## Informational Letter

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| To:         | Commissioners of Social Services  
             | Executive Directors of Voluntary Authorized Agencies |
| Issuing Division/Office: | Strategic Planning and Policy Development |
| Date:       | November 12, 2008 |
| Subject:    | Parent Advocate Programs |
| Suggested Distribution: | Directors of Social Services  
                          | Preventive Services Supervisors  
                          | Child Protective Supervisors  
                          | Foster Care Supervisors |
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I. Purpose

The purpose of this Informational Letter (INF) is to provide information to local departments of social services and voluntary authorized agencies regarding the use of parent advocates. Parent advocates can be part of an agency program or may be additional staff hired to supplement the child welfare services already provided in the agency. Parent advocate programs, whether a formalized program or the addition of parent advocate staff to agency staffing, employ parents who were previously recipients of child welfare services, and who have successfully addressed the issues which brought them to the attention of child welfare or child protective services (CPS). They are employed as advocates to assist other families that are involved in the child welfare system. These programs are currently operating in some agencies within New York State, and the Office of Children and Family Services (OCFS) supports use of these types of parent-to-parent support models.

II. Background

In the late 1980s, there was a parent advocacy movement within the mental health system to include parents of children with emotional, behavioral, and mental health treatment needs in policy and program planning in order to add a family perspective. The phrase “nothing about us without us” was the concept that fueled this movement. In 1989, the Mental Health Association of New York State, Inc. (MHANYS) received a grant to hire a parent to connect other parents to each other statewide and develop a newsletter to address families’ needs. In 1991, the Office of Mental Health (OMH) received a grant to develop an individualized care approach to serving children and families. As part of that grant, five parent advisors were hired to work with the Parent Support Network to inform, educate, support, advocate with, and organize the families in New York. From there, OMH’s parent advocate program, called Families Together, grew into the statewide, parent-governed, non-profit, family-run and family-driven organization that it is today. The concept of this type of parent advocacy program has expanded to the child welfare system.

There are more than 27,000 children in foster care in New York State and 14,500 of these children have the permanency goal of return to parent/legal guardian. In order for these parents to have their children returned to them from foster care, they must address the safety and other concerns that brought the child(ren) into care. To address these concerns and work toward the return of their child(ren), parents need to be engaged on some level with the child welfare system that removed the children from their home. This can be a challenge, especially to families who may be experiencing other stressors such as poverty, domestic violence, housing issues, and/or drug or alcohol

1 NYS OCFS Data Warehouse data as of March 31, 2008.
dependence. These parents can feel overwhelmed and hopeless with all the obstacles they need to overcome to have their family reunited. They often struggle with trusting the child welfare system, and such mistrust is understandable given the power of child welfare authorities over their family status. Parents sometimes have difficulty being able to acknowledge their role in the removal of their children, which can make it difficult to fully engage in treatment and complete service plan requirements. To address these issues, some agencies within New York State have begun using parent advocate programs.

Parents who have experienced child welfare intervention firsthand have a different perspective and can offer a unique type of support to other parents who are currently experiencing similar situations. Individuals who have had experience as clients of the child welfare system and have successfully addressed the issues which brought them into contact with child welfare possess a wealth of knowledge and understanding of how the child welfare system functions in regard to their own personal experience within the system. As parents who have made it successfully through the child welfare system, these parent advocates can serve as positive role models for families trying to achieve reunification. They can provide hope, support, and motivation to families who need to navigate through the system and work toward getting their children returned to them. These advocates also are able to add credibility because they speak from their own real experiences rather than explaining how the system is “supposed to” work. Effective parent advocates have the willingness to share their own “story” and use it to instill hope for the families they are working with that their family can do it too. For all these reasons, parent advocates are able to engage families in the provision of services and have successful interactions within the child welfare system.

