7, we will conduct similar site visits and interviews later in the grant period.

- **Qualitative data from program participants.** Adding program participants' experiences receiving services through qualitative data collection will allow for a better understanding of the programs and

services offered by grant recipients and the families they serve. We conducted a pilot qualitative study with RPG6 grant recipients in winter and spring 2023. During the pilot, we collected qualitative data via in-depth interviews and focus groups with adults enrolled in RPG services. We will collect similar qualitative data for the RPG7 cohort later in the grant period.

- **Enrollment and services data.** All project teams will provide data on participants' characteristics and enrollment in and receipt of RPG services. The data will include demographic information on family members, dates of entry into and exit from RPG, and information on RPG services received.

- **Outcomes data.** Grant recipients or their evaluators will collect data from families as they enter and exit RPG for the cross-site evaluation.[7] They will also obtain two types of administrative data on participants to submit to the cross-site evaluation: (1) child welfare data from the state or local child welfare agency responsible for the Comprehensive Child Welfare Information System and (2) substance use disorder treatment data from local treatment providers or the state agency responsible for the Treatment Episode Data Set. The analysis of these data will measure outcomes in five domains: (1) child well-being, (2) permanency, (3) safety, (4) adult recovery, and (5) family functioning. The constructs that will be measured and their sources appear in Appendix C. Project teams conducting impact studies (studies intended to examine the effects of a program) as part of their local evaluations will collect the same or similar outcomes data from a comparison group that does not receive the RPG services of interest and provide the data to the cross-site evaluation.

---

[7] RPG projects can or will also use these data for their local evaluations.

Appendix C.

Constructs and Measures for the Outcomes and Impact Studies

This page has been left blank for double-sided copying.

Table C.1. Constructs and measures for the outcomes and impact studies

Construct	Measure and source	Case member for data collection
Child well-being		
Child behavior	Child Behavior Checklist (preschool and school-age children)	Focal child[a]
Sensory processing	Infant-Toddler Sensory Profile	Focal child[a]
Permanency		
Removals from family of origin	Administrative data (CCWIS)	All children
Placements	Administrative data (CCWIS)	All children
Type of placements	Administrative data (CCWIS)	All children
Discharge	Administrative data (CCWIS)	All children
Safety		
Type of allegations	Administrative data (CCWIS)	All children
Disposition of allegations	Administrative data (CCWIS)	All children
Adult recovery		
Substance use severity	Addiction Severity Index	RDA[b]
Parent trauma	Trauma Symptoms Checklist–40	RDA[b]
Substance abuse services received and substances used at admission	Administrative data (local treatment providers or state agency responsible for TEDS data)	All adults
Type of discharge	Administrative data (local treatment providers or state agency responsible for TEDS data)	All adults
Family functioning		
Depressive symptoms	Center for Epidemiologic Studies Depression Scale	FFA[c]
Parenting attitudes	Adult-Adolescent Parenting Inventory	FFA[c]

[a] For the purpose of the cross-site evaluation, project teams will collect data on a single focal child in each family for child well-being measures, even when a household includes more than one child, thereby limiting the burden of data collection. Project teams will collect data on the focal child through the child well-being reporter, which is defined as the primary caregiver for the child.

[b] The RDA is the adult who is at risk of developing a substance use issue, has an active substance use issue, or is in recovery from a substance use issue. If no such adult is in the RPG case, the FFA will also be the RDA.

[c] The FFA is the focal child's biological or adoptive parent. If there is no biological or adoptive parent in the case, the FFA is the adult with the goal of reunification with the focal child.

CCWIS = Comprehensive Child Welfare Information System; FFA = family-functioning adult; RDA = recovery-domain adult; TEDS = Treatment Episode Data Set.