

Civic and Community Engagement Research Series Center for Public Scholarship and Social Change June 2016

An Evaluation of the Family Advocate Program Serving Children with a Parent in Prison

Carrie L. Smith, Kurt Lituma, Jennifer Strasenburgh, Tracy Rennecker, Mary H. Glazier

Millersville University

Huntingdon House 8 S. George Street P.O. Box 1002 Millersville, PA 17551-0302 http://www.millersville.edu/ccerp/research.php

Introduction

In December 2014, the Lancaster County Commissioners approved a two-year pilot program supporting a Family Advocate to work with children who have a parent in prison. The Family Services Advocate is employed through Compass Mark, a nonprofit with a focus on guiding children, teens and adults in Lancaster County to lead stronger, more fulfilling lives. Ambassadors for Hope, a community benefit organization that advocates for children with a parent in prison, assisted in the design of this position and provides ongoing support to the Family Advocate through networking and community education. The Center for Public Scholarship and Social Change at Millersville University (CPSSC) has provided consultation on tracking outcomes and research on best practices. The following report examines the impact of the services provided by Family Advocate on clients served in the first year of the program.

Background Information / Methodology

Clients' needs were assessed at two different times – at intake and at 90 days. At intake, clients were asked if they needed assistance in various areas, including accessing health insurance, food resources, stable housing and establishing guardianship. Because of the need to evaluate outcomes at 90 days, only include clients served through September 2015 (which would provide us with 90-day outcomes at the end of December 2015) are included. Subsequent evaluations will include clients served by the program from October through December 2015¹.

This evaluation of the program's effectiveness focuses on the percentage of clients whose need for assistance was lower at their 90 days assessment than at intake. If the program is effective, the percentage of clients who need assistance will be lower at 90 days.

Description of Clients

Age of Clients

Sixty-two (50%) of the clients were 5 years old and younger. Fifty-five (44%) were between 6 years old and 12 years old, and seven (6%) were between 13 years old and 16 years old. Out of 134 clients, we did not have information on the age of the client for 10 (see Table 1 below).

¹ Since this data for this evaluation was collected, the Re-Entry Management Organization has provided the Family Advocate with free access to Apricot, a case management database system. The Family Advocates client records are currently being transferred to Apricot, which will be used for all new cases. The reporting functions of this software will greatly reduce the time required to document program outcomes.

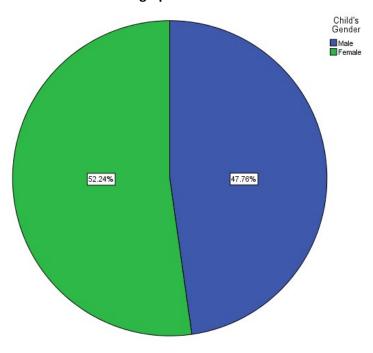
Table 1 Age of Clients

Client's Age	Number	(Percentages in parentheses)
5 years of age and below	62	(50%)
6 year of age to 12 years old	55	(44%)
13 years old to 16 years old	7	(6%)
	124	(100%)

Gender of Clients

During this time period, 52% of the program's clients were female while 48% were male (see Figure 1 below).

Figure 1 Gender Demographics of Client Base



Gender of Incarcerated Parent

Fifty-four percent of the clients' fathers were in jail, while 41% of the client's mothers were in prison. Five percent of the clients had both their fathers and mothers in jail (see Figure 2 below).

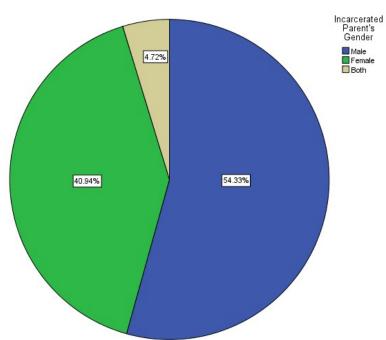


Figure 2 Genders of Incarcerated Parents

Children's School District

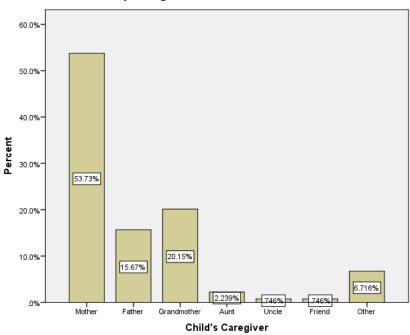
For about 38% of the 134 clients, there is no school district information. For the remaining 62% for whom there is school district information, about 42% attended the Lancaster City school district. School districts that the clients attended also included Columbia Borough, Elizabethtown Area, Ephrata, Hempfield, Pequea Valley, and Warwick.

