Prevent Child Abuse America®

A THEORY OF CHANGE FOR PRIMARY PREVENTION IN THE US

Prevent Child Abuse America
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Acknowledgments

PCA America would like to thank our staff, chapter network, HFA affiliates, national thought leaders, and most of all the families and caregivers that provided invaluable input throughout our adaptive strategy process.

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THEORY of Change

All children and families are living a purposeful and happy life with hope for the future

*Adapted from Watson & Collins, 2022

Prevent Child Abuse America®

Introduction

Imagine a world where all children have what they need to thrive and prosper, and all parents have the resources and supports they need to care for their children adequately. Prevent Child Abuse America believes this envisioned world is possible, and in response, embarked on a comprehensive, adaptive strategy process in 2022 to set a vision for the creation of a primary prevention ecosystem in the United States that builds the well-being of our nation's children and families.

We specifically chose an adaptive strategy process because it helps us stay responsive to the ever-evolving world around us. It involves ongoing cycles of understanding the current context and listening to diverse perspectives, designing strategies that fit that context, testing the strategies out, and adapting the work given what's being learned and heard.

Our process was guided by three overarching principles:

1. **Engagement.** We intentionally engaged multiple and diverse perspectives, including parents, caregivers, and families.

2. **Systems**. Our strategies and outcomes consider key systemic leverage points at multiple levels.

3. **Equity.** We have centered racial equity throughout our process and in the resulting theory of change.

To provide clarity and focus in this process, we developed an audacious theory of change to help guide us and our nation as we develop the best strategies and policies for achieving our shared goals. The PCA America Theory of Change represents a comprehensive, evidenced-based, and bold prevention framework that guides the work of PCA America and the broader prevention field and policymakers in ensuring equitable and positive childhoods for all children.

How was the PCA America Theory of Change developed?

The PCA America Theory of Change is grounded in the primary prevention and systems change literature and was developed through a series of design sessions, interviews, and surveys that engaged nearly 500 individuals representing families, PCA America staff and board, Healthy Families America staff and other affiliated home visitors, State Chapter Executive Directors, national thought leaders, and other relevant partners. A random survey through YouGov was also conducted and over 1,200 adults across the United States provided further insights on our north star and aspirational outcomes within the theory of change.

These diverse perspectives were combined with insights from the research literature, data, the 2022 "Zooming Out" speaker series (see Appendix A for list of speakers), and consultation from the W. Haywood Burns Institute and a team of experts in systems change, adaptive strategy, and human centered design. After every session we went back to the theory of change and incorporated all the feedback we received. This comprehensive, inclusive, and evidence-based planning approach provided us a deeper understanding of the systems and varying contexts within which we all work, live, and play and the levers we need to pull to advance the impact we desire for children and families. The PCA America Theory of Change will continually evolve and adapt over time in response to emerging evidence about what works to advance the well-being of children and families in our ever-changing world.

PCA America Theory of Change Elements

PCA America's Theory of Change includes four main sections that can be used to guide current and future action within PCA America and the broader prevention field:

North Star representing the future we envision.

Aspirations for Children and Families representing key aspects of health and well-being that PCA America is aiming to bring about directly through its own efforts and indirectly through partnerships with integral ecosystem partners.

Aligned and Comprehensive Primary Prevention Ecosystem which includes families, community members, elected officials and policy makers, and cross-sector organizations and institutions at regional, state, and national levels. PCA America and its Network are part of the primary prevention ecosystem. The Theory of Change lays out a series of conditions or "leverage points" based on the framework developed by Watson and Collins (2022) that are needed across the primary prevention ecosystem to support child and family well-being.

PCA America Strategies are efforts the organization is committing to pursue to do our part in helping our nation build an aligned and comprehensive primary prevention ecosystem to advance the aspirations for all children and families.

PCA America's Values and Beliefs reflect the character of the organization and what sets us apart from others in the prevention field. They serve as a foundation guiding the organization's strategies, partnerships, actions, and decisions.

"These 4 areas (aspirational outcomes) give us space to think about strengthening families and protective factors that aren't so industry speak. Anyone can look at what loving and secure family relationships look like."

-PCA America Network Chapter Director

Why is this Theory of Change needed – and why now?

Research is clear that the early years of life, especially the infancy period, are critical for establishing the building blocks for happy, healthy, and productive members of society (Shonkoff, Slopen, & Williams, 2021). When families have what they need, when they need it, in the communities where they live, delivered in a manner without stigma—before a crisis occurs—then children can thrive. However, many factors can impede health and well-being and can place children at risk for negative outcomes lasting into adulthood. When families face an overload of stress, including poverty, structural racism, and other oppressive conditions, it can hamper a caregiver's ability to provide the supportive relationships and environments children need to prosper (Shonkoff, Slopen, & Williams, 2021). Children living in poverty or in families with low incomes are at the highest risk for child neglect, which may be due in large part to their families not having sufficient access to financial resources and economic mobility (Berger, 2004; Fortson, et al., 2016). Because of structural racism and economic exclusion, children and families of color are more likely to be impacted by poverty and thus come to the attention of the child welfare system for child maltreatment (Kim, Drake, & Jonson-Reid, 2018; Barth et al., 2021). As we have argued, (Jones, Klika, Merrick, 2022), if a child and family well-being system existed in the U.S., many families could avoid contact with costly and punitive child welfare systems.

