

Improving Employment Outcomes: Healthy Relationship Skills Matter

Webinar Transcript

June 9, 2016

Operator

Welcome to the “Improving Employment Outcomes: Healthy Relationship Skills Matter” conference call. Today’s event is being recorded. I’ll turn the conference over to Stephanie Vester.

Stephanie Vester

Thank you, and welcome, everyone. Thank you for joining us today for the National Resource Center for Healthy Marriage and Families webinar for OFA and OCSE Region IV, entitled “Improving Employment Outcomes: Healthy Relationship Skills Matter.” Before we get to the agenda and content for today’s webinar, we are going to go through just a few webinar logistical items.

The webinar today will be an hour and a half, ending at 12:30 p.m. Eastern Time. Audio for the webinar will be broadcast through your computer, so please make sure your speakers and volume are turned on. If you have any technical issues throughout the webinar, or problems seeing the slides or hearing the presentation, please send to us a message in the Q & A pod that is located on the bottom right-hand corner of your screen, or feel free to call us at 1-866-916-4672, and we will be sure to assist you.

After the presentations today, we will have a Q-and-A session. We encourage you to type in questions you think of while presenters are presenting by typing them in the Q & A pod. We will be collecting the questions as they are submitted, and then we will address those questions during the Q-and-A session at the end as time permits.

Throughout the webinar, you can browse our weblinks by clicking on any of the links in the Weblinks pod, and you can download materials by selecting Files in your Files pod. We will also be conducting a couple of poll questions throughout the webinar that we encourage you to participate in.

Our speakers for today’s webinar include:

- LaMonica Shelton: LaMonica currently serves as the TANF Program Manager for the Office of Family Assistance within the Administration for Children and Families Region IV, in the U.S. Department of Health and Human Services. Prior to that, Ms. Shelton served as Acting Director for Research and Evaluation, Associate Director for Policy and Communication at the Corporation for National and Community Service, an independent federal agency that engages millions of individuals of all ages and backgrounds in service to help meet the needs of communities through its programs such as AmeriCorps.

- Jackie Mull: Jackie is the Regional Program Manager for Region IV, Atlanta Office, joining the Federal Office of Child Support Enforcement, OSCE, in November of 2008. She has over 20 years of child support experience. Her experience includes work in the following states: Ohio, Mississippi, Nebraska, Michigan, South Carolina, and D.C. She has a blend of program, technical, and management experience. She has worked as a caseworker, child support director, compliance officer, hearing officer, IT business analyst and IT project manager. She is also a graduate of Hammel College in Akron, Ohio, majoring in Paralegal Studies; and
- Robyn Cenizal: Robyn is a principal with ICF International, and has served as the Project Director for the National Resource Center for Healthy Marriage and Families since its development in 2011. She previously directed the TANF Faith-Based and Community Organizations Collaboration Institute, a research-to-practice project which focused on developing and strengthening public-private partnerships to build capacity at TANF agencies.

In addition to her federal-level work in family strengthening, healthy marriage and responsible fatherhood fields, she also brings with her over 26 years of local government experience, specializing in strategic public-private partnerships to mitigate community distress, including broad expertise with family strengthening, child welfare, workforce development, violence prevention, and poverty reduction. She is a Certified Family Life Educator and has authored numerous publications on promising practices associated with serving low-income and culturally diverse populations.

We are grateful to have our speakers here today. Moving on to our agenda, as you can see, our logistics and brief introductions of our speakers. Then we have welcome and opening remarks from LaMonica in OFA Region IV, welcome and remarks from Jackie in OSCE Region IV, and then our presentation from Robyn, focused on healthy relationship skills, their role in improving employment outcomes, and strategies for integration. After that, again, we will have a Q-and-A session, so we encourage you to submit questions as you think of them throughout the presentation, and we'll address those at the end. So again, welcome, everyone, and I will turn it over to LaMonica to get us started with opening remarks.

LaMonica Shelton

Thank you, Stephanie. Hello, everyone. As Stephanie said, my name is LaMonica Shelton, and I am the TANF Regional Program Manager for Region IV in Atlanta. Thank you so much to both the TANF and the child support staff across the region for joining us today. We're happy to see that the state and tribal staff, and staff who operate in local areas and counties have also joined. Thank you to the states for extending that invitation to your additional staff.

We really feel that this webinar is very important for a number of reasons. First, this webinar is essential to continue this concept of partnership that we've been talking about for a long time. We realize we don't want to just talk about partnership for partnership's sake, but we are intent on actually working smarter and more effectively together. As

you all are aware, many of the TANF and child support families overlap. Together, we continue to think about ways we can support those families -- support their family well-being and support their employment success. We hope that this webinar takes another step in that direction.

Second, we always want to have next steps from our regional meetings, so that we are not just sharing and taking in information, but that we are continuing to build on that information and utilize that information thereafter. Many of you came to the Atlanta regional meeting last month and you heard from our featured speaker, Robyn Cenizal, and she talked about case management strategies. I think that this webinar is a nice follow-up to that conversation we started there. But nevertheless, if you were not able to attend that interagency meeting in Atlanta, you still will be able to benefit significantly from this information today, just like every other participant.

Lastly, we want to continue to offer concrete and practical strategies and resources to you as you serve families along their pathway to obtaining and sustaining employment. We hope that our meetings and our webinars such as this one further open up avenues for you all to share with one another, to share information, to share resources, to share ideas that you're thinking about, to share ways that you're trying to be innovative with one another, just to share what you're doing. We hope that today, this webinar also provides an avenue for you to communicate with one another across states, across counties, across the region, across programs, even. So not just child support to child support, or TANF to TANF -- but TANF and child support together. So again, thank you for participating, and I will turn it over to Jacqueline Mull.

Jacqueline Mull

Good morning. Like LaMonica said, I really do appreciate the opportunities for us to further explore our partnerships, and how we can best serve the clients that we have in common. I think the big thing that occurs with partnerships is, we learn more about each other's programs. Our programs serve the same population, but we don't often know what each other does. I was also taking this opportunity to provide more information to our TANF partners on how exactly the child support program has evolved and changed -- because, while you make referrals to our program, I'm not sure that our TANF partners are aware of how much our services have expanded, and how we partner with you in moving the families toward self-sufficiency. Can you go to the next slide, please?

This bubble chart that I have here shows the services that I believe traditionally identifies with the child support program, and that is our core services of locate, establishing paternity, establishing support, and collecting support. And those are our core services -- they won't go away. But what we have learned is to be better serve the family in the best interest of the child, we needed to move more towards family-centered services. So those additional bubbles that you see there that are around our core services show you how much the program has expanded and evolved. We do look at healthy family relationships, engagement of fathers from birth -- because we do understand the success of a child when they have interaction with both of their parents. It's not just about collecting support and having a father meet their financial need. It's about engaging them so they play a role in the child's growth and development -- because we know, again, that it increases the child's opportunity to succeed.

