



**Meeting Notes**

May 11, 2021

8:30 a.m. - 10:00 a.m.

Via ZOOM Virtual Platform

**Attendees:**

Sylvia Acosta  
Tracy Almanzan  
Sonia Avila  
Tricia Boodhoo  
Sharon Butterworth  
Manny Castruita  
Michelle Chavez  
Jennifer Contreras  
Emily Dawson  
Juanita Galaviz  
Cathy Gaytan  
Gilda Gil  
Santiago Gonzalez  
Adrienne Harrell  
Margaux Sarabia Lara  
Salvador Leos  
Alejandra Martinez  
Georgina Martinez  
Roger Martinez  
Enrique Mata  
Sonia Morales  
Ruben Nevarez  
Carmen Olivas-Graham  
Jennifer Phelps  
Julie Priego  
Ashley Sandoval  
Maria Seelig  
Beth Senger  
Ivonne Tapia  
Richard Salcido  
Virginia Sigala  
Isidro Torres  
Kathie Valencia  
Christopher Villa

**Representing:**

YWCA of Greater El Paso  
65th District Court  
Texas Depart. of Family & Protective Services  
Ysleta de Sur Pueblo  
Mental Health Advocate  
EPISD  
El Paso Behavioral Health System  
  
El Paso County Juvenile Justice Center  
Paso del Norte Health Foundation  
El Paso Child Guidance Center  
Paso del Norte Children's Development Center  
El Paso Human Services  
Texas Tech Univ. Health Science Center El Paso  
El Paso Human Services  
El Paso County Juvenile Justice Center  
Amerigroup  
Texas Depart. of Family & Protective Services  
County of El Paso Juvenile Probation Department  
Paso del Norte Health Foundation  
El Paso Psychiatric Center  
El Paso County Juvenile Justice Center  
Socorro ISD/ El Paso Comm. College Board  
El Paso Center for Children  
Aliviane  
Emergence Health Network  
El Paso Human Services  
El Paso Center for Children  
Aliviane  
Family Service of El Paso  
Ysleta del Sur Pueblo  
NAMI El Paso  
El Paso Center for Children  
Helix Solutions

**Welcome and Introductions.**

Ivonne Tapia convened meeting at 8:36 a.m. and called for introductions of all online participants.

***El Paso Juvenile Drug Trafficking Overview***

Ms. Tapia introduced Mr. Salvador Leos, Senior Probation Officer, Emily Dawson and Ruben Nevarez of the el Paso Juvenile Drug Trafficking division to provide an overview on the drug trafficking problems in El Paso.

Mr. Leos began by sharing stats from the past 3 years. He indicated that especially during pandemic the problem has increased especially with teenagers between the ages of 14 and 16. Shared his screen with stats from 2019 to 2021.

Emily Dawson indicated they have noticed a serious increase in the trafficking of Fentanyl. It is higher than ever before, and the drug is being distributed in pill forms and in serious amounts. In prosecution every amount is a charged as an aggravated felony. As a juvenile, determinate sentencing. The kids are going to grant jury and the punishment is 0 to 40 years. They are pleading out in 1 to 4 years. The kids are not reporting they are being threatened or mistreated. The kids don't know the severity of the crime. Ms. Dawson shared it used to be marijuana was the drug of choice, now it is more fentanyl and harder drugs. The Feds are not taking over these cases. They are being handled in State court. The increase is more severe. They are usually US citizens and parents don't know what the kids are doing. In the past, families have been threatened and now it is increasingly turning to violence and more threats.

Mr. Martinez responded to how much do the kids get paid? Some for as little as \$200. The cartel is targeting low-income families. For families in Juarez, this amount is a big amount. Fentanyl sells for \$4 to \$10 /pill.

Dr. Graham, asked how are the kids being recruited. Ms. Dawson and Mr. Nevarez responded that much of the recruitments are done through social media, because mostly all kids are users, or from friends. Text messaging is used and, in Mexico, mainly the app "what's up" is used a lot.

