

# The Parent Advocate Initiative: Promoting Parent Advocates in Foster Care Evaluation Report Year II

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## Parent Advocate Initiative List of common abbreviations

ACS: New York City Children's Services

**CWOP:** The Child Welfare Organizing Project

**COFFCA:** The Council of Family and Child Caring Agencies

PA: Parent Advocate

PAI: Parent Advocate Initiative

**PAN:** Parent Advocate Network

#### Introduction

In 2008, a group of foundations, nonprofit service organizations, and government agencies joined together to develop the Parent Advocate Initiative (PAI). The two-year project aims to boost and support the use of parent advocates in the delivery of foster care services in New York City. In the PAI, parent advocates (PAs) are individuals with prior involvement in the child welfare system who are trained to advocate for and provide other emotional support to parents who have children in out-of-home care. Over the course of two years, 10 PAs and six foster care agencies participated in the project.

The Initiative was designed to promote and sustain the successful integration of PAs into the foster care agency work environment.<sup>2</sup> The theory of change posits that, as a result of coming into contact with PAs, families will have better safety and permanency outcomes (e.g. higher chance of reunification, shorter lengths of stay in care, lesser likelihood of repeat maltreatment after reunification). According to the Initiative, change occurs as a result of the many benefits PAs have to offer. PAs are assumed to offer a perspective and assistance to individual clients that differs from that of social workers and other professionals (e.g. focus on advocacy, shared experience). In their unique position as peers, PAs are expected to increase parental engagement in case planning, decision-making, and utilization of services. They provide information and knowledge to the parent related to legal options, case requirements, and how to navigate service systems. It is the authenticity of their experience ("I've walked in your shoes") that is expected to promote their ability to engage clients and gain their trust.

In addition, the PAs liaise between the parent and other staff, facilitating communication and providing additional team support. They work to ensure that the agency creates the appropriate conditions for the parent to engage successfully and that the needs of the family are being adequately addressed. By and large, PAs are seen to enhance the effectiveness of what the

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<sup>&</sup>lt;sup>1</sup> The Fund for Social Change, New York City's Children's Services (ACS), New York State's Office of Children and Family Services (OCFS), the Council of Family and Child Caring Agencies (COFCCA), and the Child Welfare Organizing Project joined to create the Initiative.

<sup>&</sup>lt;sup>2</sup> As part of their participation, the foster care agencies agreed to co-sponsor the PAs to supplement PAI funds. The PAI foster care agencies are the following: Forestdale, Inc., Episcopal Social Services, New York Foundling, New Alternatives for Children, Children's Aid Society, and Lutheran Social Services of New York.

agency already does to help the parent: their role is thought to enhance what clients and staff do to move the case forward.

Prior to being hired full-time by their respective agencies, the PAs participated in a 6-month training program conducted by the Child Welfare Organizing Project (CWOP). Support for the PAs was also to be provided through the development of the Parent Advocate Network (PAN), a coalition of parent advocates who come together to address issues related to the PA role, working conditions, and policy change. The six PAI agencies received funding from the Initiative, administrative support from the Fund for Social Change and technical assistance from the Council on Family and Child Caring Agencies (COFFCA). The PAI also contracted with Chapin Hall at the University of Chicago to evaluate the program. This report represents the second of two evaluation reports.

#### Evaluation

In the second program year, the evaluation set out to study the PAI model as it occurs in routine agency practice.<sup>4</sup> Our investigation aims to show the degree to which the PAI approach to integrating parent advocates into foster care work is being implemented in the manner intended by its design. Specifically, this report addresses three themes:

- <u>Scope.</u> We describe the PAs' specific roles and responsibilities as they relate to the broader agency intervention. We discern the degree of similarity and difference between what the PAs do on behalf of parents and the work of other staff. We also examine the frequency and intensity of their involvement, referral processes, and which parents receive their support.
- <u>Integration.</u> The PAs' ability to work effectively is shaped by the level of agency integration. An integrated model is marked by mutual expectations and respect, viable

<sup>3</sup> Funding for the project is provided by Child Welfare Fund, Joseph LeRoy and Ann C. Warner Fund, JPMorgan/Ira W. DeCamp Foundation, New Yorkers For Children, Annie E. Casey Foundation, and Marguerite Casey Foundation/Casey Family Programs.

