

Growing Safe:

PERSPECTIVES ON EARLY IMPLEMENTATION

Background and Introduction

The Texas Council on Family Violence (TCFV) partnered with the Child and Family Research Partnership (CFRP) at the LBJ School of Public Affairs at The University of Texas at Austin to evaluate the effectiveness of two interventions that seek to enhance the support that domestic violence (DV) centers provide to clients who also have an open Child Protective Services (CPS) case (dual-involved clients). TCFV implemented demonstration projects in three diverse Texas communities. The demonstration projects, known as Growing Safe, seek to support dual-involved, non-abusing parents in promoting child resiliency, and to enhance local-level collaboration between DV centers and CPS. Five DV centers across the three demonstration sites are implementing the same two interventions, but each center is tailoring implementation to fit the needs of their community.

The first intervention is a parenting curriculum, ADVANCE (Acknowledging Domestic Violence and Navigating Child Protection Effectively), which is designed to promote positive and protective parenting and address the unique circumstances that victims of domestic violence experience. The second intervention is the introduction of a staff position at each DV center, the Enhanced CPS Liaison (ECL), who is dedicated to supporting dual-involved clients with their CPS cases by sharing information about the CPS system, accompanying clients to CPS meetings and hearings, advocating on clients' behalf to CPS staff, and being a resource for other DV staff with CPS-involved clients.

The evaluation is guided by three overarching research aims (Table 1). To address these research aims CFRP is conducting a mixed methods evaluation that includes surveys of clients participating in the ADVANCE class and/or working with the ECL, and focus groups with CPS staff, DV center staff, the ECL staff members, and the ADVANCE facilitators (often, the latter two are the same staff member). The focus groups, which are the topic of the present report, were designed to assess how the Growing Safe interventions are being implemented across the five sites and the extent to which the interventions have resulted in increased local collaboration and coordination between CPS and DV centers at each site. The specific aims of the focus groups and additional details are provided below.

Table 1. Growing Safe Evaluation Research Aims

Research Aim	Specific Research Questions
1. Assess the delivery and effectiveness of the ADVANCE parenting curriculum for survivors of domestic violence who are involved with the child welfare system.	<p>a. How are parents recruited for/referred to the class? What facilitates successful delivery of the curriculum? What aspects of the curriculum are useful to parents? For whom is the class beneficial?</p> <p>b. To what extent do parenting classes provide victim-parents with useful tools and support for living lives free from abuse? To what extent do parenting classes provide victim-parents with useful tools and supports for strengthening the parent-child bond and increasing child resiliency?</p>
2. Evaluate the influence of the Enhanced CPS Liaison on victim-parents' experience of the child welfare system.	<p>a. What is the role of the ECL? How does the role of the ECL vary across demonstration sites? How does the ECL support victim-parents? Which clients work with the ECL at each demonstration site?</p> <p>b. In what ways do victim-parents benefit from working with an ECL?</p>
3. Evaluate the influence of the Enhanced CPS Liaison on the relationship between domestic violence service providers and local CPS offices.	<p>a. How does the ECL work to build understanding and collaboration between DV and CPS staff? Which aspects of the ECL role are most useful to DV staff? Which aspects of the ECL role are most useful to CPS staff?</p> <p>b. To what extent does the ECL improve understanding and collaboration between DV and CPS staff?</p>

Focus Groups

CFRP conducted 9 focus groups at the Growing Safe demonstration sites in July 2018 (Table 2). At each site—Abilene, San Antonio, and the Rio Grande Valley, which included the McAllen, Brownsville, and Harlingen sites combined—CFRP held a focus group with local CPS staff, a focus group with staff from the local domestic violence shelter(s), and a focus group with ECL staff member(s) and the ADVANCE facilitator(s).

Table 2. Attendance at Growing Safe Focus Groups (July 2018)

Location	CPS Staff Attendees	DV Staff Attendees	ADVANCE/ECL Staff Attendees
Abilene	5	9	2
RGV	18	6	5
San Antonio	2	11	2

Note: The focus groups in RGV included staff from three domestic violence centers demonstration sites in McAllen, Brownsville, and Harlingen.

The specific research aims and questions for the focus groups were to:

1. Determine the perceived value of the ECL position. What does the ECL do at this site? What is the model? How do they work with DV staff? Clients? CPS?
2. Determine the perceived value of the ADVANCE program. How aware are other DV staff of the ADVANCE program? Do they know the purpose and/or content of the program? Have their clients attended the program? Did they benefit from it?
3. Determine the extent to which the project has enhanced collaboration between DV centers and CPS. Has there been a shift in relations between agencies? Enhanced personal relationships? Are there still significant barriers to collaboration?

