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Family Services Advocate Program Evaluation, 2015 -2016

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Introduction

In December 2014, the Lancaster County Commissioners approved a two-year pilot program, supporting a Family Services Advocate to work with children who have a parent in prison. The Family Services Advocate is employed by Compass Mark, a non-profit organization with the goal of reducing the incidence, prevalence, and consequences of addiction to alcohol and other drugs. Ambassadors for Hope, a community non-profit group that advocates for children with a parent in prison, assisted in the design of this position and provides ongoing support to the Family Services Advocate through networking and community education. The Center for Public Scholarship and Social Change (CPSSC) at Millersville University has provided research on best practices and program evaluation. The following report examines the impact of the services provided by the Family Services Advocate on children served in the first two years of the program (2015 and 2016).

Background Information / Methodology

We begin by clarifying that the program's clients are children who have an incarcerated parent. Henceforth, in this report, we use the term "children" when referring to the clients. Children's needs were assessed at two different times – at intake and at 90 days. At intake, children's primary caregivers were asked if the children needed assistance in various areas, including accessing health insurance, food, stable housing, therapy, and establishing guardianship. For this evaluation, we include all children who were referred to and served by the program in the calendar years of 2015 and 2016. The evaluation of the program's effectiveness focuses on the percentage of children whose need for assistance was lower at their 90 days assessment than at intake. If the program is effective, the percentage of children who need assistance will be lower at 90 days.

Children for Whom Intake Was Not Conducted

In 2015 and 2016, out of 505 referrals to the program, intake was not conducted for 329 (65.1%) referrals. Typically, the Family Services Advocate makes three attempts to contact the children and their primary caregiver. This is time- and labor-intensive work, and we strongly recommend that additional resources be provided to assist the Family Services Advocate with this task. Of these 329 referrals, the majority (52.9%) did not respond. 13.4% and 12.2% of the referrals, respectively, declined services or were already in foster-care. In addition, 30 children (9.1%) were provided with one-time assistance – for which the Family Services Advocate was responsible as well. In the remaining situations, either the child's parent had already been released from prison or the child and their primary caregiver lived in another county. We emphasize again the extraordinary demands that are placed on the sole Family Services Advocate staffing this program, and reiterate our recommendation that additional resources be provided for the program to assist with contacting referrals.

Client Demographics

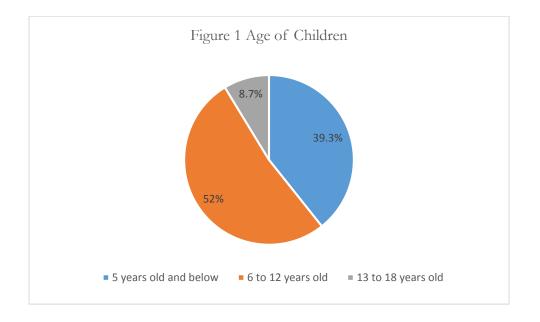
In 2015 and 2016, 505 referrals were made to the program. Of these 505 referrals, intakes were conducted for 176 children (34.9%). In this report, we focus our program evaluation on the 176 children for whom intakes were conducted.

Age of Children

Sixty-eight (39.3%) of the children were 5 years old and younger. Ninety (52%) were between 6 and 12 years old, and 15 (8.7%) were between 13 and 18 years old. Out of 176 children, we did not have information on age for three children (see Table 1 and Figure 1 below).

Table 1	Age of Children	(n=173; age info	ormation not	available for 3	3 children)

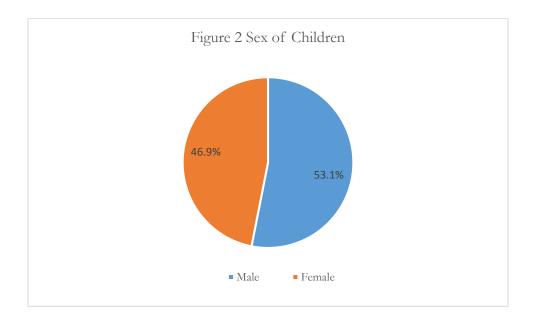
Age Range	Numł	per of Children (percentage in parentheses)
5 years old and below	68	(39.3%)
6 to 12 years old	90	(52.0%)
13 to 18 years old	15	(8.7%)
	173	(100%)



The majority of children (52%) served by the program were between 6 to 12 years old, while 91.3% were 12 years old and younger. While children have a set of universal needs that must be met, moving ahead, we might consider if there are age- and developmental-specific needs that should be addressed for children between 6 to 12 years old.

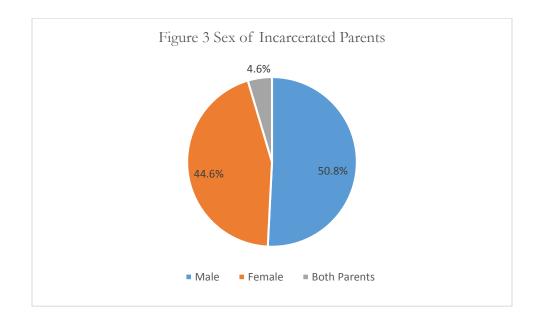
Sex of Children

In 2015 and 2016, 53.1% of the children were male, while 46.9% were female (see Figure 2).