<sup>&</sup>lt;sup>4</sup> The first year evaluation was focused on the impact of the training component on the PAs' ability to carry out their role.

mechanisms for collaboration, adequate support, and the ability to manage or resolve conflict.

 <u>Context.</u> We examine the level of consistency by which the model is implemented. The study asks how, if at all, does organizational context influence the scope of the PAs' work or the level of agency integration?

Our findings shed light on the PAs' ability to carry out their tasks within the agency work environment; how their work is received and incorporated by the agency; and any unresolved challenges that should be addressed going forward.

In addition, preliminary knowledge about how the model operates is necessary to study the effects of the PAI model on safety and permanency outcomes for families.<sup>5</sup> For example, program effects can be assessed through research in which persons exposed to an intervention are compared to others who are not. To control study conditions so that rigorous comparisons can take place, it is necessary to understand the attributes of the intervention, who has access, and how context effects may be at play.

The data presented here are not intended to describe the impact of programs of this kind on permanency outcomes for children placed in out-of-home care. What follows is a description of how the PAI was implemented in six foster care agencies. Given the small sample size and the particular structure of the Initiative design, it is unclear to what extent the work described here can be extrapolated to other parent advocate programs. Still, the findings below provide the groundwork for future research about the effects of the PAI on child welfare outcomes.

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<sup>&</sup>lt;sup>5</sup> Increasingly, innovative programs in the social service fields are being held to a standard of evidence-based success. Although the impact of Initiatives like the PAI have the potential to support organizations and communities in multiple ways, programs that can demonstrate a positive benefit to the stability of families are best-positioned to attract investments in sustainability and replication.

#### Sources of data

In order to capture the variety of staff perspectives regarding the work taking place at each of the six PAI agencies, in-depth interviews were conducted with four staff groups<sup>6</sup>:

- Parent advocates (n=7)
- Supervisors (n=6)
- Agency directors (n=5)
- Case planners (n=5)

At the time of data collection (Summer 2010) there were seven parent advocates in the program, five of whom had participated during the first year training period. In the interviews, PAs and case planner staff were asked to recount real case situations in order to gain an understanding of the range of activities that took place on behalf of specific families. In addition to addressing general questions about their practice, the PAs were asked to describe the cases of three parents with whom they had worked in the past two weeks. This method increased the opportunity to learn about a diverse set of examples that could speak to the range of PA strategies and staff partnerships. Interviews with supervisors and directors were focused on matters of organizational culture and integration.

Ongoing phone interviews were conducted with persons recruited as key informants in order to obtain a fuller picture of the day-to-day workings of the project. Key informants were recruited based on their knowledge of the curriculum and included CWOP staff, PAI leaders and the PAI network coordinator. In addition, the research includes content analysis of agency monitoring reports, curricular materials and other relevant documents as well as observation notes from PAN monthly meetings.

<sup>&</sup>lt;sup>6</sup> Interviews with six of the seven parent advocates were conducted in person. All other interviews took place over the phone.

<sup>&</sup>lt;sup>7</sup> In the first year, eight PAs went through the CWOP training. Of those eight, three have since left their respective sponsor agencies. Two of the seven current PAs had completed the CWOP training in previous years prior to the project.

#### Describing the scope of the PAI model

In this section we describe the attributes of the PAI model as it is being implemented at the six PAI agencies. We address: 1) the scope of the PAs' tasks and how they fit into routine case management practices; 2) which parents receive PA support, at what stage in their case, and with what frequency and intensity, and; 3) the degree of agency variation.

#### PAI tasks

Interviews with staff assessed the distinct kinds of activities the PAs carry out on a daily, weekly, and non-routine basis, and the amount of time devoted to each. Regardless of agency context, the notion of a "typical work day" does not exist. Rather, the PAs' schedule is flexible to accommodate the emergent circumstances of the parents with whom they come into contact. The PAs carry out a host of case planning, advocacy, and administrative activities in any given day, including:

- Attend court hearings
- Attend case conferences held at the agency, such as Family Team Conferences and Transitional Meetings
- Facilitate Parent-to-Parent meetings between foster parents and biological parents
- Supervise visits between children in care and their biological parents
- Conduct or help to conduct home visits
- Accompany parents to appointments needed to achieve case requirements (e.g. Public Assistance, housing)
- Provide referral recommendations
- Explore new referral sources for parents (e.g. web research, phone inquiries)
- Case discussion meetings with parent or staff
- Administration (e,g., writing progress notes, reviewing case records prior to meeting with a family)

The PAs are often responding to spontaneous situations: to attend an unanticipated Family Team Conference, to meet a parent whose case just opened, or to conduct a home visit for a case planner who was called to court unexpectedly. Administrative duties, such as documenting

progress notes, are often postponed in order to manage unexpected, higher priority events. In addition, some weeks are marked by significant time in the field: the PAs travel to court, parents' homes, and accompany parents to various social service agencies.