During the focus groups, CPS staff, DV center staff, the ECL staff member, and the ADVANCE facilitator each provided their perspective and input on the implementation of the ECL staff position and the ADVANCE parenting class in their community, and the status of collaboration and coordination between CPS and DV staff. The findings are summarized below.

Findings

Overall, the perceived value of the Growing Safe interventions varied widely. Of the two interventions, the ECL position was the most highly lauded—especially by the other staff at the DV shelters, but also by CPS staff in some sites. DV staff generally perceived the ADVANCE class to be beneficial for their clients, but high rates of attrition plague all sites, and CPS staff reported being largely unfamiliar with the ADVANCE class specifically.

Additionally, the sites in which CPS staff and DV staff reported the working relationship between CPS and the local DV shelter was generally positive prior to the interventions reported even stronger coordination between CPS and DV with the implementation of the ECL position specifically. In contrast, the ECL position has not yet made much progress in increasing coordination at the sites in which the relationship between CPS and the local DV shelter was strained prior to the interventions.

The Enhanced CPS Liaison

Navigating barriers between CPS and DV: CPS workers and DV staff across sites agreed that the primary barriers to a collaborative working relationship between CPS and DV are the structural differences in each agency's goals, processes, and timelines that are often in opposition to each other. For example, the primary goal of CPS is to keep children safe; the primary goal of DV is to keep the survivor, most often the child's mother, safe. Additionally, DV shelters are bound by confidentiality laws and cannot disclose whether a dual-involved client is at the shelter or what services she may or may not be participating in unless the client signs a waiver. CPS, however, is legally bound to make contact with a child in a certain amount of time, and according to CPS staff, is under increased scrutiny to meet those deadlines.

At many sites, the ECLs help both CPS and DV staff navigate these barriers. ECLs translate the CPS policies and practices for the DV staff at their centers—helping them understand why CPS staff need the information they do (e.g., location of child and mother; mother’s participation in and completion of parenting classes) as quickly as they do. When ECLs invest in being empathetic with the strict timelines CPS staff must meet, rather than dismissive, CPS staff often become more receptive to understanding the legal constraints DV staff have regarding confidentiality. At one site, a DV staff member noted, “the ECL position has totally changed the ballgame with how we interact with CPS.” Staff at that site elaborated further that there had been important attitude shifts since implementing the ECL position—CPS supervisors were backing DV staff up when new caseworkers unfamiliar with DV policies and practices became frustrated with the confidentiality policies at the DV shelter.

Not all ECLs have been successful at playing the role of mediator between CPS and DV—tensions remain high at some sites. At all the sites, however, the ECLs reported helping to reduce the barriers between CPS and DV by explaining to DV clients the importance of providing information to CPS for their case—that the information would be “another point in their favor.” The ECLs encourage their clients to consider signing the confidentiality waiver so that DV staff can provide CPS with details about how clients are working their safety plans, attending parenting classes, and accessing other resources.

Benefits for clients: In addition to translating CPS policies and practices to the DV staff at their center, ECLs also, “help make CPS less scary” for their clients, often working to diffuse tense situations between CPS and clients, as DV staff at one site remarked. CPS staff at one site described how parents can be hostile with them, but the ECL can talk with the client once they are calm and help explain what is happening and why. The ECL at one site noted helping to explain the “why” of CPS’ requirements was helpful for motivating their clients. DV staff at another site reported that the ECL helps parents navigate CPS, clarify CPS terminology, and understand how to work their plan.

DV staff at several sites reflected on how important the support the ECL provides dual-involved client was given how isolated DV clients often become prior to leaving their abuser. ECLs provide support through open-door policies at residential shelters, one-on-one meetings with dual-involved clients, and attending CPS court hearings and family group conferences with CPS staff.

Point person for CPS and DV staff: DV staff across sites and CPS staff at most sites agreed that an important advantage of the ECL position is that the ECL staff member is the point person at the DV shelter for CPS. CPS staff at one site described the ECL as being a “huge resource for CPS” and that they could “call her for anything.” DV staff also appreciated having the ECL as a resource for navigating CPS, noting that if DV staff had concerns they could go to their ECL who would find the answer and report back. At some sites, CPS staff know to contact the ECL when making a referral to the DV shelter and DV staff go to the ECL with their questions and concerns about CPS. At some sites, all DV clients with a CPS case go on the ECL’s caseload.