As disparities in health and well-being outcomes continue to widen, despite investments in programs and services, we need a drastically different approach to support families and ensure they have what they need to be happy, healthy, and economically secure. Because of systemic racism and other social injustices that have influenced our society and the many systems that purport to help families, most recently, advocates have been calling for transforming, reforming, or abolishing long-standing systems, like our nation's child welfare system (Detlaff et al., 2020). To profoundly change the trajectories for future generations of children and families, we must create an aligned and comprehensive primary prevention ecosystem across this country. This ecosystem cannot just be focused on preventing or addressing individual traumas and adversities, which has been the typical prevention response in our country. It must also disrupt the status quo and advance equitable access to opportunities and environments that all families need to thrive and achieve sustained financial stability. Too often, the fragmented field of prevention does not adequately acknowledge and address the conditions, environments, and systemic inequities that contribute to negative child outcomes. As a result, current prevention strategies are often geared towards individual behaviors, do not adequately meet families' financial needs, and continue to perpetuate the idea that child abuse and neglect is an individual, family issue, void of any systemic factors. For example, we know that children who live in families with access to economic and concrete supports are less likely to experience abuse and neglect. Yet, the prevention field is just beginning to incorporate this knowledge into their services, policies and strategies, and there is no bold economic support agenda that is guiding our prevention field. According to Feely and colleagues, "financial hardship remains one of the few preventative factors that is unaddressed in the current policy context," and in fact "intentional public policy decisions would create a different context for communities, families and individuals," (2020).

This Theory of Change lays out a framework to promote a unified movement that ensures the health and well-being of all children and families so they can thrive. Now is the time to build an aligned and comprehensive primary prevention ecosystem in the U.S. that can create the conditions for all children, families, and communities to thrive, eliminate the structural barriers to economic inclusion, and decrease the need for families to encounter deep-end systems that are racist, cause unnecessary family separations, and create generational trauma for families.

What is PCA America's role?

PCA America will serve as a national leader in our movement to transform the primary prevention ecosystem as laid out in the Theory of Change. Specifically, PCA America will:

- Transform the narrative on and create a shared value for prevention
- Center families as partners in decision-making
- Build and leverage evidence and influence to advocate for effective policies, practices, and programs that make up our systems
- Amplify collaborative learning and adaptive action through experimentation and scale solutions that are already taking place on the ground
- Grow and sustain human and financial capacity to advance prevention

How can others use the Theory of Change to advance prevention?

Individuals, organizations, policymakers, researchers, and families across the primary prevention ecosystem can use the PCA America Theory of Change to guide their efforts in many ways including:

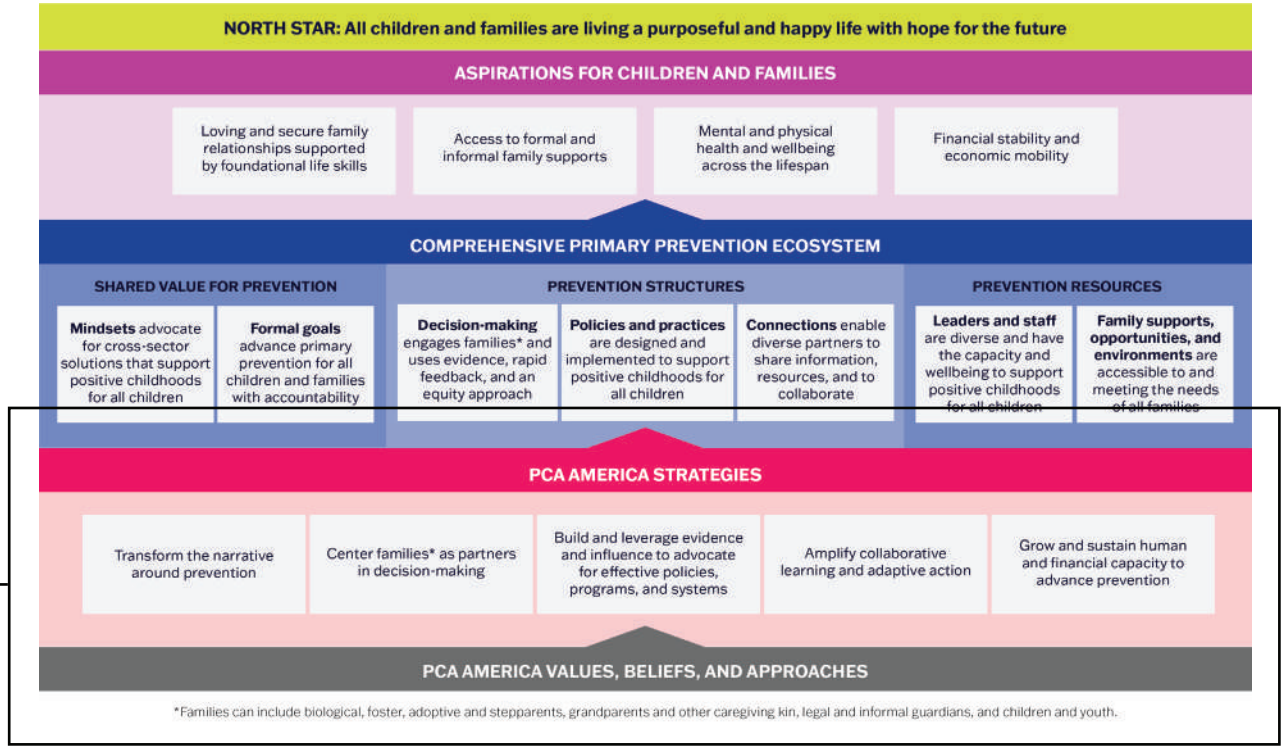
- Identify new ways in which programs, initiatives, and advocacy efforts can help to build an aligned and comprehensive primary prevention ecosystem that advances positive childhoods for all children
- Align current programs, initiatives, advocacy efforts, policies, practices, decision-making processes, and budgets with the tenets of an aligned and comprehensive primary prevention ecosystem
- Scale proven prevention strategies across sectors and communities
- Shift the narrative around what is needed to advance equity in primary prevention
- Build needed evidence to develop, implement, and evolve primary prevention efforts

Throughout this process it became clear that the value of this theory of change is not just for PCA America's strategy efforts, but it creates a primary prevention framework – or ecosystem for the entire country. We have created a "Plug and Play" theory of change (see image below), where any organizations in our Network, or any of our partners across the country, can insert their strategies and values and their collective efforts will align with our shared work to build a comprehensive and aligned primary prevention ecosystem and achieve shared outcomes for children and families in this country.

