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SCHOOL OF SOCIAL WORK

“They Treated Me Like a Real Person”: Family Perspectives on Effective Engagement Strategies

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“engagement”

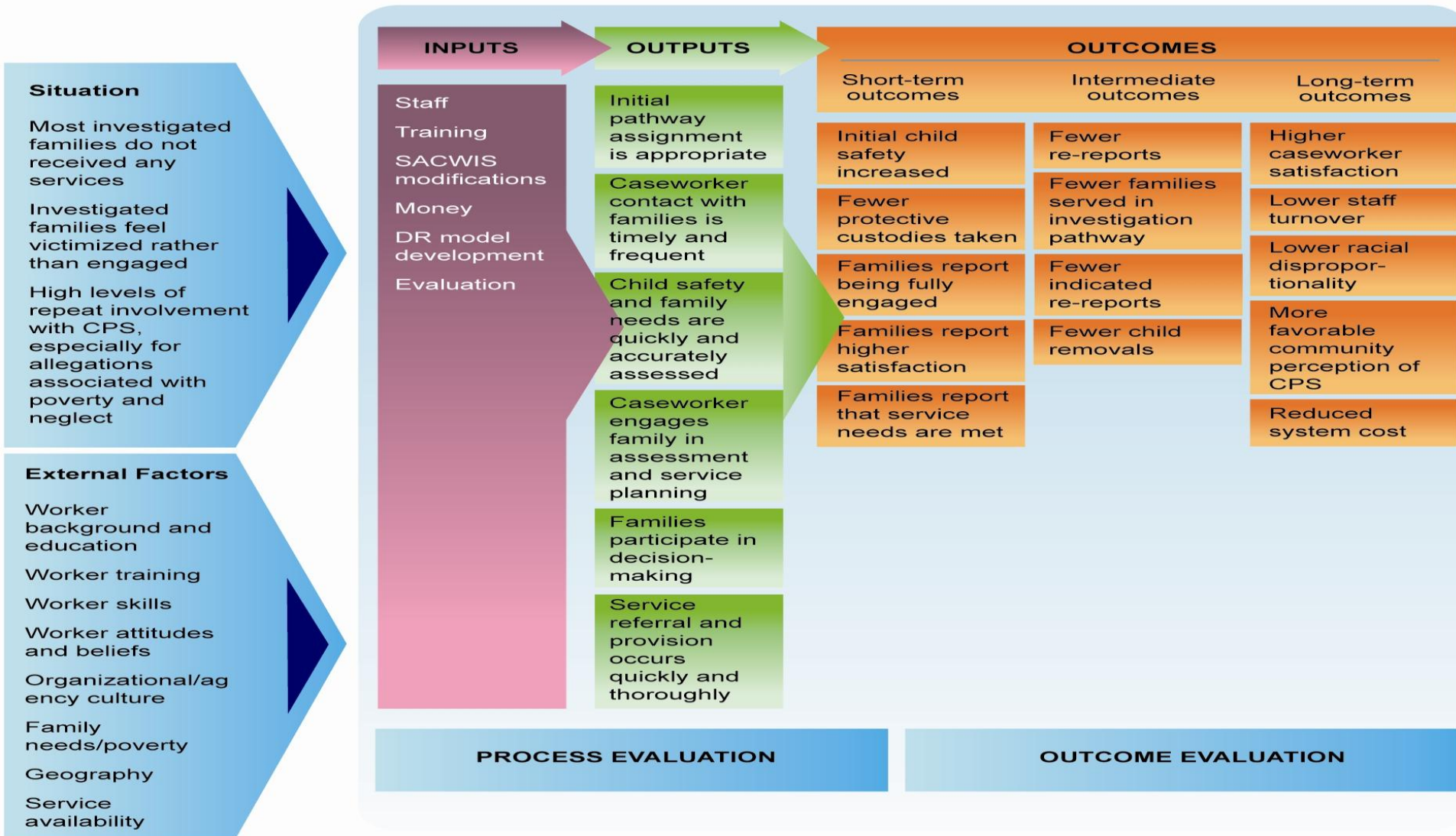
- One of the trendiest words in child welfare practice right now is “engagement”
- More and more interventions are touting engagement as a core component, including Differential Response
- Despite its status as a current buzzword, the concept of client engagement has been central to social work for decades (e.g., the “helping alliance” the “working relationship”)



Why does Differential Response work?

