



Family Justice Center Alliance Webinar

Singing About Your Successes: Data Collection in Multi-Agency Service Models

Presented by Dr. Carrie Petrucci, MSW, PhD

January 15, 2013

Dr. Carrie Petrucci, MSW, PhD, Senior Research Associate at EMT Associates, will discuss the importance of data collection in a Family Justice Center or similar service delivery model and will provide an overview of the mixed methods approach to evaluating the California Family Justice Initiative. Dr. Petrucci will discuss the why and the how of data collection and how to incorporate both quantitative and qualitative data collection and analysis in assessing a Family Justice Center or other types of multi-agency service delivery models. Dr. Petrucci has done excellent work in collaboration with the Alliance on the evaluation of eight Family Justice Centers in California, with funding provided by Blue Shield of California Foundation.

Continuing Education

This session is approved for 1 California Minimum Continuing Education (CEU) credit and 1 Minimum Continuing Legal Education (MCLE) credit. The Family Justice Center Alliance is a California approved provider of CEU for MFT, LCSW, LEP, LPCC (Provider # PCE 5095) and MCLE for attorneys (Provider #15493). Professionals in states outside of California should check with their own state board to determine whether these credits are approved in their jurisdiction. Information on how to obtain credit will be provided during the webinar and within the course materials.

Welcome!

While waiting for the presentation to begin, please read the following reminders:

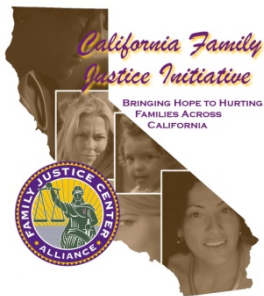
- The presentation will begin promptly at 10:00 a.m. Pacific Time
- If you are experiencing technical difficulties, email Natalia@nfjca.org
- To LISTEN to the presentation on your phone, dial **+1 (702) 489-0003** Access Code: **454-017-133** or **listen on your computer speakers**
- Attendees will be muted throughout the presentation
- To send questions to the presenter during presentation:
 - Click on “Questions” in the toolbar (top right corner)
 - Type your comments & send to presenter
- There will be a Q & A session at the end of the presentation.
- The presentation will be recorded & posted on www.familyjusticecenter.org
- Please complete the evaluation at the end of the presentation. We value your input.

Your host and co-presenter today:



Casey Gwinn, J.D.
President

Family Justice Center Alliance



Thank You to Our Sponsors

Thank you to the US Department of Justice,
Office on Violence Against Women and
Blue Shield of California Foundation
for making this training possible!

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2013 International Family Justice Center Conference

April 16-18, 2013 in Fort Worth, TX



www.familyjusticecenter.org

The three-day conference will include discussions on issues related to the handling of domestic violence, child abuse, sexual assault, and elder abuse cases in the context of the Family Justice Center model.

The conference faculty includes nationally and internationally recognized subject matter experts, advocates, and survivors. During the conference participants will have the opportunity to meet with survivors and professionals who currently work in Family Justice Centers in the United States and internationally.

Early Bird ends February 15th!!!



The FJC Alliance Team



Casey Gwinn, JD



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Rachel Whiteside

Webinar Download Reminders

This webinar presentation is being recorded and will be posted on our website by close of business. We would like to remind you that you no longer need Membership in order to download webinar files and other materials from our Resource Library.

If you would like to access our new Resource Library, please visit our website at www.FamilyJusticeCenter.org and click on “**Resources**” tab → “**Resource Library**”.



California Continuing Education

- This session is approved for .25 California Minimum Continuing Education (CEU) credit for MFT and LCSW (Provider # PCE 5095) and for .25 California credit for attorneys (Provider # 15493).

Professionals in states outside of California should check with their own state board/bar to determine whether these credits are approved in their jurisdiction.

- A checklist detailing how to obtain the credit will be included in the course materials and available for download.
- The checklist will also be emailed after the webinar training.

Today's Presenter:



Carrie Petrucci, MSW, PhD
Senior Research Associate,
EMT

Singing About Your Successes: Data Collection for Multi-Agency Service Models



Presented by: Carrie Petrucci, MSW, Ph.D., Senior Research Associate,
EMT Associates, 21601 Devonshire Street, Suite 320, Chatsworth, CA, Phone: 818.667.9167

Presentation Overview

- ✎ How you can use data about your program to “sing about your successes”
- ✎ And be confident in the accuracy of your data
- ✎ In a multi-agency collaborative domestic violence service environment
- ✎ In a feasible “doable” way with your existing resources

Objectives

Presentation Objectives:

- ☞ To present common challenges in data collection in multi-agency domestic violence service settings
- ☞ To present strategies to address these common challenges
- ☞ To present multiple strategies for a feasible approach to data collection in a multi-agency setting that provides services to victims/survivors of domestic violence

What Needs to be in Place Before Addressing Data Collection

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Program Theory, Logic Model, Confidentiality Procedures, IRB

Your Program Theory and Logic Model Are Formulated

- ✎ You've identified your program approach
- ✎ The problem you're addressing
- ✎ The services you're providing
- ✎ The amount of services you plan/do provide
- ✎ Your key staff providing services
- ✎ Your intended short-term, intermediate, and long-term outcomes
- ✎ Your program activities, objectives, and goals are identified

Your Program Theory and Logic Model Are Formulated

All data collected should link back to some aspect of your logic model. We won't cover this topic further in this presentation but just wanted to be sure the linkage is clear.

Very Brief Overview of Confidentiality

- ✎ Confidentiality and procedures for data sharing need to (and can be) established in multi-agency environments
- ✎ MOU's with all agencies in the multi-agency partnership
- ✎ Written client consents (may be one per agency or one consent that covers more than one agency)
- ✎ Each agency environment dictates different requirements around data sharing – all partners should be familiar with each other's confidentiality and data sharing requirements
- ✎ This is an entire topic by itself so coverage here is brief
- ✎ Additional resources included at end of this presentation

Confidentiality Information Toolkit

Confidentiality of survivor data is essential. Informed consent should be part of your standard agency procedures, along with adherence to all state and federal laws specific to your agency.

In a multi-agency environment, best practices have been suggested. Resources are provided at the end of this presentation. A link to the **Technology and Confidentiality Resources Toolkit** developed by the National Network to End Domestic Violence and the Office of Violence Against Women is a valuable resource for non-profits.

The **Toolkit** covers when HIPAA is (and is not) required, relevant Federal laws, and how to choose between state and Federal laws. It also has extensive FAQ's and templates for forms.

Does Data Collection Require IRB Approval?