“This has a lot of use to go deep and broad.”

-HFA Leader

Insert your own strategies and values here.



Call to action

We each share the responsibility for ensuring all children and families are living a purposeful and happy life with hope for the future. We all have a pivotal role and responsibility in the building of an effective primary prevention ecosystem.

Changing the way our society values and cares for our children and families so that we may achieve shared prosperity and reach our aspirational outcomes requires us to: deeply partner with one another; see and actively listen to children and families as key decision-makers; disrupt long-held beliefs about prevention services; experiment and rapidly test new ideas, measuring progress in real time; and launch and advocate for policies, structures, and budgets that truly create more equitable, responsive, and effective systems.

We have an extraordinary moment to create, with families and communities, an ecosystem from the ground up that is focused on primary prevention, and addressing the structural and social determinants of health, including poverty and systemic racism. PCA America looks forward to leading and deeply partnering with shared responsibility in this critical work.

Key Terms

The following are definitions for key terms from the PCA America Theory of Change.

ECONOMIC MOBILITY: Economic mobility refers to the likelihood that individuals will attain a higher standard of living than the household in which they grew up (Hardy & Logan, 2020). Upward mobility in the U.S. is said to be one of the hardest to achieve compared to other high-income countries around the world (Horsford, 2017). There are several ecological factors that play a role in individuals' upward social and economic mobility including: immediate family influence (e.g., family income, parental education), neighborhood characteristics (e.g., crime, unemployment rates, school quality), and broader government policies (e.g., access to paid family leave, affordable housing policies, levels of childcare subsidies; Corak, 2016; Chetty & Hendren, 2018).

EQUITY: Fairness. Everyone receives or has what is needed to thrive and reach one's full potential. (AECF-Burns Institute: Understanding the Basics 2018.pdf)

FAMILIES: Families can include biological, foster, adoptive and stepparents, grandparents and other caregiving kin, legal and informal guardians, and children and youth.

FAMILY SUPPORTS: Formal services and programs (e.g., home visiting, parent training, etc.) and informal supports (e.g., peer to peer social support, houses of worship, and faith communities, neighborhood support, etc.) provided through the primary prevention ecosystem.

PRIMARY PREVENTION: A focus on strategies and interventions that work upstream of the issue to reduce risk factors and increase protective factors (Centers for Disease Control)

PRIMARY PREVENTION ECOSYSTEM: A primary prevention ecosystem includes families, community members, and cross-sector organizations and institutions at regional, state, and national levels. PCA America and its Network are part of the primary prevention system.

SYSTEMS CHANGE: An intentional process designed to alter the status quo by shifting and realigning the form and function of a targeted system (Foster-Fishman et al., 2007). This can include shifting and realigning interacting policies, routines, relationships, resources, power structures, and values across multiple levels in ways that bring about desired outcomes.

SYSTEMIC EQUITY: The ways in which policies, practices, routines, relationships, resources, power structures, and values at local, state, and national levels work in ways that give all people the opportunity to live a purposeful and happy life with hope for the future without advantaging or disadvantaging particular groups.

SYSTEMIC INEQUITY: The ways in which policies, practices, routines, relationships, resources, power structures, and values at local, state, and national levels work in ways that advantage certain groups and disadvantage others given their race/ethnicity, gender, geography, etc. Structural inequity shapes the ways our politics, economy, and society work (adapted from Frameworks Institute, 2023; Watson & Collins, 2022).

"The idea of formal goals is really, really powerful. I'm not sure that we ever had shared goals across systems before. We know that what gets measured gets done. It could be really powerful to focus on the same things, across chapters, across HFA."

-PCA America Network Chapter Director

PCA America Values and Beliefs

PCA America values are actionable and measurable guiding principles that anchor our purpose and direction, and are experienced by all individuals who engage with PCA America.

- **Equity:** We boldly imagine and act to advance values, structures, and resources through targeted approaches that eliminate disparities and promote fairness, inclusivity, and belonging for all children and families.
- **Integrity:** We approach all decisions and actions with truth and transparency, and promote an open, honest, and respectful culture.
- **Evidence:** We ground our work in science and lived experience, and promote forward, pioneering solutions based on current trends and research.
- **Family-Centered:** We strive to partner with families at all opportunities to leverage and prioritize their insights, experiences, and capacities to create and advance primary prevention solutions that meet all families' unique needs and aspirations.
- **Transformation:** We commit ourselves to strategies and preventative solutions that aim to improve the community context in which children and families live their lives.

PCA America beliefs are convictions we hold as true about the world that guide our actions.

- Prevention is possible and everyone plays a role.
- All children, parents, and families should be able to get the **supports** they need, when they need it, in their own communities, without stigma before they are in crisis.
- The well-being of one is imperative to the well-being and prosperity of all.