Economic stability – we are definitely partnering with you on that, and with the Department of Labor. And like LaMonica indicated from our joint meetings, and some of what Robyn shared, is that we understand that successful employment better serves all parents, all our participants that we serve. So our primary focus is on assisting the non-custodial parent with securing employment so that they're able to secure and pay their support. Because contrary to what people believe about our program, we do strongly attempt to make the distinction between those individuals who have the ability to pay and do not want to pay, and they would fall into those core services, in that collection and that locate. But we understand that there is also a part of the caseload population where there is a desire to pay, but there is not the ability to pay -- so our partnership is identifying partners that have the tools, the training, and the employment opportunities so that we can help these individuals get to work and be able to better support their families.

The healthy family relationship piece, again -- understanding that a child needs to have the support of both parents. So we try to encourage -- in fact, now the child support program is moving towards including parents to sign agreements in their child support orders when they have both parties there and they can agree. Again, understanding the bottom line is the best interest of the child -- so those healthy relationships help that child succeed. Health care -- we've always looked at pursuing health insurance and making sure that a child is covered -- but now, with the Affordable Care Act, that is becoming less of a huge part of what we do.

And while we look at families and trying to keep the child engaged with both parents, we are very aware that there could be issues around family violence, and why the parents cannot connect. We do find that sometimes, even using our access and visitation programs, still allow the father or the parent to have supervised visitation -- but again, whatever we do, it is never our intent to put anyone in harm's way. We try to assess and do what's in the best interest of the child, but we're always making sure never to put anyone in harm's way. It's always to pursue what's in the best interest of the child.

The last bubble chart there that I'm going to talk about, which is a clear shift in how the child support program has evolved -- child support prevention. We don't want people to need our services. We go into schools and we do outreach to young people, and we talk to them about what are the consequences of becoming a parent too young -- and what it not only does to the success of your child, but what it does to your own success. The consequence that you pay is not financial. The consequence that you pay drastically changes your life and your future. So we go into the schools -- the high schools right now -- and we talk about prevention. Many of our state programs now have a huge prevention piece where we're talking to young people about not becoming parents too soon. So that is a piece that we're excited to have, because if we can make sure young people don't become parents too young, then again, that's the success of that young person -- because they really are still a child, but yet a teenager.

So this is how our program has evolved, and this is how much it has changed. And I'm always taking an opportunity to share with our partners -- and today is primarily our TANF partners -- so you keep in mind when you are providing services to your TANF participants. Understand, when you make a referral over to us, your child support

partners, how much we are trying to do and how much our success is tied to your success. I think Robyn's presentation at the interagency meeting in May also showed us how better we can do that together. Sometimes we always talk about partnerships, but we stumble through it. We don't know what each other does, and we need help getting there.

So I'm very excited that Robyn is joining us, and she is talking to us about part of employment outcomes -- but also, she is going to talk to us a lot about partnerships and relationships. I think that doesn't just apply to the participants that we serve -- it applies to us in identifying how to serve those participants. So I appreciate the opportunity to share with you about our family-centered services approach, and I hope that you keep that in mind when you are serving the participant, and making the decision on making a referral to us. With that, I'll say thank you, and I will turn it over to Robyn.

Robyn Cenizal

Thank you so much, and thank you for the opportunity to share some time with you guys today and talk about the National Resource Center for Healthy Marriage and Families. I really applaud both TANF and child support services for the proactive approach that they're taking to getting this information out, and to working towards a holistic approach to serving families. It really is the only way that we can effectively serve low-resource families and move them to self-sufficiency -- so I certainly applaud that, and look forward to sharing some information with you.

We're going to try to be as interactive as possible, so I do have a couple of videos that I'm going to be sharing. We have some poll questions. We also encourage you to, if you're on Twitter, feel free to tweet. Our hashtag is on the slide that you see. Be sure to type your questions in as they come up so you don't lose them, and we will respond to them when we get to the end of the presentation.

With that, let me tell you a little bit about the National Resource Center for Healthy Marriage and Families. We are funded out of the Office of Family Assistance, and intended to support ACF's mission. We serve as a national repository for healthy marriage and relationship education. We gather, develop, and disseminate timely, relevant research tools and other resources -- for free, by the way -- on topics of interest to practitioners, researchers, and policymakers. And we have resources that can be simply downloaded and shared with families as well.

And the other aspect of our purpose is to assist public human service agencies in integrating healthy relationship education skills as part of this holistic approach to strengthening families. And so with that, as we get started talking about healthy relationship education, I have a poll question for you. Trevor?

There it is. Okay, so what I want you to answer for me is, which of the following attributes do you consider to be the most important in a healthy relationship? Communication, mutual respect, financial stability, [or] shared values? If you haven't, all you have to do is click on it, if you haven't ever done these polls.

[Pause]

Still moving. Okay. Looks like about 72.4 percent say communication, 16.5 mutual respect, 2.76 financial stability, and 8.28 shared values. Well, the answer is whatever you think is the most important attribute of the healthy relationship. There isn't anything that specifies what exactly is the most important attribute of healthy relationships -- but what usually comes up whenever I ask that question -- it's interesting, financial issues are one of the number one stressors that impact families, but it's often not indicated as something that we think is a most important healthy attribute of healthy relationships.

When we think about healthy relationships, what we are really reflecting on are our own experiences. If communication is the most important thing to you, then it's the most important thing for relationships. Family stressors is another area that is unique to individuals. We may have some common stressors, but the more important stressors are the things that most negatively impact us vary from individual to individual based on our previous experiences.

In the natural process of things, we typically would learn about healthy relationship attributes from our family of origin. We would learn communication, conflict management, parenting, financial education, how to manage our money -- we would learn all those things in that family of origin. We would also learn how to cope with stress. When we're a child and a toy breaks, we take it to our parent and our parent soothes us and fixes the toy, and that's how that natural process evolves. We learn how to communicate, and we learn how to deal with life's natural stressors.

Unfortunately, dysfunction can disrupt that process -- and that makes it difficult for some families, for children growing up in some families to learn through the natural process. A lot of times when we use the term dysfunction, our mind goes to the deep-end stuff: substance abuse [and] violence in the home. But some of the disruption and the dysfunction in the house can be related to things that are really beyond our control. For example, if there is someone who has a major health issue in the home, that may be a distraction. Single parents with multiple children -- sometimes they just don't have the time. Maybe they're working multiple jobs. So there are lots of different things that can be going on in a home that can get in the way of this natural process. You know, you think about the disappointment of a child who loses in a baseball game, but their parent's not there to soothe them -- that type of thing.