In 2001, the federal Child and Family Services Reviews (CFSR) showed that states across the nation had difficulty engaging families involved in the child welfare system in creating plans and accessing necessary services. Engagement is often synonymous with involvement, but families can be involved and compliant without being engaged. Engagement is about motivating and empowering families to recognize their own needs, strengths, and resources and to take an active role in changing things for the better. Families who are fully involved in the development of their own service plan are much more likely to implement that plan and therefore achieve goals of child safety and permanency. As a result of the CFSR findings concerning family engagement, initiatives were launched in many states to develop ways of improving family participation in the child welfare system. Methods of engagement such as family meetings, family team conferencing, father engagement, and parent advocacy programs emerged. OCFS has developed a parent-to-parent support model strategy as part of the Performance Improvement Plan (PIP) developed in 2003 as a result of the CFSR. The PIP submitted by New York State and approved by the Federal Government listed
13 strategies and accompanying action steps to address areas that needed improvement to achieve the desired child welfare outcomes.

In 2007, OCFS launched a pilot parent empowerment program, called Parent-to-Parent, in Monroe and Ontario counties. This pilot program was developed through the work of an advisory board consisting of parents, CPS staff, and family support programs in the community. The program builds on the model already successfully in place in the mental health arena. With the assistance of other community programs, the advisory board collaborated with OCFS to transfer the model’s strengths to the child welfare arena. The parent consultant program is a two-year pilot program that has just completed its first year. A formal evaluation, including measurable outcomes, is being conducted by the University of Rochester. This evaluation is expected to show the value of parent advocates, and the cost benefit of utilizing parent advocates to achieve outcomes. Results from this evaluation should be provided to OCFS by fall 2009.

In addition to the pilot initiative, several agencies within New York State currently have parent advocate programs.\(^2\) One such program that operates in New York City is the Child Welfare Organizing Project (CWOP). CWOP is an independent and privately funded parent organization led by parents who have personal experience with the Administration for Children’s Services (ACS). The “Parent Organizers’ Advocates” are available to all ACS involved parents, regardless of what other agencies the parents may be involved with. In addition to CWOP, there are approximately 21 New York City foster care agencies that have parent advocate programs.

Input obtained from parent advocate programs suggests these services not only enhance the well-being of those families served, but may also prove cost effective if children are able to be safely maintained in their own home or returned home sooner. These programs can also have related positive impacts. One example is that through their work with the parent advocate, casework staff may gain a better understanding of the hurdles families experiencing the child welfare system encounter, and have increased empathy for such families. In addition, while there may not be evidence that proves that the use of parent advocates can be effective in addressing disproportional over-representation of African-American (and other groups) of children in foster care, it may be a promising practice if recruitment of qualified parent advocates from disproportionately represented communities can be achieved. Overall, it appears that parent advocate programs can be a valuable resource in the delivery of child welfare services.

\(^2\) Parent advocate programs use a range of titles such as: parent consultant, parent specialist, parent organizer, parents as partners, family specialist, and family consultant.
III. Program Implications

Several parent-to-parent models are available, which all share the same goal of providing needed support to struggling families in the child welfare system. This support is provided by parents who are uniquely qualified to engage the family; develop a relationship with the family; be available as needed to offer assistance, direction and advocacy; help them identify and access community supports; help empower the family in meeting identified outcomes; and provide ongoing emotional support.

Caseload sizes can vary from working with a specific set of families, usually five to ten, to working with many families in some aspect or another. Parent advocate programs can also vary in the services provided. Advocates may be limited to working with only families whose children are in foster care, or may work with families who are involved with child protective or preventive services, but whose children have not yet come into foster care. Some programs also utilize the advocate’s skills across the “life of the case” (from CPS investigation to foster care placement to supporting families who have recently had their children returned home). Parent advocates may be of particular assistance with families that have not responded to previous outreach, have expressed unwillingness to participate in planning, or have demonstrated ambivalence toward the process.

The goal of the parent advocate program is to assist families in feeling empowered to make their own good decisions; establish their own outcomes related to safety, permanency, and well-being of their families; and to better utilize their own innate resources, family, and extended family and community resources to help them achieve their outcomes. The expected result will be strengthening parent/child attachments, increasing family responsibility, building a Family Support Model system of supports, and reinforcing family skills to be self-sustaining. Parent advocates will need to have the knowledge and skills needed to assist the families toward this goal. Matching advocates with families should be done according to the needs of the parents and the skill levels of the advocate. Ideally, a parent advocate should be assigned as early in the case as possible and remain with the same family throughout their experiences with "the systems" in which they are involved.

