

# Evaluating Family Engagement in Child Welfare

A Primer for Evaluators on Key Issues in Definition, Measurement, and Outcomes

## Introduction

The U.S. child welfare system makes a significant impact on the lives of many American families; annually more than 3 million children receive a child protective services (CPS) investigation or alternative response<sup>1</sup> assessment (Children’s Bureau, 2021a). These families become intertwined with a system that aims to ensure their child(ren)’s safety and well-being while at the same time preserving vital family attachments and connections (Children’s Bureau, 2019, 2021b)—goals that, historically, have been at odds with each other (Fargion, 2014).

While continuing to fulfill its mandate of protecting vulnerable children, the field of child welfare has been shifting away from top-down practices that emphasize parental compliance and toward family-centered practices that promote active family engagement in each step of the child welfare decision-making process (Toros et al., 2018). The Children’s Bureau has called for the meaningful involvement of family and youth voice in all aspects of child welfare—from the planning and implementation of services to “the design and operation of

### At a Glance

**Audience.** Child welfare program staff and evaluators.

**Purpose.** To provide an overview of key issues encountered when evaluating a family engagement program or practice.

### Takeaways

- A growing body of evidence demonstrates that engagement improves outcomes in child welfare.
- The field lacks a common definition of engagement.
- It is important to capture the family’s perspective on engagement.
- The mechanism through which engagement impacts outcomes is not yet fully understood.
- Bias may shape perceptions of engagement.
- More work is needed to understand engagement of fathers.

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<sup>1</sup> Alternative response is one of two possible tracks used in differential response systems. In an alternative response, lower-risk families are not subject to a traditional maltreatment investigation and are encouraged to participate in prevention services to ensure child safety (see page 5).

the child welfare system”—and federal child welfare law and regulation require the engagement of families, children, and youth in case planning (Children’s Bureau, 2019).

As child welfare jurisdictions meet federal requirements and explore opportunities to engage families, evaluators will be asked to assess their efforts. This brief provides an overview of key issues encountered when evaluating a family engagement program or practice. It introduces evaluators to how family engagement is commonly defined in the child welfare context and presents an overview of family engagement models and practices. It then turns to theoretical and methodological concerns in evaluating family engagement, including how it has been conceptualized and measured, and what outcomes have commonly been found in studies of engagement.

## Understanding Family Engagement

Although the field of child welfare has shown increasing interest in family engagement, understanding of this concept varies. Here, we adopt a perspective on family engagement rooted in definitions articulated by several researchers in the field. The term has been defined as a complex, multidimensional phenomenon through which families are “positively involved in a helping process” (Yatchmenoff, 2005). Specifically, engagement is “a form of participation, in which family members are engaged at some level in shaping and directing social work processes” (Gallagher et al., 2011, p. 119). The concept of family engagement in child welfare “allows the possibility of actions by both parties in the service provision relationship to contribute to the success or otherwise of the work” (Platt, 2012, p. 139). The Children’s Bureau (2019) considers family engagement “a family-centered and strengths-based approach to making decisions, setting goals, and achieving desired outcomes for children and families.” In the following discussion, the term *family* may include youth in care, birth family, caregivers, fictive kin,<sup>2</sup> and other significant relations.

### Engagement is more than compliance.

For the purposes of this brief, engagement is not synonymous with attending or participating in therapeutic sessions, keeping appointments, complying with service requirements and expectations, or remaining in treatment, though many studies use these various indicators (Staudt, 2007). Compliance with the child welfare system and participation in its services are often compulsory in the United States, and cooperation is often a way to avoid having one’s child removed from the home.

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<sup>2</sup> Fictive kin are individuals who are unrelated to a child by birth or marriage but have an emotionally and socially significant relationship similar to a family relationship (Stack, 1974).

For this reason, compliance does not necessarily signify meaningful engagement (Yatchmenoff, 2005).