Stress is a huge issue, even for adults -- but it also exists for children. It's important for us to understand the concept of stress in its healthy form versus its unhealthy form. Positive stress is normal. It's part of every day. It's the thing that helps us stay on task. It's like that stress of knowing you're running late because you don't want to be running late for work -- but it's a good stress. It's not something that's long-term or damaging.

And then there's tolerable stress. You know, there's that stressful project at work, or that stressful situation at home. It could be a health crisis. It could be all kinds of things going on in the home that creates this tolerable stress. You know, the body reacts to it, but then it goes back to normal and everything's okay.

Toxic stress is that kind of stress where there is no resolution -- particularly when you're thinking about children in those early developmental years, where the children are exposed to the stress and there doesn't seem to be any consolation. There isn't an

opportunity for them to calm themselves down, to feel supported and to learn the coping skills that they need to manage stress. What's important to know about this, though, is that research also indicates that supportive responsive relationships with a caring adult as early in life as possible can prevent or reverse the damaging effects of toxic stress response.

And so when we think about stress, it's easy for us to think about what are stressors as adults. But I want to take a minute and talk about for little people. This is extremely significant to the work that you're doing, because not only are you dealing with adults who are responding to stress, but you're also dealing with adults who are parents -- and helping them better understand how stress affects children can be very helpful to them in breaking that cycle. With that, I want to show a quick video on how quickly children can respond to stress.

Video

Dr. Edward Trunick: Babies this young are extremely responsive to the emotions and the reactivity and the social interaction that they get from the world around them. This is something that we started studying 34 years ago, when people didn't think that infants could engage in social interaction. In this still face experiment, what the mother did was she sits down and she's playing with her baby who is about a year of age.

Mother: My good girl --

Dr. Edward Trunick: And she gives a greeting to the baby. The baby gives a greeting back to her. This baby starts pointing at different places in the world, and the mother is trying to engage her and play with her. They're working to coordinate their emotions and their intentions, what they want to do in the world. And that's really what the baby is used to.

And then we asked the mother to not respond to the baby.

[Mother turns her back to baby, then looks at baby with no facial expression.]

The baby very quickly picks up on this, and then she uses all of her abilities to try and get the mother back. She smiles at the mother. She points, because she's used to the mother looking where she points. The baby puts both hands up in front of her and says, what's happening here? She makes that screechy sound at the mother like, come on -- why aren't we doing this?

Even in this two minutes, when they don't get the normal reaction, they react with negative emotions. They turn away. They feel the stress of it. They actually may lose control of their posture because of the stress that's they're experiencing.

[Baby cries.]

Mother: Okay, I'm here. And what are you doing? Oh, yes. Oh, what a big girl.

Dr. Edward Trunick: It's a little like the good, the bad, and the ugly. The good is that normal stuff that goes on, that we all do with our kids. The bad is when something bad happens, but the infant can overcome it. After all, when you stop the still face, the mother and the baby start to play again. The ugly is when you don't give the child any

chance to get back to the good. There's no reparation, and they're stuck in that really ugly situation.

Robyn Cenizal

In the video, we see how quickly this infant can move from happy to a stressed out state. I think that this is really important for a couple of reasons. First of all, thinking about the parents, stress can sometimes be immobilizing for us. Whenever there are children involved, if we are immobilized with our own stress, then we're not responding to their needs perhaps as much, and as often as we should. We're not interacting. Young parents don't even sometimes understand the importance of that verbal interaction with their children. You know, they put them in a bouncy seat and they do whatever they need to do, and sometimes that's what we have to do. But understanding how important this interaction is is key, I think, to serving both parents and children.

It's also important to be mindful, when we think about stress and adverse childhood experiences, that not every child experiences the same event the same.

[Slide: young boy holding marker next to a baby with marker writing all over him.]

As you see from this picture, one of the children seems to be having a really good time. The other one not so much -- and I think that's something that we have to be mindful of. We can't box everyone into one category and assume just because they've had a certain experience that they're all going to turn out a certain way. We need to think of folks as individuals in understanding their individual experiences.

One of the popular conversations is the Adverse Childhood Experiences Study. This Adverse Childhood Experiences Study, also referred to as ACES, was conducted by Kaiser Permanente looking at 17,000 individuals. They looked at these older individuals and their health issues, and then asked them to fill out a self-reporting questionnaire on their childhood experience within their [no audio]. In that questionnaire, they were asked about seven categories. These seven categories that you see, including childhood abuse where actions took place directly [toward] the child, and exposure to household dysfunction during childhood in these four categories: substance abuse, mental illness, violent treatment of mother or stepmother, and criminal behavior.

What's significant about this is looking at the categories where children were exposed -- because a lot of times we think about adverse childhood experiences as being things that happen directly to the child, like the physical abuse. It's important to understand that children who have been exposed to these other issues have also experienced adverse childhood. In the categories -- they looked at these seven categories -- you see there are multiple questions in each category. But if you answered yes to one or more of the questions in any category that counted as exposed -- so if you answered yes to three of the questions, then that would count as exposed in three of those categories.

What they found was there's actually a graded relationship between exposure and adult risk behaviors and disease. So remember, I said they looked at older people and all of their health issues, and then looked back to see what their childhood was like. So as you see, the adverse childhood experiences had a negative effect on social, emotional, and cognitive impairment, adoption of health risk behaviors, disease and disability, and early

death, including suicide. And again, as they scored higher, the more likely they were to experience more of these categories.

So what does that look like? A yes in four or more categories meant basically that someone was:

- Four to 12 times more likely to suffer increased health risk, alcoholism, drug abuse, depression, and suicide attempts;
- Two to four times more likely to experience smoking, poor self-rated health, greater than 50 sexual intercourse partners and sexually transmitted disease;
- 1.4 to 1.6 times more likely to suffer from physical inactivity and severe obesity.

I am sure that if you think about many of the clients you serve, many of those clients are dealing with some of these issues, and that may be linked, in effect, to early childhood experiences.

So what does all this really mean to us? What it means is that childhood matters. It means that how we learn to deal with stress and how much stress we have to deal with, plus the number of adverse childhood experiences we've been exposed to, divided by a concept called resiliency -- and resiliency really is kind of the balancing act that we do. It's how much positive experience we've had versus how much negative experience we've had, and how we balance that out. So obviously, if we have better coping skills, that minimizes some of the stress and some of the impact of adverse childhood experiences. If we lack those coping skills, then the pendulum tilts the other way, so to speak. All of that actually adds up to how we do in terms of developing the brain components that relate directly to executive function and self-regulation. These are mental processes that enable us to plan, to focus attention, to remember instructions, and to juggle tasks. So I want to talk a little bit more about that. I want to share a video with you that really gives, I think, a good overview of what this executive function is, and what that means.

