

Child Protection Clients Designing the Services they Receive: An Idea from Practice

By Gary C. Dumbrill and Sarah Maiter

Introduction

Why not ask parents receiving child protection intervention to help design the services they receive? Current practice at Children's Aid Societies is largely based on solution-focused methods which regard parents as having an expert understanding of their own needs (Berg, 1994; Corcoran, 1999; Weakland & Jordan, 1990). If parents are expert evaluators of their own needs, does it not follow that they must also be expert evaluators of services designed to meet those needs? Intrigued by this question, the authors conducted a study at the Ontario Children's Aid Society at which they were employed. This paper details the results of that study, which was intended to test the potential of parents to both evaluate services they receive, as well as assist in the design of such services.

If parents are expert evaluators of their own needs, does it not follow that they must be expert evaluators of services designed to meet those needs?

This paper has two primary purposes. First, it demonstrates the viability of asking clients to help evaluate and design services. The paper details insights from parents about receiving child protection intervention and outlines their recommendations for improving services. Parents' suggestions for improving service are logical, well thought out and realistic. This paper also demonstrates how direct service workers can engage in research processes to develop and test their ideas. It is shown how the authors knew very little about formal research methods when they initiated this project, yet the curiosity and analytical skills employed in everyday practice provided a basis for conducting research and developing knowledge crucial to the field.

Theoretical Foundations: Client Expertise

The 1990s saw a thrust in child protection work becoming more collaborative with clients, particularly in the area of case planning (Burford & Pennell, 1995; Callahan, Field, Hubberstey, & Wharf, 1998; Callahan & Lumb, 1995; Corby, Millar, & Young, 1996). In Ontario, solution focused approaches were the primary means of achieving such collaboration, with one key

technique being the "miracle question". The clients are asked to imagine a miracle to cure the problem that brought them to the attention of the child protection agency. This miracle, however, occurs when everyone is asleep and therefore nobody knows that it has happened. Clients are then asked to imagine waking up, and to describe the first sign that would tell them the miracle has occurred that caused their problem to disappear overnight. In order to answer this question, clients must visualize life without the problem that brought them to the agency. Once clients begin to describe the "solution picture," the social worker and client can then start to construct ways of making this solution become real. The strength of the miracle question is that it allows clients to identify solutions that make sense

to them in the context of their family, culture and community.

Solution-focused methods in child protection practice have limitations. Parents who have seriously abused their children may envision the miracle of the "disappearing social worker". This would allow them to be left unsupervised with their children—a potentially dangerous situation. Yet collaboration with clients does not mean that workers have to comply with all client wishes. A solution-focused child protection worker who is being wished away by a client's miracle would respond by asking, "...what would be the first small sign I will notice that will tell me a miracle has happened so that I can go away?" Such conversations set the stage for meaningful collaboration between clients and workers in forming goals that both desire.

Although solution focused ideas are currently used with child protection clients, the implications of these ideas has not yet been fully explored. The authors began to recognize that if child protection clients are experts on their own needs, they must also be experts regarding the services presently designed to meet these needs. If child protection clients can collaborate with

workers to co-construct casework solutions to their individual problems, surely they can also collaborate with workers in co-developing programs to address such problems. While there has been no previous theoretical link between solution-focused casework with clients and having clients help evaluate and design programs on a broader level, the idea of clients evaluating and helping design the services they receive is not new. Empowerment literature suggests that clients understand their needs and experiences better than anyone else and should be involved in directly shaping the services they receive (Lord & Hutchison, 1993; Whitmore & Kerans, 1988). Consequently, the authors decided to test the viability of child protection clients evaluating and making suggestions to improve the services they receive.

Design and Methodology

The study took place at a medium size Ontario Children's Aid Society where the authors practiced. The authors asked parents about their experiences of child protection intervention and for recommendations to improve such service.

Only parents whose cases were closed were invited to participate in the research. Parents actively receiving services were not included in the study because of the concerns that they would view any negative feedback they gave to the authors as having the potential to impact their case. Eight parents participated; all were involved with child protection services for alleged or verified physical abuse or neglect. In addition, all eight parents had a child (or children) admitted into care when their files were open. Sampling purposively enabled the authors to recruit parents who had been in conflict with the agency in order to provide a stronger test of

the ability of parents to be constructive in helping to develop services.

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interviewed, however, asked the researchers more questions than they were able to ask her. This parent's questions were mainly personal in nature, about the researchers' home life, children, and families. These questions came as a surprise and unmasked the assumptions with which the authors approached the project. The researchers assumed that in order to develop knowledge they would ask the questions and the parents would answer them. Research was not "supposed" to involve

the participant's asking more questions than the researchers, especially questions of a personal nature. This parent's behaviour caused the researchers to begin to wonder what gave them the right to consider their questions more important than the parent's and they recalled feminist arguments that suggest interview guides are problematic because "the person being interviewed has a passive role in adapting to the definition of the situation offered by the person doing the interviewing" (Oakley, 1981, p.35) and that "the goal of finding out about people through interviewing is best achieved when the relationship of interviewer and interviewee is non-hierarchical and when the interviewer is prepared to invest his or her own personal identity in the relationship" (Oakley, 1981, p. 41)

With this feminist perspective in mind, the researchers began to answer the parent's questions. In doing so, they intuitively started to

discover a way of researching with parents based on similar collaboration and co-construction ideals to their solution-focused practice. This approach is known as “co-researching,” a perspective in which knowledge is constructed with, rather than about, those being researched (Moureau & Whitmore, 1995). From this beginning, a non-hierarchical relationship developed with parents participating in the research and each parent was viewed not as a subject, but as a partner who was given the opportunity to become involved in as much or as little of the research process as he or she desired. Parents began to see this project as their own, with one parent in particular spending considerable time assisting in the process. She interviewed other parents, analyzed findings and co-presented conclusions of the research at social work conferences in Canada and the United States.

Findings

Even though workers had regarded each of the parents participating in the project as “resistant” to intervention, each parent told researchers that they had been in need of child protection services. All candidly discussed their experiences and offered constructive advice about the ways services could be more effectively delivered to clients like themselves.

Parents had three suggestions for improving service: they wanted workers to listen more; they wanted to be given opportunities to make choices and be more involved in case planning; and they wanted to be better informed by workers. Parents integrated these recommendations into a model that they proposed be used by workers when bringing children into care.

Listen More

Parents complained that they were not heard or understood by workers. An example is a couple

that called child protection services several times because their son was becoming increasingly out of control. It was not until the father, reacting in

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frustration, threatened to harm his son that the agency responded. These parents had ideas about how their son might be helped; yet they felt that the child protection worker did not give them an opportunity

to share these ideas. The parents speculated that their frustration was interpreted as hostility, which may have caused the worker to shy away from collaborating with them. As a result, plans were formulated and acted upon without their input after their son was taken into care.

Even when parent’s opinions were sought and heard by workers, they were not always understood. One mother shared that the only way she could obtain help for her son’s mental health needs was to “abandon” him at the child protection agency, thereby forcing them to admit him into care and eventually into a residential treatment facility. The agency had viewed this mother as callous by removing herself from the necessity of caring for her troubled teen. Yet, rather than a cold and abandoning parent, this mother had acted in desperation to force the child welfare system to help her son.

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Based on these and similar experiences, parents recommended that workers listen more carefully to what each parent had to say. In addition to listening carefully, workers needed to take the time to more fully grasp a parent’s perspectives and motives. The parents emphasized that even though they had made mistakes in the ways they cared for their

children, this did not mean they were not committed to doing the best they could for their children. Consequently, workers needed to not only understand this commitment, but also

fully tap the potential when it was present.

Choice and Participation

During the research interviews, parents spoke of being denied opportunities to make choices in any areas of their children's lives after they were admitted into care. These included, but were not limited to: selecting their children's school courses, having contact with their children's teachers, or purchasing their children's clothing. Parents expressed a deep interest in having these seemingly minor tasks remain their responsibility.

Upon reflection, it was easy to see why workers remove these opportunities from parents; child protection services often deal with hostile and volatile parents who have difficulty in being involved with their children in a constructive way. As a result, "standard operating procedure" denies a parent choice and participation unless circumstances exist that allows such opportunities to occur. These situations, however, are usually exceptions to the rule, as workers with high caseloads often overlook these opportunities. Parents recommended, therefore, that standard operating procedure be reversed to automatically allow full parental participation in these activities unless exceptional circumstances existed to preclude this.

Keep Parents Informed

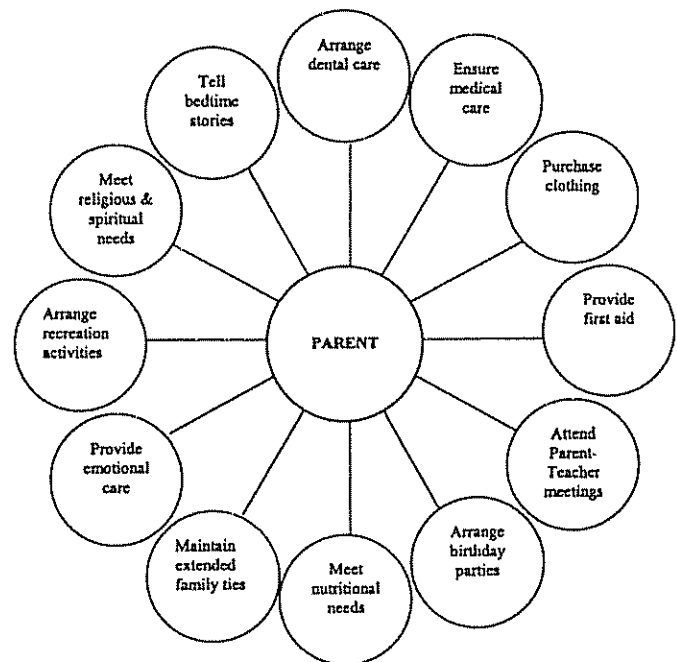
All the parents felt that they were inadequately informed about issues relating to their cases, and therefore recommended that workers make sharing information a priority. For example, a mother explained how a worker gave her copies of court papers that outlined all the mistakes the mother had made. Left alone with this information, she read over the papers every night and cried. The mother suggested it would have been better to give her a written plan detailing how she could work to overcome these problems. This would then allow her to focus on constructive solutions, as opposed to ruminating over mistakes. While it was compulsory to give parents copies of court papers, it was against agency policy to provide them with copies of the plans written in casework files. In this mother's case, such written plans did exist, and would have been very useful in guiding her towards improving her situation. Consequently,

parents recommend that copies of all written information and plans relating to their case be given to them as a matter of course (except for any confidential information in their files regarding third parties).

Services Designed by Parents

Parents developed a way to modify service delivery and pay attention to the above issues when children were admitted into care. The model, shown in Figure 1, centers on the functions of parenting.

Figure 1
Tasks of Parenting
(for a larger copy, see also attachment
t the end of article)



Parents stated that to be understood by workers, they needed to be seen as "parents." They needed to be understood, in most respects, as having the same feelings, hopes and worries as any other parent who juggles the tasks shown in Figure 1. In order to develop this understanding, parents suggested that before admitting a child into care, workers create with them a diagram similar to Figure 1. Doing so would allow the parent and worker to map together the specific role they

have been playing as a parent. Although many of the tasks shown in the figure would be the same for any parent, each parent would have their own unique way of managing their responsibilities, resulting in a slightly different map for each client. While this process is designed to help the worker understand the parent, workers might also use this diagram to illustrate to parents their concerns about tasks that have not been fulfilled by the parent.

Once the map is completed, workers should strive to maintain the parent in the center of as many of the existing parenting tasks as possible. Indeed, unless a client has failed in all areas of parenting, it makes sense to allow them to continue to perform those tasks they do well. In fact, doing so might actually reduce the overall stress on workers. In particular, the days immediately following an admission into care involve tasks such as taking the child to a medical exam and registering the child in her/his new school. In addition, the worker also needs to arrange access visits. In many instances, parents who do not require supervised access could perform these and similar instrumental tasks. In the process, parents could potentially have a more meaningful and productive access visit than the traditional office setting, or worse, trips to the local McDonald's

Parents contended that not maintaining their involvement in as many of the above tasks as possible was a counter productive casework strategy. Indeed, it makes little sense to sever healthy connections they have with their children in the process of repairing unhealthy ones; a process parents contended was analogous to a physician amputating a leg to set a broken femur. One mother spoke of how difficult it was for her to have parenting responsibility removed when her children came into care. The consequent lack of "parenting practice" meant that when her children

returned home, she had to re-learn how to be a parent again.

The above model for admission of children into care not only makes clinical sense, but also addresses the concerns parents had about child protection intervention. It ensures that workers gain a better understanding of parents, and it enables parents to be given ways to remain involved with their children in care. It logically follows that parents who are involved in these processes will also remain better informed about what is occurring with their children.

Conclusions

Unless clients have failed in all areas of parenting, it makes sense to allow them to continue to perform those tasks they do well. In fact, doing so might actually reduce the overall stress on workers.

The above research reveals the potential of involving clients in evaluating and helping design the services they receive. Parent's recommendations were logical, well thought out, made clinical sense, and would clearly improve the way services are delivered. The benefits of parental involvement in program planning became so evident through this research, that the agency where the project was conducted asked a parent who had been involved in the research to sit on a

committee restructuring the agency foster care system. A parent was also invited to become a member of the Program and Services Committee of the agency's Board of Directors.

In addition to showing the viability of clients helping develop services, this project also shows the importance of workers involved in direct service undertaking research. Workers can draw on the same curiosity, imagination, and openness they use in their casework to conduct research and to develop knowledge that has enormous implications for practice. Indeed, research undertaken or initiated by those in direct practice is particularly valuable because as shown above, ideas emerge from the realities of everyday practice, and this allows findings to be seamlessly incorporated into the ways services are delivered.

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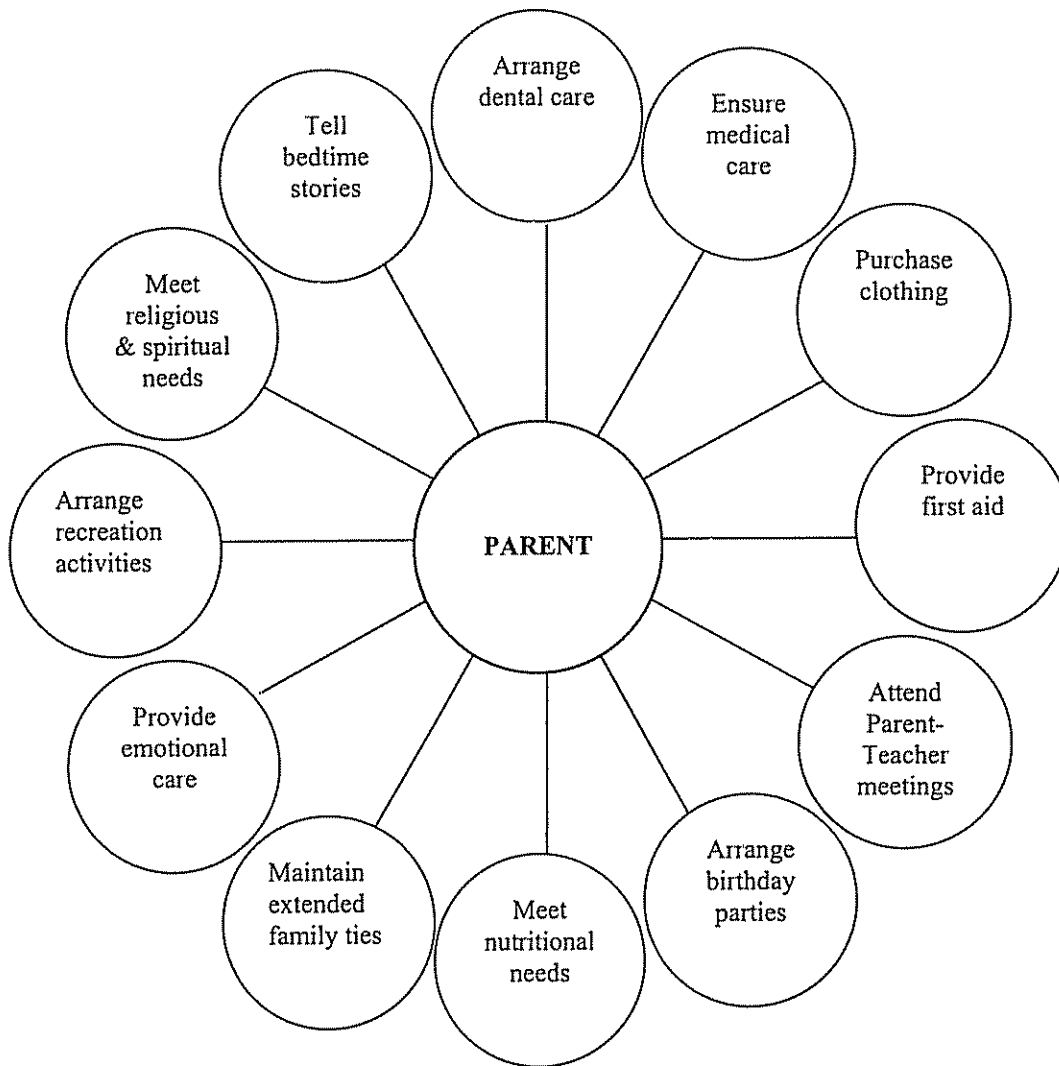
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Figure 1

Select Tasks of Parenting



Source:

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The unheard client: Assessing the satisfaction of parents of children in foster care

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ABSTRACT

Although client satisfaction information is often ignored, it is a critical piece of the picture when evaluating the service experience of parents who have had their children placed in foster care. This article describes the development of a client satisfaction instrument and information generated from its use. The findings describe the psychometrics of the instrument, a descriptive profile of the satisfaction scores of the respondents, and some intriguing relationships between distinct aspects of client satisfaction. The service implications of these findings are considered and discussed.

INTRODUCTION

Foster care continues to be one of the more prominent services for children who have experienced abuse or neglect. While the children are in substitute care, services are provided to the parents with the goal of stabilizing the home environment and making it not only safe but also nurturing for the children. The reunification of families, then, is one of the more common goals of foster care service plans. In evaluating foster care services for families, input from parents would appear appropriate; however, there is a paucity of research regarding satisfaction of parents with foster care services. The evaluation of services to families whose children have been in foster care is incomplete without input from the parents.

This article describes the development of a client satisfaction instrument for parents who have children in foster care. In addition, findings from a state-wide survey are presented which describe the experience of parents whose children were placed in foster care in the state of Kansas.

LITERATURE REVIEW

Parents of children in foster care constitute a group whose voice has generally been unheard in client satisfaction research. A review of the literature in the

1990s failed to reveal any client satisfaction studies with this group of parents. Elsewhere we reported this finding in more detail (Kapp & Vela 2004). Harris & Poertner (1998) also reported that the relevant literature in the 1990s had failed to identify client satisfaction instruments for use with parents whose children had received foster care services.

Attitudes and expectations of parents with children in placement have been investigated (Jenkins & Norman 1972). The inclusive approach to temporary foster care, where natural parents are included in many of the decisions regarding the care of their children outside their home, has also been promoted (Kufeldt 1982). In Great Britain parents of children in care have been asked to give their views on the placement process (Aldgate 1980; Thorpe 1980), and the degree of satisfaction with social work assistance has been obtained through interviews with small samples of natural parents (Thoburn 1980; Packman *et al.* 1986). However, quantitative studies that focus exclusively on measuring satisfaction of natural parents with substitute care via a measurement instrument appear to be lacking in both North America and Great Britain.

While researchers in Great Britain have made attempts to solicit natural parents' views on substitute care, it is unclear why parents of children in foster care in the US have rarely been asked previously for

their opinion about the services their families have received. One British study revealed that of all the child welfare services, foster and residential care carried the most stigma in parents' perception. Parents in this study anticipated 'the most negative reactions from others in relation to foster and residential care' (Scholte *et al.* 1999, p. 338). The stigma of having had one's children removed and cared for by someone else may be a contributing factor to overlooking solicitation of parents' opinions about substitute care services.

In the US, parents whose children have been placed in foster care have been described as 'untreatable', 'multi-problem', 'inaccessible', 'unresponsive', or 'hard-to-reach' (Maluccio 1981, p. 16). They have been assessed to be of low income, single parents (either not married, separated or divorced), members of minority groups, of low educational levels, experiencing problems with alcoholism and drug addiction, depressed, and having emotional problems (Kadushin 1978; Horejsi *et al.* 1981; Jones 1985; Bath *et al.* 1992). Having been marginalized by society, these parents 'are likely to feel alienated from society and antagonistic toward authority figures' (Palmer 1995, p. 74). Consequently, child welfare professionals may have been discouraged from obtaining consumer satisfaction data from parents whose opinions may have been viewed as not objective and thus unreliable.

In an earlier article, we reviewed nine client satisfaction instruments in the areas of child welfare and traditional social services for the purpose of identifying trends and domains (Kapp & Vela 1999). In brief, we identified six domains that appeared in the various instruments used to measure levels of satisfaction of consumers of child welfare and social services. Not every instrument included all the domains; however, collectively the nine instruments included all six: worker/therapist competency, agency/programme quality, outcomes, empowerment, strengths, and cultural competency, with the first three dominating the items in the instruments. We concluded that a future instrument for use with parents whose children had received foster care services might include these domains. (For a detailed discussion of these instruments see Kapp & Vela 1999.)

METHOD

This section briefly describes the setting in which this study was conducted, the process of instrument development, and the implementation of the client satisfaction survey with parents whose children were in foster care or had been in out-of-home placement.

Setting

The Kansas Department of Social and Rehabilitation Services had contracted the School of Social Welfare at the University of Kansas to conduct client satisfaction surveys as part of the state's study of family and children services outcomes. With foster care having been privatized, the Department had a special interest in receiving feedback on this new initiative. It was agreed that measuring the level of satisfaction of parents whose children received foster care services from the private contract providers would add to the assessment of the new approach.

Development of the instrument

At the time of the inception of this project, no instrument to assess the level of satisfaction of parents whose children were or had been in substitute care existed. Simultaneous to our efforts, an independent effort was addressing the same need. The Parents with Children in Foster Care Satisfaction Scale (PCFCSS) (Harris *et al.* 2000) was being developed about the same time that we were developing the Parent Satisfaction with Foster Care Services Scale (PSFCSS). The Harris *et al.* instrument is a 24-item scale that demonstrated high internal validity ($\alpha = 0.97$) when pilot-tested. The items pertain to worker activities and the responses range from 'never' to 'frequently' or 'not applicable' on a six-point scale. It shares some similarities with the PSFCSS but also differs in some respects.

Our interest in first-hand direct experience as a basis for knowledge (Beresford & Evans 1999, p. 673) led us to conduct focus groups in three different locations in the state of Kansas with parents whose children had received foster care services. (Human subjects approval was obtained for this study.) The purpose of the focus groups was to learn about the issues that were important to this group of parents. Findings from the focus groups served to guide the construction of the items in the PSFCSS. Not surprisingly, suggestions offered by the parents overlapped with some of the domains identified in the literature, specifically, worker competency, agency/programme quality, empowerment, and outcomes (see Kapp & Propp 2002).

A 17-item instrument was generated from the feedback of the focus group participants and the findings from the literature review. This rudimentary instrument was pilot-tested over the telephone with participants from the focus groups, who had agreed to give

their input to an initial instrument. From this small-scale pilot test and input from colleagues, a revised version resulted in a longer instrument that included open-ended questions. This second version was pilot-tested again with different focus group participants and their input was used to refine the instrument. The third revised version of the instrument was pilot-tested over the telephone with 113 parents whose children had been referred to foster care services three and six months previously. Results of the pilot test demonstrated the potential of this satisfaction survey and funding was secured for its implementation with all families entering foster care. In addition, minor refinements were made to the instrument.

Implementation

Focus group participants had suggested that a telephone survey would be a better way of obtaining information than a survey through the mail, as they viewed the latter as offensive. These parents felt that a few questions on a piece of paper could not begin to represent their intense experience with having had their children removed from their care (Kapp *et al.* 1999). Telephone surveys have been shown to have higher return rates (Dillman 1978; Frey 1989; LaSala 1997) than mail-in surveys, which have traditionally yielded low return rates in the 20–38% range and close to 50% when follow-up efforts are implemented (Dillman 1978; Lebow 1983; Frey 1989; Arkison & Greenfield 1994; LaSala 1997). For these reasons it was decided that a telephone survey would be the best method of implementation.

The foster care private contractors provided the essential data for carrying out the survey – names, addresses, and telephone numbers of parents or primary caregivers whose children had been referred to foster care services. This information was received five months after the children had been referred. A pre-notification letter was mailed to the parents with information about the survey, assuring them confidentiality and alerting them that someone would be calling within a week or two. Surveys were completed during the sixth month from the referral date. This time frame was chosen because the last of the pilot tests had shown more variance in the responses from clients who had been in the foster care system for six months than for those who had been involved for only three months.

A data entry package was developed so that responses were entered into a database system as the surveys were being conducted. Telephone survey pro-

cedures were designed and university students majoring in social welfare were hired and trained to carry out the surveys. The instrument was translated into Spanish and two bilingual/bicultural staff members were available to carry out interviews in Spanish. The interviewing process was implemented in January 2000. Human subjects approval was obtained for this project.

THE INSTRUMENT

The Parent Satisfaction with Foster Care Services Scale and its psychometric properties are described in detail elsewhere (Kapp & Vela 2004). Briefly, the PSFCSS is a 45-item instrument; however, only 34 items measure satisfaction. The 11 items that do not measure satisfaction seek demographic information, permanency goal status, the child's present location, special needs of the child, and opinions about the survey itself (e.g. the clarity of the statements, the length of the survey, whether respondents would recommend others complete it). Of the 34 remaining satisfaction items, four are open-ended questions. A fifth item pertains to parents whose rights have been terminated. Since there are few persons whose parental rights are terminated, this item solicited infrequent responses. The resulting 29 items are simple statements written in behavioural terms. The statements were constructed to relate to the six domains gleaned from the literature review – worker competency, agency quality, outcomes, empowerment, strengths, and cultural competency – and the focus group participants' concerns. Respondents were read each statement and asked to choose from three responses: agree (1 point value), unsure (2 points), and disagree (3 points). Later, we reversed the point value of the responses in order to make the numeric responses more logically coherent (i.e. the higher value representing a positive perception) and thus eliminate confusion in the presentation of the findings.

SAMPLE SIZE AND RESPONSE RATE

The data utilized in the present analysis of the PSFCSS are based on the first six months of implementation. As Fig. 1 illustrates, the overall response rate during this time was 25% ($n = 184$). The high number of incorrect, disconnected or missing phone numbers that were received from the agencies (68%) greatly limited the number of potential, and thus actual, client contacts. However, as Fig. 1 also indicates, the results show that once parents were

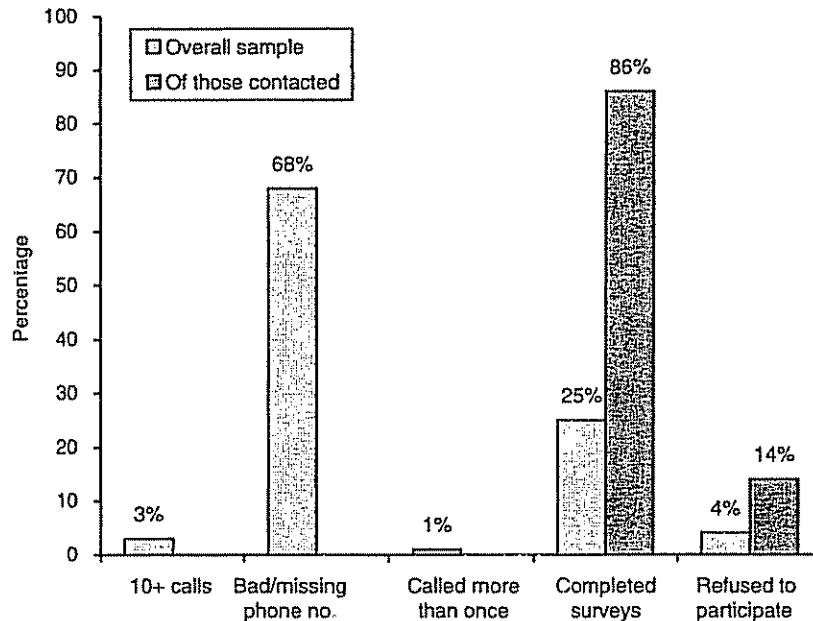


Figure 1 Client satisfaction response rates (first six months) and comparison of overall sample and those contacted.

Table 1 Factor properties

Factor label	Eigenvalue	Per cent of variance	Cumulative percentage	Reliability
Factor 1 – Worker competency	11.994	44.424	44.424	0.94
Factor 2 – State social worker competency	3.380	12.517	56.941	0.93
Factor 3 – Cultural competency	1.311	4.855	61.796	0.64
Factor 4 – Empowerment/Client rights	1.175	4.353	66.149	0.71
Factor 5 – Agency quality/Outcomes	1.114	4.126	70.275	0.91

successfully contacted, the response rate (86%) was clearly above what is considered respectable (Salant & Dillman 1994).

ANALYSES OF THE SCALE

Two of the cultural competency items are situational and do not apply to everyone, therefore a decision was made to exclude them from the analysis of the instrument. The resulting 27-item scale was tested for reliability based on data collected during the first six months of the survey. A factor analysis was also conducted to identify underlying patterns. The PSFCSS demonstrated high reliability ($\alpha = 0.94$), indicating good internal consistency. A five factor solution was extracted by the factor analysis that corresponded closely to the domains identified in the literature

review. The five factors collectively accounted for 70% of the variance. Table 1 depicts the factor labels assigned, eigenvalues, percentage of variance accounted for by each factor, the cumulative percentage of variance, and the reliability of each of the factors or subscales.

Based on the high reliability and the means and standard deviations that demonstrated variability in the responses (Kapp & Vela 2004), we concluded that the instrument was a good measure of satisfaction.

DATA ANALYSIS

The findings reported and discussed in this paper are based on four separate sets of analyses. The first set utilizes descriptive univariate techniques to describe

the respondents' demographic and service history profiles. A second set also uses univariate techniques, specifically means and standard deviations to portray clients' levels of satisfaction on the different domains. The third set explores the lower levels of satisfaction among parents who have a permanency goal of reunification. A bivariate analysis using chi-squares identifies the specific areas of satisfaction that contribute to the lower scores.

The final set of analysis utilizes multivariate techniques to identify specific predictors of overall satisfaction. Three overall satisfaction items were combined into an average index of overall satisfaction (the worker, the agency and overall). A dummy variable of overall satisfaction was created by segmenting all cases into groups of satisfied versus not satisfied. All cases whose overall average was equal to or less than one standard deviation above the average were classified as satisfied; the remainder were classified as not satisfied. In order to identify predictors of this overall satisfaction, another set of dummy variables were calculated for the individual items; again the ratings were coded as satisfied (the respondent replied positively to a particular satisfaction item) versus not satisfied (responses were unsure or negative). Logistic regressions were calculated to determine which items from the individual subscales would act as predictors of overall satisfaction.

FINDINGS

Discussion will focus on a description of the survey participants and their responses to the different dimensions of client satisfaction. In addition, some interesting differences in findings related to permanency goals are discussed, and some predictors of overall satisfaction are given attention.

Demographic descriptions

The mothers of children in foster care were the most likely to respond to the survey (70.6%). Respondents were most likely to be Caucasian (76.5%), while 12.2% of the sample were African American. The vast majority of the sample ranged between the ages of 31 and 50: 33.7% were between 31 and 40 years; 24.6% between 41 and 50. The majority of the parents in the survey had not had prior experience with having had their children in foster care (68%). It is also interesting to note that the vast majority of respondents had, as their case plan goal, the reunification with their children (78.2%). Table 2 offers more details on the description of survey respondents.

Table 2 Description of respondents (all figures are %)

Respondent	
Mother	70.6
Father	11.4
Guardian	1.4
Grandparent	5.7
Other	5.7
Adoptive parent	5.2
Race	
Caucasian	76.5
African American	12.2
Hispanic	2.8
Native American	2.8
Biracial	3.3
Age	
Under 21	5.2
21-30	11.8
31-40	33.7
41-50	24.6
50+	8.5
First experience with foster care	
Yes	68.0
No	32.7
Permanency goal	
Reintegration	78.2
Adoption	3.8
Guardianship	7.6
Independent living	10.4

Dimensions of client satisfaction

Five different dimensions of client satisfaction were assessed by the PSFCSS: (i) contract provider worker competency, (ii) state worker competency, (iii) cultural competency, (iv) empowerment/client rights, and (v) agency quality and outcomes. All of the items, with the exception of those included in the state worker domain, pertained to the direct service efforts provided by the private agency worker or the private agency.

In Kansas, foster care services are privatized. Three different private contractors provided the foster care services for the entire state during the time the data presented here were collected. The state worker is responsible for overseeing the foster care services to determine if the law and sound practice principles are being followed. Additionally, the state worker develops case goals with the contractor to establish a case plan and manages communication between the court and the family. It is also common for the state workers to have 'integrated' caseloads, meaning that they continue to work with a family after conducting an investigation that has led to the removal of a child. The worker continues to supervise the case after the child has been placed in foster care. Given these role differences, specific questions were developed to

Table 3 Client satisfaction scores (mean and standard deviation) and average domain scores

Satisfaction item	Mean*	SD	Average domain score
My worker treats me with respect	2.41	0.88	Worker and Empowerment 2.18
My worker is clear with me about what she/he expects from me and my family	2.34	0.90	
My worker is working with me to get my child/ren back	2.33	0.92	Worker and Empowerment 2.18
My worker helps prepare me for meetings and court hearings	1.91	0.98	
In meetings with other professionals, my worker stands up for me and my children	2.10	0.94	Worker and Empowerment 2.18
My worker respects my values and beliefs	2.29	0.89	
If I could, I would refer other families who need help to this worker	2.02	0.97	Worker and Empowerment 2.18
Overall, I am satisfied with my worker	2.12	0.97	
(Agency) has realistic expectations of me	2.22	0.91	Agency and Outcomes 2.07
Overall, I am satisfied with the services I have received from the agency	2.01	0.97	Agency and Outcomes 2.07
If I could, I would refer other families who need help to this agency	2.12	0.97	
My worker asked for my opinion about the problem my family and I were having	2.27	0.94	Empowerment/Rights 2.19
My worker asked for my opinion about the services my family and I needed	2.21	0.95	
My worker has included me in decision-making	2.09	0.97	Empowerment/Rights 2.19
The agency or my worker has told me my rights	2.27	0.93	
I knew who to call if I felt that my rights had been ignored	2.09	0.97	Empowerment/Rights 2.19
The services and resources provided helped me/will help me get my child/ren back	2.09	0.92	
The case goals will prevent/will help prevent future out-of-home placement of my child/ren	2.11	0.92	Outcomes 2.07
(Agency) has helped my family do better	2.00	0.97	
My worker was respectful of my family's cultural/ethnic background	2.54	0.75	Cultural competency 2.50
I felt comfortable talking with my worker about what my culture and race have to do with my situation	2.20	0.92	
My worker spoke the language most appropriate for me and my family	2.76	0.61	Cultural competency 2.50
My state social worker treats/treated me with respect	2.35	0.87	
My state social worker does/did a good job of explaining what was required of me	2.16	0.92	State worker 2.24
My state worker respects my values and beliefs	2.27	0.88	
Overall, I am satisfied with my state worker	2.18	0.91	State worker 2.24

*1 = disagree, 2 = unsure, 3 = agree.

address specific dimensions of practice related either to the private worker, the private agency, or the state worker.

The mean and standard deviations for each of the scale items are shown in Table 3. In addition, the table includes the average domain score for the five components extracted by the factor analysis.

One of the challenges of client satisfaction measurement is the tendency for scores to be inflated and present little variation. This was not the case for the results from the PSFCSS. The mean for the vast majority of the items was very close to the centre point of the three-point scale. In addition, the standard deviation was 0.85 for nearly all of the items, a significant dispersion on a three-point scale. Finally, the middle response 'unsure' was chosen infrequently, never exceeding 15% on any of the items.

Although there was an absence of drastic differences in the various domain averages, respondents'

average score related to cultural competency items were the highest (2.5), indicating a greater level of satisfaction. Private agency and state agency worker scores were comparable (2.18 vs. 2.24). The respondent average domain score for the agency and outcomes domain (2.05) indicated that parents were less satisfied with their agencies and the outcomes of their case goals than with their social workers.

Client satisfaction, permanency goals, and state workers

Another interesting finding was that parents who had a permanency goal of reintegration had lower levels of satisfaction (average score of 1.09) than parents whose long-term goals included adoption (1.62), guardianship (1.43) or independent living (1.53). When further analysis was conducted to investigate this finding, it was discovered that these parents, with

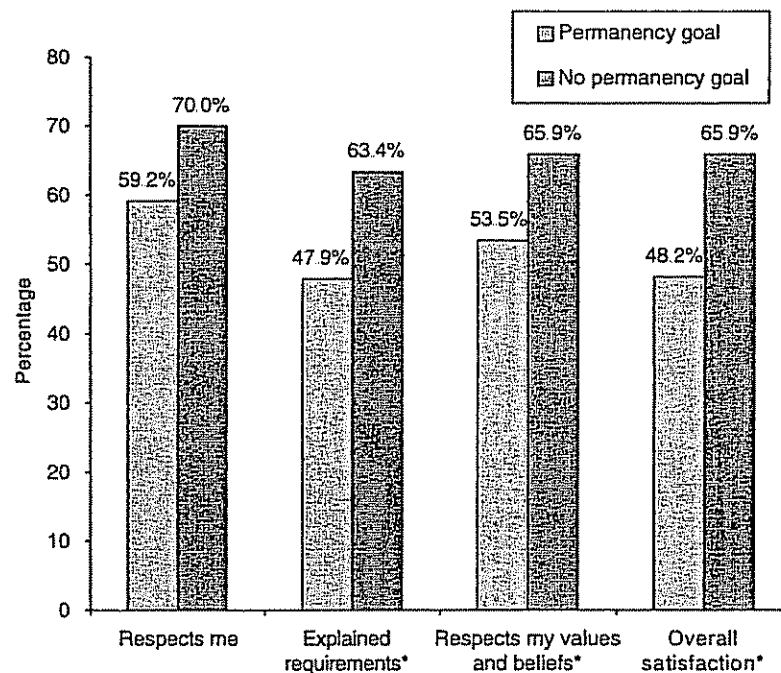


Figure 2 Client satisfaction with state worker by permanency goal. * indicates $P < 0.05$.

a permanency goal of reintegration, were less satisfied with their state workers than other parents on four related items (see Fig. 2).

Predictors of overall satisfaction

As described earlier, logistic regression was used to isolate the items that best predicted overall satisfaction (Fig. 3). In the worker domain, five items were identified. The parents were more likely to be satisfied overall when they perceived that the worker (i) was working with them to get their child back, (ii) had clear expectations of them, (iii) prepared them for meetings, (iv) stood up for them in meetings, and (v) respected their cultural background. Parents were also more likely to be satisfied overall when they felt that the agency had realistic expectations of them. Two final predictors of overall satisfaction included the parents' willingness to recommend their agency and worker to others in similar circumstances.

DISCUSSION

This survey was conducted using a telephone survey method; the rationale for using the phone method is described in Kapp & Vela (2004). The implementation of this method requires active effort on the part of researchers, practitioners and administrators, as each

must contribute different resources and accomplish differing tasks. One crucial aspect involves the accuracy of telephone numbers. Unfortunately, the telephone numbers for this group of clients tend to change often due to clients' high mobility or to disconnected phone service because of inability to remain current on their bills, and agency personnel may fail to update these changes in their databases. The high number of unavailable telephone numbers (disconnected or changed) constituted the primary obstacle to reaching a majority of the clients in this survey.

Current and accurate phone numbers in agencies' databases facilitate high response rates, and thus are an important, if not the most important, aspect of a telephone survey. However, the acquisition of up-to-date phone numbers requires a collective effort on the part of agency staff. The success of the phone survey method is contingent upon accurate phone numbers for the parents whose children are placed in foster homes. Accuracy of telephone numbers will not only assure researchers a high response rate but also allow them to determine the number of families that do not have access to a phone and decide whether this number justifies devising a method to reach them. Although methods were developed to contact families without phones, they had a minimal effect on the response rate in this survey.

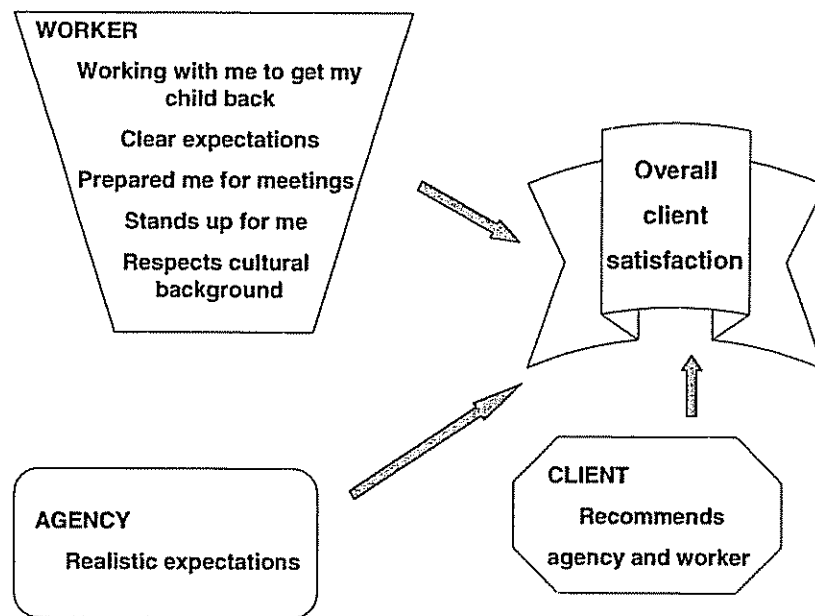


Figure 3 Predictors of overall satisfaction.

The response rate for this study presents a significant limitation. Although the fact that those who were contacted almost always responded (86%), there remains a question about those families who were not contacted. There is no evidence to suggest that their responses would have been similar or different. Additionally, demographic data were not available to determine if the profiles of the respondents were comparable to the overall agency population. Consequently, the degree to which these data are representative of the overall population of parents with children in foster care is uncertain. It is our hope that the lessons learned in the implementation of this study will inform future research of this type in a manner that may facilitate a higher response rate by creating methods for generating more complete phone numbers for respondents in this population of clients.

For those parents who did respond, the PSFCSS produced some viable information about parents' impressions of their service experiences with their children in foster care. The instrument proves to be a solid method for obtaining vital data from a group of service consumers that is typically neglected in the evaluation process. It is also interesting to note that the responses to the survey portray these parents as having a varied range of satisfaction. This finding seems to challenge a stereotype that these parents will typically be unhappy, given the trying circumstances of their situations. The variation in the degree of sat-

isfaction serves to encourage the use of client input. It also indicates to direct service and management practitioners that foster care services can be satisfactory for parents and that efforts should be invested in helping this to occur.

The summary results of the different domains of the scale find that parents are the least satisfied with the agency and outcome component of services, and more satisfied with the individual worker, the state worker, the worker's cultural competency, and with issues of empowerment. While it is interesting to see that parents' interactions with individuals (i.e. the contract provider worker and the state worker) during the service experience seems to be more satisfying than the prognosis of their case outcomes and transactions with the agency, it would be useful to conduct additional research to learn more about this discrepancy.

In addition, parents are less satisfied with their state workers when there is a more critical outcome on the line, such as their goal to reunify with their children. In these cases, it appears that it is more difficult for state workers to manage their relationships with clients in a manner that promotes satisfaction. One possible explanation for this may lie in the state worker's involvement in the removal of children from their homes. Families may continue to feel resentment towards workers who were critically involved in the removal of their children. In the case of the Kansas

state workers, their relationship with the families often continues in the role of monitor, and it may be unlikely that families would change their initial perceptions and feelings about their worker. This contentious relationship is further compounded by the state worker's role as the communication link between the court, the private worker, and the family. This aspect of the relationship has the potential to provide further tension given the fact that state workers have much influence over the reunification of the family. Once again, additional research would be useful to learn more about this distinct relationship.

The predictors of overall satisfaction suggest that if solid social work skills (i.e. respect for client values, making expectations clear, preparing clients for meetings, asking clients about problems and services, including them in decisions, and respecting their culture) are practised, it is likely that the parents will have a satisfactory experience. These findings are supported by British studies that found that users of child welfare services, including foster and residential care, demonstrated high levels of satisfaction (i) when service providers aimed to empower clients and demonstrated respect for and understanding of clients (Scholte *et al.* 1999), (ii) when parents felt that they had been listened to by the social worker, that their perception of the problem had been heard, and they had been involved and consulted (Packman *et al.* 1986), and (iii) when social workers were perceived to be empathetic and have a pleasant personality in addition to helpful social work skills (Thoburn 1980).

Other contributors to a satisfactory experience indicated by the present analysis include clients' perception of the agency as having realistic expectations of them, finding the agency helpful, and recommending the agency to others in a similar situation. These predictors have the potential to guide direct service in best practices. