A photograph of a woman lifting a baby into the air, with a blue overlay. The woman is looking up at the baby with a smile. The baby is wearing a dark, fuzzy outfit. The background is a bright, outdoor setting with trees.

Data Playbook for Prevention Action Planning



Safe & Sound
April 2022

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Introduction: About the Data Playbook for Prevention Action Planning

Dear California Prevention Planning Colleagues:

The stars are aligned to put prevention of child maltreatment front and center. With unprecedented resources, public awareness, new legislation, and policymaker support, county leaders and community partners are engaged in developing comprehensive prevention action plans. A critical element to an effective, meaningful, and measurable plan is understanding and using data.

[Safe & Sound](#), a San Francisco-based organization dedicated to strengthening families and ending child abuse, partnered with both the [California Office of Child Abuse and Prevention](#) (OCAP), [Strategies Technical Assistance](#) (formerly Strategies 2.0) and county teams from across the state to create the Data Playbook for Prevention Action Planning, a guide on how to use data for prevention planning. From our collective experience, we realized how common it has been for prevention planning teams to feel overwhelmed by utilizing and engaging with community data. We hope this guide will help to shorten and sharpen your planning work with the goal of true progress in preventing child maltreatment.

The first chapter addresses planning for what data may be most relevant to your prevention planning team and recommends several sources for accessing existing community data. The second chapter outlines how to engage

your community by collecting new data and involve a broad coalition in making sense of your results. The third and final chapter provides guidance on how you can turn this data into a compelling story that raises awareness of child abuse and gains the support of other community members.

Many of you who may be referencing this guide are veterans of work that began in January 2019, when OCAP, the County Welfare Directors Association, and Strategies 2.0 brought together 22 counties in California in an historic Prevention Summit to engage in prevention action planning. The goal for these cross-system county teams was to engage, learn, and share with each other in developing data-informed plans to prevent child maltreatment. Since that time, these counties and many more, have been actively engaged in prevention planning.

Fast forward to 2022. California has now opted into the [Family First Prevention Services Act](#) and enacted [Assembly Bill \(AB\) 153](#)¹ that offers counties an additional opportunity to create comprehensive prevention plans with community partners, supported by federal funding and state funding to address the causes — not just the consequences — of child maltreatment.

The pandemic, racial reckoning, and growing acknowledgement of the impact of structural racism has made it crystal clear that we must work together to identify and promote community assets to reduce stress, strengthen families, and allow all children to thrive. We have an opportunity to transform the way we invest in children, families, and communities by working together.

We all have a role to play to stand up, speak out, and create communities where every child in California has the opportunity to reach their full potential.

Very truly yours, Safe & Sound

Acknowledgements

Safe & Sound has written the Data Playbook for Prevention Action Planning with Paul Collier as the principal author and counsel from Katie Albright and Jenny Pearlman. Annabelle Ison graphically designed the cover and layout throughout.

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- Key staff from California’s Child Welfare Learning & Evaluation Bureau, including Bronwen Wade;
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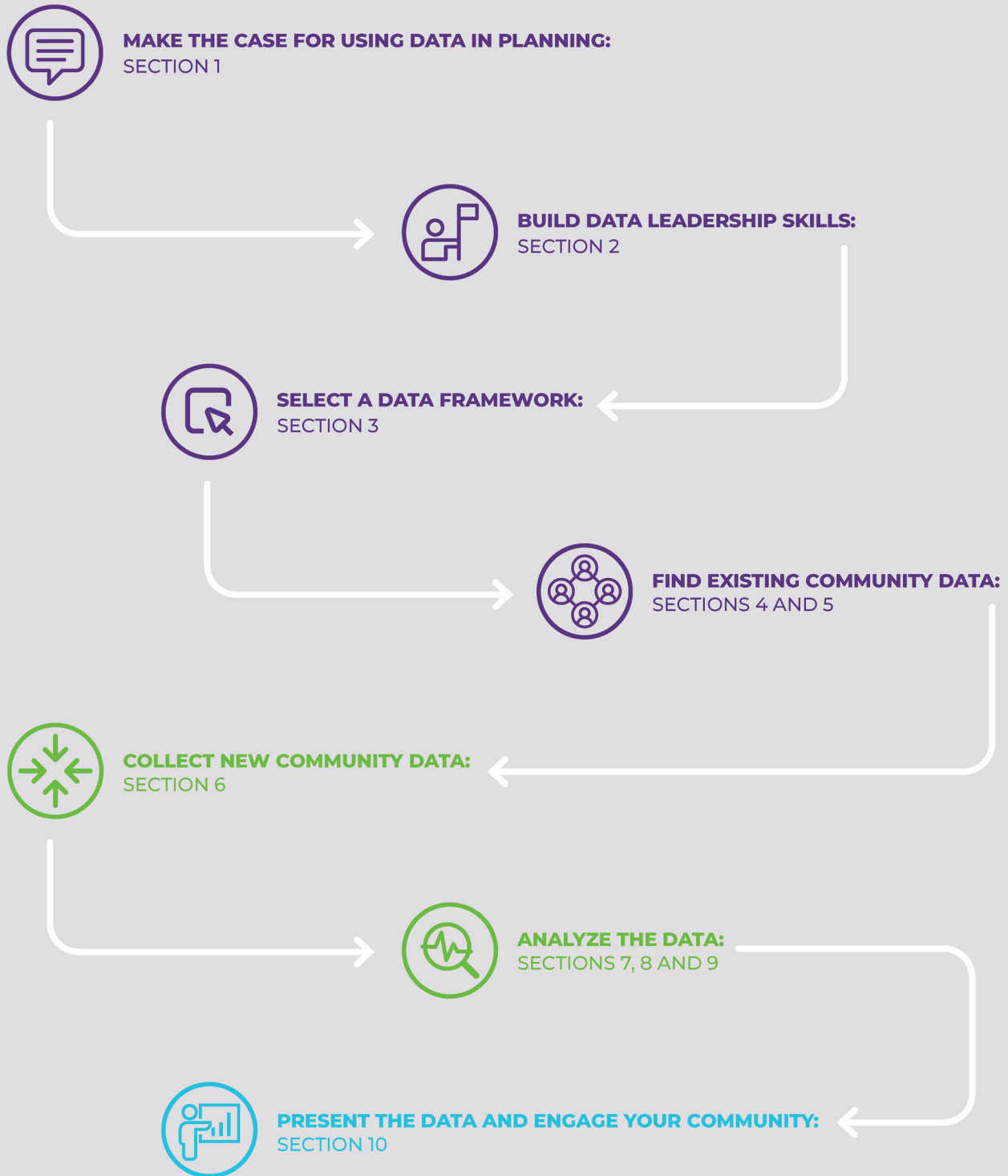
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In addition, we want to thank members of several prevention planning teams from around the state of California for sharing how they leverage data to plan their child maltreatment prevention efforts:

- Contra Costa County: Carol Carillo, Jagdish Majju, Kathy Marsh, Robbyn-Nicole Livingston, Jacqueline Lopez-Padilla, and Adriana Reyes.
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Your Playbook for Using Data in Prevention Action Planning





Chapter 1: Plan for Success



SECTION 1: MAKING THE CASE

Why is using data important when planning for prevention?

Utilizing community data in child maltreatment prevention planning has many benefits.

First, reviewing community data helps prevention planning teams create a **holistic** prevention strategy. Timely and reliable data can help your planning team zoom out to identify the geographic areas, systems, and families in your community facing the greatest challenges. Often, the process of reviewing community data helps prevention planning team members see other resources or opportunities for partnership of which they were previously unaware.

Looking at community data also helps planning team members determine how to **focus** their prevention efforts.² Data use across the systems serving these families, including education, behavioral health, public assistance, Local Health Departments, community coalitions, and probation to name a few, can help all parties involved to utilize more targeted approaches.³ Data helps each prevention planning team create a **Theory of Change** for how to promote child wellbeing in their community. Additionally, once a focus is identified, data can help teams to track progress toward prevention goals and understand whether their Theory of Change was accurate.

Benefits of using data for prevention planning

- Create holistic prevention strategies
- Focus prevention efforts for greater impact
- Create a realistic Theory of Change
- Communicate the importance of prevention

Lastly, reviewing data helps prevention planning teams engage stakeholders and **communicate** the importance of child maltreatment prevention efforts. Compelling data, presented alongside stories from community members, can engage new audiences who might not see their work as contributing to prevention, but have an important role to play nonetheless.

Why does all of this matter? Ultimately, coordinated prevention planning (supported by data) can help you build a more supportive community that helps struggling families find stability and ensures all children, families, and communities can reach their full potential.

Who is this playbook designed for?

The Data Playbook for Prevention Action Planning is designed for members of prevention planning teams across California. A prevention planning team consists of a multidisciplinary team of partners, including individuals with lived experience, personnel/staff dedicated to responding to or preventing child maltreatment, and other community members that can support the expansion of primary and secondary prevention infrastructure to bolster prevention planning efforts.

Current county prevention planning teams are co-chaired by leadership from child welfare and the county's Child Abuse Prevention Council (CAPC). Once that partnership is formed, the two agency leaders select other members to join the team. Teams are encouraged to form a membership of public and private agency decision-makers who are committed to

strengthening prevention efforts. Teams may include members from public health groups, Local Health Departments, First 5 Commissions, Office of Education, Probation Departments, Departments of Public Assistance, community-based and faith-based organizations, tribal leaders, parent partners, youth advocates, cultural navigators, Department of Housing, Department of Transportation, and Department of Labor to participate as members of the prevention planning team.

While prevention planning teams are the primary audience for this playbook, the strategies and resources outlined here may be valuable to anybody using data to plan policies and services that support child well-being. This may include AB 2083 implementation teams, Local Health Departments and healthcare professionals, education system administrators, and city and county government staff. In addition, with the enactment of Assembly Bill 153, this playbook, could also be a resource for newly formed cross-sector collaborative teams developing a comprehensive prevention plan to meet these statutory requirements.

What do we mean when we talk about data?

In this guide, we use the term "data" broadly. Data are the facts, statistics, and statements collected together for a particular purpose and may be more quantitative (e.g., numbers and counts) or more qualitative (e.g., stories, categories, quotes, or pictures). Data may be information that has already been collected, like census data, or new information your planning team collects from your community during your planning process.

What do we mean when we talk about community?

Throughout this document, we will use the word “community” to refer to the individuals, families, institutions, businesses, and cultural norms that populate a specific geographical area and are tied together through relationships. Community can be defined in many different ways. In child abuse prevention work, specific communities are often defined using geographic parameters such as county and ZIP code, as well as common demographics including age and racial/ethnic identity. When using data in prevention planning, it is vital to collect information directly from community members, especially those with lived experience of adverse community conditions and the systems that are intended to support families and children.

As a small county, what can we realistically do with data?

Regardless of the size of your county and the resources your prevention planning team has, it is possible to review data in a meaningful way. We interviewed members of ten prevention planning teams from large, medium, and small counties across the state of California when writing this playbook. We found that while the challenges faced by large, urban counties differed from those from small, rural counties, all counties can use data to inform their prevention plans. One strong example of a small county using data comes from Shasta County’s prevention planning team, which created and shared an [Adverse Childhood Experiences \(ACEs\) Dashboard](#) designed to educate their community about this important issue.

What to expect from this playbook

This Data Playbook for Prevention Action Planning is designed to make the process of using data for prevention planning easier. Often, prevention planning teams feel overwhelmed by the task of looking at community data. It’s easy for teams to get bogged down in reviewing data, and their prevention planning effort loses momentum before they get to the phase of agreeing on a prevention strategy.

Our hope is that by providing resources and answering common questions, prevention planning teams can use this guide to make their process of engaging with data more efficient. Some questions that this guide answers include:

- What is a data framework, and why is it important?
- How can we use data to identify community strengths?
- How can we use data to identify community needs?
- Why is it important to disaggregate community data to identify areas of inequity?

What is a data framework, and why is it important?

Simply gathering data is not enough to make it useful. A data framework is a structure that organizes data into relevant themes that help others understand and relate to the data. When choosing a data framework, it is important that planning teams consider their different approaches and the data that is accessible for their county.

Examples of data frameworks include the Social Determinants of Health (SDOH), the Building Community Resilience model (BCR), Family Protective Factors, and the Adverse Community Experiences and Resilience Framework. Organizing your community data into one of these frameworks provides a starting point for many audiences. Several other frameworks exist that can help your team to organize the data you collect in order to make best use of the information. A list of examples of potential frameworks to draw from is included in [Section 3](#) of this guide.

How can we use data to identify community strengths?

One important use of community data is to identify and map community strengths, which can be drawn from and enhanced by prevention efforts. Identifying community strengths allows prevention teams to utilize and strengthen resources that already exist in communities and families, thereby empowering their communities and building on existing momentum. The process of identifying and mapping community strengths should include community input and feedback. Strengths can include individuals, organizations, institutions, and community characteristics.

One approach to documenting community strengths is to obtain data related to protective factors that mitigate the risk of child maltreatment. Protective factors at the family and community levels work in concert with one another — their sum is greater than their parts. Within communities, important protective factors include equitable access

to essential needs, social support and connection, a strong social contract, and racial and social justice.⁴ For individual families, relevant protective factors include parental resilience, knowledge of parenting and child development, access to concrete support in times of need, the social and emotional competence of children, and access to resources that can help families build and strengthen protective factors.⁵

[Section 5](#) of this guide outlines several reliable sources of third-party data which planning teams can use to access existing data on community strengths, and [Section 6](#) outlines approaches to gathering new data related to community strengths.

How can we use data to identify community needs?

It is also possible to use data to document and address community risk factors that increase the risk of abuse or neglect. Researchers have identified elements that correlate with child maltreatment, and shed light on root causes of family stress and trauma.⁶ These factors include (but aren't limited to) family composition, economic stability, substance abuse, mental health, prenatal health and care, education, access to care and public safety. Looking at data from across these areas helps prevention planning teams identify major concerns, and provide direct interventions to areas or groups where risk factors are especially high. More information on commonly reviewed community risk factors can be found in [Section 4](#) of this guide.

Why is it important to disaggregate community data and identify areas of inequity?

Regardless of what data prevention planning teams choose to look at, disaggregating that data by geography, race and ethnicity, and other factors can help team members target their prevention efforts even further. Often, drilling down to a more granular level unmask insights that aren't apparent when looking at state-level or even county-level data.

Disproportionality refers to when a group's representation in a particular category exceeds expectations for that group. For example, many counties find that community conditions that support family well-being are not equally distributed along racial lines, with non-white families experiencing a disproportionate number of adverse conditions. Disaggregating data reveals where disproportionalities exist in your community.

Many prevention planning teams use maps to illustrate where children live, where resources are located, the institutions they interact with, and where resource gaps exist. These maps help teams focus on certain demographic characteristics, neighborhoods or areas that are under-resourced, even if the county as a whole has a wealth of resources for families. Other planning teams have disaggregated child maltreatment data by allegation type, so they can describe the varied nature of child abuse” and explore whether prevention efforts sufficiently address neglect, which is the most common kind of child maltreatment in most areas. More information on how to effectively disaggregate data can be found in [Section 7](#) and [Section 8](#) of this guide.

How have communities used prevention planning data?

In preparing this guide, we spoke to prevention planning teams from across California to highlight how groups like these are already using data with positive effects. In addition to contributing to a more holistic and proactive prevention plan in general, teams shared several specific stories about how data helped them focus their efforts and win resources. For example:

- **Contra Costa County** was able to collect new child mental health data to confirm their teams' hypothesis about which geographic areas were under-resourced. This data helped one prevention planning team member win a grant to fund an expansion of their programming in schools in those under-resourced areas.
- The **Shasta County** prevention planning team used existing data on adverse childhood experiences to win funding to provide additional Adverse Childhood Experiences education for child welfare staff.
- The **San Diego County** prevention planning team used data about where existing services were located to ensure team members were complementing and not duplicating existing services. This data also helped them fine-tune their coordination with other community providers, and apply for new funding.

We hope this guide will help your prevention planning team use data to achieve similar results. The remainder of this first chapter on “Plan for Success” explores skills your team can build to engage effectively with data, and resources for organizing and accessing community data for your prevention plan.



“I think it’s about helping families before it gets to child welfare. We need leadership from our system (public) partners, private agencies and the community to support and strengthen our families.”

—David Swanson Hollinger, Senior Program Manager, Ventura Children and Family Services and Co-Chair, Prevention and Early Intervention Committee of the California Child Welfare Council



SECTION 2: DATA LEADERSHIP SKILLS AND CULTURE

Data literacy

Data literacy is important for all individuals engaged in child maltreatment prevention efforts. We define “data literacy” here as the ability to understand, discuss, and verify data.

While some prevention planning teams may benefit from having access to a data analyst or epidemiologist, all planning team members will still benefit from having a basic level of data literacy. It is especially important for people in leadership positions to develop a level of data literacy that allows them to interpret data with perspective and context.⁷ Data literacy also helps practitioners and leaders to identify weaknesses in data quality that may lead to an inaccurate understanding of their community. Finally, data literacy helps community members understand how conditions in their county are changing, and helps them connect their experiences to broader trends relevant to prevention planning.

Fundamental Data Leadership Skills

- Communicating the role of data in planning new activities and adapting existing activities
- Integrating data into decision-making processes
- Interpreting data products, including understanding the strengths and limitations of underlying data
- Promoting the importance of data quality
- Having awareness of common biases, including confirmation bias, selection/sample bias, and positionality

Data for planning vs. data for adapting existing efforts

Data can be applied toward two general purposes: planning new efforts and adapting existing efforts.⁸ We use the term “planning” to describe decisions and choices that influence a new course of action. Creating a prevention plan is an example of using data for planning purposes. Other examples of where data can be used for planning include developing a strategy; identifying the activities needed to carry out a strategy; determining a policy agenda to pursue; or establishing new ways of doing business, such as more actively engaging community stakeholders.

Adaptation, in contrast, describes decisions that adapt a course of action that is already in place in an effort to improve the likelihood of success. Using child welfare system data to adjust how, when, and where child welfare agencies respond to allegations of abuse is one example of using data for adaptation purposes. A continuous quality improvement

(CQI) process is another example of data use for adaptation that many prevention planning teams are familiar with. The adaptation process may begin by using data to evaluate the efficacy of current programs and interventions, and may inform decisions regarding funding, capacity building, and resource and personnel allocation.

This guide focuses mostly on data for planning purposes. In general, using data

for planning involves collecting data in three different areas. These include (1) evidence about the problem, (2) evidence about the context(s) in which the problem is to be addressed, and (3) evidence about solutions. Gathering data to answer these questions before putting money, time, and effort into new solutions or initiatives helps to ensure that any prevention plans that are developed will be as effective as possible given the information available.

GATHERING AND ANALYZING EVIDENCE ABOUT:		
THE PROBLEM	THE CONTENT	POTENTIAL SOLUTIONS
<p>What are people expecting?</p> <p>How widespread is the experience?</p> <p>How acute is the issue for those who experience it?</p> <p>What inequities exist across population groups?</p> <p>What are the causes of the problem, including systemic and institutional factors?</p> <p>What alternative ways of framing the problem would lead us to understand the problem differently, or consider additional evidence?</p>	<p>What are the characteristics of the community with whom we are working to solve the problem? Including:</p> <ul style="list-style-type: none"> ● Cultural ● Social ● Political ● Economic <p>What perspectives do different groups have about the problem (e.g., residents, community leaders, organizations, elected officials, etc.)?</p> <p>How might contextual characteristics and perspectives affect potential solutions?</p> <p>What has made other efforts successful or unsuccessful in this community?</p>	<p>How well do existing programmatic solutions fit? How large an effect do they have, for whom and under what circumstances? What do we know about what promotes successful implementation?</p> <p>What, if any, common elements have been identified across interventions that have shown success?</p> <p>What has been learned from past system and community change efforts to solve the problem both about impact and addressing inequities?</p> <p>Given community context, which potential approaches are more likely to be successful and why?</p>

While not the primary focus of this guide, prevention planning teams may decide that adapting existing systems should be an important part of their prevention plans. Similar to data for planning, there are three areas where understanding data can add value for adaptation: (1) evidence about implementation, (2) evidence about consequences, and (3) evidence about impact. Most data collected for CQI or program evaluation purposes can be considered data useful for adaptation, and this information is an important complement to the data for planning highlighted in this guide.

Responsibilities for leaders

For leaders, engagement with data can include:

- Identifying issues to be addressed by data collection
- Applying critical thinking in analyzing evaluation and analytical reports
- Working with evaluators and analysts to interpret results
- Confirming accuracy and fidelity of reports
- Distributing reports to relevant parties⁹

Leaders have a responsibility to model critical thinking for their teams, to set a tone of discernment, and to ask the right questions. Leaders must be able to make informed choices on where data adds value, how it affects different populations, and transparently describe how data influences important decisions. Leaders should constantly be asking, “What data is relevant to this decision?,” “What does the data really say?,” and “What else do we need to know?” For leaders, data answers the fundamental

organizational question of, “How do we know we’re doing the right thing?”

Leaders should be connecting regularly with data and evaluation subject matter experts to ensure that the data collected aligns with what needs to be learned. Institutional leaders can also provide guidance by understanding the limitations of data, keeping in mind that data can reduce but not eliminate uncertainty in decision-making. Similarly, data can typically improve your confidence about the impact of an initiative or a program, but may not definitively prove that this initiative caused changes to occur.

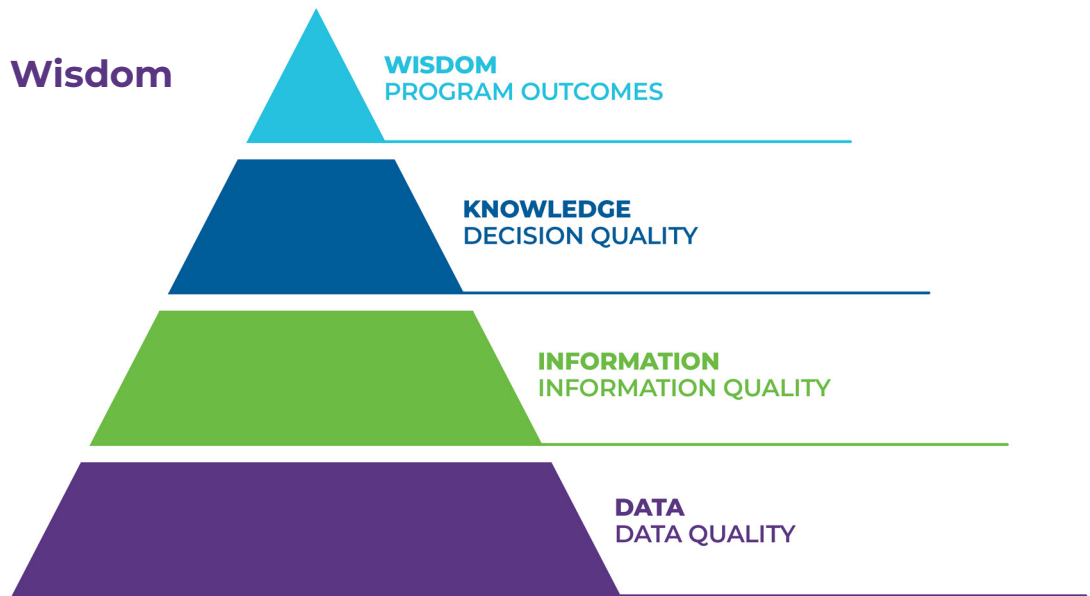
Responsibilities for practitioners

For staff working directly with community members or vulnerable populations, engagement with data may look like collecting and generating data, entering data into templates, reading reports, distributing reports, or engaging with an outside evaluator or analyst. Practitioners must ask themselves the following questions about the data they interact with:¹⁰

- Where does the data come from?
- What are its strengths and limitations?
- What can I learn from it?
- What can I do with it?
- How should I protect it?

Asking these questions regularly encourages critical thinking and helps to reduce the potential for data misuse and misinterpretation. It is important for practitioners to understand that the purpose of reviewing data is to encourage positive outcomes and improve service delivery.

From Data to Wisdom



From data to wisdom¹¹

Data collection efforts have direct impacts on program outcomes. The data we gather (raw figures or text) develops into information (figures put in context) that contributes to knowledge (understanding of a situation). This knowledge informs decisions which contribute to institutional wisdom, ideally culminating in beneficial program results. Because of this natural flow from data to program outcomes, data quality is crucial. Everyone that interacts with data has an opportunity to improve its quality by putting data through a series of checks to confirm that the data make sense, are entered completely and without errors, and do not contain duplicates or blanks. The importance of data quality is part of why all staff need a baseline level of data literacy.

Understanding bias

When interacting with data, part of data literacy is awareness of bias, and the ways in which this bias can influence the knowledge we gain from data. Bias in data is inevitable and is not always the fault of any one person, but awareness of tendencies toward bias can help us mitigate its effects. Some of the most common ways in which bias appears are in confirmation bias, selection bias, and positionality.¹² These biases often interact with and influence one another when present.

- *Confirmation bias* refers to our tendency to interpret data in a way that supports the viewpoints we already have. This type of bias comes down to faulty interpretation. It is all too easy to use data to only confirm pre-existing ideas, and ignore data that challenges assumptions and ways of looking at the world.¹³

- *Selection/sample bias* occurs when the sample data that is gathered or selected for review does not accurately represent the population being studied. This kind of bias is influenced by choices about which data to collect, how different groups engage with systems that collect data, and which data to include and/or exclude.¹⁴
- *Positionality* refers to how differences in social position and power shape identities and access in society, thereby influencing the ways in which we take in information about the world.¹⁵ Positionality can also cause faulty interpretation when we interpret information based only on our privilege and prior experiences, without accounting for factors that might be obvious to someone with a different position in society.

Data leadership skills for prevention planning teams

By participating on a prevention planning team, members take on an important leadership position above and beyond their professional titles. Members have a unique opportunity to better understand data from different sectors in their community. Prevention planning team members have a responsibility to build the data leadership skills noted in this section, and the planning process provides a ready-made opportunity to apply these skills.

In summary, the data leadership skills that prevention planning team members should have or seek to develop include:

- An awareness of the difference between using data for planning and using data for adaptation.
- Skills for integrating data into decisions, including asking questions like, “What data is relevant to this decision, and what does the data say?”
- Skills for interpreting data products, including frequently asking, “Where does this data come from?”, “What can I learn from it?” and “How can I use it?”
- An understanding of the relationship between data, information, knowledge, and wisdom, and the fundamental importance of data quality.
- Awareness of common biases that influence how individuals interpret data, including confirmation bias, selection/sample bias, and positionality.



SECTION 3: DATA FRAMEWORKS FOR COMMUNITY INDICATORS

When using data to plan prevention activities, it is helpful to start with established frameworks that organize community data, as opposed to selecting indicators based on personal preference or intuition. This section includes four examples of such frameworks, including:

- The Social Determinants of Health
- The Center for the Study of Social Policy's Strengthening Families Protective Factors Framework
- The Building Community Resilience Model
- The Adverse Community Experiences and Resilience Framework

These frameworks identify attributes within communities, families, and the environment that can be enhanced and leveraged by prevention planning teams. We opted to highlight these four frameworks because they are often used in practice, address a wide range of community conditions, and highlight community strengths. Using a pre-established data framework is important for three reasons:

1. Data frameworks can create a shared language around what data is important across sectors that traditionally value different data sources.
2. Data frameworks help planning teams examine both community challenges and community assets.
3. Data frameworks help planning teams set a reasonable yet comprehensive scope for what data to review for their community.

When considering which framework to use, keep in mind that each has important benefits and limitations to consider, and that no framework is perfect. When making your decision, see what data is already available in your community. Your Local Health Department can be a great resource to highlight available data that aligns with the framework you are considering.

Frameworks for Organizing Community Data

- The Social Determinants of Health
- The CSSP Protective Factors Framework
- The Building Community Resilience Model
- The Adverse Community Experiences and Resilience Framework

Social Determinants of Health¹⁶

Social Determinants of Health (SDOH) are defined as the conditions that affect a wide range of health risks and outcomes in the places where people live, work, learn, and play. SDOH are specifically linked to place-based and environmental factors. The Centers for Disease Control and Prevention (CDC) currently define the components of SDOH as healthcare access and quality, education access and quality, social community and context, economic stability, and neighborhood and the built environment.

Evidence suggests that SDOH are correlated with the prevalence of child maltreatment.¹⁷ In this study (as is often the case), social determinants of health were framed in the negative (e.g., poverty, housing instability, and food insecurity). Teams using this framework should make a conscious effort to review both community strengths and areas for growth in each SDOH category.

Benefits and limitations of this framework

The components that make up SDOH relate to the resources and assets in any community, including housing, schools, public safety, access to healthy foods, and environmental factors such as prevalence or lack of toxins. SDOH are strongly influenced by the unequal

distribution of money, power, and resources at the local level, as well as nationally and globally.

Research has found that the term “social determinants of health” can lead policy makers to focus on the determinants themselves, rather than the structures, delivery processes, and inequities that have influenced them.¹⁸ For example, the quality and accessibility of healthcare in a community is influenced by public policies that influence health insurance costs, as well as the location of healthcare providers in a community. When using the SDOH as a data framework, it is especially important that planning teams disaggregate community data by race and geography. Teams should acknowledge some of the underlying drivers that impact each SDOH, and any inequities in how they are distributed across a community.

That being said, Social Determinants of Health is a well-established framework that has become a common language among organizations supporting public health. Given that this framework is well-established, it is more likely that your community may have systems in place which track the SDOH components, making the data collection process easier than other frameworks listed here.



Center for the Study of Social Policy’s Strengthening Families Protective Factors Framework¹⁹

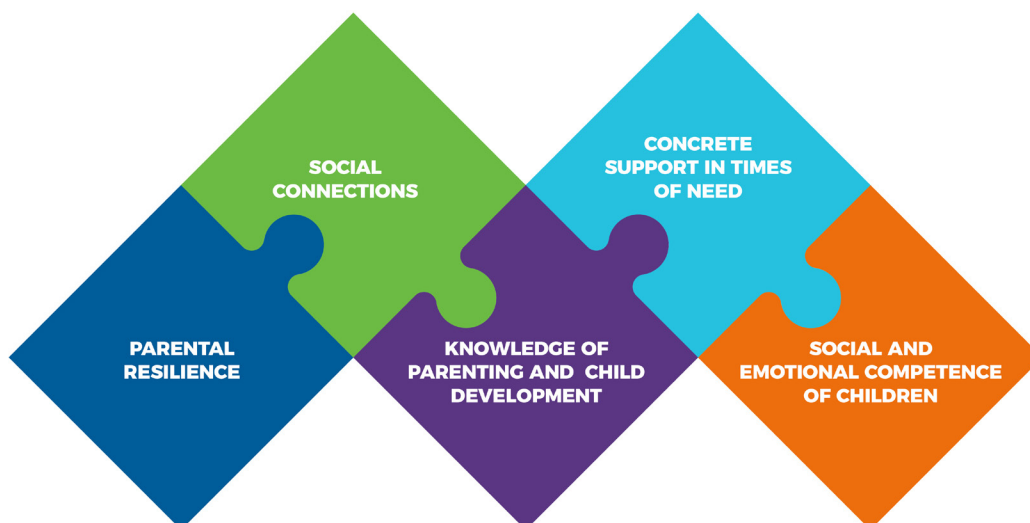
The Center for the Study of Social Policy (CSSP) designed this framework to identify protective factors within families that have been shown to increase the likelihood of positive outcomes for children, and to reduce the likelihood of child abuse and neglect. These are known as the Five Protective Factors, and include (1) parental resilience, (2) social connections, (3) knowledge of parenting and child development, (4) concrete support in times of need, and (5) social and emotional competence of children. This approach is informed by research, and designed to increase family strengths, enhance childhood development, and reduce the incidence of abuse and neglect.

Benefits and limitations of this framework

The Five Protective Factors are well-known and documented among family support organizations, and so referencing this framework will support shared understanding. Furthermore, existing data may be available to assess each of these

factors, and a number of existing parent and family assessment tools exist to help organizations collect data about the five protective factors.

However, while this framework was designed with policy and systemic change in mind, the Family Protective Factors themselves tend to be built and augmented most directly by programs and services offered by the nonprofit sector, child welfare, and early childhood education systems. Therefore, reporting on gaps in family protective factors tends to suggest that more programs in these domains are the appropriate solution. This approach can de-emphasize the importance of family-friendly policies and economic conditions to support systemic change. CSSP has nascent research exploring community protective factors²⁰ that emphasize community conditions that strengthen families, but this research is evolving and is not as well-known as the family-level protective factors.



The Building Community Resilience Model²¹

The Building Community Resilience (BCR) Model focuses on understanding community processes that combat toxic stress and Adverse Childhood and Community Experiences (ACEs). Components of this framework include shared understanding of ACEs and related concepts, a state of readiness among providers and systems, cross-sector partnerships, and community engagement. This framework emphasizes community strengths such as citizen leadership, links between organizations, and a shared understanding of resilience. Unlike other frameworks that emphasize community conditions themselves, this framework focuses on mechanisms that change conditions for children and families. The BCR approach emphasizes [asset mapping](#) as a strategy to identify gaps in services, and focuses on strengthening assets in child health and community systems.²²

Benefits and limitations of this framework

This framework is a newer model compared to the Five Protective Factors or Social Determinants of Health, so it can offer an alternative approach and fresh context. It also emphasizes assets that either exist or can be built in any community. However, a drawback to this newness is that it may be harder to find existing community data that describes each of the four elements of this framework, thus requiring prevention planning teams to collect more new data. This framework has its origin in pediatrics and public health, so it may be perceived as less familiar or credible to audiences outside these fields. Finally, this framework has 3–4 subcomponents per category, so planning teams may find that identifying or collecting data for each subcomponent is time-intensive.



Adverse Community Experiences and Resilience Framework²³

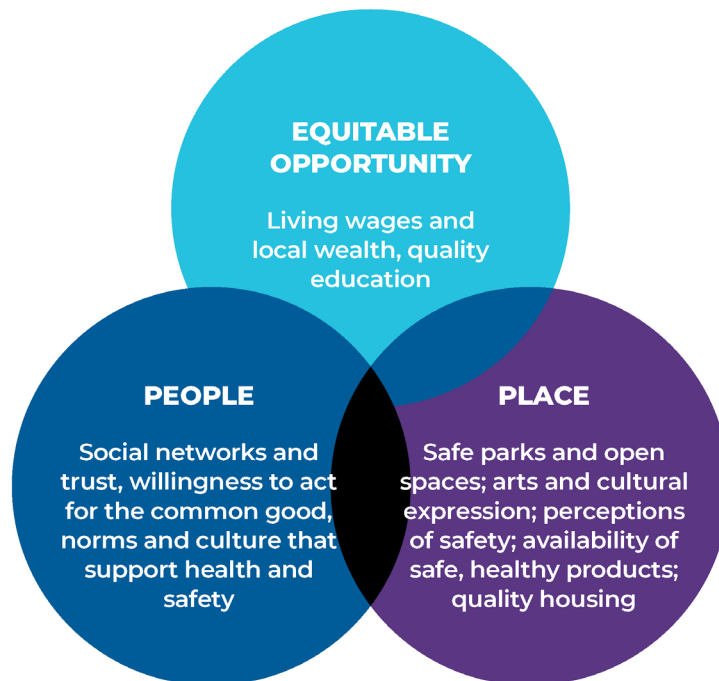
Another community strengths-based framework to consider is the Adverse Community Experiences and Resilience (ACER) framework, pioneered by the Prevention Institute. This framework emphasizes a trauma-informed approach and explores strategies to counter the effects of community trauma. The ACER framework approaches trauma prevention and healing by emphasizing the social-cultural environment (people), the physical/built environment (place), and the economic environment (equitable opportunity).

Benefits and limitations of this framework

This model is unique in its specific focus on trauma, and its effects within communities and across generations. It approaches the

issue of trauma from both a sociological and medical standpoint; this multidisciplinary background supports the credibility of the framework. The Prevention Institute has also published a set of community strategies linked to the elements of a resilient community, which can help planning teams narrow down potential strategies for their prevention plans.

Like the BCR, this framework is newer than the Five Protective Factors or the SDOH, and so has similar benefits and limitations in terms of perspective, available data, and familiarity. Like the SDOH framework, it is important that planning teams disaggregate data collected in each ACER category to uncover inequities that may not be apparent when looking at aggregate community-wide data.





SECTION 4: EXISTING DATA DESCRIBING COMMUNITY CONDITIONS

This section identifies some of the most commonly cited indicators that can be used to describe community conditions, noting specific data points used to measure these indicators for counties across California. Prevention planning teams should choose indicators after choosing a data framework (see [Section 3](#)), based on what fits best with your county's perspective and approach.

For any data framework, counties will likely need to collect some new data to describe framework elements where public data is not available. It is important to look at both negatively-worded indicators that describe undesirable community conditions for families (e.g., crime rates), as well as positively-worded indicators that describe desirable community conditions for families (e.g., education levels). Public data sources tend to focus on more negatively worded indicators, so your prevention planning team may need to make a conscious effort to find or collect data about community strengths.

In this section, we focus on indicators where county-level data is publicly available, and note a few potential data sources for each example indicator. Alternative data sources may exist for these indicators in your county. Note that different sources will provide varying levels of granularity and opportunities for disaggregation (e.g., by geography, race, ethnicity, etc.), and teams may not be able to compile all relevant information through one data source. Finally, counties with significant tribal populations face unique challenges related to accessing relevant data. We recommend contacting the [Office of Tribal Affairs](#) at the California Department of Social Services for specialized guidance on accessing data about these groups.

Common Categories of Community Indicators

- Economic stability
- Substance use
- Housing
- Family composition
- Mental health and access to care
- Child welfare system involvement

Economic stability

Economic stability, or socioeconomic status, is linked to child maltreatment in a number of ways. This category refers to families' ability to meet basic needs, including food, shelter, clothing, and childcare, among other factors. Research suggests that income is strongly correlated with child welfare involvement.²⁴ This is partly due to a family's potential inability to meet basic needs leading to stress within the family, but may also be linked to discrimination and prejudices within the child welfare system. Unemployment is also linked to economic uncertainty and stress for families.²⁵

Below are five indicators that can be used to understand economic stability, and a source with relevant data down to a county level.

INDICATOR	DATA SOURCE
Income volatility	Prosperity Now Scorecard
Households under 200% poverty	Prosperity Now Scorecard
Unemployment rate	Casey Community Opportunity Map
Child food insecurity rate	Feeding America
Earned Income Tax Credit Utilization	PolicyMap

Substance use

Problematic substance use in families often contributes to trauma, strain, fear, and increased risk for child maltreatment. Research shows that children of substance-abusing parents are more likely to experience abuse (physical, emotional, and/or sexual) and neglect in the home.²⁶ Furthermore, data indicate that abused or neglected children from substance-abusing families are more likely to be placed in foster care, and demonstrate worse outcomes within the child welfare system.²⁷

Below are four indicators that can be used to analyze substance use, and a source with relevant data down to a county level.

INDICATOR	DATA SOURCE
Age-adjusted drug-induced death rate (deaths per 100,000 population)	County Health Status Profiles
Alcohol or drug-related emergency department visits per 1,000 population	California Department of Healthcare
% of adults reporting binge or heavy drinking	County Health Rankings and Roadmaps
Alcohol outlets per 1,000 population	County Health Status Profiles

Housing

Excessive housing costs increase family stress, which leads to greater risk for child maltreatment in the home.²⁸ Californians spend a disproportionate portion of their income on housing compared to other states, which can undermine housing stability. Housing instability contributes to homelessness, which is a major driver of family separation.

Below are five indicators that can be used to monitor housing stability, and a source with relevant data down to the county level.

INDICATOR	DATA SOURCE
Housing cost burden	Casey Community Opportunity Map
Work hours per week necessary to rent a 2-bedroom home at minimum wage	Casey Community Opportunity Map
Delinquent mortgage loans	Prosperity Now Scorecard
Home ownership rate	Prosperity Now Scorecard
Affordability of homes	Prosperity Now Scorecard

Family composition

Family structure and composition are linked to rates of child maltreatment and family stability. For example, rates of child welfare involvement are generally higher among younger children, so a community with a greater proportion of infants or toddlers can expect to see greater child welfare involvement than a community whose children tend to be older. Understanding family composition also helps prevention planning teams consider whether new initiatives are a fit for the demographics of families in their community.

Below are five indicators that can be used to appraise family composition, and a source with relevant data down to a county level.

INDICATOR	DATA SOURCE
Children under 18 years	Census Bureau American Community Survey
% Married couple households with own children	Census Bureau American Community Survey
Child to adult ratio	Casey Community Opportunity Map
Single mother families	Casey Community Opportunity Map
Children with a disability	Census Bureau American Community Survey

Mental health and access to care

Families with parents experiencing mental health challenges demonstrate higher risk for child maltreatment, due to a variety of factors.²⁹ Parents facing mental health challenges experience greater difficulties caring for their children, and children of parents working with mental health challenges are also more likely to experience certain kinds of abuse.³⁰

Below are two indicators that can be used to assess physical and mental health, and a source with relevant data down to a county level.

INDICATOR	DATA SOURCE
% of adults reporting 14 or more days of poor mental health per month	County Health Rankings and Roadmaps
Mental health providers per 100,000 population	County Health Rankings and Roadmaps



Child welfare system involvement

In addition to indicators about community conditions, it is important to understand the scale of and trends in child welfare system involvement in your community. Below are a sample of indicators that can be used to understand child welfare system involvement and a source with relevant data down to a county level. Each of these indicators can be disaggregated by child age, race/ethnicity, and sex at birth. In addition, research shows that children who identify as LGBTQ+ are often over-represented in the child welfare system, though few child welfare data sources incorporate information on gender identity.³¹

When considering these indicators, keep in mind that publicly available data about child welfare allegations, substantiations, and entries into foster care can at best serve as a proxy measure for the true rate of child maltreatment in a community. For example, child maltreatment may be underreported in communities where individuals distrust government involvement, or in situations where children engage infrequently with mandated reporters.³² Child maltreatment may be over-reported, particularly for families of color, due to over-surveillance and discrimination in child welfare screening policies.³³

Below are six indicators that can be used to assess child welfare system involvement, and a source with relevant data down to a county level.

INDICATOR	DATA SOURCE
Child maltreatment substantiations	California Child Welfare Indicators Project
Allegations by age grouping	California Child Welfare Indicators Project
Fatalities due to maltreatment	California Department of Social Services (see this page for an email address to contact for per-county data)
Entries to foster care	California Child Welfare Indicators Project
Re-entries to foster care	California Child Welfare Indicators Project
Permanency in foster care	California Child Welfare Indicators Project

Community indicators in your data framework

As we described at the beginning of this section, your prevention planning team should choose indicators after selecting a data framework (see [Section 3](#)). Each of the indicators above can fit within several of the data frameworks we suggest. See [Appendix A: Integrating Community Indicators into Your Data Framework](#) for recommendations on how to map the indicators listed above to each of the data frameworks from [Section 3](#).



SECTION 5: ANNOTATED THIRD-PARTY DATA SOURCES

The section below is designed as an easy-to-access compilation of data sources that may serve as useful tools to prevention teams, including relevant information on each source. These sources will help you populate whichever data frameworks your team selects, to understand the community conditions that impact child maltreatment. These data sources are ordered in terms of relevance to the data frameworks listed above; we suggest you begin with the first few resources, as they contain data that is relevant to all of the frameworks listed in [Section 3](#).

Casey Community Opportunity Map

The Casey Community Opportunity Map is an interactive and customizable tool that displays publicly available community data tailored to user-specified areas in the United States. This map uses data aggregated from multiple sources, including the U.S. Census Bureau’s American Community Survey, the National Low Income Housing Coalition, the U.S. Department of Agriculture, the Bureau of Labor Statistics, and the National Center for Education Statistics. The Casey Community Opportunity Map is designed with the intention of drawing attention to environmental and community indicators commonly associated with child maltreatment, child well-being, and other social determinants of health.

Data Sources for Community Indicators

- Casey Opportunity Map
- Prosperity Now Scorecard
- US Census ACS Community Narrative Profiles
- KidsData
- Strong Start Index
- Children Now County Scorecard
- California Child Welfare Indicators Project
- The Economics of Abuse Interactive Website
- CHHS County Health Statuses Profiles
- PolicyMap

CASEY FAMILY COMMUNITY OPPORTUNITY MAP DETAILS

Who produces this data?	Casey Family Programs
How often is data updated?	Annually
What levels of geography can I filter on?	ZIP code, city, county, state, US Congressional district
What domains of data are included?	Child and family well-being, education, economic factors, housing, and accessibility

Prosperity Now Scorecard

This comprehensive resource features data on family financial health, as well as policy recommendations designed to put all US households on a path to prosperity. It assesses each state on its relative ability to provide opportunities to residents in building and retaining financial stability and wealth, and includes downloadable data graphics and reports.

US Census American Community Survey Narrative Profiles

The American Community Survey (ACS) narrative profiles are brief analytic reports covering a broad range of areas included on the American Community Survey. It is important to remember that the ACS is a different survey than the decennial Census, and is completed by a smaller (but still representative) sample of residents in each county. These narrative profiles provide text and bar charts to help readers visualize estimates for social, economic, and housing-related data for selected geographic areas.

PROSPERITY NOW SCORECARD DETAILS

Who produces this data?	Prosperity Now
How often is data updated?	Varies from outcome to outcome. For example, 2020 scorecard outcomes were compiled between September 2019 and January 2020, and are based on data collected by other organizations between 2013 and 2018.
What levels of geography can I filter on?	State, city, congressional district, county, metro area, tribal area
What domains of data are included?	Financial assets and income, businesses and jobs, home ownership and housing, healthcare and education

US CENSUS AMERICAN COMMUNITY SURVEY NARRATIVE PROFILES DETAILS

Who produces this data?	The US Census Bureau
How often is data updated?	Yearly, with cumulative information from the last five years
What levels of geography can I filter on?	Nation, state, county, county subdivision, place, census tract, ZIP code tabulation area, metropolitan/micropolitan statistical area, American Indian Area/Alaska Native Area/Hawaiian Home Land
What domains of data are included?	Demographics (for example, households and family composition, language, geographic mobility, and education) Employment and the economy (for example, employment status, income, poverty, and participation in government programs) Health insurance coverage Housing data, including housing inventory characteristics and housing costs

KidsData

KidsData is an online compendium of child and youth indicators from across the state of California. It allows users to explore key data points and filter down to specific counties, cities, or school districts. KidsData includes some data points that aren't found in the other resources listed here, such as perceptions of school safety, data on children with special needs, and child behavioral health information. It also includes data points that describe life disruptions and emotional and behavioral consequences of the COVID-19 pandemic.

Strong Start Index

The California Strong Start Index summarizes a wide range of data related to community conditions that affect children into a single score — the index — that highlights neighborhoods where children are afforded fewer resources. The index is based on 12 variables related to family composition, child health, access to services, and family finances. The Index scores can be compared down to the census tract, giving users a very granular view of the varying resources available across their county.

KIDSDATA DETAILS

Who produces this data?	PRB, a nonpartisan research organization
How often is data updated?	Varies from outcome to outcome. For example, as of March 2022, demographic data was available through 2020, and education data was available through 2019.
What levels of geography can I filter on?	County, city, school district, state assembly district, state senate district, U.S. congressional district
What domains of data are included?	Child and youth safety, children with special healthcare needs, demographics, education & child care, emotional and behavioral health, environmental health, family economics, physical health.

CALIFORNIA HEALTH AND HUMAN SERVICES COUNTY HEALTH STATUSES PROFILE DETAILS

Who produces this data?	The Children's Data Network, part of the University of Southern California School of Social Work
How often is data updated?	Annually
What levels of geography can I filter on?	County, census tract, state assembly district, state senate district, city, federal legislative district, school district
What domains of data are included?	The Strong Start Index, a summary of 12 variables related to family composition, child health, access to services, and family finances. Supplementary summaries of maternal and child health and infant mortality are available for each county.

Children Now County Scorecard

This interactive online tool aims to deliver a current and comprehensive picture of children’s education, welfare, and health across all of California’s 58 counties. It tracks and maps key indicators of child well-being across counties, over time, and by ethnicity and race.

CHILDREN NOW COUNTY SCORECARD DETAILS

Who produces this data?	Children Now
How often is data updated?	Biannually
What levels of geography can I filter on?	County
What domains of data are included?	Health, education, child welfare, early childhood, and race

California Child Welfare Indicators Project

The California Child Welfare Indicators Project (CCWIP) is a collaborative venture between the University of California at Berkeley (UCB) and the California Department of Social Services (CDSS). It provides agency staff, policymakers, researchers, and the public with access to critical outcome information on California’s child welfare system. In addition to the data on the public site, county child welfare staff can reach out to the site administrators to access to a private version CCWIP with finer options for data disaggregation.

CALIFORNIA CHILD WELFARE INDICATORS PROJECT DETAILS

Who produces this data?	UC Berkeley and the California Dept. of Social Services (CDSS)
How often is data updated?	Quarterly
What levels of geography can I filter on?	County
What domains of data are included?	<p>Child welfare report data (for example: child maltreatment allegation rates, child maltreatment investigation rates, disparity indices by ethnicity)</p> <p>Foster care data (for example: maltreatment in foster care, permanency in 12 months for children entering foster care, re-entry to foster care, stability, placement days)</p> <p>Health data (for example: timely health and dental exams, children authorized for psychotropic medications)</p>

The Economics of Abuse: A Study of California & its Counties

Safe & Sound, a nonprofit based in San Francisco, creates an estimate of the economic impact of child maltreatment for each county across California. This estimate is based on a peer-reviewed model of the economic impact of child maltreatment, and leverages actual child welfare involvement data obtained from CCWIP (see above), as well as data on the cost of living, income, and other factors that vary from county to county.

California Health and Human Services County Health Statuses Profiles

County Health Status Profiles is a report published for the State of California by the California Department of Public Health, measuring health indicators for all 58 California counties. These data can be compared to national standards and populations of similar composition. Where available, the measurements are ranked and compared with target rates established for Healthy People National Objectives.

THE ECONOMICS OF ABUSE: A STUDY OF CALIFORNIA & ITS COUNTIES

Who produces this data?	Safe & Sound
How often is data updated?	Annually (in early April)
What levels of geography can I filter on?	County
What domains of data are included?	Overall estimate of the economic burden of child maltreatment; breakdown of cost drivers (lifetime productivity losses, healthcare costs, child welfare costs, education costs, and criminal justice costs); and statewide data on risk and protective factors that influence child maltreatment

CALIFORNIA HEALTH AND HUMAN SERVICES COUNTY HEALTH STATUSES PROFILE DETAILS

Who produces this data?	California Health and Human Services
How often is data updated?	Annually
What levels of geography can I filter on?	County
What domains of data are included?	Deaths organized by cause of death Sexually transmitted diseases (for example: reported prevalence of persons living with HIV, reported incidence of chlamydia, gonorrhea, syphilis, etc.) Maternal health data (for example: infant mortality, low birthweight infants, births to adolescent mothers, etc.) Persons under 18 years old in poverty

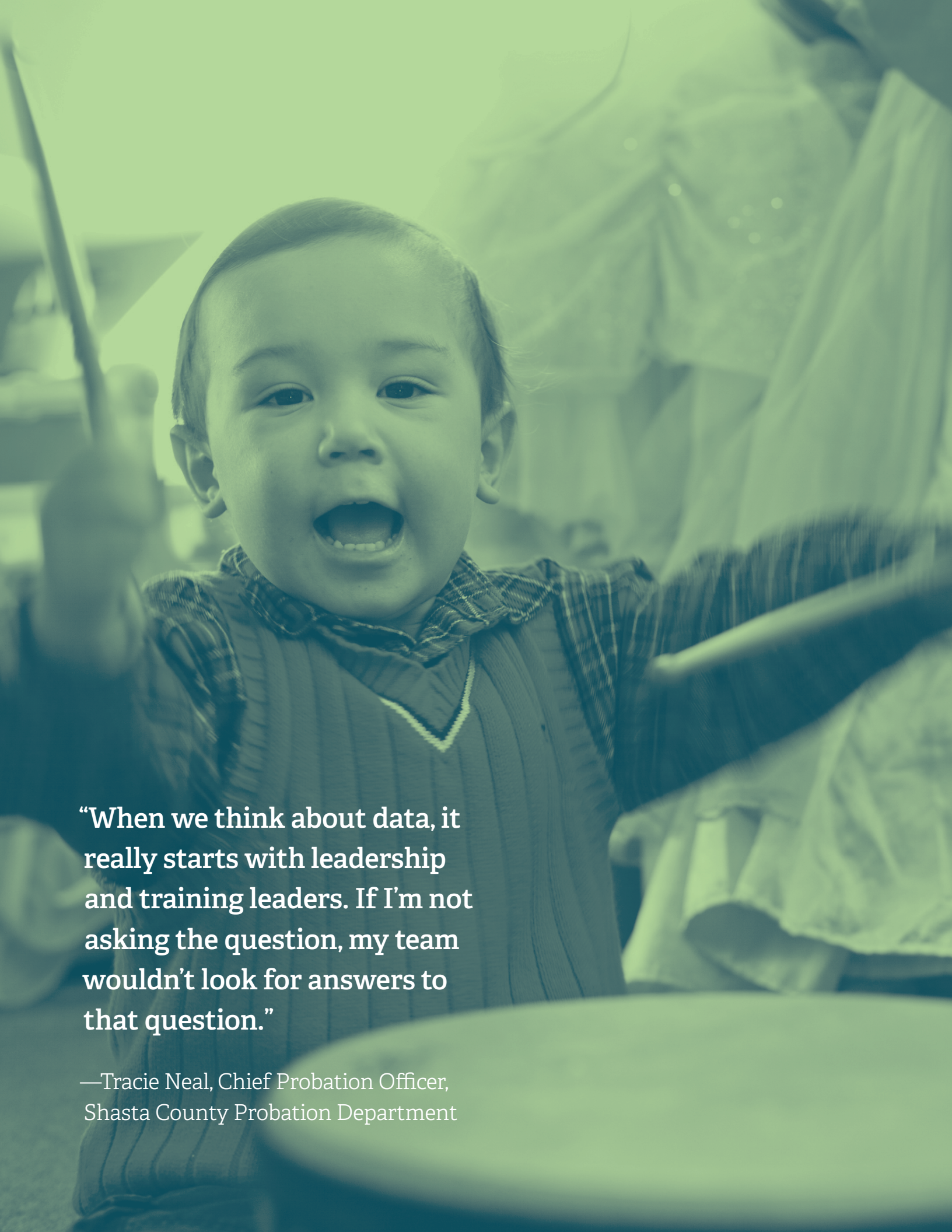
PolicyMap

PolicyMap is a comprehensive mapping resource for any area in the United States. It includes several of the indicators identified in the last section, along with many other data points. Some of the unique data points that can be accessed via PolicyMap include measures of income inequality, food security program enrollment, locations of lending and banking institutions, locations of parks and other resources supporting quality of life, and eligibility for various federal programs.

POLICYMAP DETAILS

Who produces this data?	PolicyMap
How often is data updated?	Varies from indicator to indicator.
What levels of geography can I filter on?	Varies from indicator to indicator, but many can be filtered at the state, county, census tract, and ZIP code level
What domains of data are included?	Demographics, incomes & spending, housing, lending, quality of life, economy, education, health, and federal guidelines



A young child with dark hair and eyes, wearing a dark, ribbed sweater with a patterned collar, has their mouth wide open in a joyful expression. The background is blurred, showing other people and what appears to be a festive or social gathering. The entire image is overlaid with a semi-transparent green filter.

“When we think about data, it really starts with leadership and training leaders. If I’m not asking the question, my team wouldn’t look for answers to that question.”

—Tracie Neal, Chief Probation Officer,
Shasta County Probation Department



Chapter 2: Engaging Your Community



SECTION 6: METHODS FOR COLLECTING NEW DATA

Prevention planning teams will often discover that existing data sources lack some of the key information in which you are most interested. Fortunately, it is possible to use common data collection methods to gather more specific and targeted data from your community.

As a reminder, we recommend that you start by purposefully selecting a data framework that aligns with your team's philosophy and approach. See [Section 3](#) for guidance on commonly utilized data frameworks. Once you have established your working data framework, you should begin by drawing from publicly available community data to begin to create a picture of the child maltreatment landscape in your county. See [Section 4](#) and [Section 5](#) for guidance on sources.

When you have completed these steps and assessed where data gaps exist, you can complement publicly-available data with data that your team collects independently. Data may be gathered by prevention planning team members, by other professionals from the organizations represented on the planning teams, by community volunteers, and/or by hiring an external evaluator. Who should be collecting the data is an important decision, and the best answer depends on the collection method being used and your team's data collection goals.

Common Ways to Engage your Community

- Key informant interviews
- Focus groups
- Surveys
- Community meetings
- Asset mapping
- PhotoVoice
- Community cafés

When considering new data collection, it is important to connect with other community partners to explore what data they may have already collected, and to discuss potential data sharing at the conclusion of the collection process. For example, Local Health Departments are required to collect primary data for community health assessments at regular intervals and may be welcome a collaboration with your prevention planning teams. Local colleges and universities also regularly collect data about the communities they are located in. Taking time to make these connections can ultimately help you collect better data.

Risks in collecting new data

Before collecting any new data, your team should acknowledge that there are risks involved with embarking on any data collection activity. Some of these risks include the following:

- **Representativeness:** It is generally challenging to collect representative data about a community that can accurately be generalized to the full population. Small sample sizes, confirmation bias, selection bias, and positionality (see [Section 2](#) for more on understanding bias) can all affect the quality of data that is collected. However, prevention planning teams should not necessarily use “representativeness” as a standard; data can still be useful, even if it isn’t statistically representative of your population. Planning teams should simply be aware of this concern, and consider who was included and excluded in any new data collection activity when interpreting the results.
- **Accessibility:** Your data collection approach should meet your population of interest where they are. For prevention planning teams, you may be looking to collect data from families who are experiencing adverse community experiences like discrimination, unstable housing, poverty, or community violence. Depending on who you’re looking to engage, you may need to broaden access by providing translation services, collecting information at convenient times outside of normal working hours, providing transportation, and ensuring participant safety. You should also consider compensating participants, especially if your data collection approach requires a significant amount of their time.
- **Fatigue:** Communities, especially marginalized communities, encounter many “asks” for feedback and are often over-surveyed. Too often, those requests are not followed by meaningful action. It is important for planning teams to consider what requests have already been made in their community — in particular, of marginalized families — and what attempts have been made to use existing data before collecting new data.
- **Trust:** People are more likely to provide feedback with individuals and entities they trust. If the entity collecting information is not known and trusted in a community, that entity will face more difficulty in engaging community members. The act of collecting data can build trust (if community members feel heard and see action being taken based on their input) or break trust (if community members feel that their feedback was disregarded or not acted upon).

Common Methods

Key informant interviews (KIIs)

Key informant interviews, also known as key stakeholder interviews, are one-to-one interviews conducted with people selected for their expertise in relevant community issues. These conversations are meant to be

casual so as to gather both deep and broad information, and allow the interviewee to lead the discussion toward what is important to them.

KEY INFORMANT INTERVIEWS		
WHEN TO USE	LIMITATIONS	OTHER CONSIDERATIONS
When seeking to deeply understand behavior and perspectives, gathering recommendations, and when sufficient detail might not show up through other methods.	KIIs can be time consuming; can be susceptible to biased interpretation, and may be difficult to generalize findings from unless a large number of individuals are interviewed.	KIIs should be conducted by skilled interviewers who can engender trust with interviewees. If interviewing system-involved families or community members, interviewers should be skilled in trauma-informed practices.

Learn more in the [USAID Performance Monitoring Guide](#).

Focus groups

Focus groups are similar to key informant interviews, but are conducted in a group setting. They are used to gather information about issues of relevance for people who share demographics or common concerns. People in the groups may bounce ideas off

of one another, thereby sparking topics and insights that may not be gleaned through one-on-one conversations. Focus groups are meant to be free-flowing in nature, may be conducted virtually or in-person, and often last an hour or more.

FOCUS GROUPS		
WHEN TO USE	LIMITATIONS	OTHER CONSIDERATIONS
When considering new programs or proposals, gauging community opinions or interests, and investigating root causes.	Focus groups are vulnerable to selection bias — those interested and available to participate may not be representative of the broader community. There is also potential for conflict to arise within these groups, and differences may be difficult to navigate.	Running successful focus groups requires careful selection of participants, and highly-skilled facilitators. If conducting virtual focus groups, it is important to consider meeting fatigue, and you may want to engage a smaller group (e.g., 3–5 individuals for one hour, instead of 7–10 individuals for two hours). Focus groups may also be limited by COVID-19 considerations. In-person groups may not be safe to conduct, while online groups may limit access to certain populations. It will be important to balance these factors in the planning process.

Learn more in the [Effective Engagement Toolkit](#) on page 39.

Surveys

Surveys are paper, web-based, or telephone-based questionnaires that ask a specific set of questions on a certain topic. Surveys are generally simple to administer, and ensure that the exact same questions are posed in the exact same way to each person taking the survey, thereby mitigating bias and improving reliability of results. Surveys are beneficial for their simplicity, their precision, and for reaching more respondents than is possible through focus groups and interviews. They also provide anonymity, enable statistical analysis and

data visualization, and allow for results to be disaggregated among subgroups.

However, a downside to this ease of administration is that it is common for community members to receive similar surveys from different organizations, leading to community survey fatigue. Before issuing a survey, your prevention planning team should identify any other similar data collection efforts, and coordinate with those groups to minimize this fatigue.

SURVEYS		
WHEN TO USE	LIMITATIONS	OTHER CONSIDERATIONS
When collecting specific data points across a broad group of respondents, some of whom may wish to remain anonymous.	Administering a survey that provides statistically representative results using formal sampling methods can be a high-cost, high-labor endeavor. Simply gathering relevant information from your community can be simpler and less intensive.	Questions must be phrased unambiguously in order to avoid bias and confusion. Surveys should always be tested for clarity and comprehension prior to collecting data. Survey results tend to have less depth and nuance than more qualitative data collection methods.

Learn more about surveys through [The Community Toolbox](#) and on writing survey questions through the [Pew Research Center](#).

Community meetings

A community meeting is a gathering with a specific purpose, usually for the discussion of one or issues of concern to the community. Community meetings can range in size from small groups of 10 or less, to dozens of people. Within these meetings, community

members are given time and space to express opinions and make suggestions in a public forum. Community feedback is recorded, and may even be reported on by the local media.

COMMUNITY MEETINGS		
WHEN TO USE	LIMITATIONS	OTHER CONSIDERATIONS
When building awareness, and to give many community members opportunities to voice their perspective. They can be useful in gauging interest in and feasibility of a proposed project, or for getting community input into an ongoing issue or difficulty.	Some attendants may dominate the conversation (“the loudest voice”), consensus may be difficult to reach if opinions are highly polarized, and conflict may arise when discussing highly controversial issues or when meetings are not well-facilitated.	When considering community meetings as a data collection option, think about what existing community meetings are already hosted in your community. Local governments, schools, and neighborhood groups may have existing meetings where your prevention planning team can engage with community members, or be able to help you with recruiting. Community meetings may also be limited by COVID-19 considerations. In-person meetings may not be safe to conduct, while online groups may limit access to certain populations. It will be important to balance these factors in the planning process.

Learn more through the [Effective Engagement Toolkit](#) on page 72.

Asset mapping

Asset mapping is a process whereby a community's assets are specifically identified, described, and often (but not always) visualized geographically on a map. Assets can include physical structures like community centers and grocery stores, social assets like institutions and groups, and intangible assets like relationships and skills. Creating an asset map involves connecting

with community members and leaders and asking questions like, "Which places (such as parks or businesses) do residents go to most in the community? Do they consider these places assets?" and "What types of (*fill in the blank*) assets exist in this community?" Asset mapping can be conducted through other approaches listed here, such as key informant interviews, community meetings, and focus groups.

ASSET MAPPING		
WHEN TO USE	LIMITATIONS	OTHER CONSIDERATIONS
Asset mapping can help prevention teams tap into and build on strengths that already exist in order to grow indicators of community health and wellness.	Asset mapping can become quite time-intensive if the scope of the assets being mapped or the geography being explored is large (e.g., hundreds of providers may support families in a large county).	While plotting assets on a map is often illuminating, a map-based visualization may not be able to account for resources that can be accessed virtually or in a way that transcends geography (e.g., telehealth or food delivery services).

Learn more with the [Community Research Lab Toolkit](#).

PhotoVoice

“PhotoVoice” refers to a process of collecting photographs as a way to express and illustrate community issues and concerns through images.³⁴ In a PhotoVoice project, community members are recruited to participate, and are asked to photograph their community based on one or a small number of prompts. For example, “Show us the biggest needs in your community,”

or “Show us what is beautiful to you in your neighborhood.” After images are collected, they are used to prompt reflection on questions like, “What do you see in this photograph?” and “What can we do to address this problem?” They may also be put on display as public works of art. PhotoVoice projects are effective advocacy and community engagement tools, and are designed to be participatory.

PHOTOVOICE		
WHEN TO USE	LIMITATIONS	OTHER CONSIDERATIONS
PhotoVoice projects are primarily used for communication and community empowerment purposes, but may also result in illuminating previously hidden issues.	Recruiting participants and sustaining engagement in PhotoVoice projects can be time-consuming. Photographs will represent the point of view of the photographer, and it is important that participants take care not to misrepresent their communities.	PhotoVoice may require that the facilitator provide cameras if participants do not have access to their own. In addition, it is important to gain consent from any human subjects featured in photographs prior to including their photos in a PhotoVoice project.

Learn more on the [PhotoVoice homepage](#).

Community cafés

Community cafés are facilitated conversations planned and led by family members who have been trained in this approach. Conversation leaders can relate to participants through shared demographics such as gender, age, parental status, socioeconomic status, shared geographic area, and profession, among others. Community cafés are meant to strengthen relationships within families

and communities and build grassroots leadership to address social and economic concerns. It is a strengths-based approach, and endeavors to bring community wisdom to light and make it explicit. These conversations can be conducted virtually, but will ideally be in-person, safety considerations notwithstanding. The World Café outlines [principles for hosting community cafés](#) on their website.

COMMUNITY CAFÉS		
WHEN TO USE	LIMITATIONS	OTHER CONSIDERATIONS
Community cafés are meant to build on one another, as facilitators identify potential future conversation leaders that they may train to continue the conversation in a different context led by a different family.	Community cafés are generally designed to build community, strengthen relationships, and identify community leaders. Data collection is typically a secondary concern of this approach; however, the information that comes from these conversations can be rich and informative, and members of prevention planning teams can learn by observing and debriefing these cafes.	Prevention planning teams can initiate a community café as a partner, but community members themselves are meant to be the facilitators and leaders. It is important that prevention planning team members understand their role in this process without taking over.

Learn more on the [Community Café Collaborative homepage](#).

Other Approaches

Many other potential approaches exist to engage community members in your prevention planning process. We discuss approaches for reviewing data with community members in [Section 9](#) of this guide. Two other excellent resources that explore a greater number of community engagement approaches include:

- [Effective Engagement: Building relationships with community and other stakeholders](#), published by the Australian State of Victoria's Department of Sustainability and Environment.
- [Futurewise Community Engagement Toolkit](#), published by Futurewise in partnership with Public Health Seattle & King County.



SECTION 7: DISAGGREGATING DATA TO UNDERSTAND SUBGROUPS

Benefits of disaggregating data

To disaggregate data means to explore community indicators that have been broken down to represent subpopulations of your community, versus taking in information for the county, state, country, etc. as a whole. Disaggregating data is important for a number of reasons. For one, disaggregating data reduces the risk that data about your community are misinterpreted. Sometimes, trends in data aggregated across your community can be quite different from trends for specific subgroups (this is known as [Simpson's Paradox](#)). For example, exploring outcomes through the [Prosperity Now Scorecard](#) shows how different one particular county's data can be from an entire state's. Drilling down further to the county level, ZIP codes or census tracts can unmask concentrated pockets of need that require attention, even when your community as a whole is doing well in a particular area.

Disaggregating data also reveals disproportionalities — situations where a group is significantly over- or under-represented in a particular category. For example, many counties find that community conditions that support family well-being are not equally distributed along racial lines, with non-white families experiencing a disproportionate number of adverse conditions.

When planning teams interpret data accurately and understand disproportionalities, they are in a stronger position to dedicate time and resources to the people and communities that need it most. This process can include helping teams choose which evidence-based interventions to select (e.g., if they have been evaluated with a similar population) and identifying important behavioral differences between groups. Disaggregated data can also provide evidence to support advocacy for specific policy changes and funding, and is considered an important tenet of [anti-racist data practices](#).

Why Disaggregate Data?

- Avoid misinterpreting community trends
- Identify disproportionalities
- Dedicate resources to groups that need it most

Cautions when disaggregating data

One challenge when disaggregating data is the risk of making generalizations based on small sample sizes. Being aware of this risk is an important first step. Another strategy that can be helpful is to display and visualize counts of individuals (in addition to percentages of a population) when the number of individuals in several categories are small (e.g., less than 20 individuals).

Confidentiality is also a risk with small sample sizes. Details from these samples may be so specific that individuals are easily identifiable. [Data De-identification Guidelines](#) adopted by the California Department of Social Services require that any metric representing between 1 and 10 individuals be masked on all public-facing resources, in order to protect the confidentiality of individuals served. Following this same guideline can help your prevention planning team maintain confidentiality and build community trust. One way to mitigate this risk is to use data visualization tools such as heat maps, rather than referring to individual data points.

A third challenge to disaggregating data is the potential for inconsistent definitions of subgroups. Different data sources may use different breakdowns for categories. For example, one agency may categorize “youth” as individuals ages 18–24, while others may define this as individuals ages 15–20. Being aware of this potential challenge will help your team identify areas where data sources differ.

A final, important challenge when disaggregating data is understanding that correlation doesn't imply causation. When disaggregating data, you will see trends and patterns that illustrate differences between subgroups. However, subgroup membership (e.g., residing in a particular neighborhood or holding a particular ethnic identity) may not be the primary cause of the differences. There are often complex, interconnected causes for disparities that appear in data. For these reasons, it is often more appropriate to use the term “relationships” instead of “causes” when describing trends identified by disaggregating data, unless other research shows that one aspect often causes another.

How to disaggregate data

The possibilities for data disaggregation are almost endless, and it could be easy to feel overwhelmed by the prospect of disaggregating community data. However, there are two natural limits to disaggregating data. The first is data availability — prevention planning teams may find that existing data sets can be disaggregated in some ways, but not others, based on how that data was collected. The second is time — teams may not have time to disaggregate every community indicator in every possible way, so identifying priority sub-populations is crucial.

The first step in the disaggregation process is to prioritize the different potential dimensions of disaggregation. It is important to discuss which questions your prevention planning team is attempting to answer by disaggregating data. These questions will be informed by your hypotheses about which subgroups experience your community differently. Some basic dimensions by which community data is often disaggregated include:

- Race and ethnicity
- Age
- Sex
- Gender identity and sexuality
- Immigration status
- Disability status
- Tribal status or affiliation
- Location (more on this in [Section 8](#))

The second step in the disaggregation process is to ensure that any new data your prevention planning team collects can be disaggregated in appropriate ways. (See [Section 6](#) for more information on methods for collecting new data.) It is important that your community feels safe sharing information that will help you disaggregate results. You should involve representatives from your community to help you design your data collection approach and ensure that you are collecting demographic information in sensitive ways.

The third step is actually disaggregating the data you have available by the dimensions you prioritize. Research suggests that it is often useful to disaggregate data in multiple ways, going deeper than just a few broad categories.³⁵ For example, imagine that you're working in an organization that advocates for equitable access to high-quality secondary education. In 2006, the American Community Survey showed that only 14% of Asian students achieved less than a high-school level education.³⁶ This might suggest that education advocacy should focus on other racial groups where high school completion was a greater concern. However, disaggregating the data further showed that Hmong, Laotian, and Cambodian students drop out of high school at almost double the rate of Asian students overall. This more nuanced look at the data suggests a more targeted approach to advocating for systems that support these students. Disaggregating data by multiple dimensions helps us to understand the strengths, needs, quality of life, and vulnerabilities of diverse groups, and the differences and disparities within those groups. Disaggregating data also honors the importance of intersectionality (i.e., the ways in which multiple identities interact with one another).

The fourth step is summarizing and visualizing the disaggregated data so your prevention planning team and any community members you connect with can easily engage with the results. See the inset on the next page, "Strategies for Communicating Disaggregation" for more information.

Strategies for Communicating Disaggregation

Some of the most commonly used methods for visualizing disaggregated data include tables, stacked bar graphs, pie charts, and Marimekko graphs. Some are more complex than others, and choosing the right visual will depend on factors including your audience, the nature of the data, and what you wish to communicate. We will explore data visualization more thoroughly in [Section 10](#).

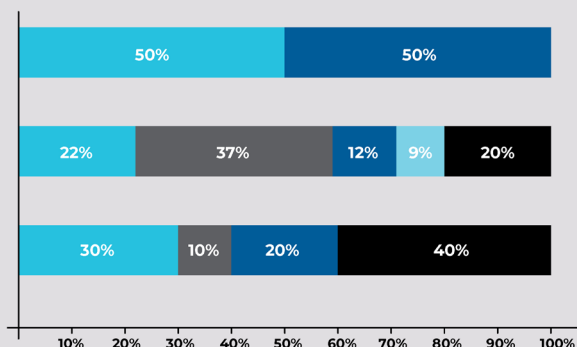
Tables

Tables have a set of rows and columns that categorize data by their intersection. Tables are often efficient to create, but may not be as quickly understood as other visual approaches to communicating data.

CATEGORY 1	CATEGORY 2	CATEGORY 3
value	value	value
value	value	value
value	value	value

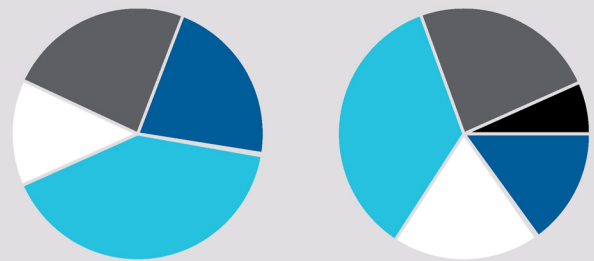
Stacked Bar Graphs

Stacked bar graphs are a space-efficient approach to visualizing the ways in which a larger category is divided into smaller categories. Stacked bar graphs can show percentages (which emphasize proportions) or counts (which emphasize the size of each large category).



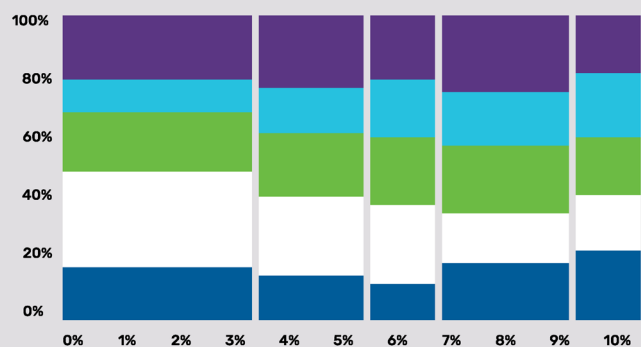
Pie Charts

Pie charts show proportions and percentages of each part of a whole. Pie charts are simple to design, but should be limited to a small number of categories to make interpretation easier (e.g., 5 or fewer).



Marimekko Charts

Marimekko charts are used to visualize two intersecting categories of data. Both axes have a percentage scale that determines the width and height of each segment. While more complicated than the other charts here, Marimekko charts excel at showing the intersectional relationships between groups.



What to do when you can't disaggregate

Unfortunately, many public data sources do not allow users to disaggregate data to the level of detail that your prevention planning team may find most useful. When encountering this hurdle, some options include:

- Reach out directly to the organization providing the data. Ask if they collect the attributes for disaggregation your team is interested in, and if so, if they can share their raw data or disaggregate the results for you.
- If the answer to the above is no, advocate for disaggregation. Note the reasons referenced in this chapter about why it is important for teams to review disaggregated data to better understand their community.
- Consider available supplementary data sources, such as qualitative data, for your prevention planning team to review alongside other available data to develop a nuanced and meaningful understanding of particular communities.



SECTION 8: REVIEWING GEOGRAPHIC DATA

As noted in previous sections, focusing on specific geographic areas through data analysis can help prevention planning teams to target their efforts to the places that are most in need. Some of the information that your team could consider mapping includes where children live, concentration of child maltreatment reports and allegations, community-based resources and assets, differences in health indicators across a county, and differences in municipal policies across a county. Maps are also intuitive, and can help us connect more theoretical ideas and challenges to real-world people and places.

Geographic units to consider

When considering how far to drill down and which geographic units to examine, begin by asking, “What geographic areas experience widely different community conditions in our county?” You may notice that some school districts or neighborhoods are particular hot spots for child maltreatment, or experience concentrated adverse community conditions such as poverty or substance abuse. Ideally, you will be able to make your focus as specific as possible, but many data sources will only be available down to the town or county level. Units to consider organizing your maps by include:

- Towns and cities within a county
- ZIP codes
- School districts
- Census tracts

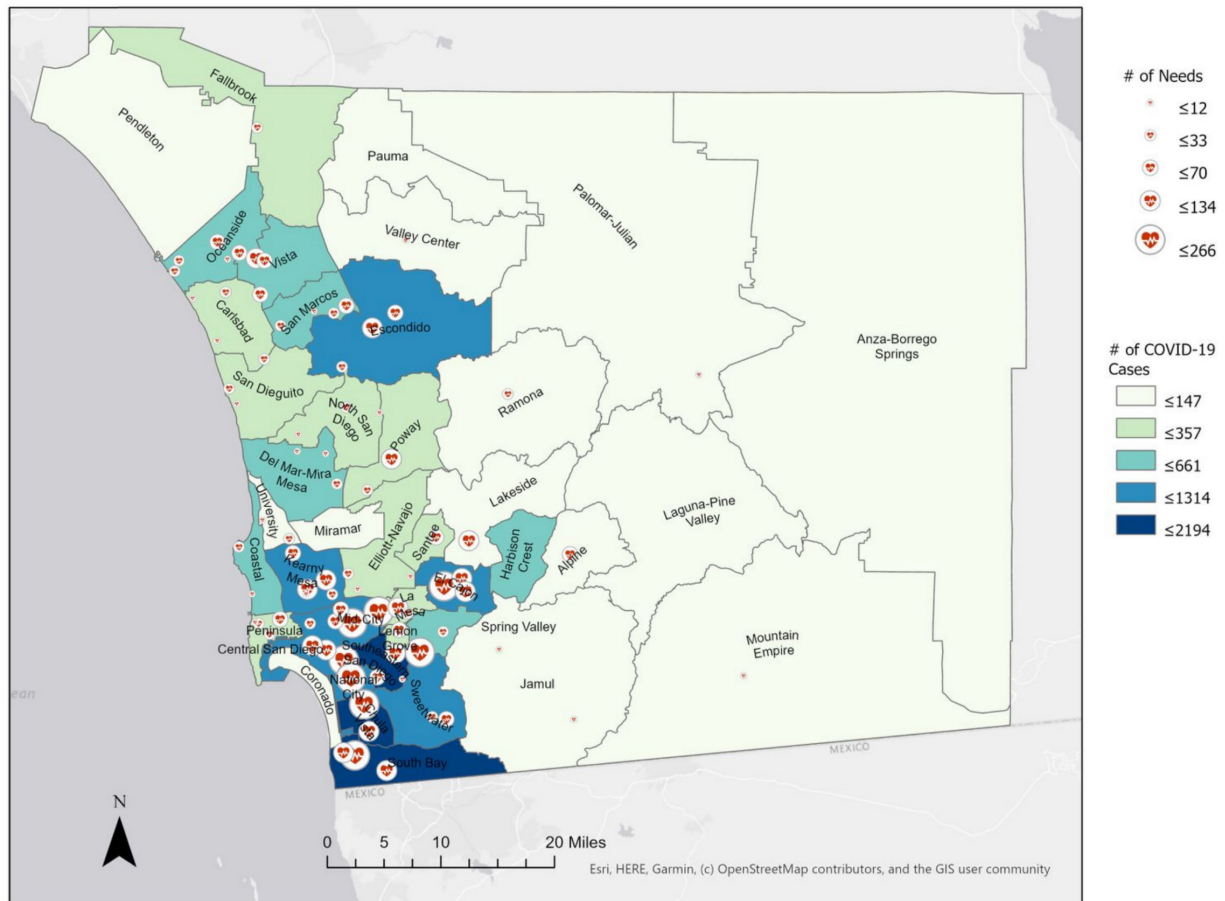
Why Map Your Data?

- Maps are intuitive, and help us connect ideas to real-world places
- Maps help you zoom in to more specific areas within your county
- Many free and low-cost tools exist to help you create compelling maps

Example — How can this approach work for your team?

It may be difficult to visualize how using geographic data can actually take shape for your team. As an example, San Diego County’s prevention planning group featured maps extensively in their [2020 Landscape Scan](#). The map below is one of several that considers the impact of COVID-19 on

San Diego County: COVID-19 cases during April 1 - July 11, 2020 and 211 Needs March - April 2020



families in the county. This particular map is divided by census tracts. One can observe through this visual that areas on the coast and in the south of the county were much more heavily impacted by COVID-19 than more inland census tracts. Further, we can see that majority-white tracts had fewer COVID-19 cases than other tracts.

If San Diego's prevention planning team only looked at the county as a whole, its landscape scan would have been missing important nuances about the impact of COVID-19.

Tools for mapping geographic data

Several of the data sources in [Section 5](#) allow users to examine community data geographically. In particular, the [Strong Start Index](#) and [PolicyMap](#) highlight differences in community conditions down to the census tract level, allowing users to zoom in to neighborhoods that are most in need of support.

In addition, several free or low-cost tools exist that allow you to map data about relevant community conditions. These tools are listed in order from the simplest to the most powerful:

TOOL	PROS	CONS
Physical map: Drawing and adding to a paper map.	Tactile, flexible, and free or low-cost.	Time-consuming to replicate and hard to share
Google My Maps : Creating a custom map using Google Maps.	Free, easy to share point-based maps.	Can only map specific addresses; more difficult to map areas (for example, shading a ZIP code by a particular value).
Microsoft Excel : Mapping data using Excel's build-in map features.	Enables some simple mapping functions, including mapping areas and points.	Only basic mapping features are available. Must have Office 2019 or later, or Office 365 to access this feature.
Tableau Public : A free version of Tableau, one of the most commonly-used analytics platforms.	Tableau Public is free and easy to share.	There can be a learning curve to use this tool.
Microsoft Power BI : Visualizes data in a similar fashion as Tableau, and is strong at connecting to other Microsoft tools such as Excel.	Has a free desktop version, and is able to integrate multiple software tools if using the Microsoft suite.	Like Tableau, there can be a learning curve in being able to use this tool.
QGIS : A free and open-source geographic information system.	Free, powerful, and flexible.	Substantial learning curve.
ArcGIS : The most commonly used commercial geographic information system.	Commonly used, very powerful and flexible, and can be used to create more than maps. See Shasta County's ACEs Dashboard for a great example of ArcGIS being used to create a complex data product.	Expensive and a considerable learning curve.



SECTION 9: REVIEWING DATA WITH YOUR COMMUNITY

After selecting a data framework, drawing from existing data, and collecting, disaggregating, and reviewing your data, it is finally time to share that data in order to find the best way to apply it to the community's needs. We believe that analysis — making meaning from data — is a team sport, and it is important to engage community members in reviewing community data. Analyzing data with the help of community members has a number of benefits:

- Diverse viewpoints help mitigate confirmation bias and balance positionalities (see [Section 2](#) for more about positionality).
- Facilitating community participation in data analysis can highlight the perspective of individuals who experience adverse community conditions on a day-to-day basis.
- Community members will be able to give context and illuminate blind spots, and can either confirm or challenge the validity of your prevention planning teams' interpretation of the data.

When we use the term “community members,” we mean people who live in your county and have lived experience with the conditions your data is highlighting. While this depends on the data your county has focused on, this will often mean engaging individuals who have experienced adverse community conditions, as well as particular community strengths showcased in your data. Be sure to review the accessibility suggestions from [Section 6](#) before beginning.

Bringing your community into the analysis process can also help to ensure the success of resulting programs or policies by building trust among stakeholders. Facilitating community participation provides an opportunity to demonstrate commitment to putting research results into action. Furthermore, any community-based prevention plan will make use of relationships with community members, and will tap into pre-existing strengths. Bringing your community members into the process helps to nurture buy-in; people will be more likely to support what they've helped to create.

Steps to facilitate a community data party

- Identify the objective and relevant discussion questions
- Invite community members
- Prepare data for review
- Review the data
- Discuss reactions to the data
- Recap insights and follow up

Time to have a data party

Participatory data analysis can take many different forms. Generally, it involves bringing a group of stakeholders together to help interpret and make meaning of data that represents them. Stakeholders can be community members, organizational staff, community leaders, or program participants, to name a few. For example, participatory data analysis among your prevention planning team members could involve having representatives of different systems (e.g., education, health, probation, child welfare, etc.) host a show-and-tell of their own data, focusing on the same sub-populations in your county. While participatory data analysis among a group of professionals often feels natural, engaging community members in reviewing data takes more planning but can also provide more unique, valuable insights.

One way to facilitate participatory data analysis with community members is to host a “data party.”³⁷ A data party is a single, time-limited event that takes place over the course of several hours and brings together relevant stakeholders to analyze data in a communal setting. Data parties can strengthen relationships, support dialogue across diverse perspectives, and get community insight into implications for actions based on data. Because data parties are designed to be one-time events, they are usually able to engage a broader audience than other approaches. A data party usually involves food and opportunities to strengthen relationships organically.

How to plan the party

Before planning for a data party, first determine what you hope to learn from the event. Select one primary objective for each data party. This guiding question will help you to select appropriate participants and ask pertinent questions throughout. Some potential learning objectives include but are not limited to:

- Understanding trends — exploring why we are seeing certain patterns in the data.
- Highlighting — determining which aspects of your community data are most important.
- Focusing — identifying potential subgroups or geographic areas to focus your prevention efforts on.
- Brainstorming — designing potential prevention strategies based on your data.

After you have determined what you hope to learn, invite the people that you feel will have the most relevant perspective. Keep in mind that it may be appropriate to provide stipends or gift cards to account for participants’ time, travel, and expertise. Ideally, the location of the event will be as accessible and central as possible, with parking and/or public transportation nearby. If necessary, these events can be held virtually, but hosting them in person encourages stronger connections between participants (if it is possible to safely gather). Make sure that the time and day of the party accommodates as many of the participants’ needs as possible, including work schedules and childcare. High-quality childcare should be offered, or the space and data party itself should be made child-friendly.

Consider recruiting participants through individual and agency connections, social media posts, social media advertising, print, and other media. All counties across California have [multiple existing coalitions](#) working to promote child wellbeing, and these groups may be able to support your planning team in engaging your community. If possible, your team may want to leverage existing community meetings that are already occurring for recruitment. Finally, be sure to create an agenda for the party that will help you make the best use of community members' time.

Facilitating the discussion & questions to ask

Hosting a data party means that you will need to make your data digestible and accessible to your community members. Give participants a chance to review the data ahead of time in a format that is easy to interpret, including results summaries and data visuals. Be wary of jargon, and be ready to answer clarifying questions. Once participants are onsite, give them the opportunity to review the data individually again and in small groups before convening for a larger group discussion.

Some ways to present data on-site include [gallery walks](#), which allow people to view posters of results and casually discuss what they see before convening more formally; [data placemats](#), which provide placemat-sized visual representations of the data along with prompting questions; and rotating "[cafés](#)," where people move around to different tables hosted by someone who

is well-versed on a particular topic and can facilitate a discussion. It's helpful for small groups to be composed of people with different backgrounds and perspectives, including those hosting the gathering. Make sure that you have the supplies that participants need to record insights and reactions, including flip charts, a whiteboard or chalkboard, index cards, markers, and plenty of pens, pencils, and paper.

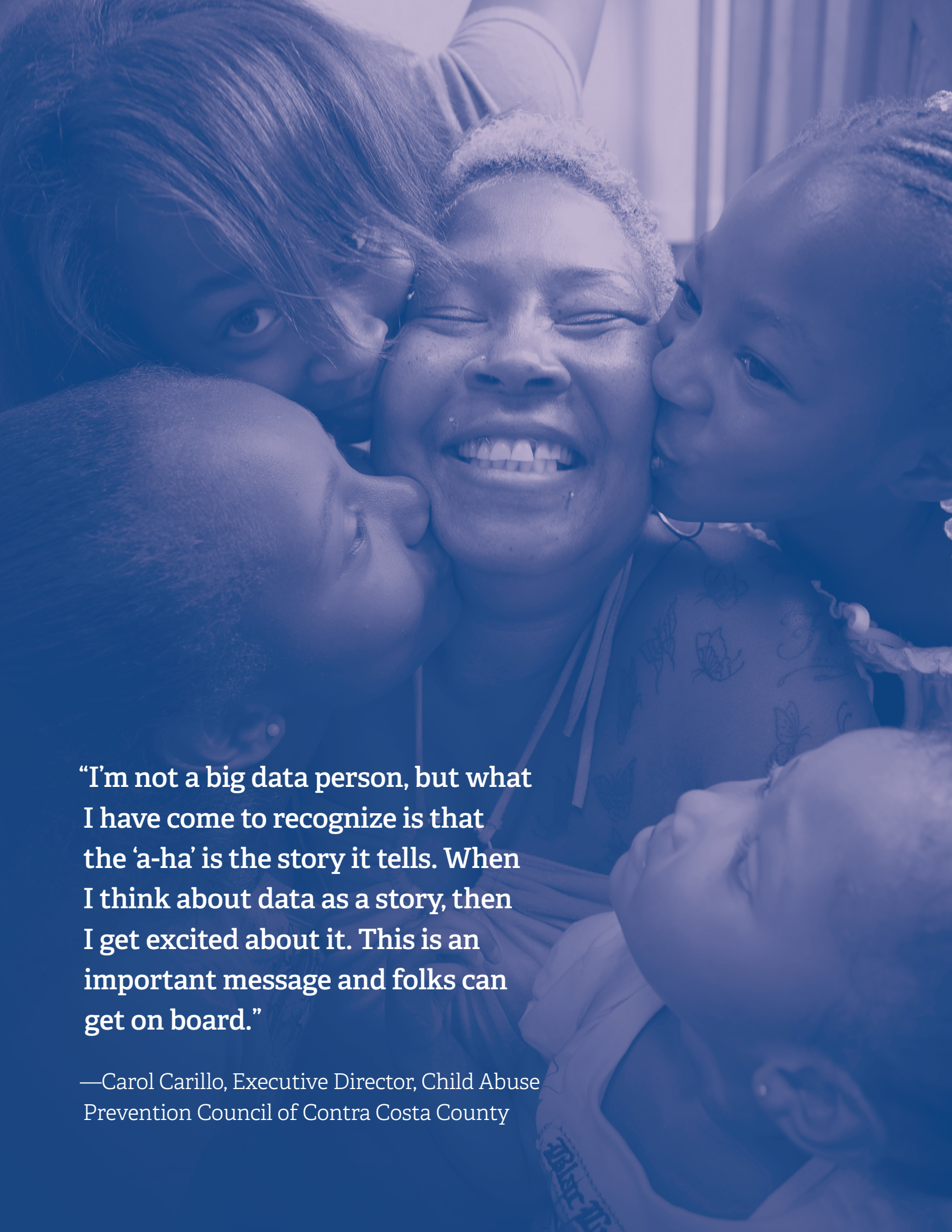
Once you have gathered your participants and given them time to review the data and initiate some connections within the group, help them discuss the findings. If you're reviewing a large data set, it can be helpful to group the data by overarching questions or themes. Employ a skilled facilitator that can appropriately manage potential conflicting viewpoints, and effectively distill the information gleaned through these discussions. Keeping your overall objective in mind, consider asking questions in your discussion like the following:

- What surprised you about the data?
- What stood out for you?
- What was confirmed by the data that you already knew?
- What resonated or "felt true" for you?
- What was missing in the data that you thought you would see?
- What else do you see in this data that we haven't already discussed?
- What other comments do you have about the data?
- Based on what you learned from this data, what would you suggest needs to be done moving forward?

Be prepared for the potential for “data resistance.” Participants may object to what appears in the results, and it is important to create space for people to air their concerns and understand the strengths and limitations of the data source. Emphasize that every data collection approach has advantages and limitations, and be transparent about these for the data you are reviewing. Give your group the opportunity to ask questions about how data were collected. If you still find participants are resistant to the data after having done the above, encourage them to move beyond a position of questioning the validity of the data. Ask them to imagine that the data is indeed accurate — what might that mean about their community and opportunities for action? Keep in mind that data resistance can be an opportunity to build your community members’ data literacy, and can also help you understand opportunities to improve the quality of data you have access to in the future.


Recap and follow-up

Following the discussion, make sure that you are checking in with participants to gauge their experience of the data party. What did it mean to them?; what did they learn, and is there anything they would like to see be done differently in the future? Consider following up again a few days or weeks after the party to see what may have developed as people have time to process the experience. Also consider following up with participants in the weeks, months, or even years after results and discussions have been applied to prevention planning efforts, to let them know how their participation influenced the work going forward.

A photograph of a woman with a joyful expression, her eyes closed and mouth open in a wide smile. She is being kissed on the cheeks by three children. The scene is intimate and affectionate. The entire image is overlaid with a semi-transparent blue filter. The woman has short, light-colored hair and is wearing a dark top. The children are of various ages and are also smiling or looking towards the woman. The background is slightly blurred, suggesting an indoor setting.

“I’m not a big data person, but what I have come to recognize is that the ‘a-ha’ is the story it tells. When I think about data as a story, then I get excited about it. This is an important message and folks can get on board.”

—Carol Carillo, Executive Director, Child Abuse Prevention Council of Contra Costa County



Chapter 3: Telling the Story



SECTION 10: CREATING COMPELLING DATA-CENTRIC PRESENTATIONS

Why are compelling data-centric presentations important?

Meaningful data has no impact if it isn't communicated well to the people that most need to receive it. Compelling data presentations can motivate action, improve comprehension, and engage new audiences that may not have understood their role in child maltreatment prevention. In contrast, ineffective presentation can cause your message to get lost in translation.

When presenting data to individuals outside of your prevention planning team, you will likely be talking about more than just the data your team reviewed. You may also be describing the reason your planning team exists, the current situation in your community (referencing your data), and the specific prevention plan you are advancing based on what your team has learned. Regardless of the nature of your presentation, strong storytelling supported by data will help you communicate the importance of a coordinated and strategic approach to prevention.

Creating effective data-centric presentations involves both storytelling and data visualization. Stories resonate with your audience and are more likely to be remembered than facts

Fundamentals for data communication

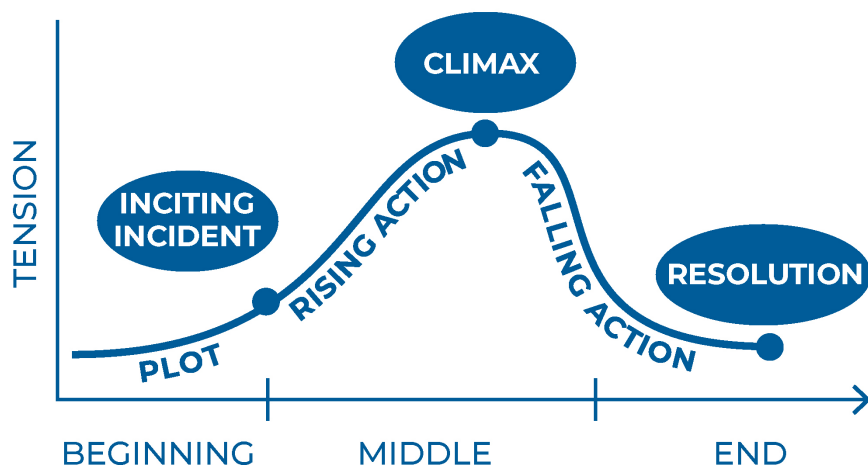
- Craft a story with a beginning, middle, and end
- Use color intentionally
- Less is more
- Choose charts wisely

alone. In fact, emotion is a key ingredient in how information is stored in the brain; information that generates emotion will be stored and retrieved more readily than information that does not.³⁸

An example of strong data storytelling comes from [Resilient Lake County](#), a community partnership between Lake County Children’s Council, Lake County Child Welfare, Lake Family Resource Center, First 5 Lake, Lake County Probation, Redwood Community Services, tribal members, Health Leadership Network and others in Lake County, California. In 2019, Resilient Lake County hosted a number of town hall meetings which were used to share community data on child adversity and well-being from a range of county departments. This data was visualized through charts and graphs, and was accompanied by stories from community members who had experienced the child welfare system. Bringing the community into the conversation and effectively presenting their message helped this coalition build community awareness of how multiple systems come together to promote child well-being, and to advocate for investing in these systems.

Organizing your data story in three acts

Effective storytelling consistently includes a beginning, a middle and an end. Tension and action rise from the beginning of the story to the climax in the middle, and gradually decrease at the end. The beginning of any story provides important context, and should answer questions such as, “Why does your prevention planning team exist?; what was the motivation for looking at community data?; and who was involved in this effort?” The middle of the story actually describes the data that is being reviewed, including lessons learned from that data. In this section, it can be helpful to complement community data with more qualitative sources like community stories or testimonials. This portion of the presentation should demonstrate an imperative for action. Finally, the end of the story calls on your audience to help take the next step. The conclusion to your presentation should describe what actions your team is taking and what you need from the stakeholders in the audience. It is crucial to have one or more clear calls to action at the end of your presentation made by community members, keeping in mind that city and county government employees are restricted in their ability to advocate.



Data visualization principles

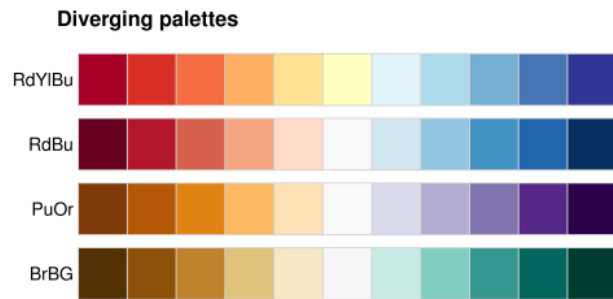
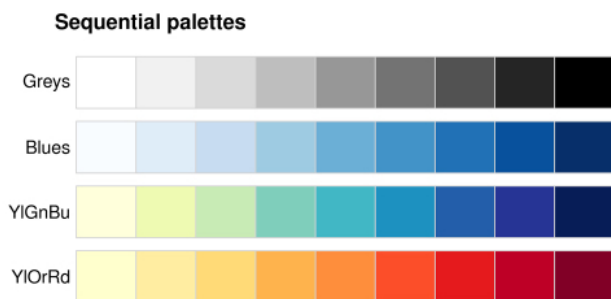
Compelling data visualizations are critical to good data storytelling. In this guide, we describe three basic principles for data visualization: (1) use color intentionally, (2) less is more, and (3) choose your chart wisely. Utilizing these principles will help to ensure that your message is communicated in a way that is engaging, clear, and impactful.

Use color intentionally

Color is an extremely important tool for communicating your message and creating attractive and impactful presentations. While sloppy use of color can be distracting and disorienting, effective use of color communicates meaning and focuses attention. As humans, our brains naturally assign significance to colors, and we tend to make associations between items of the same color or in the same color family. Specific practices for using color include:

- Generally, limit your graph to using two “emphasis colors” to help direct the eye. Adding too many colors to a graph disrupts our natural ability to see color correlations and make meaning.
- Use gray values to create structure, define space, and for data that shouldn’t be emphasized. Use your emphasis colors for important components that need attention.
- For data that has a sequential order, use a sequential color palette to illustrate the data (e.g., light to dark shades of gray, blue, or red).
- If the data are diverging (i.e., the zero point is in the middle), use a diverging color palette in which two contrasting hues or brightness ramps illustrate the distance from the midpoint.
- One in 12 men and one in 200 women are colorblind.³⁹ Check your colors using a tool like the [COBLIS Color Blindness Simulator](#) to ensure your palette is accessible.

Sequential vs. Diverging Color Palettes



Less is more

Your audience's attention is limited, and a good practice is to use the simplest and most accessible visual that can accurately convey the information you're looking to show. If you have a lot of information to communicate in a graph, consider breaking that graph into multiple visuals that build upon one another (the concept of [gradual reveal](#)).

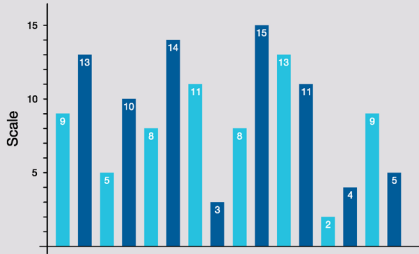
When considering which visualization to choose, consider the few most important insights you are trying to communicate. Ask yourself, "What is the main point of this chart, in 30 seconds or less?" Then make sure your chart is set up to highlight that key

point. Illustrating too much information at once will mean that your audience does not know what to focus on. The more you can edit to simplify, the more effective your visual will be. Learn more about simplicity in data visualization on [Juice Analytics](#).

It is also important to reduce clutter in charts and graphs. Messages get lost in too many words. Use headers thoughtfully, and name charts using your conclusion. Don't rely on the default formatting offered by whatever software you might be using to create a graph; critically assess if labels, gridlines, and legends are necessary, and minimize or remove chart and table borders.

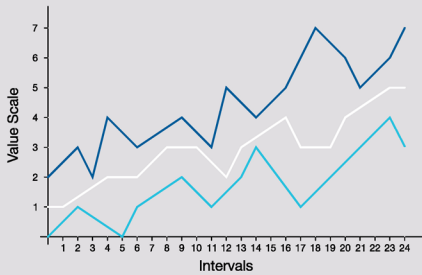
Choose your chart wisely

In [Section 7](#), above, we laid out several ways to communicate data disaggregation using data visualization. Below are more options to consider when communicating data visually. You can learn more about these options and many others at the [Data Viz Project](#).



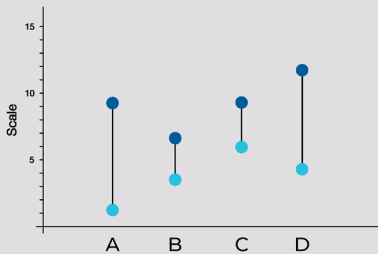
Vertical Bar Charts

Vertical bar charts are one of the most frequently used approaches for visualizing categorical data. The x-axis of a vertical bar chart illustrates different categories, and the y-axis illustrates the values or quantities for each category.



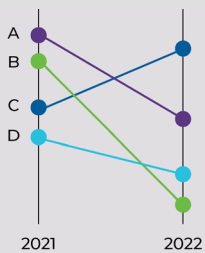
Line Charts

A line chart displays a series of data points, or markers, connected by straight lines. Line charts are ideal for showing trends over time, with time represented on the x-axis.



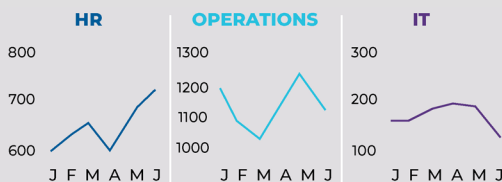
Dumbbell Plots

A dumbbell plot shows the change between two data points. They are especially useful for comparing results from two time periods or when your data contains two prominent groups (e.g., male vs. female; Republican vs. Democrat).



Slope Charts

Slope charts are similar to line charts in that they illustrate change over time, except that they only show two points in time. They are especially helpful in visualizing the differences between various actors at two time periods.



Small Multiples

Small Multiples are a series of charts or graphs which all have the same scale and axis. They can take the shape of any of the other charts noted here, and are a great alternative to having one line chart with many different categories.



Icon and Number

Simply showing a number in big, bold text alongside a corresponding icon can be a powerful and simple way to communicate a single data point.

Additional resources

Data visualization is a rich field of study, with more resources coming out every year. See below for additional resources if you are interested in exploring data visualization in more depth.

[Web Page for UC Davis' Tobacco Control Evaluation Center's Data Visualization](#)

This page provides links to a number of resources on design principles and data visualization “how-tos.”

[Evergreen Data's “Data Visualization Checklist](#)

Stephanie Evergreen has a comprehensive checklist to help you ensure that your presentations are aligned with effective design principles.

[Depict Data Studio's Data Visualization Blog](#)

Ann K. Emery's blog features in-depth articles on everything from presenting to audiences with low numeracy and literacy levels, to designing dashboards with Excel.

[Juice Analytics Design Principles](#)

Juice Analytics offers several clear and simple articles on understanding design principles and how to apply them to data visualization.

CONCLUSION: NOW IT'S YOUR TURN

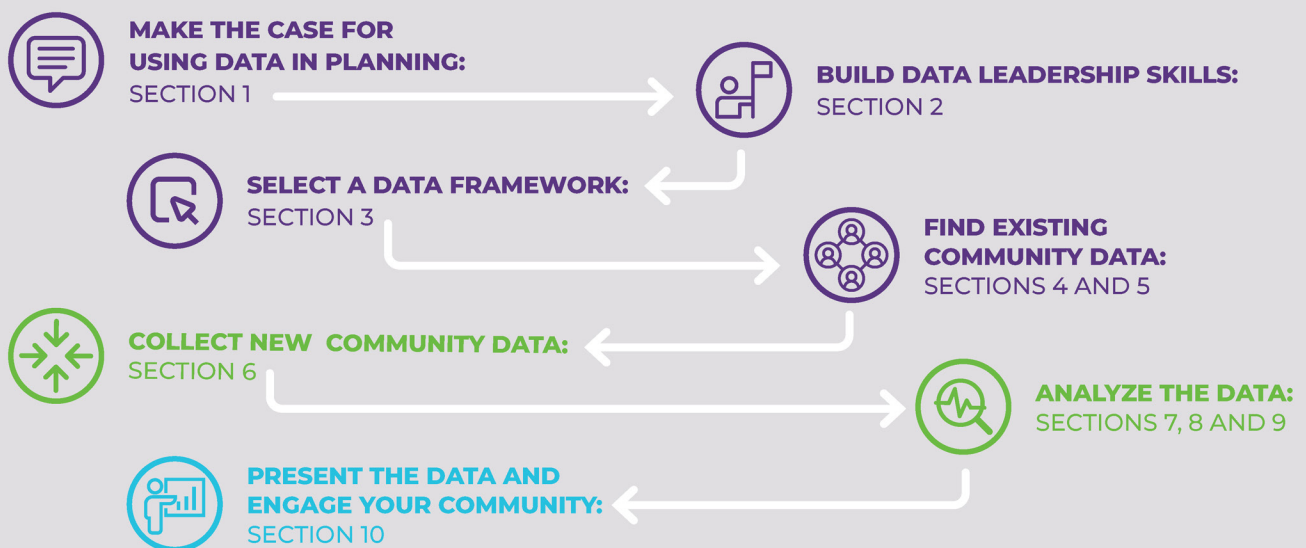
Congratulations! You now have all the tools you need to effectively use data to strengthen your prevention efforts and create a strong prevention plan. When used well, data enables clarity, better communication, and more efficient use of resources, thereby increasing your impact.

As a reminder, the data usage journey starts with developing a culture of data usage on your teams, and within your community. When you have become clear on how and why you want to use data, select the data framework that will give form and context to the data you collect and analyze. After selecting your framework, collect data by accessing existing data sources and complementing that with data you

collect on your own. When reviewing this data, you will need to disaggregate it into more specific categories and look at it geographically to help make meaning and identify patterns. You should also engage a broad group of stakeholders in helping you identify insights and determine implications from the data. When you feel that you have developed some meaningful conclusions and insights from the data at hand, use data visualization and data storytelling principles to communicate this data in a way that engages your community and inspires action.

Remember that you have all the tools you need to turn data from intimidating and dry to rich, impactful, and accessible. You can do this!

Your Playbook for Using Data in Prevention Action Planning



Appendices

APPENDIX A: INTEGRATING COMMUNITY INDICATORS INTO YOUR DATA FRAMEWORK

The table below maps the example indicators of community indicators outlined in [Section 4](#) to each of the data frameworks outlined in [Section 3](#). Keep in mind that for any data framework, counties will likely need to collect some new data to describe framework elements where public data is not available.

INDICATOR CATEGORY	SPECIFIC DATA POINT (IF AVAILABLE)	SDOH MAP	5 PF MAP	BCR MAP	ACER MAP
Economic stability	Income volatility	Economic stability	Concrete support in times of need	Shared understanding	Economic environment
Economic stability	Unemployment rate	Economic stability	Concrete support in times of need	Shared understanding	Economic environment
Economic stability	Food insecurity	Economic stability	Concrete support in times of need	Shared understanding	Physical/built environment; Economic environment
Economic stability	Households under 200% poverty	Economic stability	Concrete support in times of need	Shared understanding	Economic environment
Economic stability	Poverty rate	Economic stability	Concrete support in times of need	Shared understanding	Economic environment
Substance abuse	Age-adjusted drug-induced death rate (deaths per 100,000 population)	Social and community context	Parental resilience	Shared understanding	Social-cultural environment
Substance abuse	Alcohol or drug-related emergency department visits per 1,000 population	Social and community context	Parental resilience	Shared understanding	Social-cultural environment
Substance abuse	% adults reporting binge or heavy drinking	Social and community context	Parental resilience	Shared understanding	Social-cultural environment
Substance abuse	Alcohol outlets per 1,000 population	Social and community context	N/A	Engaged community	Physical/built environment

continued

INDICATOR CATEGORY	SPECIFIC DATA POINT (IF AVAILABLE)	SDOH MAP	5 PF MAP	BCR MAP	ACER MAP
Housing	Housing cost burden	Built environment	Concrete support in times of need	State of readiness	Physical/built environment; Economic environment
Housing	Work hours per week necessary to rent a 2-bedroom home at minimum wage	Built environment	Concrete support in times of need	State of readiness	Physical/built environment; Economic environment
Housing	Delinquent mortgage loans	Built environment	Concrete support in times of need	State of readiness	Physical/built environment; Economic environment
Housing	Home ownership rate	Built environment	Concrete support in times of need	State of readiness	Physical/built environment; Economic environment
Housing	Affordability of homes	Built environment	Concrete support in times of need	State of readiness	Physical/built environment; Economic environment
Family composition	Children under 18 years old	Social and community context	Knowledge of parenting and child development	State of readiness; Shared understanding	Social-cultural environment
Family composition	% Married-couple households with own children	Social and community context	Parental resilience	State of readiness; Shared understanding	Social-cultural environment; Economic environment
Family composition	Child to adult ratio	Social and community context	Parental resilience	State of readiness; Shared understanding	Social-cultural environment; Economic environment
Family composition	Single-mother families	Social and community context	Parental resilience	Shared understanding	Social-cultural environment; Economic environment
Family composition	Children with a disability	Social and community context	N/A	Shared understanding	Social-cultural environment; Economic environment
Mental health and access to care	% of adults reporting 14 or more days of poor mental health per month	Social and community context	Parental resilience	Shared understanding	Social-cultural environment
Mental health and access to care	Mental health providers per 100,000 population	Health care and quality	Concrete support in times of need	Cross-sector partners	Social-cultural environment

continued

INDICATOR CATEGORY	SPECIFIC DATA POINT (IF AVAILABLE)	SDOH MAP	5 PF MAP	BCR MAP	ACER MAP
Child welfare	Child maltreatment substantiations	Social and community context	N/A	Shared understanding	Social-cultural environment
Child welfare	Allegations by disposition type	Social and community context	N/A	Shared understanding	Social-cultural environment
Child welfare	Entries to foster care by removal reason	Social and community context	N/A	Shared understanding	Social-cultural environment

APPENDIX B: ACCOUNTABILITY TO COMMUNITY FEEDBACK

In drafting this document, we sought input from many individuals, including members of prevention planning teams from around California, experts in data and evaluation, and individuals having lived experience with the child welfare system. We incorporated suggestions from these stakeholders in this initial draft to the greatest extent possible.

Invariably, there were some suggestions that we were unable to incorporate in this version of the Data Playbook for Prevention Action Planning. Some of these were due to resource and time constraints; others were strategically omitted to avoid increasing the length or complexity of this resource. To ensure transparency, we are listing the suggestions we opted not to incorporate in this draft here.

OVERALL COMMENTS

SUGGESTION	RESPONSE
Please be more definitive (e.g., “The process of identifying and mapping community strengths must include community input and feedback” instead of “The process of identifying and mapping community strengths should include community input and feedback).	This playbook is designed to provide directions and guidance that help prevention planning teams use data effectively. It is not designed to establish a set of rules that must be followed, and we respect that each county has unique circumstances surrounding its prevention planning process. Therefore, we have opted to use language that recommends steps but doesn’t dictate each county’s course of action for using data for prevention planning.

SECTION 2: DATA LEADERSHIP SKILLS & CULTURE

SUGGESTION	RESPONSE
I would also add something about knowing how to handle data quality issues. There may always be missing data in some administrative databases, so researchers may need to know the right way to impute missing data, understand whether it’s missing nonrandomly or not, etc.	How to impute missing data is an important topic for analysts and researchers. However, it is a complex subject and not one we can sufficiently address within the scope of this playbook.

continued

SECTION 3: DATA FRAMEWORKS FOR COMMUNITY INDICATORS

SUGGESTION	RESPONSE
Add the emerging framework on Community Protective Factors from the Center for the Study of Social Policy. In addition, should Healthy People 2030 be included here? Or the County Health Rankings? Or the Healthy Place Index?	<p>While the emerging framework on Community Protective Factors is a valid framework, it is so new that it is unclear whether this framework will develop further.</p> <p>For the others, we worked with Strategies TA to identify a short list of commonly-used frameworks that had distinct advantages / disadvantages. We have opted to keep this list short, as adding more frameworks might lead to greater indecision about which framework to use.</p>
Add the Results Based Accountability Framework .	Results Based Accountability is a strong framework for decision-making and action. However, this framework was not included in the playbook because it doesn't suggest any specific kinds of community data. For this playbook, the purpose of a 'data framework' is to put some structure around the wide array of potential data a planning team might use to augment its own knowledge about community strengths and opportunities. Each data framework we've included suggests potential kinds of cross-community data that could be relevant.

SECTION 4: EXISTING DATA DESCRIBING COMMUNITY CONDITIONS

SUGGESTION	RESPONSE
Please include Chapin Hall's research on policy supports that impact economic factors for children and families.	Chapin Hall's research is a valuable contribution to our collective understanding of how policy impacts child well-being. At this time, we cannot find a data source that succinctly summarizes the existence or lack of relevant policies noted here from county-to-county across California that is updated on a regular basis.
Is there a more strengths-based term we can use than "problematic substance use"?	When looking broadly at community conditions, it is important for prevention planning teams to understand both positive and negative conditions. If we maintain (as research shows) that substance abuse among adults is bad for children in their care, an understanding of problematic substance abuse in a community is helpful for prevention planning.

continued

Should we also include additional Health Department indicators — for example the child fatality rate, teen birth rate, etc.?

Our approach to identifying indicators to include involved looking across the actual data indicators describing community conditions cited by several sources:

1. Four different counties in California;
2. The CDC (on their child maltreatment risk factors page);
3. Colorado's Department of Human Services, which published a [robust analysis](#) on data linked to child maltreatment.

We looked for commonalities among these sources, and then narrowed these down to indicators that had a publicly available data source that could be disaggregated to the county level. This section intentionally does not include all possible indicators, but highlights a few examples from different categories as a starting point.

The [Bureau of Labor Statistics](#) also has incredibly rich income & employment data at a pretty granular level.

This is a valuable resource for data. For our audience of non-researchers, we find the other tools highlighted to be a bit more accessible than the BLS, so we've opted to highlight those instead.

Consider adding ACEs from the California Department of Public Health or California Department of Social Services, such as the following: Adverse Childhood Experiences Data Report (ca.gov). A new ACEs report will be published in June of 2022.

The currently available report (as of the date this playbook was published) only includes ACEs data through 2017. Should this report be refreshed on a regular basis, we are happy to include it in future versions.

SECTION 5: ANNOTATED THIRD PARTY DATA SOURCES

SUGGESTION	RESPONSE
Are there other data sources that we should include here?	<p>In this section, we focused on data sources that met the following criteria:</p> <ol style="list-style-type: none">1. Data is available for every county across California.2. Data can be filtered to at least the county level, if not to a more specific geography.3. Data is updated on a frequent basis (every 2 years, if not annually).4. Data are relevant to at least one of the data frameworks introduced in Section 3. <p>This means that there could be other good data sources for particular counties not listed here. Our goal with this guide was to provide prevention planning teams with a few options for how they can start accessing relevant data.</p>

continued

SECTION 6: METHODS FOR COLLECTING NEW DATA

SUGGESTION	RESPONSE
Can we illustrate this section (or this playbook) by asking individuals to engage in a PhotoVoice project inspired by this resource?	This could be a good addition to future versions of this playbook. When interviewing county prevention planning teams to prepare for writing this resource, teams prioritized seeing examples from other counties lower than learning about strategies and resources they can try themselves. This makes us hesitant to include too many examples in this initial version.
Would it be important to mention that focus groups or key informant interview instruments should be made in partnership with an evaluator? And that the data analysis should be conducted by an evaluator?	While having an evaluator design, conduct, and analyze results from qualitative research is ideal, we acknowledge that prevention planning teams may not always have access to (or budget for) engaging these evaluators. We also acknowledge that skills for designing interviews and analyzing qualitative data are not held by evaluators alone — other prevention planning team members may have these relevant skillsets. We've opted to intentionally omit the word "evaluator" from much of this guide, so that a team's lack of access to an evaluator doesn't prevent them from accessing and engaging with data.

SECTION 7: DISAGGREGATING DATA TO UNDERSTAND SUBGROUPS

SUGGESTION	RESPONSE
What about disaggregating based on tribal status? Where can we find that information?	Data on tribal status is unfortunately hard to find, and we've had difficulty finding data in the other sources listed here that would allow us to disaggregate based on tribal status and affiliation. Notably, many tribes in California are not federally recognized, making tracking data more difficult. For communities who are trying to dig deeper into data related to tribal status, we recommend reaching out to the Office of Tribal Affairs at CDSS.

SECTION 9: REVIEWING DATA WITH YOUR COMMUNITY

SUGGESTION	RESPONSE
We're wondering if a second valuable example might be from Our Tomorrows: A Community Sensemaking Approach .	This is a wonderful project highlighting how Kansas collected stories from community members across their state. However, the scope and scale of the effort might be difficult for most prevention planning teams to replicate on their own, so we've opted not to highlight this in the playbook.

Endnotes

- 1 Note that AB 153 defines comprehensive prevention plans as follows: "Counties receiving state funds under this paragraph shall submit to the department a comprehensive plan that includes a continuum of primary, secondary, and tertiary prevention and intervention strategies and services to support the ability for parents and families to provide safe, stable, and nurturing environments for their children, in accordance with instructions issued by the department. The continuum of services shall include culturally appropriate and responsive services that are tailored to meet the needs of families who are disproportionately represented in the child welfare system, including Native American and Alaskan Native families, families of color, and lesbian, gay, bisexual, transgender, queer, and plus (LGBTQ+) children or youth."
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