Room for improvement: Despite the ECL model working well at some sites to be a resource for DV staff who have CPS-involved clients, and to diffuse tensions between CPS and both DV staff and dual-involved clients, there is room for improvement at all sites, but especially at sites where the relationship between CPS and DV was and remains strained. The ECL position is not well known at all sites. Part of this is due to turnover at both agencies, but particularly at CPS, where new caseworkers are not familiar with the position. Or, the ECL will attend leadership meetings at CPS to describe their role with the intention that the information trickles down to caseworkers, but this doesn't always happen. The need for more frequent networking and cross-training between agencies was discussed at length at all sites. The need for the ECL position to be a full-time position was also discussed at length across sites. The current part-time nature of the position limits the ECL in how much support she can provide to clients and to staff, and how much time can be devoted to connecting with CPS staff.

The ADVANCE Program

Valued by DV, less so by CPS: CPS and DV provided largely discrepant views on the extent to which the ADVANCE program was beneficial for dual-involved clients. For the most part, DV staff praised it as being uniquely suited for their dual-involved clients, whereas CPS staff across sites were generally unaware of the ADVANCE parenting program specifically, though some were aware that the DV center offered parenting classes. As such, CPS is not a significant source of referrals into ADVANCE. Referrals into the program are mostly internal within the shelter at most sites.

Benefits for clients: The benefits of the program as described by DV staff and the ADVANCE facilitators include clients gaining increased knowledge about DV, the impact of DV on their child, and the importance of selfcare. DV staff described clients who participated in the class having increased confidence and self-esteem, a greater sense of accountability, and a greater sense of social support and not feeling alone. Another benefit for clients is that at all DV centers, the class is offered on a rolling basis, such that clients can start attending at any point in the seven classes and continue until they finish all seven classes. Parents do not have to wait until the program starts over at the first class to being attending. This helps parents complete the parenting program more quickly, which is especially important if they are mandated to attend a class as a part of their plan with CPS.

High rates of attrition: Although the ADVANCE program was praised for providing parents with important knowledge, tools, and support, the biggest challenge cited by DV staff at all sites was the high rate of client attrition—very few clients actually complete the program (attend all seven classes). Many of the reasons cited were unavoidable: a client and her child relocate out of town to where they have a support system; a client's CPS case closes before classes finish; when CPS does mandate parenting classes, they often mandate fewer classes than the seven classes required to complete ADVANCE. Other explanations for high rates of attrition include transportation issues and work schedule conflicts, or the client wants to stay with the abuser and take parenting classes together, but the abuser is not welcome at the DV shelter. Some sites were committed to offering one-on-one sessions, offer classes multiple days a week at various times to help parents complete the ADVANCE program, but this was not always the case.

Traumatized parents not ready for parenting: Another important challenge to sustained client engagement in ADVANCE discussed at several sites was related to the fact that clients often arrive at the DV center in crisis, prioritizing survival and meeting basic needs. According to DV staff, attending a parenting class comes secondary, if not tertiary to dealing with their trauma. One DV staff member in particular noted that, “from a clinical perspective, parents may not be ready for a parenting class immediately after leaving a traumatic situation or relationship.” Other staff at that site agreed, noting that this was particularly evident if a recently-traumatized parent shows up for their first parenting class and everyone else in the program is on their last class, feeling empowered and confident—that disconnect can be difficult for the new client.

Room for improvement: When asked about what would strengthen the ADVANCE curriculum, two primary themes emerged—the need for additional content on the impact of DV on children to be woven through the curriculum and the need to address how to co-parent with the abusive parent. The ADVANCE facilitator at one site described often having to “connect the dots” of how DV impacts children, and that it would be helpful if the curriculum was more intentional about making those connections. An ADVANCE facilitator at a different site said it was inevitable for parents attending the class to ask about how to co-parent with the other parent assuming that he completed his required services. The facilitator noted that it would be beneficial for guidance on how to address this so that the same information was being provided to parents across sites.

Collaboration between DV and CPS

Great need for increased collaboration, mixed reviews: Across the Growing Safe sites, DV staff reported most of their clients having CPS involvement, and conversely, CPS staff noted high rates of DV involvement, indicating the need for increased collaboration and coordination. In general, many DV staff reflected positively about increased collaboration between the two agencies, compared to CPS staff who were often lukewarm about collaboration with DV staff. At many sites, the implementation of the ECL position has facilitated streamlined communication between the agencies—often acting as a bridge to CPS, but there remains a need to work on awareness of the interventions and provide frequent cross-trainings on each agency’s policies and practices, especially at sites where the communication between the agencies is still strained.

