As highlighted in the Year 3 Case Study Plan, the current Initiative evaluation activities are largely qualitative in nature, exploring the PFF Initiative and its services through observation and participants’ voices. It is through their stories, heard in focus groups and interviews, that we more fully capture how the Initiative is unfolding at multiple levels. Through this type of data collection we examine: 1) participants’ understanding and perceptions of the PFF Initiative, 2) the characteristics of families who need services and supports, 3) agency and collaborative mechanisms by which to provide services, and 4) how services are implemented. Using the data collected to date, this report provides some initial findings regarding some of the key case study questions. It also outlines the direction of upcoming case study evaluation activities.

Inventory of Evaluation Data and Information

To date, the evaluation team has completed the first round of interviews with PFF Collaborative case managers (refer to the November 2006 Quarterly Report), and has conducted focus groups with DCFS staff and with PFF client families across six Collaboratives. The focus groups, designed to aid in the development of subsequent data collection protocols, were extremely beneficial. Trends that emerged from the information gained therein, along with the case manager interview data, raise new questions of interest and guide the future direction of case study data collection efforts.

PARENT FOCUS GROUPS

The Initiative Evaluation Team hosted six focus groups to clarify nebulous concepts in interview protocols. Together, focus group facilitators and a total of 50 PFF parents explored four concepts: culture and competence, engagement, service quality, and sustainability. Parent responses indicate that PFF families and agencies share an equitable relationship; agency staff commitment to cultural best practices and initiative goals can be reciprocated with parent participation in and support for services.

Defining Culture. While discussion could have been divided evenly across the four target concepts, focus groups were somewhat weighted toward culture and competence. The proportion of information gained about culture reflects 1) facilitators’ interest in clarifying how to incorporate the concept into subsequent family interviews, and 2) parents’ desire for PFF to understand who they are and what they need.

Culture generally refers to social beliefs, customs, and institutions during a particular time period. Focus group participant definitions of culture echoed this construal, and added more specific and relevant aspects of culture. They responded that culture includes social values (i.e., individualism) as well as those deemed important by the media. Further, culture to PFF parents is a means to practice traditions, including child-rearing. Across focus groups, several participants agreed that culture is defined by the following concepts. That is, multiple comments suggested that culture reflects one’s:

- Upbringing and formative learning (7 comments)

Participants, in this case, are defined broadly as staff involved in planning, oversight and service delivery, along with client families.
Although focus group responses did not reflect language as a component of culture, sociological and anthropological conceptualizations describe language as a creation or manifestation of culture, and the primary symbolic means by which culture is transmitted. Language has been construed as a key element of subjective or shared culture. Thus, whether or not the caseworker can talk with the parent in the parent’s primary language may affect the parent’s experience of receiving services. When asked what it means for a caseworker to address a client in his or her primary language, some parents responded that they would feel more comfortable, respected, understood, and accepted by workers who speak in their primary language. According to respondents, bilingualism reflects an educated staff with the capacity to help families. Staff should be cautious when deciding to speak in a non-English language without first consulting with clients, however. One participant mentioned how use of client language could be construed as offensive if the client has not requested its use.

Observable Components of Cultural Respect. When asked how they knew that an agency respected their cultural identities and customs, parents described indicators that were not necessarily culture-specific, but important to service delivery in general. Comments from focus group participants essentially reflect longstanding principles of good practice.

Overall, parents felt that the careful treatment of clients as well as caseworkers’ use of clear language (lay explanation and translation, when needed) were the strongest indicators of respect (6 comments each). Careful treatment was described as caseworkers’ appreciation of families’ differences, avoiding offensive language, and courteous interaction with families. Parents thought a respectful caseworker would ask clients for clarification regarding unclear points and be prepared to address family needs (3 comments). Also, caseworkers would show an effort to assist, listen to, and understand clients (4 comments). Focus group respondents noted that being allowed a voice in services is both respectful and an incentive to participate in services.

Culture and Children. According to focus group responses, culture is a “vehicle for youth to get through life.” That is, culture provides guidelines (values and beliefs) to get through life (3 comments). Parents reported instilling culture in their children to facilitate identity development, understanding of others, and pride. Parents offered the following comments:

Identity development (5 comments)
Culture teaches children “where they came from.” It shapes their values and beliefs so they can navigate life.

Pride (4 comments)
Culture allows children to “not hide who they are.”

Understanding of others, including their parents (3 comments)
Having a culture assists children’s learning about and respect for others’ customs.