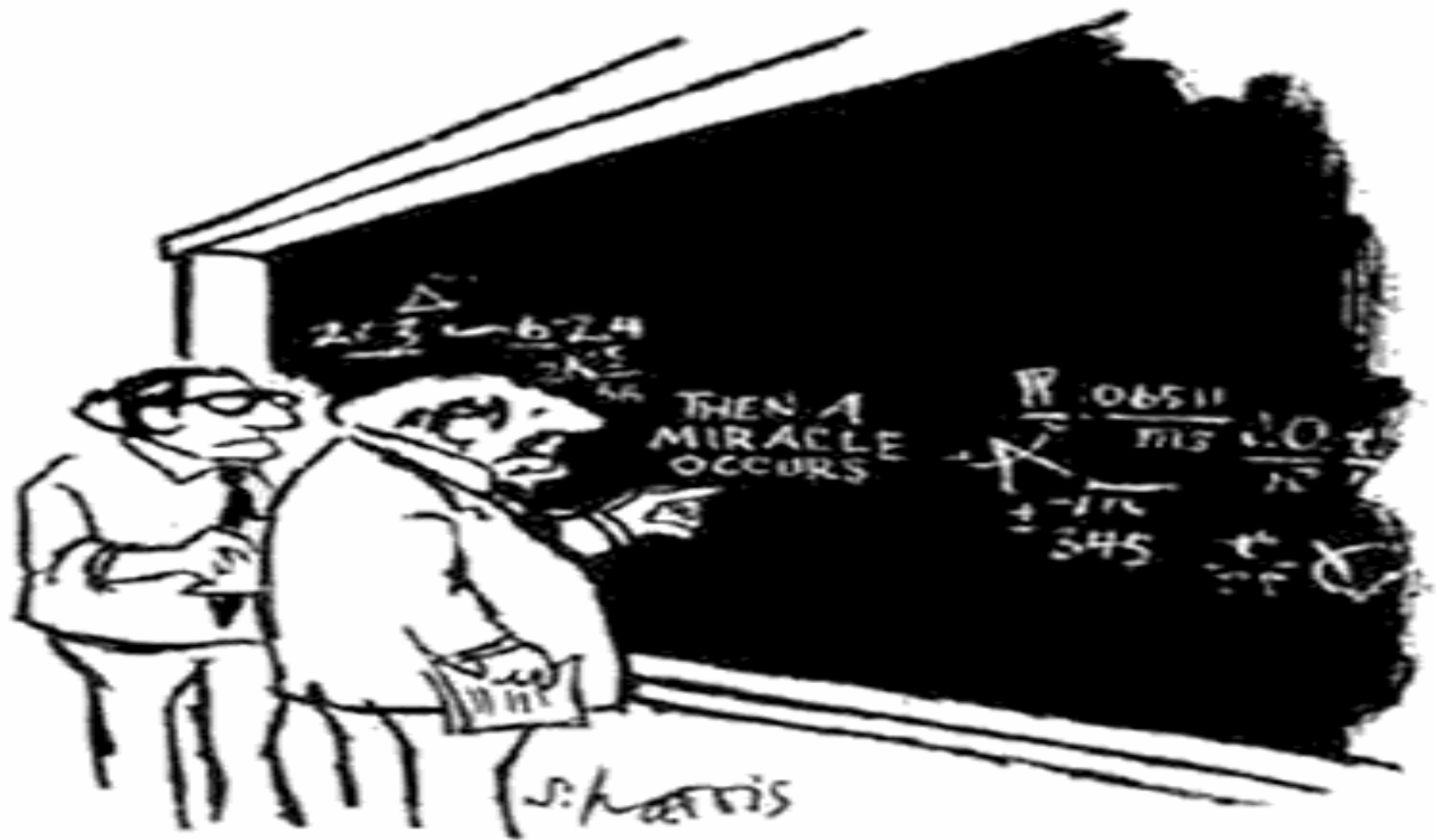
- DR is a good example of a program which emphasizes family engagement
- Where does engagement fit in the DR logic model?

Illinois Evaluation Logic Model





Or put another way.....



"I THINK YOU SHOULD BE MORE EXPLICIT
HERE IN STEP TWO."



What Do We Know?

- Little consensus on what defines engagement
- Measurement is rudimentary
- Little is known about the factors that enhance engagement (client, worker, organizational)
- Even less is known about how engagement is related to “treatment” outcomes



Defining Engagement

- Hard to define, but we know it when we see it?
- Dictionary says: emotional involvement or commitment
- Research uses vague and overlapping terms such as involvement, compliance, participation, cooperation, collaboration, empowerment
- Both a process and an outcome?