## Engagement is interpersonal.

Meaningful family engagement is an interactive process that stems from the relationships and communications between child welfare staff and family members (Charest-Belzile et al., 2020). The development of a productive working relationship that facilitates achievement of agreed-upon change goals is often referred to as a *therapeutic alliance*, *working alliance*, or *collaborative alliance* (Bordin, 1979; Cheng & Lo, 2015, 2020; Kemp et al., 2009; Navarro, 2014). Child welfare agencies facilitate the development of this alliance by creating “an environment of warmth, empathy, and genuineness that enables a client to enter into a helping relationship and actively work toward change” (Altman, 2008, p. 43).

## Engagement matters.

There is an extensive literature base on the question of why families should be engaged in the conceptualization, delivery, and improvement of the social services they use. Some researchers argue family engagement is a good unto itself; others point to the benefits that may accrue to families and children in child welfare when they are meaningfully involved in critical decisions that affect them.

**Engagement is a basic human right.** Family engagement derives from fundamental rights to participation, information, expression, and self-determination contained in many international treaties (Lenzer & Gran, 2011; Morris & Connolly, 2012).

**It may improve the treatment-planning process and services.** Parents and caregivers know their children, their family’s strengths and goals, and the social context in which they live. Family engagement provides crucial context and insights that may improve the validity of child assessments and the appropriate selection of interventions (Robertson, 2005).

**It furthers the “democratization of decision making.”** Family engagement approaches such as Family Group Conferences (discussed later) have the potential to shift the balance of power between the child welfare system and its clients, and to democratize decision making within families (Holland et al., 2005; Mizrahi, et al., 2009; Morris & Connolly, 2012). Engagement gives voice to those whose lives will be most impacted by decisions made within the child welfare system.

# Family Engagement Models and Practices

Evaluators may be asked to assess various approaches to establishing and maintaining relationships with families and incorporating their voice, perspectives, and priorities into the child welfare process. It is helpful to think of engagement as occurring at three broad levels: case level, peer-to-peer level, and at the child welfare-system level (Children’s Bureau, 2019). What follows is a brief overview of common types of program models and practices implemented by child welfare jurisdictions at these three levels.

## Case-Level Engagement

Case-level engagement refers to bringing family members in as meaningful partners in individual case planning. Families may be engaged in identifying their family’s strengths and needs, setting goals, developing case plans, and making decisions jointly with case workers and service providers. Examples of case-level models and approaches include the following:

### Family Conferencing and Decision-Making Models

Child welfare organizations have made increasing use of inclusive models of decision making in which the family of system-involved parents/caregivers are convened to reach consensus and develop a plan or make a key decision about the safety and well-being of the child(ren) involved. Variations of this type of approach include Family Group Decision Making (FGDM) models, Team Decision Making (TDM), and Family Team Conferences (Crea & Berzin, 2009). The approaches differ from one another in some important respects (e.g., purpose of the meeting, role of the meeting facilitator, who has final authority in decisions), but all are strengths-based approaches that engage the family in making case-level decisions.

### Family Finding

Family finding is a set of methods and strategies for locating and engaging the family of children in out-of-home care (National Institute for Permanent Family Connectedness, 2015). Family finding specialists search for relatives of a system-involved family and determine if these individuals could potentially participate in service planning, serve as a resource for the child’s placement, host sibling or parental visits, or serve as mentors for the family (Melz et al., 2019). Family and kin may be located through reviews of children’s case records; interviews with family, friends, teachers, and others; software applications that develop family trees and genograms; and genealogy software and social media. When family members are located, child welfare staff or volunteers reach out to them and begin a process of reconnecting them with the child’s existing family and support network.

## Differential Response Systems

When a report of child maltreatment is screened in but the safety risk to the child(ren) involved is determined to be low or moderate, the child welfare system may work with the family via differential response as an alternative to launching a formal investigation. Caseworkers try to engage the family in a supportive, nonadversarial partnership through which the family's needs and social support network can be identified (Navarro, 2014), often using a variety of approaches and engagement methods such as family conferencing (Pennell, 2004). Differential response is intended to motivate families to use services offered by community partners to improve outcomes for their child(ren) and avoid further involvement with the child welfare system (Abner & Gordon, 2012; Children's Bureau, 2020).