Aspirations for Children and Families

L PCA America Leading S PCA America Supporting

Aspirations for children and families represent key facets of health and well-being that PCA America is aiming to influence directly and indirectly through its efforts (e.g., HFA home visiting, policy advocacy, etc.). This includes reducing disparities in the aspirations across intersections of demographics (e.g., race/ethnicity, geography, etc.). The aspirations and associated indicators (see Appendix B for data sources) can currently be examined through existing data sources within regional populations, and ideally over time within populations engaged with the PCA America Network. Additional indicators can be added over time (e.g., positive childhood experiences) as data systems are put in place to consistently gather needed data.

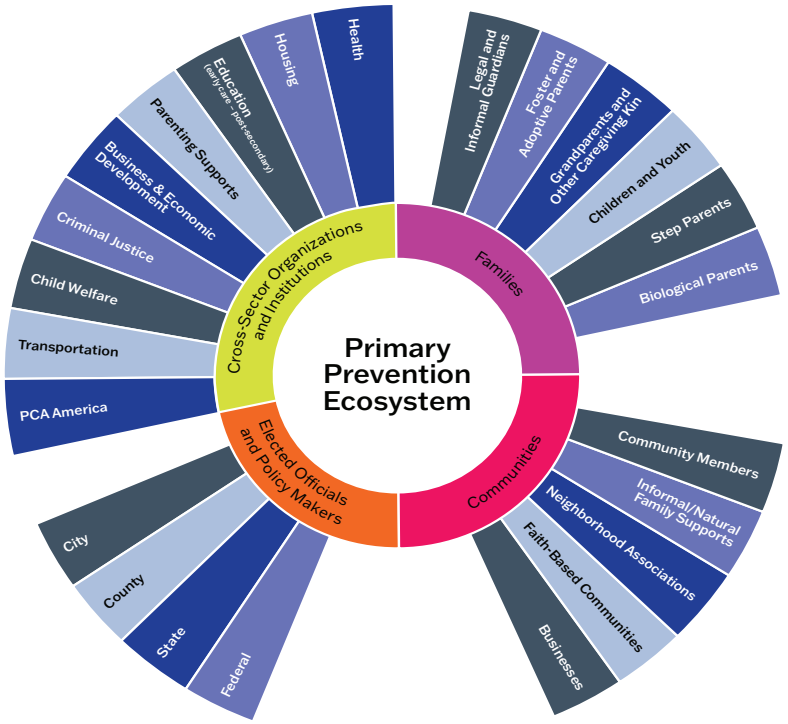
ASPIRATIONS		INDICATORS
Loving and secure family relationships supported by foundational life skills	L	More (%) children are experiencing safe, stable, nurturing **family relationships**
	L	Fewer (%) children and youth experiencing **ACEs** and other violence
	L	Reduced (%) rate of **substantiated incidents of child maltreatment**
Access to formal and informal family supports	S	Fewer (%) children whose parent reported that during the past year there was not someone they could turn to for **emotional parenting support**
	L	More (%) children and families are accessing **home visiting supports** when they need them
	L	More (%) parents and caregivers have the **skills they need to promote their children's healthy development**
	S	Fewer (%) income-eligible children without access to needed **early care and education** (as measured through the total number of slots)
	S	More (%) parents and caregivers are accessing community-based **informal support networks or groups** (e.g., faith based, neighborhood groups)
Mental and physical health and well-being across the lifespan	L	Fewer (%) children whose **parent reports they are not coping "very well"** with the day-to-day demands of parenting
	L	Fewer (%) **children who rate their mental/emotional health** as poor or fair
	S	Fewer (%) low-income (<138% of the federal poverty level) adult women of childbearing age (19 to 44) who report they do not have any **health insurance** coverage
Financial stability and economic mobility	S	Fewer (%) children living in a family in which no parent has regular, full-time (35+ hours per week), year-round (50 weeks of the year) **employment**
	S	Fewer (%) children whose family lives below 100% of the federal **poverty level** (FPL)
	S	More (%) families accessing **earned income tax credit and child tax credits**
	S	Fewer (%) children experiencing **housing** instability
	S	Fewer (%) households with at least one child who reported experiencing low or very low child **food security**

Aligned and Comprehensive Primary Prevention Ecosystem

An aligned and comprehensive primary prevention ecosystem includes families, communities, elected officials and policy makers, and cross-sector (e.g., child welfare, education, business and economic development, health, housing, government, etc.) organizations and institutions at regional, state, and national levels. PCA America and its Network are part of the primary prevention ecosystem.

The Theory of Change lays out a series of conditions or "leverage points" based on the framework developed by Watson and Collins (2022) that are needed across vertical and horizontal levels of the primary prevention ecosystem to support child and family well-being. These leverage points are grouped into three categories: shared value for prevention, prevention structures, and prevention resources.

Creating systems change within this primary prevention ecosystem requires intentional actions to shift and re-align these leverage points in ways that bring about the prioritized aspirations for children and families without advantaging or disadvantaging particular groups.



"You are laying it out for us. We can see visually. You are giving us language to be able to say this is what we can do in our states. And we can do the same thing."

-PCA America Network Chapter Director

"This feels like a framework we can all work within. If we have some some big goals that are consistent in the framework and find ways to measure our progress that are really tangible, that will feel like we are moving the needle. Being able to show the world that we are moving the need on this."