Ms. Morales from Psych center asked if anyone is doing outreach and education? Julie Priego responded they are working with schools, but because of the pandemic it has been difficult to get the message out. Aliviane has reached out to Emily Dawson. JPD educates parents after the fact, but again it is difficult. Sonia is willing to volunteer. Gina. Is there a correlation with guardianship with the children and parents being involved. Not in the past year, they are doing this without parent knowledge.

Ruben only one of all they stats, where the mother and sister had history of drug trafficking.

Viridiana. Do you have any information on written hard copy or in social media that can be shared with the children?

Mr. Martinez indicated there is no information available at this point to share. Hopefully, there is something that can be done as a result of this presentation. Maybe get this information into Juarez as well.

Ms. Tapia talked about how this topic of discussion came to the Council. Now that we have information, how can the group get together to help. In the past, a subcommittee or work groups were developed to help address the problem. How can we together address this issue with the school district and parents?

Ms. Gaytan liked the idea of developing a task force. There is a broad base of information to share many.

They are not aware of how they are doing with the adult drug trafficking. They will get that information in the future. The federal system does not take juvenile cases. Maybe because they are not set up to prosecute juvenile cases. However, they are pouring resources into this area but are only deal with adults.

Mr. Martinez shared they don't see the trafficking of marijuana anymore, but now it is harder drugs. Now older people in their 20's also being recruited.

There is a system available, but more for Human Trafficking.

Ms. Tapia asked Mr. Mata. What was needed to create a Task Force. Mr. Mata responded the following:

- Set up a group of volunteers.
- What are the goals and objectives of the task force?

Ms. Dawson used to have a video, but it is old. Outreach and Education is where we need help.

Dr. Graham mentioned the video on vaping is what the group could emulate for parents and kids. The kids want to work, but difficult for them to find employment.

It was recommended that the task force contact Mary Helen Hernandez-HIDTA. She would be a great addition to the taskforce.

Ms. Tapia asked and confirmed the consensus to develop a taskforce. The following individuals signed up to be a part of the task force.

- Santiago Gonzalez- PRIDE
- Sonia morales -sonia.morales!@hhs.texas.gov
- Viridiana Sigala
- Julie Priego
- Ashley Sandoval
- Sonia Avila
- Beth Senger
- Alejandra Martinez [Alejandra.martinez@amerigroup.com](mailto:Alejandra.martinez@amerigroup.com)
- Michelle Chavez -michelle.chavez@uhsinc.com
- Gilda Gil

- Carmen Olivas
- Margaux Sarabia Lara -margaux.sarabialara.uhsinc.com
- Cathy Gaytan
- Isidro Torres
- Adrienne Harrel- peer to peer
- Michelle Chavez

Ivonne proceeded to move on the updates from the work groups of the FLC

***Work Group Progress:***

**Strong Families- Community Change Initiative**

Ms. Valencia provided a brief presentation on Parent Café.

- workshop 35-cafes
- 240 participants
- Parent partnerships

Chris Villa asked everyone to please respond to the Annual Survey. He explained the link being sent via email and commented that he will contact individuals to gather data if needed.

**Strong Families**

Ms. Martinez, Co-Chair of Strong Families presented. Child abuse prevention month. Presentation on childcare. Next meeting May

**Family Advisory Committee:** Did not have anyone available to present they will send out information at a later date.

**Help Me Grow**

Gilda Gil- presented a pp presentation. They officially received the HMG logo. She provided an introduction to the Help me grow program.

The HMG is a system model with 4 components.

- Centralized Access Point
- Family & community outreach
- Child health care provider outreach
- Data collection

Introduced all partners in the community. She presented all funding efforts of the group. She provided an update on the 4 components of the program.

**Community Collaborations:**

Cathy Gaytan provided an update for Kathy Revtyak. The last meeting was 4-13-2021. They have 13 active partners, evolving need and collaboration to interface with their work. Using telehealth. Their next meeting is June 10<sup>th</sup> at 8:30.

**Foster Care**

Georgina Martinez -provided updated FAD. She has met with CPAs and worked on plan on building capacity. Placement is in crisis in El Paso as it is in the rest of the state. This year 122 kids have spent 1 or more day in their offices rather than in a placement home. UTEP is doing a training in deescalating. These are mainly kids with psych problems and high level needs. EHN is also supporting the efforts of dealing with some of the problems. Gina has met with Ashley

to address areas where EHN can provide support. They have an immediate need for activity, games and items where the kids can be physically active.