## Peer-Level Engagement

Peer-level engagement involves inviting those who have lived experience with the child welfare system to help other families currently involved in the system.

### Parent Representation Programs

Those who have experience with child welfare may be engaged through various types of peer-to-peer programs to play a formal or informal role supporting other families as they move through the system. For example, a project at a community-based organization in New York City offered rigorous training to “parent representatives” to attend child safety conferences with system-involved parents and provide support and information during the process (Lalayants, 2013). A California program engaged “parent partners” as employed staff to mentor parents and give support at critical points in their case, such as court hearings or TDM meetings (Cohen & Canan, 2006). Peer mentors—who offer parents a perspective that is grounded in lived experience with the child welfare system—work to ensure that parents are “informed consumers” who understand what services are available to them, what is expected of them, and how their choices may affect the outcome of their case (Berrick et al., 2011). These mentors may also provide valuable psychosocial support to families (Enano et al., 2017).

## System-Level Engagement

System-level engagement involves including family members and youth who are or once were involved in a child welfare system in agenda setting and decision making, with the goal of improving or reforming child welfare systems. Those with lived experience can be engaged in policy discussions and decisions, lead or contribute to evaluations of child welfare structures and processes, or conduct trainings and community outreach.

## Systems of Care

Systems of care is an example of where system-level engagement can occur. It is a family-centered service framework marked by cross-agency coordination of services for families and children who are involved in child welfare and have needs addressed by other social systems, such as children's mental health or education. In this approach, various agencies partner by sharing resources and responsibilities to address children's unique needs (Children's Bureau, n.d.) The importance of youth and family voice is a common element in systems of care (Casey Family Programs, 2018), and family empowerment appears to be an important mechanism of change in this framework (Graves & Shelton, 2007). Families may be engaged in system-level efforts such as shaping and maintaining the system of care, participating in its committees, contributing to strategic planning, contributing to or leading training, and engaging in policy and reform advocacy (National Technical Assistance and Evaluation Center for Systems of Care, 2018; Williamson & Gray, 2011).

## Conceptualizing Family Engagement

Over the past 20 years a body of conceptual work has been developed to better understand engagement and its role in improving child welfare outcomes. The discussion below illustrates how prevailing ideas about why family engagement matters have changed during this time. Research and theory refinements have helped to reveal a connection between family members' participation in their own helping process and improved outcomes.

Using worker-reported data, Littell and Tajima (2000) identified *collaboration* in treatment planning and *compliance* with program expectations as two distinct components of parent participation in family preservation services. They found collaboration was affected by predictors at the case level (e.g., parental substance use and mental health), worker level (e.g., supervision adequacy, worker burnout), and program level (e.g., whether the program offered concrete services). In another study continuing this line of inquiry, Littell (2001) found that greater collaboration in treatment planning predicts better compliance with program expectations, suggesting collaboration may play a key role in exposing parents to treatments that improve outcomes.

Yatchmenoff (2005) furthered understanding of family engagement in the process of developing and testing an instrument called Client Engagement in Child Protective Services (see appendix). Analyzing data collected from clients, she found engagement to be a multidimensional concept, comprising aspects of receptivity, buy-in, working relationship between caseworker and client, and mistrust. The study made two important theoretical contributions: (1) It highlighted the importance of self-reported perspectives by clients on whether they have been engaged; and (2) It pointed to the need for more research to clarify whether collaboration works by exposing parents to outcome-

improving treatments, or whether outcomes depend on the family’s own involvement in the helping process.

That question was the focus of a study of families participating in a system-of-care model (Graves & Shelton, 2007). The researchers found that child problem behavior improved over time with this model, but that the outcomes were not only attributable to the intervention—family empowerment mediated the relationship between the intervention and child functioning. In other words, family empowerment was itself an important mechanism for improved child outcomes.