Defining Engagement

- Subset of studies that define engagement in behavioral terms: enrollment, retention, attrition, completion, attendance, compliance, adherence
- Others view it as “the process whereby the social worker creates an environment of warmth, empathy, and genuineness that enables a client to enter into the helping relationship and actively working toward change” (Altman, 2008)



Defining Engagement

Parent involvement in early childhood programs defined as “the process of the connecting with and using the services of the program to the best of the parent’s and the program’s ability.”

Involvement includes two broad dimensions:
participation – quantity of the intervention

engagement – emotional quality of interactions



Measuring Engagement

- Most studies have relied on quantitative measures of service usage, such as acceptance of services, frequency of attendance at meetings, service completion
- Other studies of the affective qualities of engagement have mainly relied on worker assessments of “client cooperativeness”



Measuring Engagement

Evaluations of DR have measured parent engagement by parent assessments of:

- Emotional reactions following the first contact with workers (relieved, angry, respected, stressed, etc.)
- Satisfaction with services and caseworker
- Caseworker listened
- Participation in decisions

Quantitative Measure of Engagement in CPS

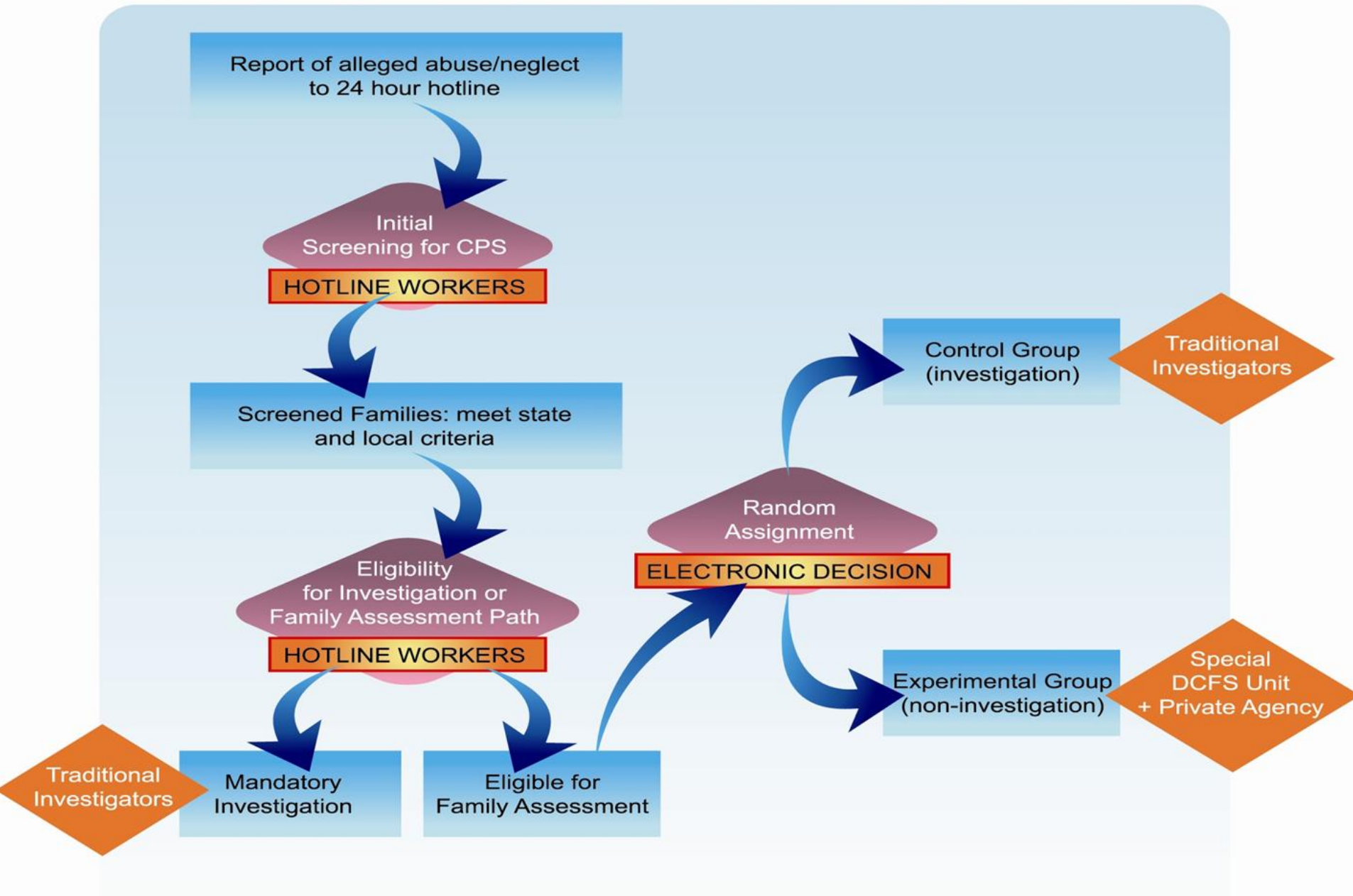
- Receptivity: openness to receiving help
- Working Relationship: sense of reciprocity and good communication with worker
- Buy-in: perception of being helped, commitment to the helping process, active participation, goal ownership
- Mistrust: belief that the worker or agency manipulative, with intent to harm the client