Video

[Children playing in classroom]

Narrator: Science tells us that brains, minds, are built, not born -- and at the center of this dynamic architecture are a set of skills called executive function and self-regulation.

C. Cybele Raver, Ph.D.: Children's self-regulation and executive function are key ingredients in their lifetime performance. It's not just about learning language or learning numbers or learning colors.

Deborah A. Phillips, Ph.D.: We have to be able to work effectively with others, with distractions, with multiple demands. These actually are skills that contribute to the productivity of the American workforce.

Teacher: Justin, look at your shapes. What should you have done next?

Philip David Zelazo: Educators, I think, are looking for just this sort of thing. When we describe what we mean by executive function, they say, "Yes. That's it -- that's exactly the problem. These kids, they can tell me these rules, but they can't actually use them."

Teacher: [holding index card] What's this?

Boy: A toolbox.

Teacher: A toolbox.

Narrator: What is executive function?

Boy: Safety goggles.

Teacher: Safety goggles.

Deborah A. Phillips, Ph.D.: Probably the best way to think about it is sort of like an air traffic control system in the brain. Just like an air traffic control system has to manage lots of airplanes going on lots of runways, and really exquisite timing and so on, a child has to manage a lot of information and avoid distraction.

We really think of it as involving working memory and inhibitory control and mental flexibility. Take a situation where a child is having to take turns. So first of all, the child has to have inhibitory control. The child has to be able to stop whatever he or she is doing and let the other child take a turn. But when it's your turn again, you also have to remember what it is you're supposed to be doing. So that pulls on working memory. If the children who are taking the turns after you do something unpredictable, you have to be able to adjust what you're going to do next, and that requires mental flexibility.

Children who are struggling with these capacities often look like children who just aren't paying attention, or children who are deliberately not controlling themselves.

Deborah J. Leong, Ph.D.: If you don't have self-regulation, you act out and the teacher puts you in time out, and so then you miss part of the learning that's going on, and then you are more upset because you're behind, and so you act out. And so you get this downward spiral.

Narrator: How does executive function develop?

Deborah A. Phillips, Ph.D.: In little children, and even in the infant and toddler years, you begin to see the roots of executive functioning skills. What's going on in our brains is unbelievably intricate and complicated.

Silvia A. Bunge, Ph.D.: The prefrontal cortex, or the front third of the brain, is important for executive function. But it's more than just the prefrontal cortex. This region doesn't act alone. It's involved in controlling your behavior through its interactions with all other parts of the brain. The brain goes from a situation where you've got the nearest neurons communicating very strongly with each other and ignoring the rest of the brain, to these widespread networks that are connecting these different areas.

Executive function changes over the life course. It improves radically over the first few years. It continues to improve throughout adolescence. It's not until early adulthood that you have the adult-type networks that are very strongly activated that connect different brain regions together. Also, we believe that executive functions can be trained.

Philip A. Fisher, Ph.D.: It's just like going to the gym. So the more you practice in these areas, the stronger the capacity is likely to become, because you're helping to strengthen those neural connections.

Boy with toy sphygmomanometer: You're at 24.

Deborah A. Phillips, Ph.D.: Slowly but surely, you're going to be able to step back, and that child's going to go into the world with these skills where they can get along with other people, change rules, and they can be flexible and they can accomplish new things and they're unafraid.

Boy holding paper: I got bit by my dog in my arm. Oh dear.

Deborah A. Phillips, Ph.D.: If we don't learn these skills during the childhood and adolescent years when they're coming online, we are really ill-equipped as an adult to hold a job, to maintain a marriage, to raise children, to get along with each other, to basically be part of a civil society.

Boy with toy sphygmomanometer: You're okay.

Robyn Cenizal

So in the video, we see this experience with little people. But fast forward without the opportunity to strengthen these executive function skills. Fast forward to teenagers, and these are the very teenagers who are struggling in school and winding up getting into trouble and on the juvenile justice path. Fast forward beyond that, and these are the very adults that are hard to place and are having difficulty finding employment and maintaining employment. They're often the people that you're trying to serve.

So it's really important that we understand that some of the behavior issues you're seeing in the families that you're serving are not that they're just intentionally trying to be difficult -- but that they have these issues that they've not had any opportunity to address because in our society, typically if you don't learn these skills when you're in your family of origin, we don't offer an opportunity for these skills except in a punitive environment. For example, if there's a domestic violence situation, then you get conflict management classes. Or, if you get involved with child welfare, you get parenting classes.

So why is the federal government interested in this? Well, "How much do you think family fragmentation costs taxpayers each year?" Less than a billion dollars? One to 50 billion, 50 to 100 billion, or more than \$100 billion a year?

[Pause]

All right? Looks like 47.3 percent of you are correct. More than \$100 billion per year, and that is actually based on data from 2006. The Scafidi report on Taxpayer Cost of Divorce and Unwed Childbearing reported in 2008 \$112 billion a year. We also know that right after that timeframe, there was this thing called a recession. So you can imagine how much these dollars have increased. This was the estimated cost as it relates to all of the social services that have to step in and support those families, as well as the loss of tax base. If you think about it that way, it makes total sense that the federal government would want to invest money in strengthening families and doing it from a holistic approach.

There's also the impact on communities, because interpersonal skills transfer to the community and the workplace. Employees in stable, healthy relationships are more productive and miss less work. On average, an employee loses 168 hours of work time

in the year following a divorce. What is interesting about that is, that's just looking at divorce. That's not necessarily looking at what might be the impact for, for example, cohabiting couples who separate. We know there's an impact, but the research hasn't been done to determine what that impact is.

Absenteeism, reduction in productivity and increased health care costs due to marital distress costs U.S. businesses \$6.8 billion a year. This is a costly issue. And increased stress drives employee turnover, diminishes productivity, and affects medical, legal and insurance costs. For example, one study showed 46 percent higher health care spending for stressed employees. Stress also leads to higher workplace absenteeism, illness and injury. Not only that, but there's also implications for stress as it relates to workplace injuries. It's also been linked to a range of health issues including depression and heart disease. The World Health Organization called stress the health epidemic of the 21st Century.

Now, I know none of you have ever felt any stress, so you certainly wouldn't be able to relate to that, but it's out there. And stress comes to work – for many employees, a common source of stress is from home with their relationships with their spouse or partner. It's interesting because a lot of times we think about stress, we talk about job stress. But it really does come from home a lot of times, and when we bring that stress in, or we're absent and not present because of stress and because of issues at home, that means our co-workers are taking up the slack -- and when our co-workers are taking up the slack, that means they're becoming stressed -- and so it really has a domino effect on everyone around us, not to mention the children who are exposed to the stress in the home. So it's really something that needs to be addressed.