Platt (2012) extended this idea by proposing an ecological model of parental engagement with child welfare. Platt placed engagement in the context of factors that are external to the parent (e.g., the parents’ circumstances and resources, the worker’s skills) and factors internal to the parent (e.g., cognition, affect, motivation). Platt offered a testable model, proposing that together those factors would determine engagement in child welfare services, leading to parent and child outcomes.

The importance of engagement to the effectiveness of child welfare services was illustrated by a study of whether caseworkers collaboratively engaged parents when referring them to services (Cheng & Lo, 2015). The data demonstrated that when workers engaged parents in a joint, goal-oriented process when referring them to services, the risk of substantiated re-report of maltreatment was reduced. But the key finding was that provision of services itself was not the key to reducing maltreatment risk; rather, the alliance between parent and worker that encouraged problem solving by the parent was essential to outcomes. A later study (Cheng & Lo, 2020) found that parents’ compliance with case plan services was unrelated to their perception of caseworker engagement, in contradiction to earlier findings about a link between collaboration and compliance (e.g., Littell, 2001). These studies supported the emerging theory that outcomes depend at least in part on the authentic participation of family members in their own helping process.

## Evaluating Family Engagement

There is a growing evidence base for how family engagement has been implemented in child welfare and how it influences child welfare processes and outcomes. The following is an overview of how family engagement has been measured and what studies have revealed about possible outcomes of engagement.

### Measuring Engagement

The study of family engagement in child welfare requires evaluators to consider ways to capture the implementation, or “doing,” of family engagement. How does an evaluator or program staff know that



authentic engagement has occurred? Just as definitions of engagement in the literature have varied, so too are the ways researchers have measured engagement.

**A productive, collaborative relationship between parent and caseworker is at the heart of engagement; as such, many studies have measured that alliance.** In a study of parents in Quebec whose children were in foster care, Charest-Belzile et al. (2020) measured the parent-caseworker relationship using the Working Relationship subscale of the Yatchmenoff (2005) instrument. It includes items such as *My worker and I agree about what's best for my child* and *If I need to talk to my worker, I can just call, and we talk*. In a study of client-worker relationships among parents who had participated in family preservation services in Los Angeles (Lee & Ayón, 2004), researchers used the Relationship with Social Worker subscale of the Parent Outcome Interview (see appendix). These items ask parents, for example, *Did your social worker give you confidence that headway or progress could be made on your problem?* And in an experimental study in London, researchers found support for using the Working Alliance Inventory-Short (see appendix) to measure alliance between families and CPS workers (Killian et al., 2017). The instrument, which was originally developed to measure the relationship between clients and their therapists, contains subscales that measure agreement on the goals of the relationship (Goal subscale), the tasks required to meet these goals (Task subscale), and the quality of the relationship Bond subscale).

**Engagement is often measured in terms of parent behavior.** In a large evaluation of family preservation services in Chicago, researchers measured caregiver collaboration by asking caseworkers to rate the extent to which the caregiver was engaged in developing a service plan, agreed with the plan, initiated contact with the agency, kept appointments, and cooperated with the caseworker (Littell & Tajima, 2000). In another study of CPS in Illinois, family engagement was measured by asking caseworkers to rate the extent to which families were cooperative, receptive to help, engaged, and difficult (Fuller & Zhang, 2017). Researchers in the Quebec study of system-involved parents (Charest-Belzile et al., 2020) measured the behavioral dimension of parent engagement by asking parents to report whether they had participated in certain decisions during their child's placement (e.g., the child's education and progress, planning of visits).