Primary Caregivers

A majority of the clients relied on their mother as their primary caregiver (54%). Twenty percent of the clients relied on their grandmother as their primary caregiver, and 16% relied on their father. Other primary caregivers included an aunt, uncle, friend, and other (non-specified) (each less than 10%) (see Figure 3 below).

Figure 3

Clients' Primary Caregivers

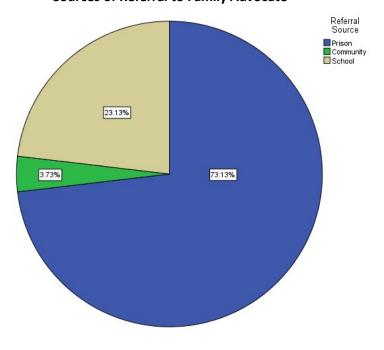


Referral Source

From the initiation of the program to September 2015, the Family Advocate served 134 clients. Out of this client base, the majority of cases were referred to the program through the prison system (73%), followed by the schools (23%), and finally, through the community (4%) (see Figure 4 below).

Figure 4

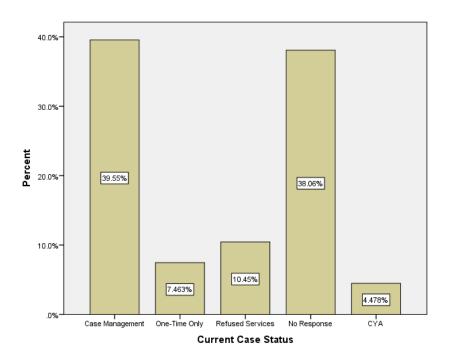
Sources of Referral to Family Advocate



Type of Services Provided

During this time period, 40% of cases involved active case management, while 7% required one-time only information and assistance. Thirty-eight percent of referrals resulted in no further response or communication from the client / clients' caretakers,² and 10% of referrals declined services. Five percent of cases were referred to Children and Youth Agency (CYA) (see Figure 5 below).

Figure 5 Clients' Engagement With Family Advocacy Program



Assessment of Family Advocate Program's Effectiveness

In assessing the program's effectiveness, we focus on the time period from March – September 2015 (see earlier explanation). In addition, we also focus on the 49 clients who required active case management. Out of these 49 clients, we had intake and 90 days data for 47 clients. Therefore, this assessment is based on a total of 47 clients. As mentioned earlier, our evaluation of the program's effectiveness focuses on the percentage of clients whose need for assistance declined at 90 days' assessment. If the program is effective, the percentage of clients who need assistance will be lower at 90 days. By this indicator, the program has been highly effective in meeting the needs of its clients, as the percentage of clients needing assistance in every area decreased at 90 days (see Table 2 below).

² While it might appear that a large percentage of the client base displayed no interest in getting assistance from the program, it is important to remember that this unique population faces many challenges and difficulties in navigating day-to-day life. Thus, it is not unusual that many will not follow up with a program referral. The Family Advocate's practice was to make three phone calls in an attempt to connect with the client / client's caretaker. Once those attempts were exhausted with no success, the Family Advocate closed the client's file.

Table 2 Needs of Clients Requiring Active Case Management (47 clients total)

Stated Need P	ercentage at Intake	Percentage at 90 Days	
Health Insurance	16%	9%	IMPROVED
Food Stamps	22%	13%	IMPROVED
Cash Assistance	14%	0%	IMPROVED
Stable Housing	43%	23%	IMPROVED
Therapy	57%	36%	IMPROVED
Support through CYA (Children and Youth Ager	29% ncy)	26%	IMPROVED
WIC (Women Infants and Chile	2% dren)	0%	IMPROVED
Clothing	18%	4%	IMPROVED
Access to Incarcerated Pa	irent 84%	40%	IMPROVED
Advocacy in School Settin	ng 40%	16%	IMPROVED
Primary Care Physician	4%	0%	IMPROVED
Establishing Guardianship	16%	9%	IMPROVED

Client Stories

Sometimes, the positive impacts of the family advocacy program on the clients' lives are beyond quantification. The following two vignettes illustrate how the Family Services Advocate has helped to meet the needs of her clients. The first demonstrates how the primary caregiver, a grandmother, became better able to provide for the basic needs of her grandchildren:

When you meet Suzanne (not her real name), the first thing you think is NOT grandmother. She met me on her front porch and we went into her apartment that she shared with her adult disabled son and her three grandchildren, aged two, four and eight, children she has cared for since birth. As we talk she is moving around the living room and kitchen getting juice, picking up toys and microwaving Chef Boyardee. Suzanne told a story that is all too common. Her

daughter and son-in-law have been in and out of jail since the kids were born. Suzanne said that her daughter does really well for a while, she had a job, helps with the rent and the kids, but then her addiction takes over. It is only a matter of time then before she goes back to jail. Suzanne explains that she and the children will be evicted soon. They are living off her son's disability, and it just doesn't cover all the rent, utilities and household costs. Suzanne said the Welfare office has denied her assistance. In the next week we were able to talk with her caseworker at The Department of Public Welfare and complete the necessary steps for her to receive cash assistance, adequate food stamps and get her approved as a full time caregiver. With this additional income, Suzanne and the kids were able to avoid eviction and even begin looking for a bigger apartment.

The Family Advocate also helps to keep children connected to their parents, making sure that parents and children have an opportunity to maintain their relationships, as illustrated here.

The two boys, ages 13 and 11, sat in the plastic chairs in the lobby of the prison with their grandmother waiting for their first visit with their mother. They looked at their feet, and sat quietly. As I approached them they didn't look up. Their grandmother had explained that the 13 year old was very angry with his mother, she wasn't sure if he would come. The 11 year old, she said, was anxious for his mother to come home. I explained to the boys that we would walk through the metal detector and then the correctional officer would wand them down and then we would go into the prison. I also let them know that we could leave whenever they were ready. I suggested that they ask their mother "What is the grossest thing you have eaten?" They smirked, and as we went through the series of doors to the visiting room, the 13 year old was holding back tears. In the visiting room he paced back and forth waiting for his mother. When she walked through the door, he began to cry. Mom hugged him and sat him down beside her, she asked him about his new sneakers. They started what was obviously a longstanding debate on the necessity of matching your sneakers to your outfit. As everyone relaxed, the 13 year old asked his mom, "What is the grossest food you have eaten?" She laughed and said, "Bologna soup!" As she described the soup, everyone was laughing and talking about what they would eat together when she came home. The hour flew by and plans were made for the next visit, as well as a special birthday phone call the following week.

Conclusion / Looking Ahead

The data contained in this report demonstrates the success of that the family advocacy program and its effectiveness in meeting the needs of children with a parent in prison and their caregivers. It also reveals that there are some needs more difficult to resolve than others. For example, at 90 days, over a third of the children receiving assistance from the Family Advocate still need mental health services. Children of the incarcerated experience some of the most devastating hardships out of any group of at risk children. Parental incarceration is now recognized as an "adverse childhood experience" (ACE); it is distinguished from other adverse childhood experiences by the unique combination of trauma, shame,

An Evaluation of the Family Advocate Program

and stigma.³ Community attention needs to be directed not only to meeting the behavioral health needs of this group of children but to addressing the underlying factors contributing the difficulties associated with accessing these essential services.

Not only are the children with a parent in prison dealing with separation from their parent, but quite often also with the loss of basic necessities. As noted above, nearly a third of the children receiving services from the Family Advocate were living with someone other than a parent. In order for a caregiver to access public assistance and many other community resources, including public school, a caregiver must establish guardianship. Public assistance programs, including Temporary Aid to Needy Families (TANF) were not designed with relative caregivers in mind. Grandparents especially are reluctant to seek support for fear of losing the children to the child welfare system. The public assistance programs are difficult to navigate and require documentation (i.e. birth certificates, guardianship forms) that is often not easily accessible. When basic needs such as stable housing, food and clothing are not being met, a child is at imminent risk for removal from the home. A significant percentage of children with a parent in prison did not have many of these basic needs being met at the time the Family Services Advocate first met with the caregiver. More than half of the children had multiple basic needs that were not being met putting them at immediate risk for foster care. Through the services offered by the Family Advocate, that percentage was cut in half, averting placement in the child welfare system and saving the county a significant amount of money.

In conclusion, the data contained in this report support the value of the services provided by the Family Advocate. The data justifies the value of the support that the county and Compass Mark have provided and indicate that a firm foundation for continuation of the program has been established.

³ Hairston, C.F. 2007. Focus on the children with incarcerated parents: An overview of the research literature. Annie E. Casey Foundation.

⁴LaVigne, N., Davies, E., Brassell, D, Feb.2008, Broken Bonds, Understanding and Addressing the Needs of Children with Incarcerated Parents. Urban