What's interesting about these interpersonal skills like communication and conflict resolution, often referred to as soft skills, is what Dr. James Heckman says. In 2000, he was the Nobel Prize-winning economist. He has actually done a lot of research on the return on investment for going back to what we said about executive function -- that the brain is like a muscle, and that executive function can be trained. So teaching these soft skills actually has a return on investment, regardless of where you start the intervention. Now obviously, the sooner you intervene the better, and that's one of the reasons why there's a lot of conversation around two-generation approaches, where you're working with adults but you're also working with children. But what's really exciting is that, even if you don't get to intervene until folks are adults, you can still teach these soft skills and generate a return on investment.

The messaging is important. What we talk about healthy relationship skills, what we're really talking about are interpersonal skills such as communication, conflict resolution -- these are those interpersonal skills that transfer from the family, to the workplace, to the community, to the school. We're also talking about critical skills like parenting and financial education. Parenting and financial issues are the top two stressors that impact all families across socioeconomic lines, but these can be even greater issues for families who have low resources. These skills can be integrated individually into job training programs or social service delivery programs – but they can also be integrated collectively, as part of a more comprehensive program. It just really depends on what type of service delivery system you have.

So what we have here is called the Energy Industry Competency Model. What I wanted to show you is as it relates to the workplace and job training programs. When you look at this, the top tier, Tier 6 through 8, these are the types of jobs that we're talking about in the energy industry. Then you see the technical competencies that are down below. But look at Tier 1 -- one of the first things that they have in this foundational tier is interpersonal skills. They also have things like flexibility and adaptability. Now, think back to some of the words we heard in executive function. Looking at Tier 2, we've got writing, listening, speaking, communication skills.

Tier 3, we've got teamwork, problem-solving, planning, following directions -- all of these things relate to what we heard in terms of executive function, yet these are not the skills that most job training programs train on. The expectation is that you already have these skills, and they train on the technical competencies up above. So for families who get into job training programs that only focus on technical competencies, if they didn't already have this foundation, even if they passed this training program, they're not likely to be successful in that industry.

That's one of the reasons why it's so important how you, as folks interfacing directly with these families, how you interface with them using interviewing techniques and strength-based approaches. Because the goal is to build a partnership with the individual to help move them along the continuum to self-sufficiency. Not the old case management-type approach, where you just give them a list of things they have to check off in order to move to the next phase, but staff foundational principles that lead to economic stability and employment. Things need to be strength-based. Coming from a strength-based approach for adults, it's much more important. The concept of motivational interviewing and a conversational approach, which is really about building rapport with the person you're meeting with. Improve active listening. If you're staring at the computer, filling in a form, never making eye contact with the person sitting at your desk -- you're not building rapport. These are important strategies to help build their self-sufficiency.

So thinking about staff, key. Power of a caring staff -- we've heard it before. People don't care what you know until they know you care -- it's so true. The strength-based approach, they need to feel like you're a partner in moving them forward on whether it's meeting the needs of their case management as it relates to child support or TANF. Transferring the skill set approach to employment, helping people understand this -- and you've got to set high expectations for the folks that you're working with. Don't assume they won't succeed. Assume they will succeed and then provide them the supports that they need to do so. Modeling is hugely important -- staff need to model good communication skills, good interpersonal skills, and consistency.

Again, the strength-based approach is really about shifting the focus of what we're doing to be holistic -- a more holistic view of the client and the client's situation and the family's, instead of just making assumptions. Back to the conversation around child support, where there's this perception that people just don't want to pay. There's a difference between those who don't want to pay and those who are just not in a position to pay -- and being mindful of that is a way to come at this from the strength-based approach.

A comprehensive assessment tool that helps to identify and eliminate barriers that are causing problems for families is important. That helps to work together to build a partnership that outlines a plan that they can be successful at. Setting goals together, as opposed to telling them what they need to do.

I've mentioned one assessment tool here. There are tons of assessment tools, but the OWRA Tool is a tool that ICF had developed and one is for OFA. One of the things that I think is important to notice are all the different categories that are covered in this assessment tool. It's designed to identify an individual's strengths and their barriers, and then to help map a plan based on their strengths.

We talked earlier about collaboration and interconnectedness, and I wanted to share this, because I really do believe that we all are interconnected, but we're not always integrated. We need to think more integrated in terms of how do we connect the dots on what's available. So if you think about all of these organizations as being opportunities for referrals to other organizations or opportunities to recruit into programs -- and Healthy Marriage and Responsible Fatherhood and reentry programs, there are 98 of them that are funded across the country to provide these specific skills that I mentioned: communication skills, conflict management, parenting, and financial literacy. Connecting the dots so that your programs are identifying those resources in the community to make referrals to, as opposed to just thinking that you have to actually do it all yourself, is a good strategy.

There's also Cooperative Extension, which is attached to the land grant university system. Cooperative Extension also offers financial literacy, parenting, and healthy relationship education. So those are other resources that can be tapped into.

So what's the practical application of all this? Consider offering informational resources to strengthen relationship skills in your waiting rooms, or as links on your website. That's a simple way to share information. Partner with community organizations like those that I mentioned that are already offering healthy relationship, parenting or financial education programming, and make client referrals. Also, integrate healthy relationship education programming into job training programs that you're already working with. There are lots of easy ways to integrate these skills and share this information, and it doesn't always have to be a class.

The Resource Center offers research that supports and promotes the integration of healthy marriage and relationship education skills, and we have resources, tips, [and] tools that you can use, and you can share with the families you serve. We've got a great collection of materials that you can just print out. You'll see some really relevant resources in the box to the right that says Files that you might want to consider downloading. Again, everything that we've developed is research-based. It's all free, and it's all available on our website, but we also provide training and technical assistance for free to support stakeholders like you as you work to figure out what are the strategies. So for example, we could coordinate with you on your strategic plan, and help you figure out what makes sense based on your service delivery system.

We offer a free research-based curriculum that is available on our website in our Virtual Training Center. It is *Strong Relationships, Strong Families*, and we worked with Dr.

Dave Schramm from the University of Missouri to adapt this curriculum. He had developed it under a Children's Bureau grant, and under that grant, he trained 1,400 child welfare workers using this curriculum on how to integrate it. Within the curriculum, there are learning objectives and there are key concepts, and then there are practice tools. The practice tools are particularly interesting for the work that you do, because they are designed for people who are not typically facilitators, if you will.

We offer conversation starters, which are talking points to help you start the conversation from an asset-based approach around healthy relationship education.

There are activities that you can use in the curriculum, and these activities are marked whether they're appropriate for couples or individuals, or however might be appropriate.