**Other studies have used caseworker practices as an indicator of engagement.** For example, in an analysis of data from the first cohort of the National Survey of Child and Adolescent Well-Being (NSCAW-I), researchers looked at caseworker-reported data on how often caseworkers used collaborative engagement skills when referring parents for needed services, such as accompanying the parent to an initial appointment or following up after services had begun (Cheng & Lo, 2015). In the Quebec study, Charest-Belzile et al. (2020) assessed caseworkers' use of strengths-based practices using items from the Parent Engagement in Foster Care Questionnaire (see appendix). The survey measures engagement-promoting caseworker practices from the parent's perspective, with items such as *My caseworkers value the knowledge I have about my own children*.



**Participation in a family engagement program model is not itself a sufficient indicator of engagement.** In established family decision-making models with promising research evidence (e.g., FGDM, TDM), the core components of the models—including specific aspects of family engagement—have been identified (California Evidence-Based Clearinghouse for Child Welfare, 2021; Pennell, 2004). However, while there are fidelity guidelines for some family decision-making models (see discussion in Merkel-Holguin & Marcynyszyn, 2015), the extent to which participation in one of these models indicates authentic engagement has occurred may depend on the participants' point of view. For example, in a study of fidelity to the FGDM model, White family group participants perceived higher levels of fidelity to the principles of family leadership and empowerment than did African American group participants, and professionals perceived higher fidelity than did nonprofessionals (Rauktis et al., 2011). It is therefore important to include measures of the family's perception of engagement, even when implementing established engagement models with fidelity. In a study of FGDM among Lakota families, researchers collected feedback survey data from meeting participants using culturally relevant items. These measured engagement from the perspective of the participants, through indicators such as *Family traditions were respected in the family plan, which is consistent with my cultural beliefs and values* and *I expect my family's connections to the community to become stronger as a result of this meeting*. In a small study of a kinship navigator program (Gentles-Gibbs & Zema, 2020), caregivers' experiences of empowerment were explored using an interview protocol based on the Family Empowerment Scale, which measures perceptions of competence, knowledge, and confidence in navigating the child welfare system (see appendix).

### Family Empowerment Scale

This widely used instrument with established psychometric properties (Singh et al., 1995) has been applied in child welfare settings to measure family perception of engagement and empowerment.

## Anticipating Engagement Outcomes

When designing studies of family engagement in child welfare, evaluators should look to research literature for an understanding of the array of short- and longer-term outcomes that may be expected. This section highlights findings from select studies of the relationship between family engagement and outcomes in the areas of participant satisfaction, service referral and use, CPS involvement, and child and family functioning and well-being. What follows is not a full review of the literature, but it is hoped the following examples will be helpful in thinking about the types of outcomes evaluators might want to look for when designing their own studies.

**One of the most proximate outcomes of family engagement practices is the family’s perception of engagement and satisfaction with the process.** Studies have generally found that family participants in conferencing models express satisfaction with the process. For example, in an evaluation of a Family Group Conference program in Calgary, participants expressed high levels of satisfaction; they felt they were free to speak out during the meeting and had a strong sense of being involved in the decision-making process (Sieppert et al., 2000).

Differences in satisfaction and the perception of engagement exist, however, even among those participating in the same meeting. For example, one study of TDM found that clinical staff perceive more positive team decision-making processes than do parents and court appointed special advocates (Leathers et al., 2021). In an evaluation of FGDM in Maryland, participants in family involvement meetings expressed higher levels of satisfaction when they felt engaged, were able to express their own thoughts, were able to build a plan based on the family’s strengths, and when the facilitator made them comfortable (Ahn et al., 2018). In a study of race, gender, and relationship effects on the perception of family engagement in FGDM, African American family members were less likely than White family members to perceive that the resulting plan included ways the family group would help, and African American women were least likely to perceive that there were more family members than service providers invited to the meeting (Rauktis et al., 2011). In a study of Los Angeles youth in foster care who participated in development of their independent living plans, the youth were surveyed to assess their perception of engagement and satisfaction with the process (Park et al., 2020). Youth who were relatively older and higher in conscientiousness, and who felt their caseworkers were helpful, were more likely to report they were engaged in the process. Youth who found their caseworkers to be helpful, those who were parenting, and those who lived in urban settings were more likely than others to report satisfaction with the process.