- ✎ Collecting data for purposes of program improvement and internal use typically does NOT require IRB approval
- ✎ If you are collaborating with a university for research purposes, then IRB approval WILL BE required
- ✎ IRB only needed for research (defined as data that will be disseminated outside your agency for purposes of “knowledge generation”)
- ✎ Still, data collection should be presented as VOLUNTARY, for both professionals and program participants

Common Challenges in Data Collection

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Including Multiple Perspectives, Accurate Counting and Database Structure, Service Contacts vs. Unique Individual, Services Needed vs. Services Received

Common Challenges in Data Collection

Not Gathering Data from All Perspectives
Resulting in Gaps in Documenting
Program Successes and Areas Needing
Improvement

Gather Data from Multiple Perspectives



Multiple Data Approaches from which to Choose

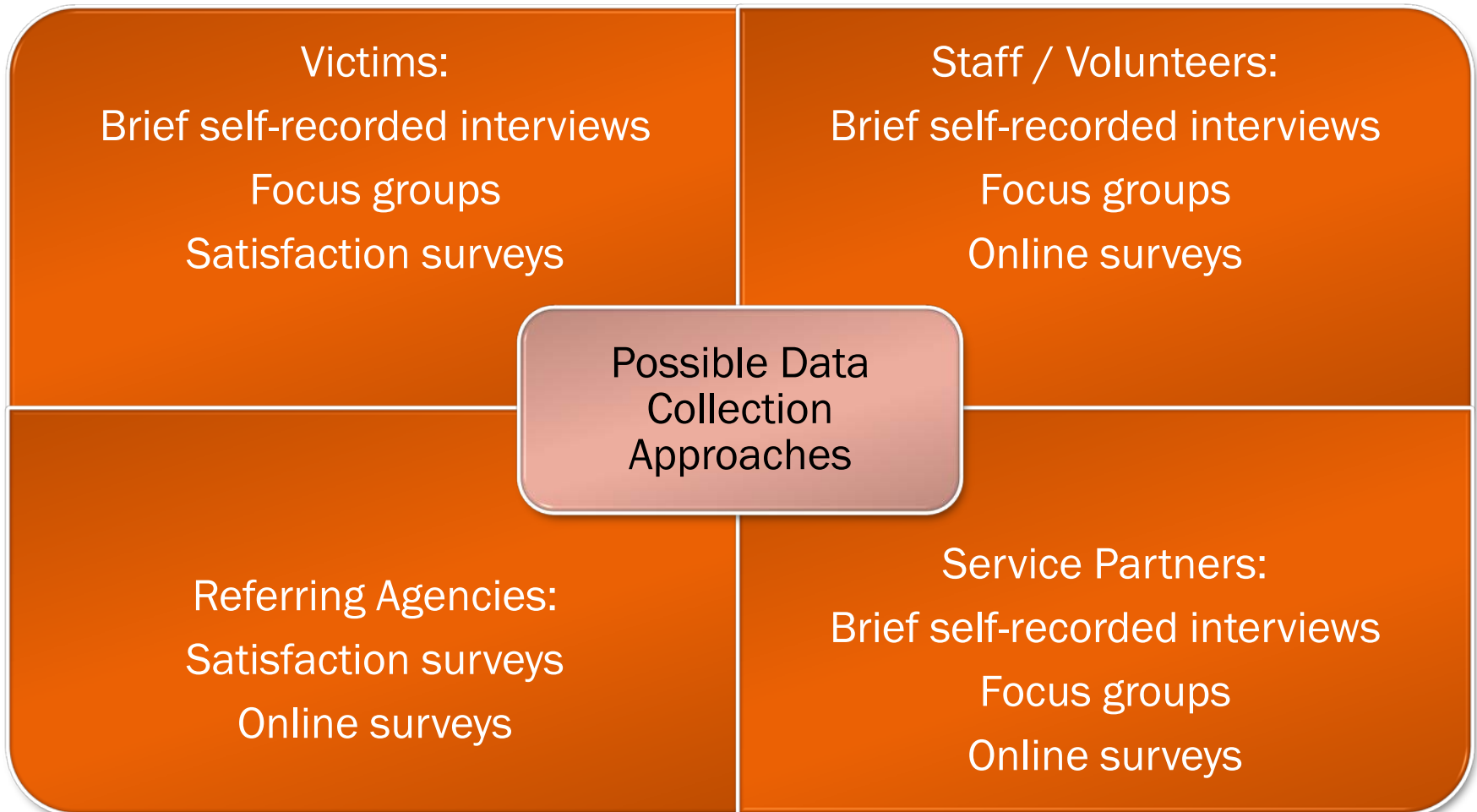
Qualitative

- ✎ Brief Self-Recorded Interviews
- ✎ In-depth/Depth Interviews
- ✎ Focus groups
- ✎ Observations / Walk-throughs by Supervisors / Managers

Quantitative

- ✎ Satisfaction surveys
- ✎ Phone surveys
- ✎ Online surveys
- ✎ Standardized measures
- ✎ Existing record review

What Kind of Data from Whom?



Approaches to Data Collection with Victims/Survivors

Brief interviews

- On-site brief self-recorded interviews
- Short set of questions about services
- Opportunity to share positive & negative feedback

Focus groups

- Run by trusted volunteer
- Held on a regular/quarterly basis
- Open invitation for participation

Satisfaction surveys

- On-site one page survey
- Translated in all relevant languages
- Include open-ended and closed ended questions

Approaches to Data Collection with Referring Agencies, Staff, Partners

Brief interviews

- On-site brief self-recorded interviews for staff, partners
- Record extraordinary program success and particularly difficult cases

Focus groups

- Run by trusted volunteer or staff person
- Held on a regular/quarterly basis
- Open invitation for participation

Online Surveys

- “Check-in” on program implementation
- Keep it brief and confidential/anonymous
- Include open-ended and closed ended questions

Approaches to Data Collection

- ✎ Also consider standardized instruments/assessments:
 - That measure type and severity of domestic violence among victims/survivors
 - That measure collaboration and trust among staff/partners
 - That measure knowledge of domestic violence, abuse, sexual assault among staff/partners
- ✎ If this information can be utilized in practice
- ✎ Resources included at end of this presentation

Data Collection Considerations

Administered by Whom?

- Someone trusted
- Volunteer or staff person?
- Consider level of comfort sharing

Transparency

- Share purpose of collecting data
- Share how it will be used

Confidentiality

- Make clear confidentiality of data
- No use of names when possible (i.e., focus groups)

Data Collection Considerations

Frequency

- On a set schedule
- All the time (satisfaction survey)
- Quarterly (focus groups)
- 1 or 2 times a year (online surveys)

Oversight

- Build into regular program operations
- Assign to appropriate regular staff to administer

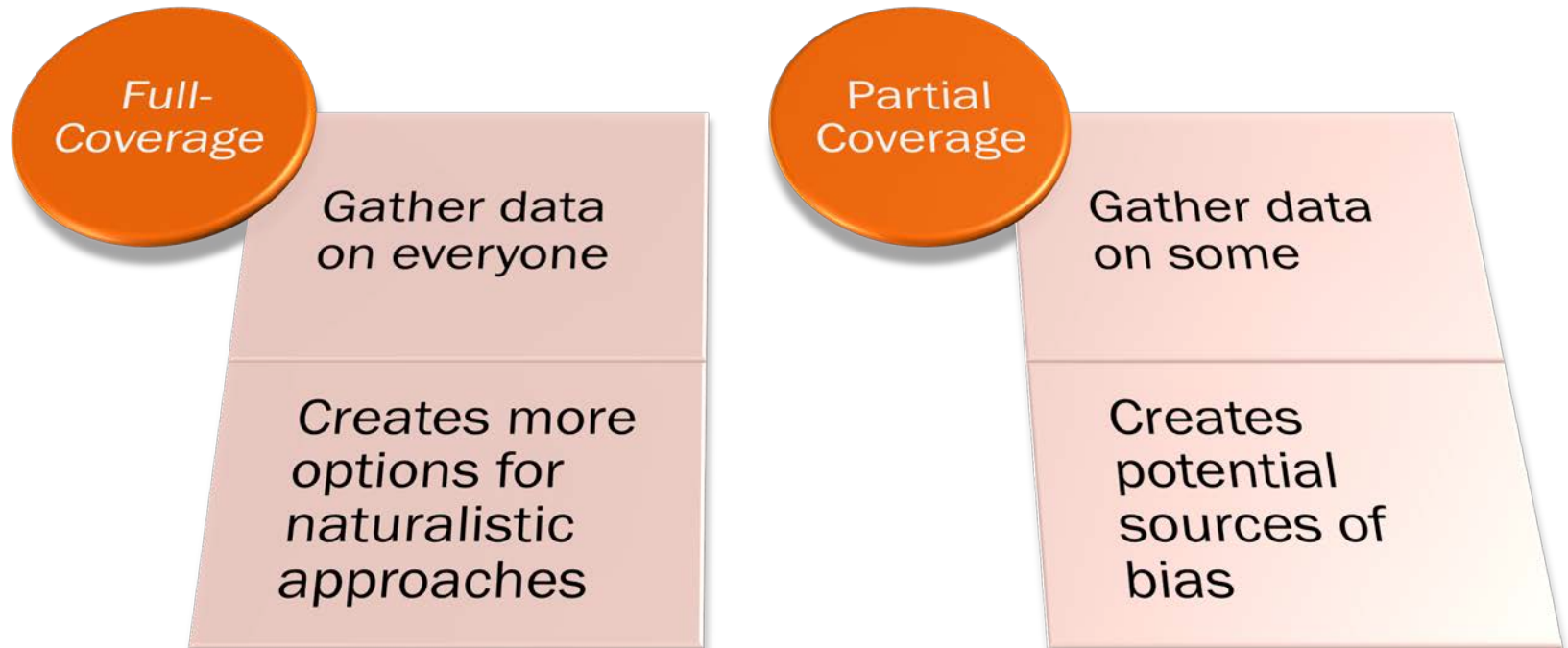
Costs

- Staff time to coordinate and administer
- Staff time to analyze and share results
- Consider use of college interns

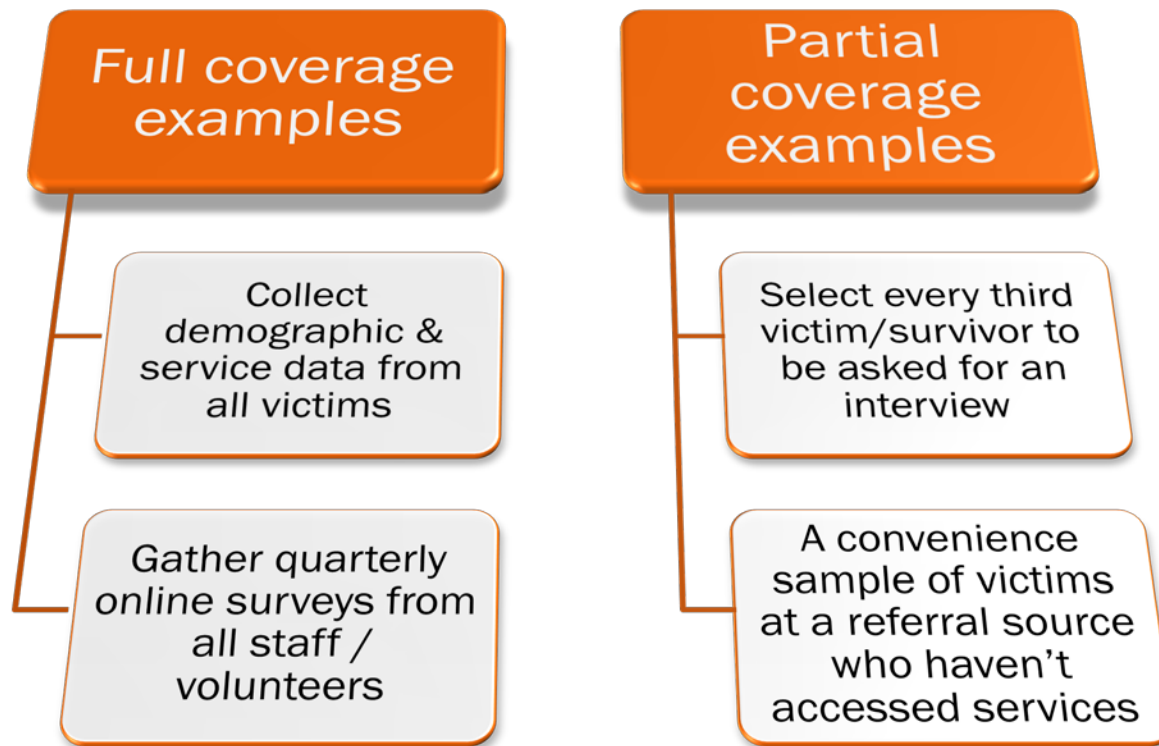
Common Challenges in Data Collection

Determining How to Define a Sample: Full Coverage vs. Partial Coverage

Sampling for Data Collection



Sampling for Data Collection



Key Considerations in Sampling

Minimizing Bias in Sample

- ✎ Use a systematic selection process if possible
- ✎ Every 3rd, 6th, Nth person
- ✎ Or everyone during a particular day, week, month
- ✎ Avoid asking just those participants most willing to share – ask all to share
- ✎ Keep count and some information on all who do & don't participate

Advantages to Full Coverage Sample

- ✎ Everyone has equal chance of participation
- ✎ Builds a representative sample
- ✎ Assures large sample sizes
- ✎ Lessens need for random assignment
- ✎ Can talk about “all” victims, staff, partners

Sampling: How Can You State the Results Based on Different Sampling Approaches?

Full Coverage Sample

- ✎ All clients or all staff
- ✎ Out of all clients served over a one year period, 88% reported high satisfaction.
- ✎ Result has stronger and more clear-cut interpretation

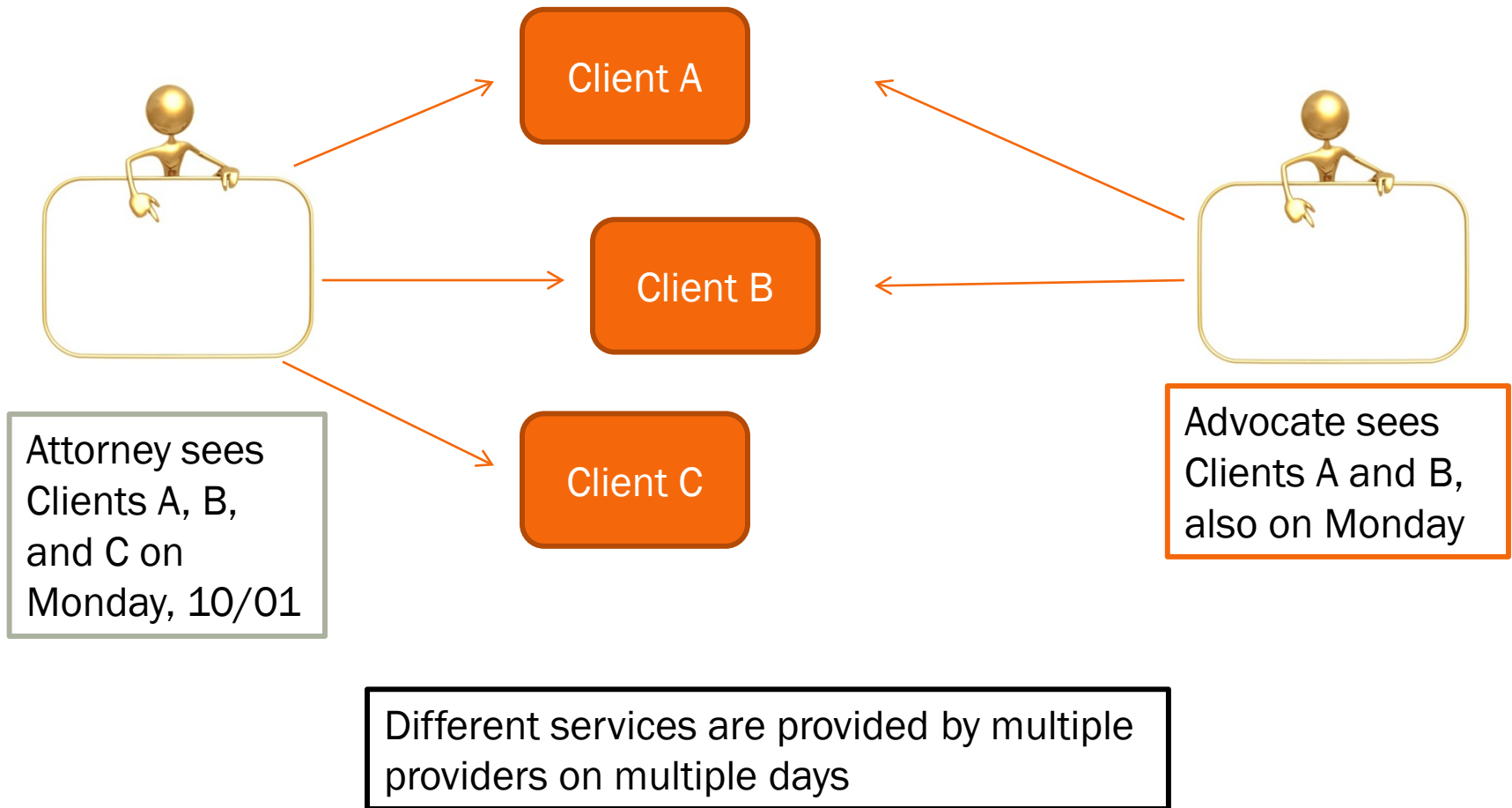
Partial-Coverage Sample

- ✎ Selected clients or staff
- ✎ Among clients who were surveyed, 88% reported high satisfaction.
- ✎ Several questions emerge:
 - Who didn't complete a survey? How many didn't?
 - Why didn't they?
 - Did those who were unhappiest with the services not complete a survey?

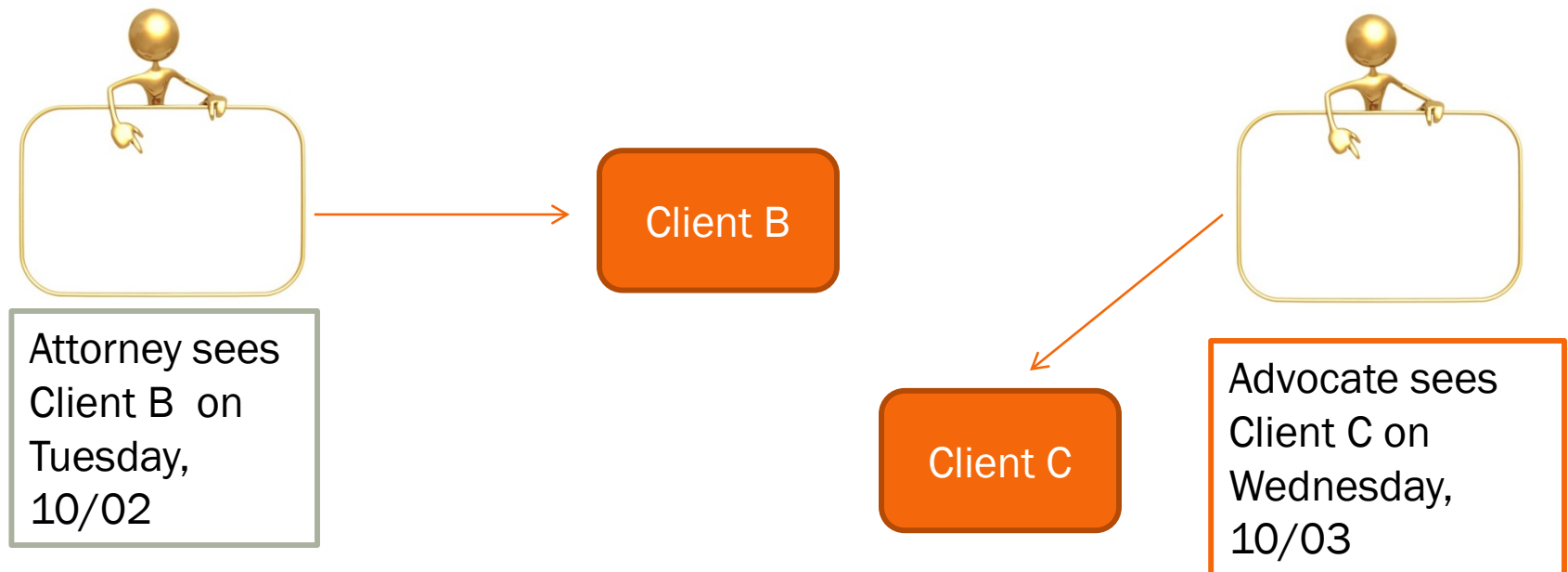
Common Challenges in Data Collection

The Nitty Gritty of Databases:
Why Counting in a Database Can Be
Challenging in a Multi-Agency Environment

Why Counting in a Database Can be Challenging in a Multi-Agency Environment



Why Counting in a Database Can be Challenging in a Multi-Agency Environment



Let's assume for this example that all of these services are recorded in the same database. How would this data look in a database and what can be counted?

Why Counting in a Database Can be Challenging in a Multi-Agency Environment

Client ID	Date of Service	Service Received	Service Provider
A	10/01/12	Family law/ divorce	Attorney
A	10/01/12	Protective order	Advocate
B	10/01/12	Family law/ custody	Attorney
B	10/01/12	Housing/ shelter	Advocate
B	10/02/12	Family law/ immigration	Attorney
C	10/01/12	Family law/ custody	Attorney
C	10/03/12	Protective order	Advocate

One row represents one service contact, creating multiple rows of data per client. Not all databases are set up this way. We'll look at other structures next, but first let's consider how many ways this data can be counted.

Why Counting in a Database Can be Challenging in a Multi-Agency Environment

Client ID	Date of Service	Service Received	Service Provider
A	10/01/12	Family law/ divorce	Attorney
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B	10/01/12	Family law/ custody	Attorney
B	10/01/12	Housing/ shelter	Advocate
B	10/02/12	Family law/ immigration	Attorney
C	10/01/12	Family law/ custody	Attorney
C	10/03/12	Protective order	Advocate

WAYS TO COUNT THIS DATA:

- 7 service contacts
- With 3 different clients
- Across up to 3 days
- With 2 different service providers
- For 5 different services

Why Counting in a Database Can be Challenging in a Multi-Agency Environment

DIFFERENT “STRUCTURES” OR SET-UP OF DATABASES

Client ID	Date of Service 1	Service 1 Received	Service Provider 1	Service Date 2	Service Received 2	Service Provider 2
A						
B						
C						

One-row-per client / “flat” database

Multiple rows of data per client / “stacked” or “long” database

Client ID	Date of Service	Service Received	Service provider
A			
A			
B			
B			

Why Counting in a Database Can be Challenging in a Multi-Agency Environment

Client ID	Date of Service 1	Service 1 Received	Service Provider 1	Service Date 2	Service Received 2	Service Provider 2
A						
B						
C	10/01					
C	10/05					

May not be able to accommodate multiple return dates for one client, resulting in over counting clients

This format can usually accommodate more accurate counts but not all databases are set up this way

Client ID	Date of Service	Service Received	Service provider
A			
A			
B			
B			

Why Counting in a Database Can be Challenging in a Multi-Agency Environment

RELATIONAL DATABASE STRUCTURE NEEDED FOR ACCURATE COUNTS: ONE-TO-MANY RELATIONSHIPS

Client ID (Primary Key)	Intake Date	Gender	Age/DOB	Other stable demographics
A				
B				



ONE ROW: A one-row-per-client table to identify unique clients and stable demographic characteristics that don't change

TO MANY ROWS:

Tables like this that allow multiple rows of data per client for things like service contacts. Data matched on Client ID.



Client ID (Primary Key)	Date of Service	Service Received	Service provider
A			
A			
B			
B			

Why Counting Data in a Database Can be Challenging in a Multi-Agency Environment

- ✂ How do you know the structure of your database?
 - Flat database – one row per client for all data
 - Relational database – one-to-many relationships (among others)
- ✂ One way to find out is to export the data
- ✂ Need to know how your database is set up to understand how counts are done and what can be counted accurately within your database
- ✂ Data can be exported out to do more counts
- ✂ Ideally, your database will produce accurate desired counts but it's important to double-check

Common Challenges in Data Collection

Counting Services Contacts vs. Clients
Served –
Let's Look at a Previous Slide Again

Service Contacts vs. Clients Served

Client ID	Date of Service	Service Received	Service Provider
A	10/01/12	Family law/ divorce	Attorney
A	10/01/12	Protective order	Advocate
B	10/01/12	Family law/ custody	Attorney
B	10/01/12	Housing/ shelter	Advocate
B	10/02/12	Family law/ immigration	Attorney
C	10/01/12	Family law/ custody	Attorney
C	10/03/12	Protective order	Advocate

Recall our example:

7 service contacts represented here

Across 3 individual clients

Which one best tells the story of your program?

Both! But they tell a different story.

Service Contacts vs. Clients Served

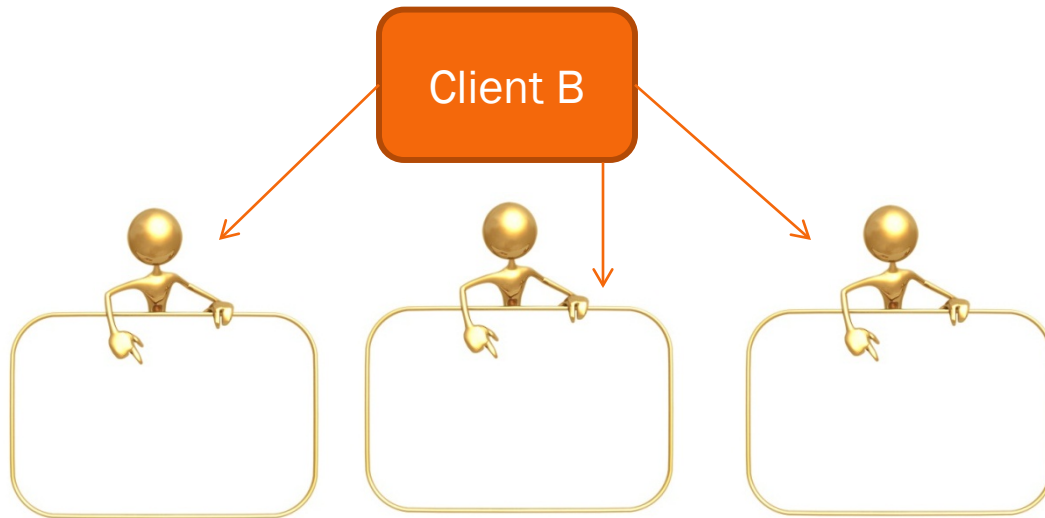
Clients Served (easier to interpret)

- ⌘ How many people did your program serve (in one day, one week, one quarter, one year, multiple years)?
- ⌘ People have unique identifiers
- ⌘ Counts can be added up across time periods (weekly, quarterly, etc.)

Service Contacts (can be interpreted more ways)

- ⌘ Is a service contact defined as...
 - contact with a service provider (for any number of services)?
 - Or as a specific type of service (so multiple contacts are counted with one service provider)?
- ⌘ See next slide for visual representation

Service Contacts vs. Clients Served



Client B sees **Attorney** for **custody** assistance on **Monday**

And sees **Advocate** for **housing** assistance on **Monday**

And sees **Attorney** for **immigration** assistance on **Tuesday**

How are these service contacts recorded in your database?

- As **3 contacts** based on **service type**, regardless of the number of service providers or days?
- Or as **2 contacts** based on the client seeing **2 different service providers**?
- Or as **2 contacts** based on the client seeing 1 or more providers on **2 days**?

Interpretation varies by how you “count” it.

Service Contacts vs. Clients Served

- ✎ No “right” or “wrong” way – but consistency is needed for equivalent comparisons within and across programs
- ✎ Service contacts ARE important but are more difficult to interpret and can easily be misinterpreted
- ✎ Is there a universal definition for service contacts?
- ✎ How are our existing databases “counting” service contacts?
- ✎ How service contacts are counted speaks to they can be interpreted
- ✎ Service contacts are DIFFERENT from numbers of clients served
- ✎ But BOTH contacts and clients are important to count
- ✎ LET’S OPEN THIS UP FOR DISCUSSION

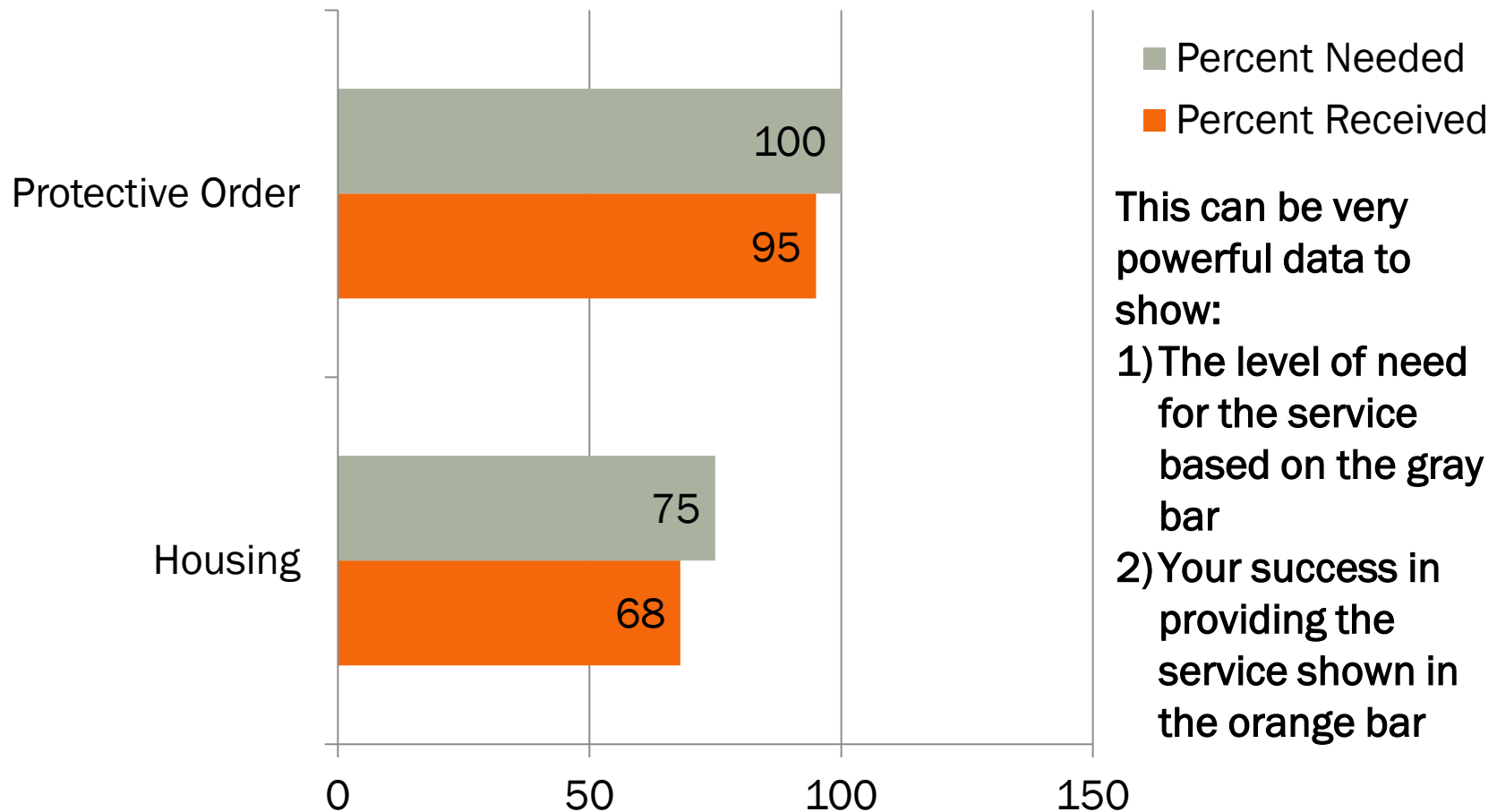
Common Challenges in Data Collection

Services Needed vs. Services Received

Services Needed vs. Services Received

- ✎ How is a service being “needed” established?
 - By the client requesting the service
 - By a standardized assessment
 - By professional judgment
 - Preferably by a combination of 2 or more of the above
- ✎ Why do we need both “needed” and “received”?
 - To show that services WERE provided WHEN NEEDED, documenting successful service provision
 - To identify when services that WERE NEEDED were NOT RECEIVED (and hopefully why they were not received in order to establish the need for more services or more funding)

Services Needed vs. Services Received



Common Challenges in Data Collection

And if that's not enough –
Let's briefly identify some additional
challenges and how they might be
addressed

Additional Challenges and Strategies to Address Them

- ✎ Getting the full picture – gaps in the data by service provider or after hours service provision
 - Collaboratively discuss and resolve together / share data entry resources to the extent possible (i.e., an intern)
- ✎ Access to one database
 - Assigning data entry to one person or a core group
 - Permissions to access to “read” or “write”
- ✎ Motivating staff/volunteers/partners to consistently enter data
 - Using data in brief reports that present “counts” or progress
 - Thanking staff when data is presented
- ✎ Avoiding blank cells (“none” vs. “not applicable” vs. “other interpretation”)
 - Address through training and emphasize worthwhile nature of data in brief reports or presentations of counts of clients, service contacts, and other available data

A General Approach to Support Successful Data Collection in Multi-Agency Service models

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Make it Doable

- ✂ Whatever you do in data collection, do it well!
- ✂ It's better to count a few things...
 - Accurately
 - And consistently
- ✂ Then to set out to count a lot of things
 - And end up with incomplete data
- ✂ Make it doable / feasible / achievable
 - Start small and steadily add to what you count
 - Count a few items consistently for every case all the time
 - Count a lot of items in every case for a short period of time
 - Build in more data elements as capacity builds
 - Involve the appropriate staff/partners/volunteers in development

Share the Data Early & Often

- ☞ Motivate staff, volunteers and partners by presenting the data they were involved in collecting, and thank them for collecting it
- ☞ Make it meaningful to your audience – choose data elements of particular interest
- ☞ Have fun in how you present it – charts, graphs, color, stick figures, pictures
- ☞ Invite feedback on what your audience would like to see
- ☞ Share a little bit of data – one or two charts or graphs or a table – as often as possible at meetings or via email
- ☞ Allow time for people to discuss and interpret the data
- ☞ Use the data to better understand program operations and to sing about your successes!

The Idea of the “Periodic Check-up”

- ✎ Data collection must be a feasible, doable task
- ✎ That occurs as part of regular program operations
- ✎ The “Periodic Check-up” refers to a larger analysis of program data on a periodic basis to see how the program is doing in addressing the problem
- ✎ Be consistent in scheduling your “periodic check-ups” once or twice a year
- ✎ Have set data collection strategies in place to support the use of “periodic check-ups”
- ✎ Results are information for program improvements and documentation of program successes
- ✎ See Kettner, Moroney, & Martin (2008)

In Conclusion: How to “Sing About Your Successes” in Data Collection

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In Conclusion: How to Sing About Your Successes

- ✧ Understand how your database or data system ‘counts’ your data
- ✧ Determine ‘counts’ of people, services, and contacts in the most meaningful way in your setting
- ✧ Involve staff, partners, volunteers, and survivors in the data collection process
- ✧ Use multiple methods of data collection
- ✧ Collect data regularly
- ✧ Report one or two data results regularly
- ✧ Talk about your results!

In Conclusion

Thank you for your attention!

Contact me with questions or comments at:

carrie.petrucchi@gmail.com

Telephone: 818.667.9167

Additional resources follow this slide.

Now it's time for your questions.

Additional Resources

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Materials Referenced, Further Information on Confidentiality

Materials Referenced and Additional Resources

Confidentiality and Coordinated Community Responses:

Tibbetts Murphy, S. (2011). *Advocacy Challenges in a CCR: Protecting Confidentiality While Promoting a Coordinated Community Response*. The Battered Women's Justice Project, Minneapolis, MN.

http://www.bwjp.org/files/bwjp/articles/Advocacy_Challenges_in_a_CCR.pdf

Data collection approaches (and lots more):

- ✎ Kettner, P.M., Moroney, R. M., & Martin, L. M. (2008). *Designing and Managing Programs: An Effectiveness-Based Approach, Third Edition*. Thousand Oaks, CA: Sage Publications.
- ✎ Saltzman, L. E., Fanslow, J. L., McMahon, P.M., and Shelley, G. A. (1999). *Intimate Partner Violence Surveillance Uniform Definitions and Recommended Data Elements, Version 1.0*. Atlanta, GA: Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. (Includes 50 suggested data elements to measure intimate partner violence.)

HIPAA information:

- ✎ http://www.cdc.gov/nhsn/FAQ_HIPPArules.html

HIPAA information specific to non-profit victim service agencies and advocacy:

- ✎ <http://nnedv.org/tools/faq/faq-flc/flc-hippa>

National statistics on intimate partner violence:

- ✎ <http://www.cdc.gov/ViolencePrevention/intimatepartnerviolence/datasources.html>

Full-coverage vs. partial coverage samples:

- ✎ Vedung, E. (1997). *Public Policy and Program Evaluation* (pp. 195-208). New Brunswick, NJ: Transaction Publishers.

Standardized Instruments (mostly in the public domain):

- ✎ Fischer, J. & Corcoran, K. (2007). *Measures for Clinical Practice and Research: A Sourcebook, 4th edition. Volume 1: Couples, Families, and Children; Volume 2: Adults*. NY: Oxford University Press.
- ✎ Thompson, M. P., Basile, K. C., Hertz, M.F., & Sitterle, D. (2006). *Measuring Intimate Partner Violence Victimization and Perpetration: A Compendium of Assessment Tools..* Atlanta, GA: Centers for Disease Control and Prevention, National Center for Injury Prevention and Control.

For Information on Confidentiality in Data Collection for Non-Profits

- ✎ **Technology and Confidentiality Resources Toolkit for Non-Profit Victim Service Agencies & Advocates Working to Provide Safe & Effective Services to Victims of Domestic Violence, Dating Violence, Sexual Assault, and Stalking**
- ✎ **A partnership of the National Network to End Domestic Violence's Safety Net Project, and the Confidentiality Institute, U.S. Department of Justice Office of Violence Against Women**
- ✎ <http://nnedv.org/tools/>

NNEDV Suggested Best Practice for Sharing Information

- ⌘ What is best practice: having a separate release for each agency the survivor's information is being released to or having several agencies listed on one form?
- ⌘ Best practice is to have a separate form for each agency that the survivor's information is being released to. This helps ensure that the survivor is fully informed, both of who is receiving her/his information and of the particular consequences associated with that agency getting the information. If you consistently work with a few particular agencies, individual forms could be developed that lists each agency (e.g., one for Section 8 housing, one for the prosecutor, one for the food bank). The benefits and consequences of the release can then be identified on the form for each agency, in addition to being discussed with the survivor before s/he signs the release.
- ⌘ <http://nnedv.org/tools/faq/scr/faq-basic-release-template>

For Information on Confidentiality and Data Sharing in Coordinated Community Responses

- ✎ See Sandra Tibbetts Murphy's (2011) *Advocacy Challenges in a CCR: Protecting Confidentiality While Promoting a Coordinated Community Response*. The Battered Women's Justice Project. (Available online).
technicalassistance@bwjp.org
 - "...records should be limited to confirmation of the types of services provided to her, such as shelter, legal advocacy, or economic planning. A form with checkmarks indicating services accessed, rather than narrative descriptions of the use of any such services, is much more protective of a battered woman's privacy and safety... (p. 5).
 - http://www.bwjp.org/files/bwjp/articles/Advocacy_Challenges_in_a_CCR.pdf

Questions?