- Beth Senger has provided support and allowed the kids to showers in their facility.
- The city is also being a support for the kids. The primary goal is to find placement for the children.
- Ms. Senger please talk to elected officials to provide support for placement of these kids. Child welfare system is in dire need of help and support.
- Migrant facilities have been taking the staff due to the increase of pay.
- Gina wants to thank the staff and volunteers that have been working 16-hour days, provide food, laundry and work long hours to support the kids.
- Mr. Martinez indicated that he can support by providing food for the kids.
- Ivonne asked Gina please address the help needed from the FLC partners, maybe background checks, security, laundry, Etc.

Ms. Tapia asked Mr. Mata to address the group on community events. He indicated that there is a need to take steps to overcome mental health and promote emotional well-being. Should the Leadership Councils develop an event or series of events that will help up promote school aged children.

Adrienne Harrell has a program available where they read a book and discuss with parents and children. She will send the invitation and share it with the group.

Isidro is willing to also share the presentation and is in agreement with having a major event to share and place the organizations together.

Ivonne asked if the committee should create a planning committee for an event?

Ms. Tapia thanked everyone for participating and apologized to the groups that did not have a chance to report on their work groups.

Meeting adjourned at 10:08am.

# STRONG FAMILIES

## A COMMUNITY CHANGE INITIATIVE

Prevention and Strengthening Families

January 2021

# Prevention of Child Abuse Coalition Strong Families Workgroup

Co-Chair

Stacy Barnett - Amerigroup

Alex Martinez – Amerigroup

Reports to the Family Leadership  
Council every other month on  
workgroup activities.

# **Family Advisory Council Co-Chair**

Lourdes Rivera – EPISD Parent Liaison

Shelia Anthony (Ret. Army) – Veterans One  
Stop Military Peer Network

Meetings held once a month on the 3<sup>rd</sup>  
Saturday of each month.

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# Strong Families Grant Update

October 1, 2020 – September 30, 2021

- Parent Café Workshop –15 Cafés/ 98 participants
- Parent Café Workshops are on Eventbrite
- Military Expansion - building relationships to provide Parent Cafés
- Parent/Community Opportunity – Parent Café Host Training January 26<sup>th</sup>, 27<sup>th</sup>, and 28<sup>th</sup>. Please contact us if you would like any of your staff trained. Free training

# Five Protective Factors for Strengthening Families

- Parental Resilience
  - Social Connections
  - Concrete Support in Times of Need
  - Knowledge of Parenting and Child Development
  - Social and Emotional Competence of Children
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What we know: Families gain what they need to be successful when key protective factors are robust in their lives and communities.

Strengthening Families

# PARENTAL RESILIENCE

The ability to manage your reactions to stress and to function well when faced with challenges, adversity, and trauma.

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# Living the Protective Factors- Individual

Parental Resilience – What that looks like:

- Hope, optimism, self confidence
- Problem solving
- Self care and willingness to ask for help
- Ability to manage negative emotions
- Not allowing stress to interfere with nurturing family.

# Living the Protective Factors – Organization

Parental Resilience- What that looks like:

- Demonstrate that parents are valued
  - Honor each family's race, language, culture, history and approach to parenting
  - Encourage parents to manage stress effectively
  - Support parents as decision-makers and help build decision-making and leadership skills
  - Help parents understand how to buffer their child during stressful times.
- 

# Four ways researchers conceive resilience:

1. Resilience is a process and an outcome; it is not a personality trait
2. Resilience is contextual with respect to setting, point in time, culture, and social factors
3. Resilience reflects a person's pattern of positive adaptive behavior in response to current or past risk factors or adversity
4. Resilience results in personal growth and positive change.