Informational handouts -- these are simply handouts -- information that can be printed out and shared with clients that you serve. For example, we have a handout on dating tips for single moms -- things like that that you can share. Tips for healthy eating, tips for being more active in your family, lots of different resources.

There are seven key concepts, and this is based on research that says these are the seven key concepts of healthy relationship education. Care for self, getting to know your partners well -- The getting to know your partners well is one that I think is particularly important from a safety issue as it relates to children. Too many times in the news, we hear of a mom who's left her child in the care of a man that she didn't know very well, and things didn't end good for the child. I think that is a really key chapter.

Nurturing the relationship is important -- showing affection and respect. This is important to combine those two because it gets to the issue of domestic violence. Some people don't understand what respect means, and the other thing that we've integrated throughout this curriculum are safety flags that help raise flags in areas where those who are in a high-conflict relationship might try to use the information to manipulate their partner. We've added safety flags to help reduce the likelihood of that.

Developing and maintaining friendship. Friendship is key to long-term relationships -- dealing with differences in healthy ways and engaging in positive social network. Now, for those of you who are thinking, "Gosh, well, we only serve individuals. We don't really serve couples." What's really important to keep in mind is that, individuals are where the change occurs. I can't do anything to change my partner. All I can do is change how I react to my partner. So working with individuals is the key to actually breaking patterns of unhealthy relationships. I would encourage you that, even if you only work with the custodial parent or the non-custodial parent, healthy relationships are healthy relationships. So helping non-custodial parents and custodial parents understand co-parenting and how to have healthy communication and conflict management in the context of that relationship. Then, as it expands, those former partners get new partners and the circle grows. It is very important everyone in the circle understand that for the benefit of the children, it's important that they all get along and co-parent effectively.

This just gives you the insight on this first chapter. So you can see the various topics that are covered on being mentally and physically healthy, mental and emotional well-being, mindfulness, healthy eating, sleep, major health issues and relationships. It just gives you a deeper dive into what that chapter looks like. It's a very easy read and the

curriculum can be downloaded as a PDF, or go through the Virtual Training Center. When you go to the Virtual Training Center, you set up a profile. You can come in and out as much as you want. If you take that course or any of the courses that we offer and complete the quiz at the end with 80 percent completion, you will get a certificate of completion which can then be used for CEUs. So if you or any of the folks in your organization need CEUs, it's a great strategy.

We also have a four-part series: Communication, Conflict Management, Parenting and Financial Education. These are short courses. It will take you less than an hour to complete these courses online, and they're really good refreshers for those of us who think we know this stuff. They're great even for families that you serve. They can go online and take these little courses themselves. Again, they'll get a little quiz at the end. These are written on an educational level that would be appropriate for most of the population that you serve as well, so they're really easy and fun.

As I mentioned, [we have] the *Strong Relationships, Strong Families* curriculum material. Module 1, when you go into the Virtual Training Center, Module 1 is going to be very much the information we've talked about today -- what is healthy relationship education? Why does it matter, and why should stakeholders like you be interested? Module 2 is what I just talked about a few minutes ago. It's an actual curriculum that can be used directly with families, and it has all of those seven chapters with the key concepts, conversation starters, activities and informational handouts, and the safety flags that I mentioned.

We do provide technical assistance. Again, it is free. We have multiple ways that we provide it. We provide [it] through the Virtual Training Center. We can do integration exchanges, where we can have a web-based conference; webinars; written products and resources; and conference calls. So we can, for example, if you are planning a strategy session, we can join you by conference call and participate in that. There is a technical assistance request form on our website that you can fill out, and we will respond within three days -- or you can email or contact us directly, and we're happy to do that. So with that, I'm going to turn it back over to Trevor and Stephanie for questions.

Trevor Hoffberger

Thanks so much, Robyn. The first question that we have is actually for LaMonica. That

LaMonica Shelton

There are two things. If you are interested in the materials that were actually presented and shared at the meeting, we can certainly make that available to you. You can get in contact with me directly, or in contact with someone in your state who attended that meeting. For me, my email address is my first name dot last name -- LaMonica dot Shelton at ACF -- F as in Frank -- dot H-H-S dot gov. That's LaMonica.Shelton@acf.hhs.gov. Then we are also working on some follow-up materials to share with you all, so that will be coming in the future. Those are materials that were not presented at the meeting, but certainly take off from the discussions that we had at the meeting.

Trevor Hoffberger

Thank you, LaMonica. I also wanted to remind the audience that if you do have questions, you can use the bottom right-hand pod on your screen to type in the questions, and we will place that in the queue.

The next question is for Robyn. The question says, "What resources do you have that states could access immediately, specifically with regards to partnerships and domestic violence?"

Robyn Cenizal

Well, a couple of things. If you visit the Resource Center website and you look under Strategies for Integration, we have an entire section on partnerships. In the section on partnerships we have all kinds of cool stuff, including sample MOUs and clarification around when you might want to use a Memorandum of Understanding, versus when you might want to use a pay for performance-type agreement. We have a lot of resources there on partnerships.

We also have a tremendous number of resources as it relates to domestic violence. We have a Family Violence Prevention Toolkit, which you will see in the File Download box to the right of the screen. That is an amazing resource. What it really does is it is speaking to specifically organizations like yours, who are not responsible for addressing domestic violence or child maltreatment, but are working with families who have been possibly impacted by those issues. I think it's a great resource. You can download it immediately from the box. You can also go to our website and you'll find that information.

We also at the Resource Center have a Family Violence Prevention advisory panel, which is made up of a group of fabulous folks from around the country who work on these issues from varying perspectives -- from the research perspective to the men against violence perspective, to the LGBT community perspective. We have lots of those resources there.

Trevor Hoffberger

Great. Thanks. As a quick follow-up to the resources, are materials available in different languages?

Robyn Cenizal

We do have some materials that are available in Spanish. We are, this year actually, moving in the direction of creating more resources that are available in Spanish. Previously, we were focused on -- since our primary targets are governmental agencies, and in most of those agencies, English is the spoken language, on the government side, I should say -- so we are moving in the direction of increasing our Spanish-speaking materials, but we haven't gotten a bunch of them yet.

Trevor Hoffberger

Thanks. The next question says, "What tools are available for TANF case managers?"

Robyn Cenizal

Again, in the File Download box, there is a resource that says “NRCHMF Resource List.” In that list, you will see some resources. That list gives you information on our most popular research-based resources. It will highlight whether they are research-to-practice brief, a tip sheet, a fact sheet, a toolkit or a guide, and you will see in there, for example, [a] research-to-practice brief on relationship education and TANF, and working with TANF agencies. For example, the one that you also see to the right there, Integrating Healthy Marriage Education Into TANF Programs, is one that is specific to TANF, but there are lots of others out there too.