-PCA America Network Chapter Director

Shared Value for Prevention

A shared value for prevention includes two levers for systems change: mindsets and goals. Mindsets refer to the attitudes and beliefs that create a worldview for those who share them. Actors within a comprehensive primary prevention ecosystem hold shared mindsets that: advocate for cross-sector solutions that drive positive childhoods (Lakoff, 2008; Holt et al., 2007); advocate to advance justice, equity, diversity, and inclusion/belonging (Klein & Sorra, 1996; Elias & Feagin, 2020; Omi & Winant, 2012); and promote social norms and narratives supporting positive childhoods (Grier et al., 2005; Henley et al., 1998; Horsfald et al., 2010; Stannard et al., 1998).

Goals are the aims, outcomes, and purposes driving the actions of individuals, groups, and organizations. A comprehensive primary prevention ecosystem is more likely to advance positive childhoods for all children when it includes formal goals and outcomes that explicitly target these aspirations (Meadows, 1999; Martin, 2014) and mechanisms to ensure accountability to those goals (Meadows, 2008).

Levers	Prevention Priorities
Mindsets	**Shared mindsets advocating for cross-sector solutions that support positive, equitable childhoods for all children** More people across the primary prevention ecosystem hold shared mindsets that advocate for the need to bring about cross-sector "upstream" solutions to nurture positive childhoods and prevent child abuse and neglect. **Shared mindsets advocating to advance justice, equity, diversity, and inclusion/belonging** More people across the primary prevention ecosystem hold shared mindsets advocating to advance justice, equity, diversity, and inclusion/belonging. **Social norms and narratives that support positive, equitable childhoods for all children** More people within community regions are promoting social norms and narratives that confirm it is okay for parents to ask for help in parenting (e.g., home visiting) when needed and support healthy child development and child safety, including norms for shared responsibility for children and how parents discipline their children.
Goals	**Formal goals and outcomes are in place advancing positive, equitable childhoods for all children** More cross-sector organizations, institutions, and governmental agencies have adopted formal goals and outcomes related to building a comprehensive primary prevention ecosystem (e.g., the prevention outcomes listed on this and the next two pages) that can advance the aspirations for children and families. **Processes in place to promote accountability to the above goals** More processes are in place across the primary prevention ecosystem to promote accountability to the above goals and outcomes.

Prevention Structures

Prevention structures includes three levers for systems change: decision-making, policies and practices, and connections. Decision-making refers to how decisions are made, and who is included and excluded. Policies and practices are the formal and informal regulations that influence behavior. Connections refer to the exchanges of information and resources between individuals, groups, and organizations.

A comprehensive primary prevention ecosystem is more likely to advance positive childhoods for all children when it includes: decision-making processes that authentically engage diverse families as partners (Israel et al., 2008; Watson et al., 2013) and utilize research and practice-based evidence (Miller et al., 2005), rapid and short cycle feedback (Bowie & Inkelas, 2014), and equity approaches (Agic et al., 2019); policies and practices that are designed and implemented in ways that advance the prioritized aspirations (Delgado & Stefancic, 2017, Meadows, 1999; Jurik & Cowgill, 2005; Kendi, 2018); and connections that enable diverse partners to share information, resources, and collaboration in ways that enable them to more effectively bring about positive childhoods for all children (Senge, 2006; Foster-Fishman, et al., 2007; Rogers, 2010; Neal et al, 2011).

Levers	Prevention Priorities
Decision-Making	**Decision-making processes authentically engage diverse families as partners** Decision-making processes across the primary prevention ecosystem (e.g., about understanding system conditions, making strategic priorities, hiring staff and leaders, co-designing programming, and policies, etc.) authentically engage diverse families as partners with influence over final decisions within the primary prevention ecosystem. **Decision-making processes use research and practice-based evidence** Decision-making processes across the primary prevention ecosystem use research and practice-based evidence within the primary prevention ecosystem. **Decision-making processes use rapid and short cycle feedback** Decision-making processes across the primary prevention ecosystem use rapid and short cycle feedback. **Decision-making processes use equity approaches** Decision-making processes across the primary prevention ecosystem use equity approaches (e.g., equity impact assessment process).
Policies and Practices	**Policies and practices are designed and implemented to support positive, equitable childhoods for all children** More policies and practices across the primary prevention ecosystem are designed and implemented in ways that enable positive childhoods for all children.
Connections	**Connections are in place to enable diverse partners to share information and resources, and to collaborate** More data, information, resources, referrals, trainings, staff, and learnings are being shared within and between individuals and organizations across the primary prevention ecosystem.

Prevention Resources

Prevention resources includes two levers for systems change: human resources and organizational culture, and family supports, opportunities, and environments. Human resources refers to people and their skills and knowledge and includes aspects of organizational culture. A comprehensive primary prevention ecosystem is more likely to advance positive childhoods for all children when staff and leaders represent diverse communities and families (Paschall et al., 2021), have skills and knowledge to advance prevention (Brashears, et al., 2012; Foster-Fishman et al., 2006; Livet & Wandersman, 2005; Turner & Crawford, 1998; Lane, Koka, & Pathak, 2006) and are well supported thus reducing staff burnout (Oyeleye et al., 2013; Whittaker et al., 2018).

Family supports, opportunities, and environments represent resources needed for families to thrive. A comprehensive primary prevention ecosystem is more likely to advance positive childhoods for all children when formal and informal family supports (e.g., home visiting, community-based social support), opportunities (e.g., living wage jobs), and environments (e.g., green spaces, affordable housing) are equitably accessible and meeting families' needs and preferences (Daly et al., 2002; Feagin & Bennefield, 2014; Powell et al., 2009).