Sex of Incarcerated Parents

50.8% of the children's fathers were incarcerated, and 44.6% of the children's mothers were in prison. 4.6% of the children had both their mothers and fathers in prison (see Figure 3).

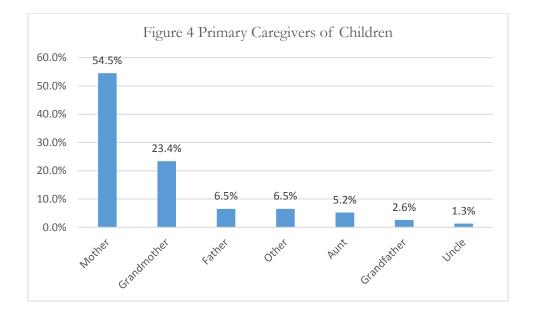


Children's School District

For the 176 children for whom intake was conducted, 70 (39.8%) were from the School District of Lancaster. Children also attended the following school districts: Cocalico, Columbia Borough, Conestoga Valley, Donegal, Eastern Lancaster County, Elizabethtown Area, Ephrata, Hempfield, Manheim Central, Manheim Township, Pequea Valley, Solanco, and Warwick. We did not have school district information for 12 (6.8%) of the children. While a large percentage of children were from the School District of Lancaster, the phenomenon of children with an incarcerated parent is by no means a "Lancaster City problem." Children with an incarcerated parent lived and attended schools across the county.

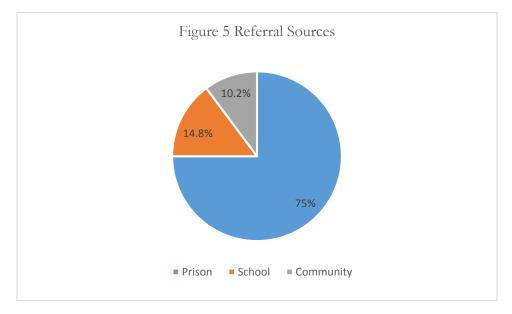
Children's Primary Caregivers

A majority of the children relied on their mother as their primary caregiver (54.5%). 23.4% of the children had their grandmother as their primary caregiver. 6.5% of the children had their father as their primary caregiver, while another 6.5% had a non-related adult serve as their caregiver. Other primary caregivers included aunts, uncles, and grandfathers (see Figure 4). Of note, 26% of children had a grandparent as their primary caregiver. We anticipate that this trend will continue to grow. Looking ahead, we recommend that local and county programs and organizations start examining ways to support grandparents who are acting as the primary caregivers for their grandchildren.



Referral Sources

From the initiation of the program to December 2016, the Family Services Advocate conducted intakes for 176 children. A majority of the cases were referred to the program through the prison system (75%), followed by the schools (14.8%), and finally, through the community (10.2%) (see figure 5 on the next page).



Assessment of Family Services Advocate Program's Effectiveness

In assessing the program's effectiveness, we focus on the calendar years of 2015 and 2016. We also focus on the 176 children for whom an intake was conducted. As mentioned earlier, our evaluation of the program's effectiveness focuses on the percentage of children whose need for assistance declined at 90 days' assessment. If the program is effective, the percentage of children who need assistance will be lower at 90 days. By this indicator, the program has been highly effective in meeting the needs of the children, as the percentage of children needing assistance in every area decreased at 90 days (see Table 2 on the next page). We note that the percentage of children indicating multiple needs also decreased at 90 days – from 76.6% to 26.1%. Not only has the program been successful at providing the children with the assistance they need, it has also been successful in helping children reduce the number of needs with which they require assistance.

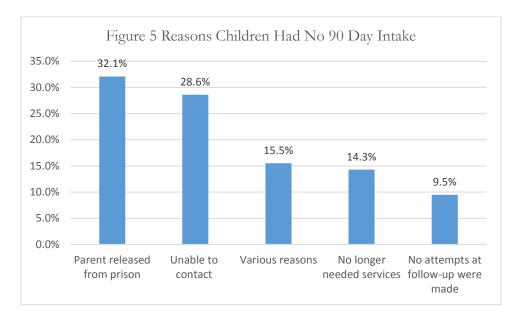
Table 2Children's Needs Assessments at Intake and 90 Days for 2015 and 2016