Overall, task variation across the agencies is minimal. Home visits are conducted by PAs at five of the six agencies; at five agencies, PAs are authorized to supervise family visits. <sup>8</sup> The amount of time spent in court on behalf of a given family varies. Four PAs report that they go to court infrequently; three reported they are in court very often. Four agencies have created formal referral forms that the PA reviews. PAs have access to Connections, the statewide administrative database at all but two agencies.

PA activities are not limited to their direct work with parents. Other PA tasks include:

- Facilitate parent support groups
- Attend professional development trainings outside the agency
- Conduct staff trainings
- Attend supervision
- Attend regularly scheduled staff meetings
- Participate in PAN network meetings
- Participate in Parent Advisory Workgroup with ACS leadership
- Attend monthly Community Partnership Project meetings<sup>9</sup>

Regarding such tasks there is slight variation. For example, the amount of time spent in formal supervision varies among the PAs, as does their involvement in managing support groups at the agency.

#### Who, when, and how much?

The flexibility of daily tasks reflects the broader variation in the kinds of needs and case situations to which the PAs provide support. They respond to parents' needs at all stages throughout the life of a case, from point of intake through the post-discharge period. They are

<sup>&</sup>lt;sup>8</sup> Here we refer to mandated home visits to the birth parent's home. The PAs also conduct home visits that are not counted toward case requirements.

<sup>&</sup>lt;sup>9</sup> CPPs are community-based coalitions comprised of service organizations, residents, and ACS.

available to all clients served in the unit or region where they are physically stationed. Specifically, the number of clients the PA can potentially serve depends on the size of the agency's general client population and the PA's catchment area. For example, in one agency, the PA covers one half of all intakes entering the foster care unit. In three agencies, the PAs are assigned to regional branches or specialized medical units of large multi-site agencies. The remaining two agencies are small and medium-sized organizations. Although PAs frequently work with both birth parents, the majority of contact takes place with the mother of the child in care. Few of the PAs have any contact with foster parents outside of Parent-to-Parent meetings of Family Team Conferences.

Some parents receive support over the course of several months, while other parents' interactions with the PA may be limited to a one-time consultation. The PA may have 2-3 interactions with the family, or may work with the family over the course of several months or longer. (However, it is important to note that, at the time of data collection, the PAI PAs had been working as full-time staff for less than one year.) Within this variety, the amount and type of support – from a brief phone conversation to sustained support of the parent's progress over the course of several months – will depend on the particular family. The extent of involvement may also change over time throughout the course of the parent's case. Though the regularity by which the parent is present at the agency (e.g. to adhere to the family visitation schedule) can increase contact, the PAs spend significant time meeting with parents in the field.

According to the six PAs' supervisors, flexible eligibility structures were preferred to having the PAs' work restricted to select families in order to maximize the number of parents who could benefit from the PA's assistance. Three of the seven PAs (at three of six agencies) hold formal caseloads of approximately 10-12 parents with whom they work over the course of several months or longer. However, these PAs also spend a significant amount of their time helping parents who are not on their caseloads. Typically, the level of involvement and frequency of contact is more sustained with caseload-assigned parents than with other parents. For example, a PA is more likely to attend multiple court hearings on behalf of the family. Among caseload-assigned parents there is also variation regarding the frequency and intensity of support: the PAs

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<sup>&</sup>lt;sup>10</sup> Another parent advocate who is not affiliated with the PAI manages the other half of the intake cases.

work closely with approximately two-thirds of the parents on their caseloads; with the remaining third their level of support for the parent's needs is minimal and contact is infrequent.

At the remaining three agencies where PAs do not have a caseload, we observed little difference in the types or amount of support they provide or diversity of needs they address. Although PAs who do not have official caseloads are less likely to "follow" cases over time, we learned of several examples in which the PA at these agencies was in regular contact with the family over the course of several months. The scope of support PAs provide also depends on the parent's general willingness to work with the PA, though staff reported that instances of refusal are infrequent. The length and intensity of support is also related to the quality of the PA-parent relationship. According to the PAs, parents who solicit regular, sustained contact tend to be those individuals who view the PA as a trusted confidant essential to their successful reunification with their children.