# Resilience Is Much More Than “Bouncing Back” from Challenges and Adversity

It is intentional and sometimes intensive interventions are needed to help people learn to demonstrate resilience; that is to:

- A) Successfully adapt despite current or past trauma and
  - B) Achieve personal growth and positive change.
- 



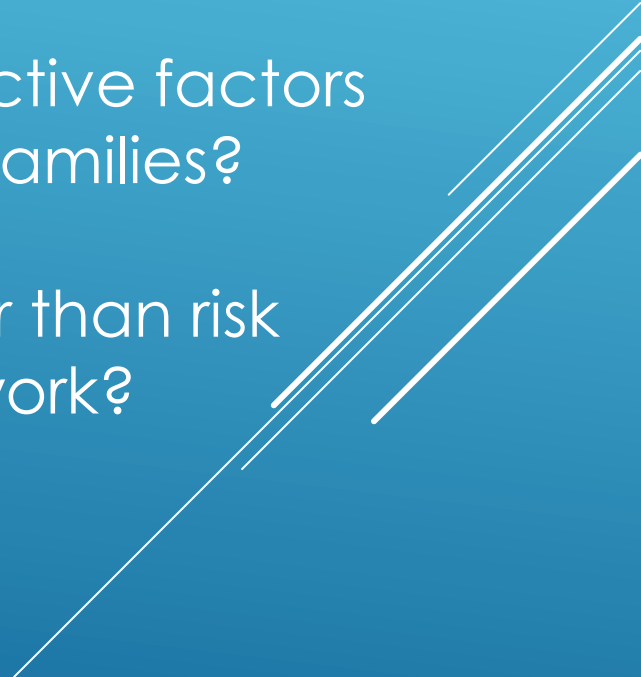
# Parental Resilience (Organization Level: Action Sheet)

Center for the Study of Social Policy

Protective and Promotive Factors – Action Sheets (handouts)

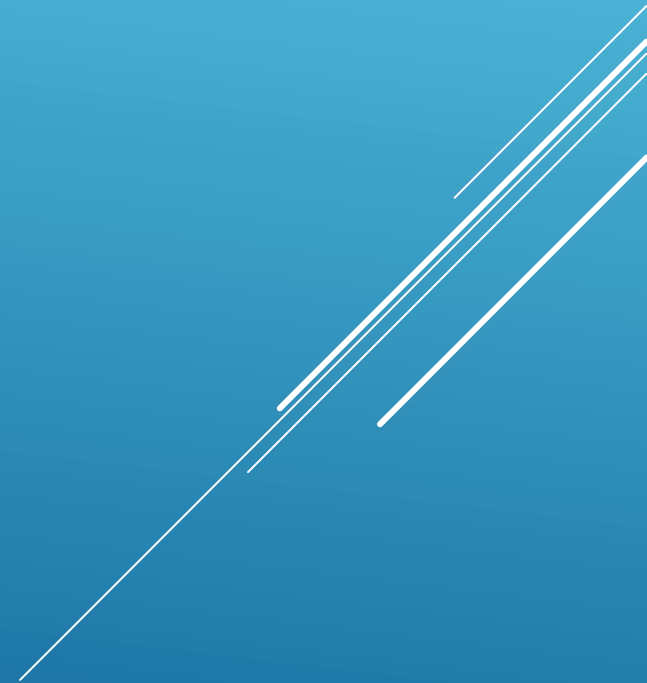
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# Reflection

1. In what ways has this training prompted you to think about your work, both what you are already doing and what you might try?
  2. How does the idea of focusing more heavily on protective factors seem relevant to you and “workable” in your work with families?
  3. How has focusing on building protective factors rather than risk factors impacted your own enthusiasm and energy at work?
- 

# Next Steps Taking a Deeper Dive

Strong Families – Community  
Change Initiative - Grant  
El Paso Center for Children  
Kathie Valencia  
kvalencia@epccinc.org  
915-307-8043



# Reminder

## Strong Families – Community Change Initiative Evaluation Requirements

- Federal Grant/ Research Project
- Two Yearly Evaluations:
  - Helix Solutions – Local Evaluation Team
  - ABTs – Federal Evaluation Team

THANK YOU

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Help Me Grow<sup>®</sup>  
El Paso



**Help Me Grow is a system model that works to promote integrated, cross-sector collaboration in order to build efficient and effective early childhood systems that mitigate the impact of adversity and support protective factors among families.**



**Help Me Grow**<sup>®</sup>  
El Paso

**Through model implementation in communities and states across the country, the mission of Help Me Grow is to advance children's optimal healthy development and support early detection, referral, and linkage to community-based services, such that all children can grow and thrive to their full potential.**



Help Me Grow<sup>®</sup>  
El Paso

Help Me Grow is not a stand-alone program, but rather a system model that utilizes and builds on resources already in place in order to develop and enhance a comprehensive approach to early childhood system building in any given community.