Current Study

- Using qualitative interviews, attempts to gain better understanding of CPS-involved parent perceptions of the engagement process
- Looked at differences in engagement between parents who got an investigation response (IR) or DR
- Part of the larger evaluation of Differential Response in Illinois.

Illinois DCFS Pathways to Strengthening and Supporting Families





Family Exit
Survey

Worker
Survey

Case-specific
Report

SACWIS/
CYCIS

Caregiver
Interviews

Key Informant
Interviews

Stakeholder
Focus Groups

Field
Observations

Cost data



Current Study Sample

- 40 parents who received either DR services or a traditional CPS investigation following an accepted report of child abuse or neglect
- All were “DR-eligible” (no prior indicated reports, current allegations of inadequate food, shelter, clothing, environmental neglect, mental injury, medical neglect, certain reports of inadequate supervision)
- Selected from those who returned the Family Exit Survey at case closure



Sample Response Rate

70 parents were sent recruitment letters

- 40 agreed and completed interviews (57%)
- 13 had disconnected phones (19%)
- 7 were unreachable after several attempts (10%)
- 5 refused to participate (7%)



Sample Characteristics

- Region: Cook (27.5%)
Northern (25%)
Central (22.5%)
Southern (25%)
- Race: White (71%)
African American (26%)
Native American (3%)
- Hispanic: 6%
- Gender: Female (87.5%) Male (12.5%)



Sample Characteristics

Education:	11 th grade or less	(17%)
	High School/GED	(31%)
	Some college	(29%)
	2-year college degree	(11%)
	4-year college	(6%)
	Some graduate school or degree	(6%)
Income:	Less than \$10,000	(50%)
	\$10,000 - \$19,999	(25%)
	\$20,000 - \$29,999	(16%)
	\$30,000 +	(9%)



Methods – Qualitative Interviews

- Interviews were conducted by MSW or PhD researchers
- Interviews were conducted over the phone
- Interviews were audiotaped and transcribed
- Interviews lasted less than 30 minutes
- Participants were given a retail gift card for their participation

Methods – Qualitative Interviews

Interviewer began by asking them about their “recent experience with DCFS or a service agency in your community.”

- What happened during the first visit? Tell me everything you remember.
- How would you describe your caseworker? How would they describe you?
- How did the two of you get along? Did you work well together? Why or why not?



Methods – Qualitative Interviews

- Who was more “in charge” in your relationship?
- Did they make any decisions about you or your family that you didn’t agree with? How did you handle this?
- What kinds of help did you need?
- How did {name} find out what kinds of help you needed?
- How do you feel about DCFS now?



Qualitative Data Analysis

- Small number of interview transcripts were read and coded for major “themes”
- Triangulation of themes among group of researchers
- Discussion, revisions, consensus
- Five major themes identified in data



Qualitative Themes

- Caregiver internal responses
- Processes (what happened, when, how often)
- Perceptions of DCFS
- Needs, problems, and services
- Relationship between caregiver and worker
 - **Engagement**
 - Additional rounds of reading and coding looking specifically at engagement



Qualitative Analysis Results

Four Factors Related to Engagement

- Caseworker actions
- Caseworker competency
- Caseworker attitudes
- Use of Power



Caseworker Actions

Communication Skills

- Listening

“She very openly listened to what we had to say and was on board with helping us and getting everything rectified.” (DR)