Remaining challenges: Although the ECL has helped at some sites, the tension around confidentiality at the DV centers was the primary frustration cited by CPS staff. Additionally, DV staff across sites discussed the importance of educating CPS staff on the implications of DV, specifically working with families who grew up in homes with DV and are now trying to raise children themselves. At one site, DV staff described that the challenge of working with CPS was getting them to understand that when DV is present, the mother is a victim of trauma and that leaving her abuser can be complicated.

Turnover of staff at both agencies remains a barrier for collaboration between DV and CPS, and emphasizes the need for frequent cross-trainings. Incoming CPS staff are often not aware of whom to

contact at the DV center, or the resources available for parents (including the ADVANCE program), which is made even more difficult with staff transitions at the DV center.

Recommendations

The findings from the focus groups reported here point to several recommendations to strengthen the Growing Safe interventions and ultimately, the collaboration between CPS and DV.

Increase the Frequency of Cross-Trainings between CPS and DV

Across all sites, the most common recommendation was the need for more frequent cross-trainings between CPS and DV. Both CPS and DV staff articulated the need for training on the other agency's policies, practices, timelines, and terminology, with the expectation that greater knowledge of each agency's time and legal restraints would foster greater understanding and reduce frustrations and tension. Staff at both agencies cited how helpful previous trainings had been and that they wished trainings happened more often. Staff perceived annual trainings to be insufficient, but that quarterly trainings might be more appropriate and effective at fostering collaboration.

CPS staff at one site provided an important example of the need for education on each agency's terminology. The local DV center used the term "intake" when registering clients at the shelter, which is the same term CPS uses when they open a CPS case on a family. Thus, dual-involved clients often have just gone through the traumatic experience of a CPS "intake" only to go to their DV shelter and have to go through another "intake."

TCFV may want to include mandatory cross-trainings as a tool for increasing collaboration between the two agencies.

The ECL Should Be a Full-Time Position

DV staff and the ECL staff at all sites emphasized the need for this position to be a full-time position. ECLs reported not being able to provide the amount of support needed for dual-involved clients, particularly when ECLs are attending CPS meetings, court hearings, and providing one-on-one meetings with clients. When the ECL was also the ADVANCE facilitator, the ECLs described being even more stretched for time. An ECL at one site who was also the ADVANCE facilitator noted that the position would benefit from having a support staff or an intern who could help with the ADVANCE preparation.

In addition to considering how much time should be devoted to the ECL position, TCFV could reevaluate whether the ECL should also be the ADVANCE facilitator. DV staff cited both pros and cons to having the same person in both positions. The most common disadvantage is the amount of time preparing for ADVANCE classes and teaching takes away from the ECL work. An advantage of having the same person in both positions cited by an ECL who was not the ADVANCE facilitator was greater awareness of how clients are progressing through classes, which would allow them to provide better information to CPS.

That staff member in particular reported feeling “out of the loop” on how her clients were doing in the ADVANCE class.

Reevaluate the ADVANCE Curriculum and Structure

The ADVANCE facilitators provided important suggestions for how the ADVANCE curriculum might be enhanced including emphasizing the impact of DV on children throughout the program and addressing the oft-asked issue of whether to and how to co-parent with the abusive parent. TCFV should consider these suggestions when reevaluating the curriculum. Additionally, some of the challenges around attrition could be assuaged by encouraging sites to be more flexible with the class schedule. Several sites, but not all, offer one-one-one sessions to make sure parents complete their program, or have changed when and where the class is offered to accommodate parents with transportation issues and work conflicts. Not all sites have been as flexible, and should be encouraged to do so.

Conclusion

The extent to which the Growing Safe interventions have fostered collaboration between CPS and DV varies by intervention, perspective, and history of collaboration between the two agencies. The ECL position has been beneficial for bridging the gap between CPS and DV at most sites, especially from the perspective of DV staff, but also from many CPS staff. The ADVANCE program, in contrast, is far less known by CPS staff, but has the potential to be beneficial for dual-involved clients, especially if clients complete the program.

The ECL has been the most effective at strengthening collaboration at sites where there was an existing working relationship between CPS and DV. It has been less effective at sites where tensions run high. Despite this variation, all sites requested more opportunities for trainings on agency policies and practices to foster greater understanding and collaboration. Moving forward, taking advantage of additional cross-trainings to also provide CPS staff with information on both the ECL position and the ADVANCE program, would also help foster collaboration between the two agencies.

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The Child and Family Research Partnership (CFRP) is an independent, nonpartisan research group at the LBJ School of Public Affairs at The University of Texas at Austin, specializing in issues related to young children, teens, and their parents. We engage in rigorous research and evaluation work aimed at strengthening families and enhancing public policy.