## The cooperation of these four core components characterizes the Help Me Grow system model:



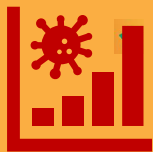
A **Centralized Access Point** integrally assists families and professionals in connecting children and their families to appropriate community-based programs and services;



**Family & Community Outreach** supports education to advance developmental promotion, and also grows awareness of the system and the services that it offers to families and community-facing providers;



**Child Health Care Provider Outreach** supports early detection and intervention, and loops the medical home into the system;



**Data Collection** supports evaluation, helps identify systemic gaps, bolsters advocacy efforts, and guides quality improvement to support continuous system enhancement.



# Help Me Grow<sup>®</sup>

## El Paso

Successful implementation of Help Me Grow leverages community resources, maximizes existing opportunities, and advances a coalition working collaboratively toward a shared agenda through the implementation and cooperation of four Core Components:

- ✿ *Centralized Access Point*
- ✿ *Family & Community Outreach*
- ✿ *Child Health Care Provider Outreach*
- ✿ *Data Collection*



**Centralized Access Workgroup (CAP) meets monthly.**

**Members:**

**2-1-1**

**Aliviane**

**United Way of El Paso**

**ECI Child Find**

**El Paso Center for Children**

**PdN Children's**

- **Reviewed Common Indicators**
- **Consulted with HMG of North Texas**



- Submitted a grant application to PN-3 for the development of the website, awards will be announced June 30<sup>th</sup>.
- Submitted an LOI to the PdNHF for the implementation of the model.
- Will submit an LOI to the Caplan Foundation.
- Meeting monthly with Early Matters to collaborate.
- Participate in the State Developmental Screening Workgroup meetings.
- Received materials on Act Early-Learn the Signs as we are the Deputy Ambassadors.



## **COMMUNITY & FAMILY OUTREACH WORKGROUP**

- **Is participating in the Strong Families Workgroup and exploring ways to use this existing coalition to fulfill the requirements of the HMG model with this component.**



## **CHILD HEALTH PROVIDER OUTREACH WORKGROUP**

- **Dr. Anacani Fonseca, Developmental Pediatrician is our Physician Champion.**
- **Scheduling a meeting with Dr. Alison Days currently leads the El Paso County Medical Society.**
- **Technical Assistance Calls with HMG National.**
- **Meet with Dr. Sarah Martin-CPAN**



## **DATA COLLECTION & ANALYSIS WORKGROUP**

- **CAP Workgroup met with Emily Hartmann, Executive Director of PHIX and staff to discuss the possibility of developing the data collection system for HMG that will align with PHIX.**
- **Emailed the Common Indicators required to collect by HMG National.**

## CORE FUNCTIONS OF STRENGTHENING FAMILIES™ IMPLEMENTATION

Strengthening Families™ is implemented in a wide variety of programs, agencies, systems, communities and states. Across all of these settings, implementation includes five core functions:

- Building an infrastructure to advance and sustain the work
- Building parent partnerships
- Deepening knowledge and understanding of a protective factors approach
- Shifting practice, policies and systems toward a protective factors approach
- Ensuring accountability

Each of these functions is critical to effective implementation, although exactly how they are carried out will vary depending on the setting and role of the implementer.

### **Building an Infrastructure to Advance and Sustain the Work**

Leadership and implementation teams are typically the driving force behind successful implementation of Strengthening Families. At the state or community level, the Strengthening Families leadership team brings together partners from various systems to coordinate their efforts and services to focus on protective factors. At the program or agency level, an internal implementation team – ideally including parents who participate in the program or receive services – can ensure that a focus on protective factors infuses all aspects of the organization's work. Other critical aspects of building the infrastructure include advocating for the vision of the initiative, identifying funding to support the work and developing and monitoring implementation and action plans.