Levers	Prevention Priorities
Human Resources and Organizational Culture	**Staff and leaders represent diverse communities and families** More leaders and staff across the primary prevention ecosystem represent diverse communities and families. **Staff and leaders have skills and knowledge to provide effective primary prevention programming and support positive, equitable childhoods for all children** More leaders and staff across the primary prevention ecosystem have skills and knowledge to provide effective primary prevention programming and to advance equity (e.g., skills in trauma-informed practices, anti-racist practice, etc.). **Staff and leaders experience less burnout and more well-being** More leaders and staff across the primary prevention ecosystem experience less burnout and more well-being resulting in better performance and retention.
Family Supports, Opportunities, and Environments Needed to Thrive	**Family supports and initiatives are accessible to and meeting the needs and preferences of all families** More family supports (e.g., home visiting) and initiatives (e.g., educational efforts to shift social norms) across the primary prevention ecosystem are equitably accessible and meeting families' needs and preferences. **Opportunities and environments needed to thrive are accessible to and meeting the needs and preferences of all families** More opportunities (e.g., living wage jobs) and environments (e.g., green spaces, affordable housing) are equitably accessible and meeting families' needs and preferences.

PCA America Strategies

The following are strategies PCA America is taking to help build a comprehensive primary prevention ecosystem to advance the prioritized aspirations for all children and families. The tables below describe these strategies and corresponding actions over time (see color coding on right).

Short-Term	Initiate strategy within **1 years**
Mid-Term	Initiate strategy within **3 years**
Long-Term	Initiate strategy within **5 years**

STRATEGY 1:

Transform the narrative around prevention

The first strategy approach aims to transform the narrative around prevention and targets the following levers within a comprehensive primary prevention ecosystem:

- **MINDSETS** advocating for cross-sector solutions that drive positive childhoods and advance justice, equity, diversity, and inclusion/belonging; social norms and narratives that support positive childhoods
- **GOALS** and outcomes are advancing prevention and the child and family aspirations
- **DECISION-MAKING** processes utilize equity approaches

Strategy Components		Actions Over Time
Amplify the theory of change framework within the Network and to the broader prevention field	S	Support PCA America Network Chapters and HFA affiliated sites in using the Theory of Change framework to guide decision-making and action.
	M	Support cross-sector organizations and institutions within the prevention field in using the Theory of Change framework to guide decision-making and action.
Reframe the definition and role of primary prevention in the field	S	Operationalize what prevention is (including where we are and are not going to focus our efforts), reframe the role of child welfare (that CPS is only one factor of child welfare), and redefine resilience.
Develop common definitions of justice and equity within PCA America and the Network and continually assess alignment with current and future frameworks, budgets, policies, and decisions	S	Create a common/shared definition of equity and fairness across the intersections of race/ethnicity, gender, class, etc.
	S	Articulate equity as a value and define the role of equity, diversity, inclusion, and belonging within primary prevention.
	M	Have an independent entity help assess the alignment of current and future frameworks, budgets, policies, and decisions with this value.
	M	Continue to review the state chapter re-chartering process and how it reflects the value and commitment to equity.

Develop better understanding of how to change mindsets	S	Understand more about how to effectively change mindsets in post-COVID era so we do not do more of what is not working. • Look at relevant research. • Engage with entities across the political spectrum to learn more how to frame things for different audiences - leverage Network for these relationships • Bring in Frameworks Institute work.
	M	Build trust in marginalized communities to co-design communication approaches with families and community leaders.
	L	Initiate multiple communication approaches to shift prioritized mindsets and narratives.

“This allows PCA America to go deeper on things we have already started and should be doing, like economic and concrete supports”

-PCA America Network Chapter Director

STRATEGY 2:

Center families as partners in decision-making

The second strategy approach is aimed at engaging families – both those that have and have not been involved in the formal child welfare system - as full decision-making partners within primary prevention ecosystem efforts to advance positive childhoods for all children.

- **DECISION-MAKING** processes authentically engage diverse families as partners

Strategy Components		Actions Over Time
Leverage Network connections to partner with families in organizational decision-making	S	Build out and organize connections within the Network to more strategically partner with families in decision-making processes.
	S	Work with existing parent leaders to co-design multiple ways to engage families as partners in decision-making that: • Meets families where they are (vs. expecting them to come to an office). • Partners with families from the beginning of the decision-making process and engage them on a regular basis. • Uses trauma informed, culturally responsive, non-stigmatizing approaches that create safe spaces to partner with families.
	M	Engage families in decision-making opportunities, including helping PCA America determine its goals within the organization and across the prevention field.
Provide supports and compensation for families to engage as partners in decision-making	S	Engage existing parent leaders in co-designing training, mentorship, and apprenticeship opportunities to cultivate parents' leadership capacity/skills to engage in decision-making and advocacy.
	M	Launch training, mentorship, and apprenticeship opportunities to cultivate parents' leadership capacity/skills to engage in decision-making.
	M	Shift policies to allocate funding to fairly compensate families to engage in decision-making and leadership roles (in ways that considers benefits cliff).
	M	Provide necessary supports so all families can access opportunities to engage as partners in decision-making, including childcare, technology, transportation, and time for families to set these things up.
Build parent engagement capacity within PCA America and the Network	S	Learn how others have successfully partnered with families in decision-making and use/spread this knowledge to inform practice.
	S	Foster frequent discussions about authentic parent engagement and partnerships throughout PCA America and the PCA America Network.
	M	Determine how to put additional staffing needs in place before launching new parent engagement approaches.
	M	Build the skills and knowledge of staff and leaders within PCA America and the PCA America Network to engage families as authentic partners.
	L	Determine the most appropriate staffing structure within PCA America to support authentic engagement and new decision-making changes.
	L	Embed parent engagement approaches and principles in the PCA America employee handbook and other documentation.
	L	Extend principles for authentic engagement in other initiatives within PCA America and the PCA America Network.