Trevor Hoffberger

Okay. The next question is open to everybody. It’s about next steps. “What are some good next steps following this webinar? What other resources do you recommend we access that align with today’s discussion and might not have already been mentioned?”

LaMonica Shelton

This is LaMonica. I can start off with the next steps and Jackie can feel free to chime in, and then maybe you, Robyn, can add some more information. Next steps related to the partnership, as I mentioned earlier, we’ll have some materials that we’ll be able to share in the future. Certainly, if you have some suggestions -- because we’ve been partnering for a little bit of time, and we’ve been trying to build on that and grow that partnership more -- it certainly, if anyone has any suggestions about things they would like to see happen -- whether that’s in regards to a future in-person meeting, whether it’s related to a webinar or conference call -- any other things that you would suggest that would be most helpful to you and to case managers in their work, we would definitely love to hear some of those ideas.

Jacqueline Mull

This is Jackie. Something else that, it’s a prime opportunity because of the requirement of the WOIA requirement that it is really pushing the partnership, so if you are not aware of whether or not your agency is included in -- because each state had to submit a plan on how they were going to work with their program, and efforts to implement the Workforce Innovation Opportunity Act. It’s a good time for you to reach out to maybe your other state agency partners and see if you were included in that plan, and if you were not -- because child support is not a required partner, but in some of our states, child support has been invited to the table.

But if you have not been, this is a good opportunity to share how and why you should be. We started building that bridge during our meeting in May. Actually, we’ve been building that bridge for several years. We’ve had some states come together and put together action plans -- action plans that help them work across their program, identify where they are, where they can potentially share resources, make a referral to each other, or how they can work together. I think it’s a prime opportunity for everyone to ask the question of, who are we currently partnering with? Are we a part of this plan, and if we are not, figuring out how to come to the table and explaining how you are a valued partner and should be included. Robyn?

Robyn Cenizal

I think all of that sounds great, and we can support any of that that would be helpful. I would also suggest that as a next step, folks visit the website. The weblinks are in the box to the upper right of the screen as well. Check out the Virtual Training Center, and encourage colleagues to maybe go through Module 1 in the Virtual Training Center so that they get this information. Today's webinar will be archived on our website once it's 508-ed and everything is well, so I would encourage others to do that. Sometimes it takes getting the buy-in of all the right people in order to move forward on these things, but I am happy to support any next steps anyone would like to make, and brainstorm on ideas as well.

Trevor Hoffberger

Thank you all for your responses. The next question is for Jackie, I believe. It has to do again with TANF and child support. "Once the TANF case has been closed and the customer put into transitional phase and no longer receiving cash benefits, are they required to cooperate with child support requirements?"

Jacqueline Mull

Required? No, but I think it's important to understand the necessity of the child support services. When you say "required" to a partner when they are receiving TANF, there is a requirement that if paternity hasn't been established, that paternity should be established. But a family should want to establish paternity regardless of whether or not there is a TANF case involved, because that's essential to the child, and that child being connected to both of their parents. The requirement in order to receive your TANF benefits do go away when you close that case, but I would suggest to our TANF partners that when those TANF cases do close, they continue to encourage those participants, those families, to secure those needed services of having paternity established. [They] may be able to get parenting time access, visitation, as well as establishing a support order. The requirement goes away, but the need to keep those families connected to the child support program does not go away.

Trevor Hoffberger

Perfect. Thank you. The next question is open to anybody and it says, "Do you have any resources that can help staff assist their clients as they navigate the referral process?"

Jacqueline Mull

This is Jackie. I guess I'll go first. This is something we continue to try to improve on, and where and why the referral from TANF to child support is required while that family is receiving TANF. There are so many other referral processes in here about, how do we make referrals to an employment and training program? How do we make referrals related to if you see there is a substance abuse issue? When we talk about referrals, the referral from TANF to child support is required when that person is receiving benefits, but there is a large number of other referral processes within here that we are really looking to improve and streamline. Again, I think this is a great opportunity with the Workforce Innovation Opportunity Act for us to improve how we can make those referrals to each other where the person actually gets the service – not [that] we make the referral, and then we don't know what happens after.

I think that's a big part that we're continuing to try to address and to improve, and we're always looking to get best practices on how to do that. Sometimes it seems like the family might fall between the cracks if they have to take that referral and walk across town. They might not make it across town, or a walk across town might be too far, and they don't have money for bus fare, train or whatever. It's not just making the referral. It's making sure that that participant actually gets the services that you are referring them to as well. This is the tricky part. This is the part that we really need to come together and figure out how best to do it. If you're doing it well, please share it.

LaMonica Shelton

This is LaMonica. I think that was very well said, Jackie. What I was going to say is I can't, at this particular point in time, point to specific resources that exist. Maybe Robyn is aware of something. We can certainly look into that further, but what I was going to suggest, one of the things Jackie touched upon is a lot of times -- and you all already know this, but when you make referrals, sometimes that person may not follow through, or they may start the process and you don't know what's happening with them. I know resources are limited, especially the resource of time -- but one suggestion really is to figure out what's in your own system. What can you proactively do to follow up, to continue to reach out to that person to ensure that they are either doing what you suggested, or understanding why they're not? A lot of times they just need either additional communication, additional motivation -- kind of like what Robyn was saying, they need to know someone cares maybe to keep that line of communication open.

The other thing we always hear about this as an issue is with regards to data sharing, information sharing. I would strongly encourage you, to those partners that you already have relationships that you're trying to refer people to their services, or those partners that you are currently reaching out to, hoping to develop a relationship -- having that communication about your processes for sharing information about a client with one another. I know that there are a lot of technology-related legal issues around that, but starting that discussion, I think, will be very helpful and will go a long way.

Robyn Cenizal

This is Robyn. Just to follow up on that, I totally agree. It's not just the process -- it's the approach. Starting from that place of a strength-based approach is building a rapport with the client and coming at this conversation as you're a partner in their progress so that, even if you don't have time to stop and follow up with them, they want to stop and take time to follow up with you and let you know that either they've followed up on their appointment, or they're having difficulty following up on their appointment. At one point, I managed an 1115 child support waiver, which was one of your early healthy marriage initiatives. One of the things that we found particularly helpful in the case management component of all that was to give the families we were serving a calendar.

I know that sounds like a very simple thing, but many of these folks, especially if they are getting lengthy case plans, are getting multiple appointments on multiple slips of paper, and they don't have a central way to keep up with all of this stuff, so they wind up missing appointments or not following up because they didn't realize they were supposed to do something. But we found that the simple calendar -- it didn't have to be a

fancy calendar, just a simple calendar where they could actually write those appointments on there made a huge difference, in terms of them actually making it to those appointments. Just throwing the idea out there in case it's helpful, but really building that rapport so that they feel like you are a partner with them in their progress, is key.