### **Family Engagement Inventory**

A starting point for information about outcomes that may be expected in evaluations of family engagement is the Children’s Bureau [Family Engagement Inventory](#).

**Service outcomes are also commonly included in evaluations of family engagement.** For example, caregivers have reported higher levels of satisfaction with the mental health services youth receive after TDM meetings as compared with the services they received before the meetings (Leathers et al., 2021). Using propensity-score matching, researchers have found that among cases in which children and their families went through FGDM, a higher proportion were connected with counseling services for the child, and mental health and parenting services, as compared with cases that did not receive FGDM (Weigensberg et al., 2009). And in a study of families engaged in family

preservation services, researchers found that greater parent collaboration in service planning yields greater parental compliance in implementing the plan (Littell, 2001).

**Many studies of engagement in child welfare have tracked child welfare outcomes such as safety, placement stability, and permanency.** For example:

*Family decision-making models have been evaluated for their effects on outcomes at multiple stages of involvement in child welfare, with inconsistent results.* In Texas, the use of Family Group Conferences with families in the CPS maltreatment investigation stage reduced the odds of the child subsequently being removed from the home by 51 percent, compared with families that did not have a meeting (Lambert et al., 2017). Also in Texas, after removal, meetings improved odds of reunification with family by 28 percent and with relatives by 7 percent (Wang et al., 2012). The use of meetings in Texas has been found to positively impact exit rates from foster care (Sheets et al., 2009) and not to affect them (Wang et al., 2012).

A large national evaluation of the Family-to-Family child welfare reform initiative,<sup>3</sup> which included TDM as a core strategy, explored the relationship between TDM and permanency outcomes among children in foster care. Researchers found the use of team meetings significantly improved the likelihood of a child exiting care to reunification with parents or a relative (Crampton et al., 2011). Other randomized control studies of FGDM and FGC have found no effects of the use of these models on child safety, placement stability, or permanency (Berzin, 2006; Berzin et al., 2008; Sundell & Vinnerljung, 2004).

*Peer-level engagement programs have also been studied.* In a study of a peer mentor program for parents involved with children in foster care in California, 60 percent of children whose parents participated in the program were reunified with their parents within 1 year of removal, compared with 26 percent of children whose parents did not participate (Berrick et al., 2011). In another peer mentor program, those who participated in the program were five times more likely to reunify with their children compared with parents in a control group (Enano et al., 2017).

*Child welfare outcomes have been documented from other engagement approaches as well.* A large study of the use of differential response in six states found the approach was associated with lower maltreatment re-reports and lower substantiated re-reports (Office of the Assistant Secretary for Planning and Evaluation, 2016). An experimental evaluation of CPS in Illinois also found that higher family engagement was associated with lower risk of maltreatment re-report (Fuller & Zhang, 2017). An analysis of NSCAW-I data revealed that when caseworkers collaboratively engaged parents in

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<sup>3</sup> Family to Family was an Annie E. Casey Foundation initiative to improve child welfare systems. For more information see <https://www.aecf.org/work/past-work/family-to-family>.

the problem-solving process when referring them to services, it significantly reduced the likelihood of substantiated re-report of neglect and other maltreatment (Cheng & Lo, 2015). In a study of engagement as measured by workers' ratings of family attitudes and behaviors at first contact with CPS (e.g., extent to which families were cooperative, receptive to help, engaged, or difficult), higher levels of engagement were associated with lower risk of maltreatment re-reports and substantiated re-reports. And in an analysis of indicators of parent engagement from an evaluation of a Title IV-E waiver demonstration project in a Midwestern state, higher quality engagement was positively associated with placement stability and permanency (Trahan et al., 2020). This study was one of relative few that have focused on father engagement as well as mother engagement, finding that while the quality engagement of both mothers and fathers improved outcomes, the impact of mothers' quality engagement was higher than the impact of fathers' engagement.