Submit questions via the webinar toolbar

2013 International Family Justice Center Conference

April 16-18, 2013 in Fort Worth, TX

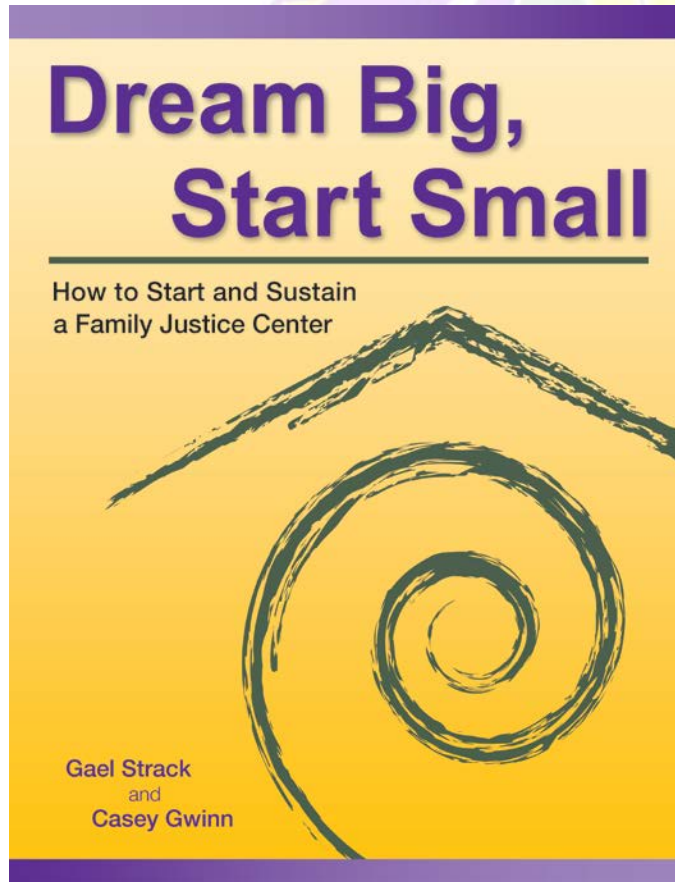


www.familyjusticecenter.org

The three-day conference will include discussions on issues related to the handling of domestic violence, child abuse, sexual assault, and elder abuse cases in the context of the Family Justice Center model.

The conference faculty includes nationally and internationally recognized subject matter experts, advocates, and survivors. During the conference participants will have the opportunity to meet with survivors and professionals who currently work in Family Justice Centers in the United States and internationally.

Dream Big, Start Small: How to Start and Sustain a Family Justice Center



In *Dream Big, Start Small* the visionaries behind the Family Justice Center movement use the outcomes and lessons learned from a decade of starting Centers in the United States and around the world to show the road to a better way to help victims of violence and abuse- by bringing all the community services for family violence, elder abuse, stalking, and sexual assault under one roof. Any community can do it. *Dream Big, Start Small* will show you the way.

Go to the “Store” at www.familyjusticecenter.org to purchase *Dream Big, Start Small*



Thank You

Thank you for joining today's presentation

Family Justice Center Alliance

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**Reminder: This presentation will be available for download on the Online Resource Library within one business day*



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Dr. Carrie Petrucci, MSW, Ph.D. is a Senior Research Associate at EMT's Los Angeles office. She has over 10 years of experience in evaluation research with local, state, and federal agencies. Throughout her career, she has specialized in working in collaborative interdisciplinary criminal justice and public health/social welfare settings that target disadvantaged populations with multiple needs. These have included projects with victims/survivors of domestic violence, reentry populations, and populations with high poverty and co-occurring mental health and substance use disorders. She has also conducted evaluation research with Judges and law enforcement.

Dr. Petrucci's content areas of expertise include program development, practice-based collaborative evaluation, mixed methods, concept mapping, and implementation and program fidelity. She is experienced with several data analytic software programs including SPSS/Paws, Stata, Concept Systems,[™] and was recently an invited beta-tester for NVivo 10.0, a leading qualitative and mixed methods software. She is currently Co-Principal Investigator for a statewide evaluation of the California Family Justice Initiative, including 8 Family Justice Centers. She is also the Lead Evaluator for several SAMHSA CSAT/CMHS local service grants providing outpatient substance abuse treatment programs including Assertive Adolescent and Family Treatment programs, Offender Reentry Programs, and a Services in Supportive Housing program. Other current projects include an evaluation of a jail-based visitation program for families involved in the child welfare system, and an after school program for children impacted by incarceration. Past projects include evaluations of 20 SAMHSA CSAT-funded Adult Treatment Drug Courts (ATDC), two DUI courts, and a domestic violence court. Her prior statewide evaluation experience includes an evaluation of 45 Child Abuse Treatment Programs (CHAT) and an evaluation of 7 Law Enforcement Specialized Units (LESU's), both conducted for the California Governor's Office of Criminal Justice Planning (OCJP).

Before doing evaluation full time, Dr. Petrucci was both a part-time and full-time faculty member at California State University in the social work department where she specialized in master's level courses on macro social work which included needs assessment, program development, and evaluation and research of social service agencies. Prior to her academic and research career, Dr. Petrucci was a children's social worker in South Los Angeles and a program director in community corrections in San Francisco. Her most recent publications include a critical literature review of the use of sanctions and rewards in DUI courts published in the *Transportation Research Circular*, a descriptive longitudinal analysis of a domestic violence court in *Victims & Offenders*, and two articles in *Journal of Social Service Research*, one on the use of multinomial logistic regression for practice-based research and the other on concept mapping. She has also published several chapters on therapeutic jurisprudence, most recently in David Springer and Al Roberts' *Juvenile Justice and Delinquency*.



National Family Justice Center Alliance
Webinar Training

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Presented by Dr. Carrie Petrucci

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