LaMonica Shelton

And I wanted to add something else. I would also suggest thinking about, if you're making a referral, connecting that individual with a person, as opposed to a system or an entity. If they have someone that they know they're going to, and you have someone that you can communicate with at the other organization that's receiving the referral, I think that would also be very helpful as well.

Trevor Hoffberger

Great. Thank you all again. The final question we have is for Robyn. The question says, "Selecting the right partner and right curriculum can be tricky. You mentioned Healthy Relationship Skills curriculum, but what about soft skills curriculum generally? For example, sometimes when people have trouble in a relationship, they then may not even communicate with their supervisor about coming into work. They simply might not show up. The two issues are very linked. What insights can you offer here? What should we be looking for, and can you help us as we get through that process?"

Robyn Cenizal

Well actually, in the Virtual Training Center, there is a tutorial on a curriculum guide that we created, that the curriculum guide highlights free and low-cost curriculum, and in the guide, you can see who the target audiences are, and what are the content areas. The tutorial will help you navigate through there to make sure you're picking out a free or low-cost curriculum that would be appropriate for addressing these things. I think the soft skills that you're referencing in terms of not communicating with an employer when they are not going to show up for work, I think the soft skills need to be built into all workplace training programs. I think all job training -- if you're a TANF agency and you're putting people into programs to prepare them for work of any kind, I think soft skills need to be a part of that.

We've got to change the culture to making these skills available to folks throughout the community, as opposed to the perception being that they only get these skills if there's a problem -- because that's part of the problem, is that people don't talk about the challenges, because there's some perception that they're magically supposed to know all the answers anyway. You know, children don't come with instructions, spouses don't come with instructions, but we're still supposed to manage. I think if we can look for opportunities to share information on how to effectively communicate -- whether it's "Ten Tips for Healthy Communication" on a handout in a waiting room, or it's a course that they can go to, or it's built into job training programs, I think we need to look for all those opportunities. We do have additional curriculum options that are available that are free and low-cost.

There are a number of curriculum that are out there in the world. We just typically focus on the free and low-cost. They're all research-based, but we focus on free and low-cost,

because we do realize that most governmental agencies don't have a lot of extra money to spend on facilitators and curriculum.

Stephanie Vester

Great. We also just wanted to make sure -- Felicia, is there anyone who has called in over the phone, perhaps who wasn't able to listen to their computer speakers, just to make sure we can see if they had questions that way?

Operator

Yes. If you would like to pose a question, please signal by pressing Star-1 on your telephone keypad. If you're using a speakerphone, please make sure your mute function is turned off to allow your signal to reach our equipment. A voice prompt on the phone line will indicate when your line is open. Please state your name before posing your question. Again, that is Star-1 to signal for telephone questions. [pause] And no one has signaled over the phone.

Stephanie Vester

Okay, thank you so much. I think that's all of the questions that we have received online as well, so I just want to give the opportunity for Robyn, LaMonica or Jackie to say any final words before we close out the webinar.

LaMonica Shelton

This is LaMonica. I can start. I have a few things that I wanted to say. The first is a little bit of a plug. I want to go back to what Jackie Mull from Child Support was saying earlier about what Child Support does when TANF makes referrals. We talked about, in the very beginning, our overlapping clients between TANF and Child Support. But oftentimes, we hear people say that we want to be sure the custodial parent gets child support, and then can come off the TANF rolls because they're receiving that child support. I want to encourage TANF staff to continue to work with the custodial parent on her or his well-being and employment goals and employment strategies, because it is an important track for that custodial parent to obtain her own or his own self-sufficiency, so that he or she is not just relying on child support payments, so that was my plug.

The other thing I wanted to say is that I like that the information and resources that Robyn has pointed to really relate to ACF two-generation priority, because we spoke about services and resources that are available for both the child and the adults in the family. I encourage those of you who are listening today to share this information with others that you work with, your colleagues -- and to also look at the resources shared to follow-up with the National Resource Center to obtain both technical assistance and training. I mean, how often do we hear about things that are free? That's a really important word. And then I encourage you to reach out to one another -- to share ideas about today's topics and, of course, other things. But it really would be good for you all to begin to connect and to think together about your own next steps, or to share what has worked or what hasn't worked for you, or what you think you're going to try. Thank you again for participating, and I'll turn it over to Jackie and Robyn.

Jacqueline Mull

And this is Jackie. To follow along with what LaMonica has indicated, when you're looking at a partnership with your sister agency or building a relationship, I don't think we even have to look at it as being this huge task you have to take on. Sometimes if you're located in the same building within a county, then there is something that you can do right there within your county that will help you improve that connection of making sure that those individuals and those families get served there. As I stated earlier, Child Support is not a mandatory partner, but I would go as far as to say that it is a critical partner in moving the family towards self-sufficiency, and in the overall success of the child's future.

So when you are having the conversations of who should be at the table, I would definitely like for you to consider that and again, partnerships don't have to be huge and cumbersome. Sometimes it's, again, it's in your local offices. You are close enough in proximity that you could start something very simple, like LaMonica said, instead of giving the person a piece of paper and telling them they've got to take the elevator up to the fourth floor -- maybe if there's somebody that has a moment, they could walk them up there, or make sure there's somebody there to greet them when they get there, that they know they're coming for those services.

They don't have to be large, cumbersome partnerships to get started. It's just making the connection and seeing where your services connect, and then making that connection at the local, county, state, and we're still trying to do it at the federal level as well -- on building those partnerships, and we're finding that sometimes it's better to take a baby step than plan six months to take a giant step. With that, I encourage you to look for ways to connect to each other, always keeping in mind that our common goal is moving the family towards self-sufficiency, and trying to make sure that child has a successful future. Thank you.

Robyn Cenizal

This is Robyn. Thanks again. I so appreciate everyone taking time out of their afternoon to listen to us talk about this important topic. I applaud the efforts that you guys have taken already to collaborate and to work holistically to strengthen families. Keep up the good work. Please let us know how we can help. That's what we're here for. In addition to the resources we talked about today, we have almost 1,400 research-based resources in our library, so please feel free to visit the website. If you have questions, let us know. We even have a person who actually answers the telephone in our call center, so here's all of our contact information.

<https://www.healthymarriageandfamilies.org/>, info@HealthyMarriageandFamilies.org

Feel free to reach out to us, whether it's by email or phone or however, and do please follow us on Twitter, if you're on Twitter. [twitter.com/MarriageResCtr] But with that, I will turn it over to the team for the questions that come up at the end of our presentation, and thank you again.