**There is a body of research on the effect of engagement on child and family well-being outcomes.** In an evaluation of TDM for youth in care, key indicators of youth well-being had improved 4 months after meetings compared with before the meeting. Youth exhibited lower levels of emotional and behavioral problems and reported lower stress and more optimism about having a good job in the future (Leathers et al., 2021). In a formative evaluation of FGDM among informal kinship caregivers and their families, those who built trust with program staff before engaging in services and those who went on to use FGDM experienced improved outcomes over time in the areas of stress, family needs, and child well-being (Feldman, 2017). Again, participation in an engagement model may not be a sufficient proxy for actual engagement. In a study of families participating in a systems-of-care approach, researchers found that a positive effect on child behavior from participation in the program was in part attributable to families' feeling of empowerment, which had its own effect apart from the effect of fidelity to the systems-of-care program model (Graves & Shelton, 2007).

## Discussion and Conclusion

A growing body of evidence demonstrates that family engagement improves outcomes for children and families involved in the child welfare system. Studies suggest this is not only because engagement promotes a family's participation in and exposure to services, but also because the working alliance with a caseworker or service provider helps family members participate in their own helping process—a key to outcomes.

Recognizing the importance and benefit of including family voice, child welfare systems are increasingly emphasizing the engagement of families at multiple levels of the child welfare process. As evaluators plan and implement studies to assess these efforts, there are conceptual and methodological issues to contend with.

**The child welfare field still lacks an accepted definition of family engagement.** As described, there are varied definitions of family engagement and numerous measures of the construct, and more work is needed to develop our conceptual understanding of engagement. Evaluators should work with program staff to define engagement in their own studies and select measures appropriate to that definition.

**It is important to capture the family’s perspective on engagement.** Family members and child welfare staff often have divergent opinions about whether authentic engagement took place. Where possible, evaluators should collect data from family members when measuring engagement, rather than collecting data from caseworkers alone.

**The mechanism through which engagement impacts outcomes is not yet fully understood.** Evaluators can contribute to theory development by hypothesizing and testing links between family engagement and child and family outcomes. There is evidence pointing to the importance of families engaging in their own problem solving, though exactly why this affects outcomes is yet unclear and remains an opportunity for more research.

**Bias may shape perceptions of engagement.** Evaluators should be aware of and acknowledge potential sources of bias when studying engagement, particularly in the high-stakes context of child welfare, where the implicit and explicit biases of caseworkers, supervisors, and judges may play a role in determining a family’s fate (Cahalane & Anderson, 2013; Pennell et al., 2011). The finding that White FGDM participants perceived higher levels of fidelity to the principles of family leadership and empowerment than did African American group participants in Rauktis et al. (2011) is but one example pointing to the need to better understand how race, ethnicity, class, and gender differences may influence subjective assessments of engagement. Biases may even shape how respondents interpret the meaning of questions used to measure engagement, or how caseworkers label parent attitudes that are often used as indicators of engagement (e.g., describing parents as “uncooperative” or “difficult,” as in Fuller & Zhang, 2017).

**More work is needed to understand the engagement of fathers.** Mothers are more likely than fathers to be engaged in case planning and to be the point of contact for child welfare staff (JBS International, 2019), and relatively few studies of father engagement in child welfare exist (Sonenstein et al., 2002). Researchers have studied fathers’ interest in involvement in the lives of their system-involved children (Campbell et al., 2015; Gibson et al., 2020) and the association between father involvement in a child’s life (e.g., via visits, childcare, homework help, financial support) and child welfare outcomes (Leon et al., 2016; Malm & Zielewski, 2009; Malm et al., 2008), but little work has been done on father engagement in child welfare processes and decision making. (Trahan et al., 2020, and Fung et al., 2021, are recent, notable exceptions.) Child welfare workers express willingness to engage fathers (Saleh, 2013) but say they are less likely to do so for various reasons, including experience, gatekeeping by mothers, stigma associated with fathers’ past

incarceration, and obstacles such as child welfare data systems and protocols that lack data fields for reporting nonresident fathers as resources (Campbell et al., 2015; Maxwell et al., 2012). Evaluators can contribute to the field by including fathers in studies of engagement efforts, where possible, and further exploring obstacles in the child welfare system that stand in the way of authentic engagement of fathers.