When prompted, the PAs did not express concern regarding their capacity to manage multiple case types or to handle caseloads while simultaneously working with a variety of non-caseload families. According to the PAs, flexibility, variety, and spontaneity are fundamental aspects of their work. They identify as staff who are "here to help any parent who needs me in any way I can."

#### PA referrals

The agencies employ a similar mix of referral processes designed to maximize the pool of parents who will have access to the PA's service. In summary, referrals occur in the following ways:

- Caseworker requests referral
- Parents are introduced to PA at point of intake
- Contact is made through the PAs' participation in case management task (e.g. attend conference, supervise visitation)
- Parent self-referral

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<sup>&</sup>lt;sup>11</sup> When asked about refusals, PAs and supervisors consistently claimed that parents who resisted support did so because they perceived the PAs as agency representatives whom they could not trust more than other staff. One PA shared the belief that parents who rejected her support did so because they were threatened by her success.

• Informal meeting in public area at the agency

There are two *formal* mechanisms in which a parent may be introduced to the PA. First, case planners and supervisors at all six agencies refer parents for whom they think the PA can make an important difference.<sup>12</sup> Staff report referrals to parent advocates are made under three general conditions:

- Parents whose case has been open for a considerable time (e.g. more than six months)
  and have not made progress toward completing his or her mandated requirements. PAs
  are viewed as being effective with parents who need support in obtaining or completing
  services.
- Parents who are not able or willing to communicate with agency staff. In such cases, the PA's status as peer advocate is assumed to help facilitate communication and help mediate between the parent and the agency.
- Parents whose needs align with the PA's perceived expertise in a particular resource area.
   For example, one PA is known by agency staff to have strong knowledge of housing lottery options. One of the case planners at the PA's agency tends to request her support in cases where housing is a need.

A second formal mechanism provides an example of non-selective referrals. At three of the six agencies, all parents served by the agency site are introduced to the PA at the time of intake. At two agencies, the PA is the first representative of the agency to come into contact with the parent. At a third agency, all intakes generate a letter from the PA to the parent that explains the PA role and includes the PA's contact information. Agency supervisors and directors expressed the motivation on the part of the agency to prioritize new cases. They argued that the early days of the case are important because parents are overwhelmed and may be experiencing severe trauma and anger. According to leadership at several agencies, the ability of the PAs to support the parent in the initial phases of the case can make a difference in getting the parent on track for success quickly and effectively.

 $<sup>^{12}</sup>$  At four of the six agencies, staff designed PA referral forms which are processed and documented at the time of any request from a case planner for the PA's involvement in a case.

Parents also come to the attention of the PA *informally*, through an unplanned encounter. A PA may meet a new parent when asked to supervise a visit on a case planner's behalf, or may sit in on a Family Team Conference with a new family. Initial contact can also occur in public areas at the agency, where the PAs often pass through and solicit conversations with parents whom they have not met. Though less frequent, a parent may self-refer to the PA in response to a flier posted at the agency or word of mouth. We found no relationship between the method of referral and the intensity or time duration of a PA's involvement in a case.

Regardless of agency context, the PAs serve parents with diverse sets of needs, from the point of entry into the foster care system through the post-discharge period. All agencies employ a variety of formal and informal referral processes that maximize the number of parents who can be exposed to the PAI model.

#### Understanding the PA's role

In this section we discuss in more depth the types of support that characterize the PA role, how their role differs from that of other staff, and how it contributes to the traditional service model at the agency.

#### Working as part of the team

The data indicate that a high level of team collaboration occurs on behalf of families. For example, the PAs help to conduct case management tasks that are central to a case planner's work. They supervise family visits, document progress notes, and consult with staff about parent's progress with case requirements. The PAs spend significant amounts of their time providing service referrals, a fundamental part of case planning. Case planners at the agency may consult the PA about potential resources to address a case need, given the PAs are known to have knowledge of unique services in the community. The PAs may initiate a referral through talking with the parent, though all referrals must be vetted with case planner and/or supervisory staff. We learned of many examples in which the PA took on primary responsibility for communicating with the parent about upcoming meetings and to monitor progress.

Supervisors and directors described how the agency views the value of staff overlap:

The work [of the PA] is not different for the social worker and this was deliberate. The parent advocate and social worker collaborate and work together to enhance engagement.