Functions of Parent Advocates

Parent advocates provide support and advocacy to families through a variety of activities that may include the following:

- engaging families and helping them understand the child welfare and family court process
- attending case conferences or family team conferences
- facilitating productive visitation between parents and their children in foster care
• accompanying families to court, school, public benefits offices, health centers, etc.
• assisting families in advocating for themselves
• providing assistance in accessing community resources
• facilitating appointments
• conducting aftercare visits following foster care discharge
• facilitating support groups
• representing the parent perspective and voice in meetings with public officials regarding policy and agency practices, etc.
• working as a liaison between parents, case workers, foster parents, and other service providers to bridge gaps between the family and agency staff, and support relationship development
• assisting with training other parent advocates

Recruitment and Training

For most parent advocate programs, the primary source of referrals will be public and private agencies that have worked with families involved in the child welfare system. Applicants can also be self-referrals; however, expectations would need to be similar to those from agency referrals in that the applicant would need to show a successful “graduation from the system.” As a parent advocate program grows, there will likely be family members who successfully complete the program and become parent advocates themselves.

Most agencies that have this type of parent-to-parent program require training for the parent advocates. Training should include a baseline understanding of child protective and child welfare services; understanding and working with boundaries with families with needs; understanding the role of the parent consultant and the caseworker; communication and advocacy skills; understanding public assistance and public housing issues; understanding domestic violence, mental health, substance abuse, HIV-AIDS, legal issues, confidentiality, and parent rights. Confidentiality requirements for parent advocates should be the same as for other child welfare staff. Information gathered by a parent advocate should be shared only with those who “have a need to know;” such as child protective service staff, judges, case managers, and case planners. Many agencies have ongoing skill development opportunities provided around sensitivity, coaching, grief counseling and attachment. Other agencies send their parent advocates to outside training programs, such as the Family Development Credentialing (FDC) training through Cornell University or Columbia University’s Parent Empowerment and Self-Advocacy (PESA) program.

Support for Parent Advocates

Parent advocates can work full time or part time for an agency, or on a contractual basis. Some agencies pay them an annual salary and others pay daily stipends. It is very important that parent advocates receive ongoing
supervision and the support they need within their advocate role. The advocates usually attend staff meetings and other agency activities. Most agencies with a parent advocate program have a program coordinator who recruits, hires, trains, matches the advocate with families, and provides support and direction to the advocates. Having ongoing contact with other agency staff can promote positive relationships, understanding, and positive attitudes toward one another when collaborating on family cases. Successful models will require full agency support. To help ensure success, other stakeholders, such as caseworkers, family court judges, law guardians, county attorneys, police and others involved with human services, require orientation and/or training regarding the role of the Family Support Model.

Costs

Parent advocacy services can continue to be claimed as a preventive or protective service (child welfare finance dollars), as described in the claiming instructions below, when Parent Advocates are used in Preventive, Child Protective, or Foster Care cases.

Financial Claiming Instructions (for LDSS only)

The expenditures should be claimed on line 15, "Other Services," of the Schedule G, Title XX Services for Recipients.

Expenditures that can be related to a specific child and meet the definition within 18 NYCRR 423 may be claimed in column 4, Child Preventive Title XX, or in column 5, Child Preventive Title XX, under 200% if the family meets the 200% of poverty standard. Costs that can be related to a Protective case may be claimed in column 6 Child Protective Title XX or in column 7 Child Protective Title XX under 200% if the family meets the 200% of poverty standard. These expenditures would be entitled to the 63.7% state share after federal funds.

Costs that are non-client-specific and costs where the advocates are working directly for the agency should be encoded under the F2 function and claimed on the schedule D-2 Allocation for Claiming General Services Administration Expenditures.

/s/ Nancy Martinez

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