

REGIONAL PARTNERSHIP GRANT PROGRAM

THE REGIONAL PARTNERSHIP GRANT PROGRAM (RPG), first authorized by Congress in the Child and Family Services Improvement Act of 2006, is designed to support regional partnerships for the purpose of improving outcomes for children and families in which a child is in, or at risk of, out-of-home placement because of a parent's or caregiver's substance use disorder. This legislation was a direct response to the evidence that parental substance abuse is a key factor underlying the abuse or neglect experienced by many children in the child welfare system. Since the Children's Bureau awarded the initial 53 grantees in 2007 and following the 2011 reauthorization of the Child and Family Services Improvement and Innovation Act, four more rounds of grants were funded. In 2018, the Bipartisan Budget Act of 2018 reauthorized the RPG program through 2021. An additional eight new awards were made in October 2019 and 18 new awards in 2022, for a total of 127 funded projects in 40 states. The 2018 reauthorization of the RPG program now requires a planning phase prior to recipients' implementation of their project and includes a change in mandatory partners.

The RPG program focuses on building system-level capacity and enhancing safety, permanency, and well-being outcomes for children and their families who are affected by substance use disorders. The program supports interagency collaboration and the integration of programs, services, and activities. Historically, child welfare services and substance use disorder treatment have been fragmented, making it difficult for families to navigate the dependency court process and meet the requirements of both systems. The RPG program provides an opportunity to address these issues through partnerships, coordinated care, and collaboration. It also seeks to expand the evidence base of programs and practices in the fields of child welfare and substance use disorder treatment by requiring recipients to:

- ▶ Identify and use appropriate practices that are indicated by evidence to be well-supported, supported, promising, or emerging practices
- ▶ Adapt these practices for the children, parents, and families they serve, where appropriate
- ▶ Implement and participate in local and cross-site evaluation of the program to expand the evidence base of services for families involved in the child welfare and substance abuse treatment systems

**FROM 2007 TO 2021
THE RPG PROGRAM
HAS SERVED:**

 **41,630**
CHILDREN

 **31,305**
ADULTS

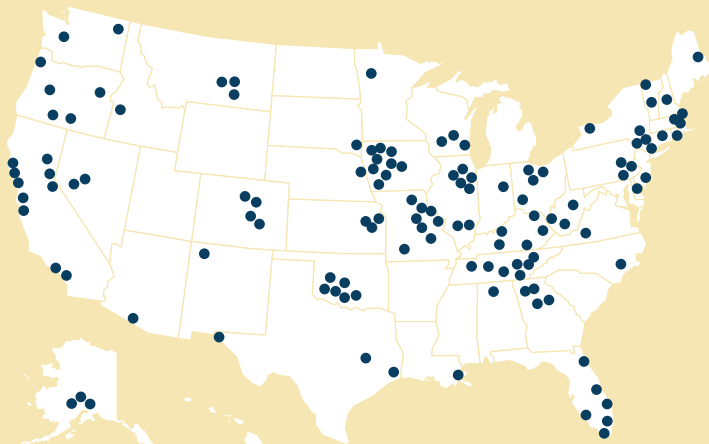
 **25,595**
FAMILIES

**COLLABORATIVE
PARTNERSHIPS
HAVE INCLUDED:**

- Substance Use Disorder Treatment
- Dependency Courts
- Child Welfare
- Mental Health
- Children's Services

- Housing
- Primary Health Care
- Education
- Universities
- Early Childhood
- Local Evaluation

- In-Home Services
- Family Resource Centers
- Maternal and Child Health
- Services for Fathers
- Domestic Violence Service Providers



127 TOTAL PROJECTS

40 STATES

591 COUNTIES

11 PROJECTS

have served or are serving primarily American Indian/
Alaska Native families

PROGRAM STRATEGIES



STRENGTHENING COLLABORATIVE CAPACITY TO MEET THE NEEDS OF ALL FAMILIES WITH EQUITY



PEER AND RECOVERY SUPPORT



FAMILY-CENTERED SUBSTANCE USE DISORDER TREATMENT



PARENTING AND FAMILY STRENGTHENING PROGRAMS



SERVICES TO PREGNANT AND POSTPARTUM WOMEN AND THEIR FAMILIES



MEDICATION-ASSISTED TREATMENT



TRAUMA-FOCUSED SERVICES



IN-HOME PARENTING AND CHILD SAFETY SUPPORT FOR FAMILIES



TRAINING AND STAFF DEVELOPMENT



FAMILY TREATMENT COURT

81% OF PAST RECIPIENTS HAVE SUSTAINED SOME OR ALL PROGRAM STRATEGIES¹

RPG PROGRAMMATIC TECHNICAL ASSISTANCE

RPG projects receive technical assistance to assure robust implementation and operation of their projects. The Center for Children and Family Futures was awarded the National Center on Substance Abuse and Child Welfare (NCSACW) contract to provide this assistance. NCSACW is an initiative co-funded by the Children's Bureau in the Administration on Children, Youth and Families, and the Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Treatment. Technical assistance to recipients focuses on collaborative practice and policy; trauma-informed services; evidence-based and evidence-informed services; treatment and recovery support services; family-centered interventions and support; and program sustainability.

RPG NATIONAL CROSS-SITE EVALUATION AND EVALUATION-RELATED TECHNICAL ASSISTANCE

RPG projects participate in evaluation activities at the local and national cross-site level. Mathematica was awarded the contract to provide evaluation-focused technical assistance and conduct a national cross-site evaluation of current projects. For this project, Mathematica (1) reviews proposed RPG programs, partnerships, and local evaluations; (2) provides evaluation technical assistance to strengthen recipients' local evaluations and support their participation in the national cross-site evaluation; (3) collects performance measures from recipients and develops a report to Congress on their progress; and (4) conducts a cross-site evaluation of the implementation, outcomes, and effectiveness of RPG programs.

FOR MORE INFORMATION ABOUT THE RPG PROGRAM, PLEASE CONTACT:

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NCSACW RPG website:
<https://ncsacw.acf.hhs.gov/>

MPR website:
<https://www.mathematica.org/>

¹ SOURCES: Children and Family Futures. (2012). *Targeted grants to increase the well-being of, and to improve the permanency outcomes for, children affected by methamphetamine or other substance abuse: Fourth annual report to Congress*. Prepared for the U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau; Children and Family Futures. (2013). *Regional Partnership Grant (RPG) Program: Final synthesis and summary report*. Prepared for the U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau; RPG Grantee Semi-Annual Reports through October 2019

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National Center on
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