We work as a team. If somebody is out and a visit needs to be covered, the parent advocate can help the team. This is how we work here.

Though it is unclear to what extent tasks taken on by the PA would or would not be managed in his or her absence, the PAs are often stepping in to "fill in gaps" that case planners do not have the time to address because they are managing the needs of another case. Staff from each of the staff groups interviewed claimed the presence of the PA increases the case management capacity of the agency. PAs, supervisors, and directors alike expressed the claim that case planners are "overwhelmed" and that PAs can "relieve some of the pressure."

At the same time, the PAs identify with a "problem solving" orientation to the work that is unique to their role. The PAs relayed many examples of situations in which they helped "brainstorm" about ways the agency could support a case and took initiative to pursue various options. For example, one PA relayed the story of how she independently arranged a meeting with extended family to discuss how they could collaborate to support the grandmother's care of a child with challenging medical needs. As one PA describes:

I am there to find the solutions. Sometimes [the case planner] just can't see what I see because of my unique position. Or they just don't have the time and don't think that way.

Given their focus on advocacy, the PAs work to address "sticking points" in a case. Sometimes this approach may involve efforts that fall outside the traditional case planner role. For example, we learned of a story in which a PA drew on her social network to put into place a job opportunity for a child's caregiver. In another example, a PA chaperoned a reunified family to school to ensure the child was registered and that staff were made aware of the child's tendency to be truant. Prior to leaving the house for school, the PA supervised the child's getting dressed and breakfast. As advocates outside of the traditional social work role, the PAs are able to perform actions that may speak to a unique informality and even intimacy with the parent.

#### Working with parents

The theory of change underlying the PAI model is that PAs increase parental engagement in case decisions and activity, ultimately leading to the higher likelihood of reunification. Data indicate that the PAs make diligent efforts to increase parents' capacity to manage case requirements. They equip the parent with information about how to navigate city agencies, and assist in filling out applications. They advocate for the rights and needs of the parent across settings, from court and service organizations to their respective agency. In Family Team Conferences or other agency meetings, they ensure that the parent's voice is being heard and that the parent is well-informed. They hold the agency accountable to the parent and broaden the scope of service possibilities. They also provide emotional support and advice.

Case planners, case aides, and supervisory staff may advocate for clients in similar ways. What makes the PA role distinct is their status as persons wholly committed to support the parent in any way necessary ("I am here to help you in whatever way you need"), and who can relate to the experience of being a client at the agency. All staff groups interviewed claimed that the PAs were able to gain the trust of parents in ways not possible for other staff. All seven PAs claim that they disclose their system history with all parents.

The PAs often serve as a confidant, who "lends an ear" and provides a "place to vent." The PAs spoke of some parents' need to express their fears and frustrations to someone who could relate firsthand to their experience. "Coaching" is a chief part of how the PAs advocate for parents. They share strategies to help the parent move forward and overcome challenges. As two PAs said:

I tell them I am a support and a resource. I am not the boss. I want to teach you. I want to teach you the system and how to get through it. You're in it so now let's sit down and talk about how to get through it.

I have open arms. I want to be involved. I tell them I know there has to be a way. Something they are doing hasn't been working. Let's make it right.

The PAs encourage parents to focus on tasks that will be important in the eyes of ACS, the courts, or the agency. They may consistently remind parents about the importance of taking their

medication or attending a service. Coaching parents on how to manage intense and difficult emotions is another part of their role:

She tells me about things that happen with the foster parent. I tell her she has to try to get along. I tell her to keep a positive attitude. I tell her that I know the system is slow, it's not fair, but keep calm and be patient. The reason that she trusts me is that the things that I say will happen come true.

They are always emotional, angry. How can you blame them? I point out their strength. I say, 'You have to not show your anger because it's the judge's last word. You have to pull it together.'

I try to get them to think about the important stuff, not their resentment. Get her to focus on her program not her attitude. I teach her how to behave in court. They're afraid, they send me to be a witness. When they get upset I diffuse them. The judge wants to see that you are an adult and to make sure the kid is safe. Hostile body movement is going to work against you. A lot of times I tell them, 'I've been here. Let me show you what I did. In a couple of months I found my own success'.

The PAs work to constantly reinforce the parent's progress and focus their attention on issues that are unresolved. They give strategies to the parent on how to self-advocate:

She told me in court she was going to ask for an overnight visit. I told her, 'why not aim higher? Ask for a weekend. Point out your progress.'