The discussion above highlights the many opportunities that remain for researchers and evaluators to contribute to the evidence base for family engagement in child welfare systems. Evaluators can draw on research literature to help refine definitions of engagement, and they can contribute technical expertise to improve how engagement is measured. They can also move the field of child welfare forward in its understanding of how and why engagement affects child and family outcomes. Evaluators should also be at the table when agencies seek to understand and address two issues that are particularly important in child welfare: (1) how conscious and unconscious bias among agency staff, leadership, and service partners may undermine family engagement or shape perceptions of whether authentic engagement has occurred; and (2) how fathers of children involved in the child welfare system can be engaged and barriers to their engagement identified and removed. When evaluators contribute their professional perspectives, technical skills, and capacity for systematic inquiry to child welfare agency efforts to engage families, there is even greater potential for improved outcomes for families and children.

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# Appendix

## Measures of Engagement

Instrument	Description	Source
Parent Engagement in Foster Care Questionnaire	This 22-item instrument was developed to explore the child welfare parent-case worker relationship. It is grounded in theory suggesting the importance of two dimensions of parents' experiences: perception of worker <i>doing</i> family-focused actions and degree to which parents <i>feel</i> empowered, respected, understood, and supported.	Alpert, L., & Britner, P. (2009). Measuring parent engagement in foster care. <i>Social Work Research, 33</i> (3), 135–145.
Client Engagement in Child Protective Services	This 19-item measure of client engagement in child welfare services comprises four dimensions: receptivity, buy-in, working relationship, and mistrust. It is based on a literature review and interviews with child welfare case workers and clients and reviewed by researchers, scholars, and practitioners.	Yatchmenoff, D. K. (2005) Measuring client engagement from the client's perspective in nonvoluntary child protective services. <i>Research on Social Work Practice, 15</i> (2), 84–96.
Family Empowerment Scale	This 34-item scale measures family perceptions of level of empowerment, as well as the way in which empowerment is expressed. It was developed to be completed by families with children with disabilities; however, it has also been used in other fields that include child mental and physical health, child abuse, domestic violence, and school-based prevention programs.	Koren, P. E., DeChillo, N., & Friesen, B. J. (1992). Measuring empowerment in families whose children have emotional disabilities: A brief questionnaire. <i>Rehabilitation Psychology, 37</i> , 305–321.
Working Alliance Inventory	This 36-item instrument was developed to measure the quality of alliance/therapeutic relationships in three domains: goal, task, and bond. The inventory has been adapted to study client relationships with case workers and other professionals, and it has been translated into many languages.	Horvath, A. O., & Greenberg, L. S. (1989). Development and validation of the Working Alliance Inventory. <i>Journal of Counseling Psychology, 36</i> (2), 223–233.
Parent Outcome Interview	This outcome measure is used to evaluate child welfare case outcomes and clients' relationships with their caseworkers.	Magura, S., & Moses, B. S. (1986). Outcome measures for child welfare services: Theory and applications. Child Welfare League of America.

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## Author

Heidi Melz, Ph.D., James Bell Associates

## Submitted to

Tracy Y. Fields, M.S.W., M.A.  
Child Welfare Program Specialist  
Children's Bureau  
Administration for Children and Families  
U.S. Department of Health and Human Services  
Contract Number: HHSP2332015001331

## Prepared by

James Bell Associates  
3033 Wilson Boulevard, Suite 650  
Arlington, VA 22201  
(703) 528-3230  
[www.jbassoc.com](http://www.jbassoc.com)

Elliott Graham, Ph.D.  
Project Director

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