2 (Singelis, 2000)
Parents noted that culture also shapes the way in which a child will ultimately rear his or her children. Thus, culture blueprints future behaviors important to individuals’ well being.

**Best Practices in Addressing Cultural Diversity/Sensitivity Issues.** Focus group participants were asked what advice they would give a new program about working with a culturally diverse client population. Their responses focused on caseworker performance and agency mechanisms. Parents suggested that caseworkers in a new program should show an ongoing commitment to families (4 comments), which includes showing concern and compassion, listening, avoiding judgment, and being vigilant with service. Further, agencies and caseworkers should get to know families and their histories before providing services; respect clients’ needs, backgrounds, and customs (3 comments); give the clients ownership (voice) in their progress (2 comments); and, avoid giving false hope to families (2 comments).

Respondents also offered that agencies should provide training in people skills and cultural awareness to assist workers in providing better services to clients. Further, agencies should facilitate the likelihood of good worker-client relationships by hiring staff who reflect client diversity. Some parents’ responses endorsed opinions consistent with research that suggests that clients and providers of the same race or ethnicity may be more satisfied with their interactions than incongruent client-provider pairs. At the same time, many parents emphasized the importance of basic practice skills that are not dependent on the race or ethnicity of the caseworker. Focus group participants suggested that helping activities should be evaluated, using a simple questionnaire or by checking-in with parents, to maintain quality services.

In the event that parents are misunderstood or disrespected by caseworkers, parents were split on their course of action. Speaking with the caseworker and filing a grievance with a supervisor were each mentioned equally across focus groups. This suggests that parents might respond to the matter using person-to-person interaction. Few comments were made to the contrary; although respondents might request another caseworker or educate that person about the family’s culture, respondents are unlikely to leave the situation unresolved.

At the agency level, responses indicate that caseworkers should receive cultural training to prevent miscommunication with families (5 comments). Focus group participants also mentioned that staff behavior was, in part, the agency’s responsibility. That is, agencies may take action and reassign a family to a different caseworker or directly discuss the grievance with the caseworker.

**Engagement**

**Barriers.** When asked about the barriers to service they encountered in previous programs, several respondents (6) noted the lack of resource awareness and their inability to identify community services. Case managers also noted resource awareness as an obstacle to quality service. Some case managers mentioned needing an updated list of quality services – those that

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3 See Brewer (2000); Luo (2002); and Hall, Guterman, Lee, and Little (2002), for example. For counterpoint and a discussion of cultural competency (incongruent pairs), refer to Weinrach and Thomas (1997).

4 To note, there is a distinction between how focus group participants would approach a misunderstanding v. disrespect. Participants suggested that misunderstanding lends to parent-to-staff discussion, and disrespect leads to requests for supervisory action.
are still in operation that are family-focused. Economic barriers also shaped respondents’ previous experience with family services (5 comments). As some parents reported, earning over a certain amount precludes families from receiving low-income services; one might earn enough to exist, but not enough to qualify for Section 8 or pay for family services.

Respondents also noted communication as a previous barrier to participation (3 comments); experiencing a language barrier with a service provider or not feeling heard discouraged some parents from participating in services. Respondents added that their individual drive to participate (i.e., pride or frustration) determined the extent of their participation in services (4 comments). Being upset about having to participate might dampen individuals’ motivation to persist in services.

As the below display illustrates, respondents echoed case manager concerns regarding barriers to service. Parents agreed that housing, service operations (i.e., wait lists, returned calls), transportation, immigrant status, and the sway of politics threatened quality service. Unique to families, however, are concerns about not being treated as a person (versus a case), and receiving services that parents feel are unrelated to family need. This finding might suggest that giving families more ownership in their services retains their participation.

Display 1. *A Comparison of Parent and Case Manager Views of Barriers to Quality Services*

<table>
<thead>
<tr>
<th>PARENT RESPONSE</th>
<th>CASE MANAGER RESPONSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Awareness of available resources</td>
<td>Awareness of quality services</td>
</tr>
<tr>
<td>Economic</td>
<td>Discretionary funds for families</td>
</tr>
<tr>
<td>Language match and being heard</td>
<td>Language match</td>
</tr>
<tr>
<td>Individual drive to participate</td>
<td>Family suspicion of DCFS association</td>
</tr>
<tr>
<td>Housing</td>
<td>Housing</td>
</tr>
<tr>
<td>Service operation (i.e., wait time)</td>
<td>Wait time</td>
</tr>
<tr>
<td>Politics</td>
<td>Internal and external politics</td>
</tr>
<tr>
<td>Immigrant status</td>
<td>Immigrant status</td>
</tr>
</tbody>
</table>

**Client Maintenance.** Focus group participants identified practices by which to avoid creating or sustaining barriers to service participation. Overwhelmingly, participants stated that agencies should accommodate families (8 comments). In addition to meeting the family in the home, services should also be provided in-home or transportation should be provided to service sites. Childcare should be available if parents are to attend programs. Services should not be offered during parents’ work hours. Staff should be prepared (trained) to work with families and do so with a positive disposition. As well, staff should be diverse, accessible when needed, well engaged with families, and voracious communicators. Each of these provisions should be offered in a welcoming environment.

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5 The featured case manager responses are not exhaustive. For case manager responses, refer to the PFF Evaluation Quarterly Report, November 2006).
**Service Quality**
Focus group participants articulated that *quality services* are characterized by the appropriateness of family supports provided. Specifically, supports should accommodate needs that the family identifies, not a caseworker’s interpretation of needs (5 comments). Also, staff commitment should be evident through genuine care and initiative to help the families meet their goals (5 comments). Parents offered that agencies that provide quality services will survey or check-in with parents (4 comments). Such evaluation, according to parents, is the primary means of assessing service implementation (5 comments). Agencies might also rate their performance through the number of clients who refer other families (3 comments), client praise for staff (4 comments), and the family’s progress through services (4 comments). Further, agencies are *doing a good job* if parents apply their learning (i.e., contacting and attending referred services).

**Sustainability**
Parents overwhelmingly responded that PFF agencies would be sustained through fundraising (7 comments), which includes requests for government support, bake sales, silent auctions, and “walks.” Parent involvement (i.e., volunteering) was distinctly identified as a way to maintain services provision (3 comments). Respondents were willing to support agencies through volunteering (10 comments), including fundraising and publicity. Focus group participants also suggested that sustainability could take place at the staff-level (5 comments); agencies that maintain quality staff through meetings, training, promotions, and other incentives should persist.

**CURSORY COMPARISON OF CASE MANAGER AND PARENT RESPONSES**
Although responses from parent focus groups were collected largely to develop questions for parent interviews, comments hint at distinctions between case manager and parent experiences with PFF. Responses were particularly insightful with regard to families’ needs related to culture. Among other issues, respondents noted concerns about how client culture (e.g., sex roles) impacts service implementation, the specific need for staff training in cultural issues, families’ requests to direct which services they receive, and the opportunity for parents to evaluate service quality.

A cross-comparison of case manager and parent responses yielded indirect dialogue on family culture, client engagement, and service quality (see Display 2). Comments in caseworker and parent columns reflect distinct contributions from those groups. That is, the Caseworkers column illustrates only caseworkers’ unique insight about culture, client engagement, and service quality. The Intersection column displays ideas that were shared by both caseworkers and parents.

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6 Case manager interviews were completed previously, with findings discussed in detail in the October 2006 quarterly report.
### Culture

<table>
<thead>
<tr>
<th>CASEWORKERS</th>
<th>PARENTS</th>
<th>INTERSECTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Features of culture</td>
<td>Child rearing and discipline practices as well as traditional sex roles are part of families’ cultures.</td>
<td>Culture includes one’s morals and experiences</td>
</tr>
<tr>
<td>Culture in service implementation</td>
<td>Provider-family interactions can be more comfortable when experience, ethnicity, and/or environment (i.e., neighborhood type) are shared.</td>
<td>Providers must get to know families first and avoid judgment.</td>
</tr>
<tr>
<td>Culture accommodation (sensitivity and respect)</td>
<td>Families need access to bilingual and ethnically diverse staff. When match is not possible, providers should be vigilant and up front with families about their lack of awareness, and prioritize quality service.</td>
<td>Families need providers who are committed to their well being. Parents want someone who is compassionate, attentive, reliable, and patient. It would be helpful if they were trained on cultural issues.</td>
</tr>
</tbody>
</table>

### Client Engagement

<table>
<thead>
<tr>
<th>CASEWORKERS</th>
<th>PARENTS</th>
<th>INTERSECTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reducing barriers to service</td>
<td>Providers demonstrate commitment to families by being reliable and accessible to families even for urgent needs.</td>
<td>Services should be provided in such a way that families might participate. Parents want flexibility of and access to services provided by trained professionals.</td>
</tr>
</tbody>
</table>

### Service Quality

<table>
<thead>
<tr>
<th>CASEWORKERS</th>
<th>PARENTS</th>
<th>INTERSECTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Features of quality service</td>
<td>Families’ needs are met through consistent, accurate service, active communication, and realistic expectations of families. Quality service is maintained through ongoing provider meetings and trainings.</td>
<td>Quality service is seen in agencies’ systems of care and their continuous inquiry of parent satisfaction.</td>
</tr>
</tbody>
</table>
DCFS FOCUS GROUP

In January 2007, the Initiative Evaluation Team invited DCFS workers involved in PFF – Regional Administrators, Assistant Regional Administrators, Community-Based Liaisons, and Emergency Response workers – to a roundtable discussion in preparation for DCFS worker interviews. Eleven workers, representing the Wateridge, Belvedere, Torrance, Santa Clarita, and North Hollywood offices, participated. The discussion informed researchers of the referral process and revealed the diversity of practices around family referrals from DCFS to PFF. DCFS workers’ responses suggest that although the purpose of the PFF Initiative is clear, workers’ experience and activity around PFF services makes it a different program across SPAs.

Knowledge of PFF

According to DCFS workers, the PFF Initiative provides intervention to families at risk of having a case opened with DCFS; prevention to families needing education and support in maintaining healthy families; and empowerment for families to exist autonomously (i.e., with full awareness of how to find supports and services when needed). Specifically, services:

- Prevent children from later being harmed and/or being removed from their home
- Provide an alternative response to other DCFS programming
- Prevent families from returning to DCFS
- Intervene for children at that “critical age” (i.e., infancy to five years)
- Provide auxiliary funds for families

In addition, DCFS workers offered that PFF services should give families the right amount of needed services and avoid overwhelming. This reflects families’ need for “realistic goals” as mentioned during case manager interviews. In one SPA, families were told that they must receive all PFF services offered, which (as one worker noted) would very likely be related to the high rate of families who decline services in that community.

Referral Process

The discussion with DCFS workers revealed inconsistencies in the referral process across SPAs. Workers do not characterize PFF families in the same way; some workers refer families with sexual abuse or domestic violence designations, while others are restricted by lead agencies from doing so. Also DCFS workers report giving different information to their lead agencies and having dissimilar understanding about what PFF services entail. Although this finding may reflect the specific needs of clientele in each SPA, the procedure may be linked to workers’ training related to the Initiative. Workers’ responses suggest that specific knowledge can be improved via use of a uniform PFF training. As well, participating in more roundtable discussions might allow workers to understand more global DCFS-PFF issues and use each other as resources (for improved methods of referrals, for example).

Ongoing Data Collection Activities

During the past quarter, the Initiative Evaluation Team strategically situated itself within the PFF community. We anticipate that by establishing a presence at Collaborative meetings and social events we will ease apprehensions related to the evaluation process, and gain the rich, SPA-specific context with which to present evaluation findings. Each visit is an opportunity for
researchers to meet PFF community members (i.e., case managers, families, and DCFS workers). Researchers engaged in both participatory and non-participatory observation during these visits to enhance their understanding of the Initiative. Observation data, coupled with SPA-specific facts and figures, will distinguish communities and needs as well as provide comprehensive contexts of services.

**Site Visits and Collaborative Meetings.** Our researchers are visiting PFF service providers at lead agencies to reconstruct service context for more removed stakeholders. This is achieved by observing:

a) The physical and staff structure of the agency,

b) The agency’s warmth and accommodations for children and families, and
c) The way in which collaborative agencies interact.

To illustrate, researchers have already noted the striking difference between SPA settings. SPA 7, which has a Collaborative of almost 30 agencies, is located on the second floor of a sizeable professional building. The agency is a quiet labyrinth of offices and rooms that provide great privacy for counseling sessions. It showed no evidence of children outside of the rooms. Families in this SPA are ethnically diverse and include a Korean population. In contrast, neighboring SPA 6 is tucked into a South Central Los Angeles neighborhood. The agency shares its space with another collaborative member. Inside are several stacked and shared offices and classrooms that accommodate a non-traditional school for community children and teens. The families served are largely Black with some Latino representation.

Each SPA offers a different environment and clientele, making it necessary to frame evaluation findings in their respective contexts. The culmination of findings in the annual report will be presented by SPA to better identify Collaborative mechanisms and service impact on respective communities.

**Family Events.** Exceptional information was collected during the holiday season when lead agencies hosted holiday parties for their families. For many, the holiday party was the first event with which the agency engaged parents in a community setting. At agencies where such functions were new, many families were clearly unfamiliar with one another. Those families who did interact seemed to know one another by name, perhaps through other programming or non-PFF social connections. Families who knew one another and conversed soon after entering the family event were more demonstrative of agencies that had previously hosted a family event or had other collaborative programs on-site.

**Document Review.** In order to provide a thorough understanding of the context in which PFF was conceived and implemented, the Initiative Evaluation Team is currently reviewing relevant documents. This component of data collection relies on the accumulation of original sources published by agencies and regional news outlets. In order to gain a thorough understanding of the context in which PFF was implemented and is operating, the details of the dynamic environment of child welfare policy in Los Angeles County are being uncovered. As relevant documents (e.g., meeting minutes, organizational mission statements, and agency websites) are compiled, broad level themes begin to emerge and are then included in draft documents.
Ultimately, in narrative form, the child welfare context – both pre- and post-PFF implementation – will be made distinct.

Next Steps

In the coming few months, researchers will collect detailed information from PFF families, DCFS workers involved in PFF, and Collaborative agency staff (other than case managers, with whom we have already spoken). Conversations with families and workers will answer the following case study questions in fuller detail:

<table>
<thead>
<tr>
<th>OVERARCHING EVALUATION QUESTIONS</th>
<th>RESPONDENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is the context in which PFF operates?</td>
<td>Families; DCFS workers; Collaborative agency staff</td>
</tr>
<tr>
<td>Who are the PFF service provider agencies (i.e., resources, services, and supports)?</td>
<td>Collaborative agency staff</td>
</tr>
<tr>
<td>Who is the PFF population?</td>
<td>Collaborative agency staff</td>
</tr>
<tr>
<td>What is the PFF referral process?</td>
<td>Families; DCFS workers</td>
</tr>
<tr>
<td>How do PFF agencies engage families in services?</td>
<td>Families; Collaborative agency staff</td>
</tr>
<tr>
<td>What capacity-building activities are PFF agencies doing?</td>
<td>Collaborative agency staff</td>
</tr>
<tr>
<td>In what ways are PFF agencies collaborating?</td>
<td>Collaborative agency staff</td>
</tr>
<tr>
<td>How is PFF perceived?</td>
<td>Families; DCFS workers; Collaborative agency staff</td>
</tr>
<tr>
<td>What is the quality of PFF-related services provided?</td>
<td>Families; Collaborative agency staff</td>
</tr>
<tr>
<td>What is the impact of PFF-related services provided?</td>
<td>Families; Collaborative agency staff</td>
</tr>
<tr>
<td>How are PFF agencies addressing sustainability?</td>
<td>Collaborative agency staff</td>
</tr>
</tbody>
</table>

The evaluation team will host one-hour interviews with parents and other primary caregivers from at least 80 families over a three-month period, beginning in February 2007. While the Initiative Evaluation Team has received IRB approval through UCLA, recruitment at several agencies is dependent upon secondary approval from their Human Subjects committees. Interviews will take place at the parents’ location of choice (e.g., lead agency, nearest University, public location, or family’s home), provided that the interviewer will be safe and comfortable in that space. Interviewers (graduate-level research associates) reflect the anticipated ethnic and language diversity of PFF families, which should ease interview apprehension to some extent. Researchers will compensate families for their time with a $20 gift card to Target.

During March and April 2007, the evaluation team will interview approximately 24 DCFS workers involved with PFF, including the Regional Administrator or Assistant Regional Administrator and the Community-Based Liaison from each PFF-affiliated office. At least one Emergency Response worker from each affiliated office will also be interviewed; the findings of these interviews will be used to inform development of an online survey that will be distributed to all DCFS Emergency Response workers later this Spring. Development of interview templates for each group of workers is underway, as is assembly of an application for IRB approval for this case study component.

Planning for the non-case manager Collaborative staff interviews is in a somewhat earlier stage. Currently, the Initiative Evaluation Team is assembling questions that will form the basis for an
interview template draft. We are also discussing the number and types of staff (i.e., individuals in what roles and from which agencies) to interview and other methodological specifics. It is anticipated that these interviews will take place between April and June 2007.
References