STRATEGY 3:

Build and leverage evidence and influence to advocate for effective policies, practices, programs, and systems

The third strategy approach is aimed at building and leveraging evidence and influence to advocate for effective policies, programs, and systems that can advance positive childhoods for all children. This strategy targets the following levers within a comprehensive primary prevention ecosystem:

- **DECISION-MAKING** processes use research and practice-based evidence
- **POLICIES AND PRACTICES** advance positive childhoods for all children
- **CONNECTIONS** to enable diverse partners to share information, resources, and to collaborate
- **FAMILY SUPPORTS, OPPORTUNITIES, ENVIRONMENTS** are accessible, meeting needs/preferences

Strategy Components		Actions Over Time
Build evidence to inform decision-making around primary prevention	S	Conduct/translate research to inform efforts pursuing the Theory of Change.
	L	Foster innovation labs within the Network, including funding sites to pilot test efforts to build a comprehensive primary prevention ecosystem and evaluating their progress to inform collective, adaptive learning.
Amplify PCA America's role in policy and practice change	S	Use research and experts to inform/advance a robust policy agenda. See these **recommended local, state, and national policies.**
	M	Leverage relationships to amplify advocacy, including mapping out relationships with legislative staff.
	M	Create and disseminate interactive policy and practice tools.
	L	Serve as a thought leader/influencer in framing issues, a policy agenda.
	L	Create a 501c4 as an opportunity for others to partner in advocacy (this does not mean changing PCA America's current status).
Partner with families and Network members in advocacy efforts	S	Engage parent leaders and Network members in co-designing training, mentorship, and apprenticeship opportunities to build their policy/advocacy skills and connections.
	M	Create opportunities for families and Network members to build their advocacy skills and connections.
	M	Provide opportunities and supports (e.g., materials, transportation, financial resources, etc.) to help families and Network members engage and lead in advocacy.
Partner with non-traditional cross-sector partners in anti-poverty work	S	Engage with new partners (e.g., cross-sector entities, business/chambers, justice-oriented groups outside the mainstream) around shared advocacy goals. Expand the definition of "Network" to also include these partners.
	M	Advocate for and partner with community-based systems of care.
	L	Build in funding mechanisms to support cross-sector collaboration.
Strategically target shared policy and practice goals across the Network	S	Chapters and HFA affiliated sites identify common national policy targets to guide collective advocacy efforts across PCA America. We may use different tactics but have same collective target.
	M	PCA America more intentionally partners with Chapters and HFA affiliated sites to advocate for policy and practice changes at state level.
Engage families as partners in assessing and co-designing ways to improve the accessibility and alignment of family supports	S	Partner with families to plan out where/how to expand PCA America chapters and HFA affiliated sites to equitably meet the needs of families.
	M	Partner with families to understand and address ways to make it easier for families to know about and navigate available family supports.
	L	Partner with families to understand and improve/streamline enrollment processes and procedures (e.g., number of times a family must tell their story and other "hoops") to reduce trauma and help families more equitably access needed family supports as early as possible, before crisis happens.

STRATEGY 4:

Amplify collaborative learning and adaptive action

The fourth strategy approach aims to amplify collaborative learning and adaptive action across the primary prevention ecosystem and targets the following levers:

- **GOALS** and outcomes in place related to equitable and comprehensive primary prevention systems and prioritized child and family aspirations
- **DECISION-MAKING** processes utilize rapid and short cycle feedback and use research and practice-based evidence
- **CONNECTIONS** enable diverse partners to share information, resources, and collaboration

Strategy Components		Actions Over Time
Serve as a connector to relationships, influencers, resources, and knowledge	S	Create strategic and intentional opportunities for the national office, Network, and families with lived experience to connect in person and virtually.
	M	Provide more opportunities for sites to share family stories and other relevant data.
	M	Enhance PCA America newsletters to connect Network with relevant information, including how Chapters and HFA affiliated sites can use the information within their efforts.
	L	Create data dashboard that measures/maps relationships and connections.
Define shared metrics and a measurement plan for short, mid, and long term outcomes within the Theory of Change and embed within PCA America and the Network	S	Determine organizational goals and evidence-based metrics around what we are measuring and aiming to achieve, include focus on reducing disparities and social inequities; help set evidence-based goals and metrics for Chapters and HFA affiliated sites.
	M	Put practices in place to measure/evaluate these goals and outcomes, including internal feedback loops across all levels and departments, internal & external partners. Create a data dashboard for Senior Team to monitor and measure progress on the indicators and strategies.
	M	Create procedures within the organization to regularly check-in on alignment with North Star.
Create opportunities for adaptive, collective organizational learning	S	Plan for the intentional use of rapid cycle testing - we need to be ready and prepared to USE rapid feedback within the adaptive strategy process.
	M	Build the relationships/networks to promote rapid organizational/collective learning – leverage Network connections and build on existing affinity group structures and feedback mechanisms (e.g., surveys).
	M	Create structured opportunities for senior team learning/connection and intentional inclusion of cross-department initiatives and goals in annual planning processes.