- Explaining Process

“...most people when they talk to you, they come in and tell you this is what’s gonna happen. She actually sat down with us. She talked to us. She explained things to us.” (DR)

- Open/Equal Communication

“Me and her talked a lot. She kept open communication with me.” (DR)



Caseworker Actions

Communication Skills (continued)

– Establishing Trust

Best interests of family/child

“I felt the caseworker was basically looking out for the interests of myself and the children in trying to make a better environment for the whole family.” (IR)

- Concern for family

“...she genuinely cared about me and my kids.” (DR)

– Honesty

“I think the most helpful thing that she did was just be honest with her analysis.” (DR)



Caseworker Actions

Offering Reassurance:

- Being non-judgmental

“She never made us feel like she was accusing us of anything.” (DR)

- Kids won’t be taken

“I felt like after she basically explained to me that she wasn’t gonna take the kids...that it would make my family stronger as a whole.”
(IR)

- Caregiver as a good parent

“She said she could see that, when they spoke to my daughter, that she was being well taken care of and everything like that...it was a lot of positive feedback.” (DR)



Caseworker Actions

Advocacy

“She was really instrumental in going back and talking to the teacher...and making sure that we all felt comfortable with it...” (DR)

Availability

“If I was feeling bad I could call and talk to her. She was just there.” (DR)



Caseworker Actions (Negative)

Lack of time/rushed/over-worked

“I feel like she didn’t get enough information to come up with her conclusion. I think she made a rushed judgment.” (IR)

“I was leaving several voice messages because she had other cases that were probably more important than mine, but I felt that my case was important...she would return my call, we would set up a date, but then someone else would come up so our date had to move back.” (IR)



Caseworker Actions (Negative)

Lack of information sharing

“I read (the paperwork) in the end and found out that there was stuff for people that do need help. He didn’t explain that part of it...I shouldn’t have to read it. If you’re here to do a job, do it thorough.” (IR)

Not listening

“She wouldn’t let me explain myself...she didn’t wanna hear nothing from nobody.” (IR)



Caseworker Competency

Being organized, flexible, efficient, experienced:

“...the one thing that I thought was kind of interesting is I don’t think he ever looked at his paperwork...but he was able to tell me everything, and it was like, “wow.” I mean, that tells you he’s definitely good at his job.” (DR)

Being passionate about the work:

“She cares about the kids. You could tell that. She wasn’t in it for the paycheck.” (IR)



Caseworker Attitudes

Generally described as polite, nice, friendly, fair, non-judgmental, flexible, easy to talk to, respectful, calm, etc...

- “...compassionate, open-minded...oh, and we can also say very non-judgmental...” (DR)
- “...she came in very respectful...” (IR)
- “...very down-to-earth, friendly...” (DR)



Caseworker Attitudes (Negative)

- Most caregivers in both groups used positive terms for worker attitudes
- One caregiver used terms such as disrespectful, lack of people skills, and burnt-out

“Some of his personal skills weren’t very good...you gotta be (better) with people instead of hanging up on someone...maybe he’s just frustrated with some of the stuff he sees. I don’t know what he deals with every day. He probably sees some pretty rough kids.” (IR)

Caseworker Use of Power

Shared power

“...the idea was that it was whatever I needed. I was the one saying, ‘Gee, I wonder about this and if this is going to work’...I guess we both had our own power, you know?”

Working *with* caregiver

“...the decisions that were made, she involved me in ‘em. It’s not like she did it and didn’t let me know what was goin’ on...”

Use of Power (Negative)

“He was the one asking the questions and he was the one actually doing the interview. I just assumed that he would be in control.” (IR)

“She’s like ‘No, you can’t be doing this. You can’t be doing that’...she kept on telling me things loudly.” (IR)

“He was asking the questions and I was being compliant.” (IR)

“She had questions to ask. Some I was interested in, and some I wasn’t.” (IR)



Implications for Practice

- Honest, clear communication about reasons for agency involvement
- Active communication of respect
- Willingness to listen to client's story
- Follow-through on commitment and tasks



Implications for Practice

- Reduce the power imbalance
- Reduce parent's fears
- High caseloads prevent effective engagement
- Micro-level communication skills needed to reduce confrontation



Next Steps

- Continued analysis of the interviews
- Linking the results with the Family Exit Surveys
- Examining the relationship between engagement and outcomes
- Examining the impact of worker and caregiver characteristics on engagement

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