### **Building Parent Partnerships**

At all levels of implementation, parents are crucial partners in authentic and effective application of the Protective Factors Framework. Parent partnership begins at the program and service level, where collaboration is based on building relationships between providers and parents. This work with parents is also reinforced through activities that support parents in building protective factors for themselves and their children. Building on this foundation, parents should have opportunities for leadership and participation in decision-making so that they can play a guiding role in ensuring that the programs and services they use are both accessible and effective. Parents who become engaged in this way often step into further leadership roles at the community, system, state or national level. Parent partners bring important perspectives and insight to leadership teams, and can play a variety of meaningful roles such as engaging other parents and community members and modeling what authentic partnership looks like for service providers.

### **Strengthening Families**

Strengthening Families is a research-informed approach to increase family strengths, enhance child development and reduce the likelihood of child abuse and neglect. It is based on engaging families, programs and communities in building five protective factors:

- Parental resilience
- Social connections
- Knowledge of parenting and child development
- Concrete support in times of need
- Social and emotional competence of children

Using the Strengthening Families framework, more than 30 states are shifting policy and practice to help programs working with children and families focus on protective factors. States apply the Strengthening Families approach in early childhood, child welfare, child abuse prevention and other child and family serving systems.

For more information, visit [www.strengtheningfamilies.net](http://www.strengtheningfamilies.net).



## Implementation Levels

The core functions of Strengthening Families implementation are carried out by implementation teams at multiple levels.

At the **national** level, the Strengthening Families team at the [Center for the Study of Social Policy](#) supports a national network of implementing states and jurisdictions and national partner organizations; develops and disseminates tools and materials to support implementation at all levels and encourages expanding the research base for the Protective Factors Framework.

At the **state or jurisdiction** level, a leadership team typically works on coordinating efforts across partners and systems; making the case to stakeholders and new partners; integrating the Strengthening Families approach into current practices; recommending shifts in policy and systems to deepen and sustain implementation and developing a plan for local and/or state evaluation. Authentic inclusion of parent members enhances these teams and models and promotes partnerships with parents at the program and agency level.

Implementation teams within **agencies and systems** introduce changes in daily practice, provider perspective and policy to shift to a protective factors approach. These teams know their own systems and agencies best and are able to motivate staff members to make small but significant changes, engage parents and help monitor the agency or system's implementation progress and effectiveness.

Finally, at the **program** level, implementation teams typically include direct service staff, parents and management. Implementation at the program level means connecting with and supporting parents, ensuring that all staff are trained in the Strengthening Families approach, integrating the framework into current practice and evaluating the impact of their efforts.

## Deepening Knowledge and Understanding

Training and outreach, professional development activities and raising awareness among parents and providers are the primary strategies used to deepen knowledge and understanding of the Strengthening Families approach and the Protective Factors Framework. This work can take on several forms. In some cases, leadership team members are called on to create local outreach tools and messaging to engage new partners in supporting parents. At other times, this work entails offering in-depth training to providers to give them the tools and support to change their practice.

## Shifting Practice, Policies and Systems

At its heart, Strengthening Families is about changing how service providers interact with families to support them in building protective factors. Programs and agencies will need varying levels of support as they change their daily practices and organizational policies. Technical assistance, incentives and practice tools aligned with the Protective Factors Framework are all critical in supporting those shifts. Policies and systems affect large numbers of children and families and offer opportunities to institutionalize a protective factors approach. Policy changes may occur at the organizational level (e.g., changing board bylaws to include parent members), at the agency level (e.g., requiring case workers to use assessment forms that address protective factors) or at the state or national level (e.g., making parent partnership an element of quality rating and improvement systems for early care and education).

## Ensuring Accountability

Finally, implementers must ensure that their efforts are effective, making a difference for families and making good use of the funds invested in them. Strengthening Families is an approach, not a model, and it can be implemented in many different ways. This flexibility is a tremendous strength and, when it comes to evaluation, a challenge. At the national level, CSSP works to ensure that the Protective Factors Framework is supported by established and current research, and supports the development of tools and materials to support evaluation. Local and state implementers may choose to assess the effect of training or professional development on provider practice; the effect of program participation on parents or families or the strength of protective factors among families in a community over time.