STRATEGY 5:

Grow and sustain human and financial capacity to advance prevention

The fifth strategy approach aims to grow and sustain human and financial capacity to advance positive childhoods for all children. The strategy targets the following primary prevention ecosystem levers:

- **HUMAN RESOURCES AND ORGANIZATIONAL CULTURE:** Staff and leaders represent diverse communities and families with lived expertise, have skills and knowledge to provide effective prevention programming and advance equity, and experience less burnout and more well-being
- **FAMILY SUPPORTS, OPPORTUNITIES, AND ENVIRONMENTS** are equitably accessible to and meeting the needs/preferences of families

Strategy Components		Actions Over Time
Develop equity-oriented recruitment and hiring policies	S	Redesign recruitment and hiring policies and procedures to better reach and support staff who represent the families and communities served by the PCA America Network.
	M	Consider whether/how to engage and support interns in PCA America Network efforts, managing implementation needs (e.g., training).
Develop policies and supports for PCA America (first) and the PCA America Network (next) to promote staff well-being and reduce burnout	S	Explore funding sources to support this internal work, especially large capital organizational investments.
	M	Expand supports (e.g., counseling, reflective supervision, etc.) and expectations to foster staff self-care practices.
	L	Review current HR policies and establish goals to become the premier model for equitable and family friendly HR policies within the field. Examples: flexible work schedules, sick/family leave, lower caseloads/caseload weights, and higher compensation.
Promote aligned organizational culture	M	Manage how shifts in recruitment, hiring, and family friendly HR policies impacts the organizational culture overall, and what supports (e.g., training, discussions, etc.) are needed to promote alignment.
Create strategic professional development and structured learning opportunities across departments and Network to support implementation of the Theory of Change	S	Create shared learning opportunities where Network affiliates can discuss their DEI efforts.
	S	Provide internal speaker/education series to learn about other affected/impacted sector.
	M	Provide training/technical assistance to field and networks on collecting, analyzing, and utilizing research evidence.
	M	Grow skills around rapid feedback/learning, learning organization.
	M	Embed key ideas and concepts from the Theory of Change into new staff orientation and targeted trainings for emerging leaders within the organization and Network, including systems change for advancement of justice, equity, diversity, and inclusion/belonging.
Build needed infrastructure to support implementation	S	Develop processes to continually assess the infrastructure (e.g., staff, training, technology, funding, etc.) needed to support implementation of the Theory of Change strategies and the anticipated growth of the Network.
	S	Develop processes to rapidly use the above assessment results to build needed infrastructure to support the implementation of the Theory of Change strategies and the anticipated growth of the Network.
Expand and sustain funding for primary prevention efforts	L	Gather evaluation evidence needed to garner increased funding for primary prevention efforts initiated by PCA America and other partners, including pursuing strategies and goals within the Theory of Change.

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Appendix A: PCA America Zooming Out Speaker Series

Topic	Speaker(s)	Date
Addressing systemic racism, poverty and its impact on child and family well-being	Dr. Renee Canady, Michigan Public Health Institute (MPHI)	August 2022
Using data to identify areas for programmatic, policy and systems level change efforts.	Sam Mellerson, Burns Institute	September 2022
	Michael Finley, Burns Institute	
Family leadership within community systems	Takkeem Morgan, Foster America	October 2022
	Sixto Cancel, Think of Us	
	Tara Hunter Bah, Healthy Families America/National Children's Advocacy Center	
Addressing systemic racism and poverty at program level	Eddie Brown, Hartford Communities that Care.	December 2022
	Claudia Peralta-Mudd, Louisville Department of Public Health & Wellness	
Building a comprehensive prevention vision: a public health approach to prevention	Melissa Merrick, Prevent Child Abuse America	January 2023
The Social Sector's Role in Disrupting the Status Quo	Raquel Hatter, Kresge Foundation	February 2023

Appendix B: Data Sources for Aspirations for Children and Families Indicators

Aspirations	Indicators	Data Sources
Loving and secure family relationships supported by foundational life skills	More (%) children are experiencing safe, stable, nurturing **family relationships**	National Survey of Children's Health (NSCH)
	Fewer (%) children and youth experiencing **ACEs** and other violence	Kids Count Data Center
	Reduced (%) rate of **substantiated incidents of child maltreatment**	National Child Abuse and Neglect Data System (NCANDS)
Access to formal and informal family supports	Fewer (%) children whose parent reported that during the past year there was not someone they could turn to for **emotional parenting support**	National Survey of Children's Health (NSCH)
	More (%) children and families are accessing **home visiting supports** when they need them	PCA America Home Visiting Yearbook
	More (%) parents and caregivers have the **skills they need to promote their children's healthy development**	National Survey of Children's Health (NSCH)
	Fewer (%) income-eligible children without access to needed **early care and education** (as measured through the total number of slots)	American Community Survey (ACS)
	More (%) parents and caregivers are accessing community-based **informal support networks or groups** (e.g., faith based, neighborhood groups)	National Survey of Children's Health (NSCH)
Mental and physical health and well-being across the lifespan	Fewer (%) children whose **parent reports they are not coping "very well"** with the day-to-day demands of parenting	National Survey of Children's Health (NSCH)
	Fewer (%) **children who rate their mental/emotional health** as poor or fair	National Survey of Children's Health (NSCH)
	Fewer (%) low-income (<138% of the federal poverty level) adult women of childbearing age (19 to 44) who report they do not have any **health insurance** coverage	American Community Survey (ACS)
Financial stability and economic mobility	Fewer (%) children living in a family in which no parent has regular, full-time (35+ hours per week), year-round (50 weeks of the year) **employment**	American Community Survey (ACS)
	Fewer (%) children whose family lives below 100% of the federal **poverty level** (FPL)	American Community Survey (ACS)
	More (%) families accessing **earned income tax credit and child tax credits**	IRS, Statistics of Income Division
	Fewer (%) children experiencing **housing** instability	American Community Survey (ACS)
	Fewer (%) households with at least one child who reported experiencing low or very low child **food security**	Current Population Survey (CPS), Food Security Supplement (FSS)