Need	Intake		90 Days		Outcome	
Access to Parent	123	(69.9%)	25	(27.2%)	IMPROVED	
Therapy	91	(51.7%)	25	(27.2%)	IMPROVED	
Stable Housing	51	(29.0%)	10	(10.9%)	IMPROVED	
Clothing	46	(26.1%)	7	(7.6%)	IMPROVED	
Cash Assistance	37	(21.0%)	1	(1.1%)	IMPROVED	
Health Insurance	34	(19.3%)	2	(2.2%)	IMPROVED	
Legal Guardianship						
Established	34	(19.3%)	2	(2.2%)	IMPROVED	
Food Stamps	33	(18.8%)	4	(4.3%)	IMPROVED	
СҮА	30	(17.0%)	11	(12.0%)	IMPROVED	
Advocacy in School	14	(8.0%)	1	(1.1%)	IMPROVED	
Food	13	(7.4%)	2	(2.2%)	IMPROVED	
Access to Primary Ca	re					
Physician	11	(6.3%)	1	(1.1%)	IMPROVED	
WIC	3	(1.7%)	0	(0%)	IMPROVED	
More than 1 need						
Identified	135	(76.7%)	24	(26.1%)	IMPROVED	

(At intake, % are calculated out of 176 children; at 90 days, % are calculated out of 92 children. Percentages are in parentheses.)

At 90 days, 92 (52.3%) of the 176 children served at intake remained connected to the program. What happened to the 84 (47.7%) children who had lost connection with the program? Out of these 84 children, 27 (32.1%) of them no longer qualified for the program's services as their parent had been released from prison. Additionally, 12 (14.3%) of the children no longer needed the program's assistance. Of concern are the 24 (28.6%) children whom the Family Services Advocate was unable to contact at 90 days, and the 8 children (9.5%) for whom no attempts at follow-up contact were made (see Figure 5 on the next page). As we mentioned earlier, there are extraordinary demands placed on the sole Family Services Advocate staffing this program. It is simply not feasible, for one staff member, to have the time to continually attempt to contact the children. **We repeat our earlier**

recommendation that additional resources be provided for the program to assist with contacting referrals, as well as to assist with following up with the children post-intake.



Children's Stories and Experiences

As we noted in our last evaluation report, sometimes, the positive impacts of the Family Services Advocate program on the children's lives are beyond quantification. The following two case vignettes illustrate how the Family Services Advocate has helped to meet the needs of her clients (all names are pseudonyms). The first demonstrates how the client – a newborn baby – was able to spend time with his mother and begin to establish a bond with her:

The Family Services Advocate met Joanna soon after she arrived at Lancaster County Prison. Joanna was in her last trimester of pregnancy. Her baby boy was due in six weeks. Joanna explained to the advocate that she wanted her boyfriend to come to the hospital to take the baby home when he was born. Joanna talked about how caring her boyfriend had been all through her pregnancy, even though he was not the biological father. The advocate and the newly formed support services group worked with Joanna to see if her boyfriend was prepared to care for her son. It turned out that the boyfriend was un-fit to care for the baby due to some worrisome charges in his past. Joanna was shocked and heartbroken! She turned to her support team in tears, asking them what she could do. The advocate was able to arrange for a family through Bethany Christian Services' "Safe Families" program to care for her baby until Joanna was released from prison. The advocate was able to bring the baby in to spend time with Joanna, and allow mother and child to bond before they were reunited upon her release. Joanna was so grateful that her son did not have to go into foster care, and that he was cared for by a loving family.

Existing research documents how crucial the early bonding period is between babies and their parents. In this case, the Family Services Advocate was able to help the child establish contact and maintain a connection with his mother. We note also that a large part of the advocate's job is to

identify, locate, and partner with existing local programs and organizations. In this case, the Family Services Advocate was able to provide support for the client in conjunction with Bethany Christian Services.

The Family Services Advocate also helps primary caregivers obtain temporary guardianship so that they can better care for the children:

Grandmother (Judy) was distraught when her daughter overdosed and almost died. It brings her to tears every time she talks about how her granddaughter found her mother on the floor, and had to call the ambulance. Judy does everything she possibly can to take care of her granddaughter, but she realized very quickly how difficult this is to do. Judy reached out to the Family Services Advocate to get a temporary guardianship agreement that would allow her to get health insurance for her granddaughter, as well as get her into therapy, so that she would have someone to help her process this situation. Judy explained to the Family Services Advocate that she was on a very limited income, and didn't think that she would be able to pay for the summer camp that her granddaughter was looking forward to. Through the advocate's work, a sponsor was located, and Judy's granddaughter was able to attend two weeks of summer camp. Now Judy's daughter is back in the home and working on her recovery, as well as making up for lost time with her daughter.

It is important that primary caregivers (who are not biological parents) obtain temporary guardianship, which allows them to make crucial decisions for the children under their care. The Family Services Advocate is invested in helping children's primary caregivers understand this, and works closely with them to help secure temporary guardianship.

Conclusion

The data contained in this report continues to demonstrate the success of the Family Services Advocate program and its effectiveness in meeting the needs of children with a parent in prison and their primary caregivers. This evaluation also reveals that, like the previous evaluation, there are some needs more difficult to resolve than others. Specifically, at 90 days, almost a third of the children still needed to secure access to their incarcerated parent and to therapeutic services.

There is clearly a need for this program. In fact, there is a clear evidence that this program needs to be expanded. In 2015 and 2016, there were 505 referrals to the program. One staff member in the Family Services Advocate program can only do so much to reach out to, and follow up with, all these referrals.