Several of the PAs shared their tendency to present their support as contingent on the parent's honesty and commitment to change. The following quotes highlight the PAs' ability to speak to parents in a frank, highly personal manner:

I explain all of their rights. I ask them to be truthful and explain what happened. I say, 'I am not your lawyer. I will guide you through. Sit down and let's make a plan. I am here for you. If you are not doing well I will lift you, if you play games....if you give me constant excuses I will let you know. I will let you know the repercussions'.

I have one parent she calls me, not the case planner, to tell me she's running late or can't make it to the visit. I tell her the truth that she doesn't want to hear. I say, 'you're not working. What is your excuse? If you keep these behaviors up you won't get your kids.'

The strategies recounted here were consistent across agencies and individual PAs. Though it is unclear to what degree such strategies are exclusive to the PA and not other staff, the stories spoke to a high level of trust and informality that seem unique to the PA role.

#### **Integration**

The ability of the PAs to advocate and support parents is tied to the level of healthy integration of the model into agency practice. We define positive integration as meeting the following conditions:

- There are clear and consistent expectations among staff about the PA role
- High levels of mutual acceptance and respect
- The PAs have the organizational support they need to do their work
- There is functional collaboration among staff in working on behalf of parents
- The means to manage and resolve challenges or conflicts exists
- Staff perceive the PA as performing a valuable contribution to the work

As reported in the Year 1 PAI report, the PAs faced some initial difficulty adjusting to their new work environments during the training period. Supervisors reported that many of the case management staff at the agency did not understand the PA role and did not make substantial attempts to engage their collaboration. In addition, some of the PAs expressed feeling prejudged by staff on the basis of their past history at the agency.

As of the end of the second program year, the PAs seem to have adjusted well to their work environments. In the interviews, the PAs described their general experience with staff as characterized by a spirit of collaboration and mutual respect. With one exception, supervisors reported a constant flow of staff referrals: requests from case planners to the PAs for their support of a parent on their caseload. In the interviews, four of the seven PAs referred to having close working relationships – real partnerships - with select case planners and supervisors at the agency. Overall the directors and supervisors believe that line staff had become open to and accepting of the PAs. For example, four of the five directors interviewed referred to "initial resistance" to the PAs that had since seems to have been "overcome" or "resolved". They claim

that staff appreciate the ways in which the PAs help support their work and engage the parent in case planning and decision-making.

Still, supervisors and PAs alike claimed that a small minority of case planners are "territorial" and avoid working with the PA. The PAs stressed that they use caution in negotiating staff boundaries and "try to not step on any toes." In this sense the PAs acknowledge the potential to alienate staff by independently taking action that affects the direction of the case. At the same time, the PAs enjoy a high level of autonomy. Although they are not authorized to make case decisions without alerting other staff, the PAs are trusted at all times to act independently on the part of parents.<sup>13</sup>

The PAs' perspective on the quality of agency practice was positive. A few PAs offered criticisms about a particular case planner's practice as being too impersonal or not strengths-based. However, in seventy-six percent (16 of 21) of real case situations recounted, the PAs agreed with the statement that the agency was "doing everything it should be doing on behalf of the parents."

All groups of staff reported an absence of interpersonal conflict regarding the PA role. In all of the actual cases discussed, the PAs claimed that their role in supporting parents was clear to all staff and the work was marked by collaboration. It is important to note, however, that the interviews were focused most directly on the work model of the PAI; discussions did not delve deeply into matters of conflict.

In another example of integration, five of the PAs have been given the opportunity to create their own parent support groups at the agency. In three cases, the PA designed the support group independently to fulfill a perceived need for parents. For example, one PA has designed a group to help parents prepare for trial discharge. At another agency, the PAs will draw on their experience to train staff in ways to communicate effectively with parents.

At the time of data collection, the PAs were confident in their ability to work with parents in concert with their role at the agency. They are able to negotiate their role as advocate and confident at the same time that they hold parents accountable to case demands and let the parent

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<sup>&</sup>lt;sup>13</sup> According to the supervisors, the importance of vetting all actions is based largely on the need to avoid redundancy.

know that all information relevant to the case must be documented. All seven PAs reported that they are getting sufficient emotional and professional support from the agency, specifically, their direct supervisors. This perspective differs from our findings in the previous evaluation, in which the PAs seemed to rely heavily on CWOP and their peers for support. All six PAI supervisors claimed that they had the experience and resources needed to support the PAs.

We also asked directors to describe their attitudes toward the hiring of additional parent advocates. All of the directors interviewed (n=5) expressed the desire on the part of the agency to hire more parent advocates. However, according to the directors, the hope to invest in more staff would be difficult to realize in the near future given current budget constraints.

Finally, the PAs expressed a high level of job satisfaction that seems to reflect in large part a strong commitment to their work. Many spoke passionately about their ability to advocate for parents as a calling. As described in the previous section, the PAs talked about the wide scope of their work as being manageable and appropriate to their role. This view was echoed by their supervisors: only one of the six PA supervisors expressed concern regarding the amount of demands being placed on the PA by the agency. However, all of the PAs shared concerns regarding their future growth at the agency. Many expressed the fear that, over time, they would not receive adequate salary increases or title mobility without additional education. They believe that the quality and scope of their work is on par with other staff and therefore warrants the potential for promotion.

#### Conclusion

In this report we describe the PAI service model as it is implemented in real practice. The scope and content of the PAs' work is reflective of the vision put forth by the PAI founders. PAs provide a host of support, advocacy, and engagement strategies that are well-aligned with the tenets of the PA training program. As the above discussion illustrates, the PA role is multifaceted and flexible to meet the diverse needs of each parent. Their support is available to all parents in care at the agency where they are physically located. They engage strategies that both

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<sup>&</sup>lt;sup>14</sup> In addition, the PAs view the PAN network less as a place to discuss organizational concerns than as a forum to collaborate toward policy reform.

enhance and reinforce the work that is performed by the agency. They are able to draw on their past experience to gain the trust of parents needed to develop a close working relationship.

By the end of the second year, the PAI Initiative has succeeded in providing a structure for integration. The PAs appear to be well integrated into their agency environments. They have the resources and cooperation they need to perform their role. Line staff and leadership staff alike acknowledge the value of the PAs for their work and for parents. We found no significant variation among the agencies regarding the degree of integration. Nor did we identify major differences among the PAs in the scope of their tasks or role.<sup>15</sup>

The advocacy PAs' provide, which includes informational, emotional, and practical support, is intended to help parents move closer to reunification with their children. However, due to timing and resource constraints, the evaluation was not able to gain the perspective of parents with whom the PAs interact. Without the voice of parents, it is difficult to determine how the PAs' efforts shape what parents do.

#### Looking ahead to future research

Though the information gathered here suggest the PA intervention is extensive and well-received, it cannot speak to the impact of the work on individual safety and permanency outcomes, such as reunification. The evaluation set out to provide information about the PAI model that can be used to guide future studies that assess the model's efficacy. As the findings indicate, the attempt to "isolate" model elements would be challenging given that the PAs' level of involvement in each case varies widely. Still, the descriptions offered here provide insight into how the effects of the unique model, as it is practiced by PAI parent advocates, can be studied. The data explain what the PAs do that is focused on improving outcomes, how their work relates to routine practice, and the degree of variation across agency settings.

It is clear that the PAI model does not occur as a separate intervention but rather can provide increased capacity to the casework that would otherwise occur. Moving forward, it is important to conduct research that can compare parents who have access to the PAI model to those who do

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<sup>&</sup>lt;sup>15</sup> It is unknown to what extent the commonalities are shaped in part by conditions set in place by the Initiative, including the PA's exposure to CWOP's "Parent Leadership Curriculum". It is also the case that the majority of the PAI agencies have employed parent advocates in the past and may draw on guidelines that are known in the larger foster care community.

not. Outcomes of interest should include intermediary outcomes (e.g. service completion, time to service completion, attendance at visits and agency-held case conferences). In addition, how such intermediary outcomes are linked to permanency outcomes can be examined in order to further demonstrate the program's impact. Researchers may also find value in a comparative study of safety and permanency outcomes among the PAI agencies before and after the PAI began.

Another important approach, albeit a challenging one given the open-endedness of the PAs' work, is for researchers to find ways to study the "dose" of exposure so as to distinguish between parents who receive high levels of support from those who interact with the PA only briefly. Finally, future research should investigate whether the timing of initial contact matters to rates of reunification or lengths of stay in care. For example, it is important to understand if the PAs' impact is greatest in cases where he or she met the parent at the point of intake.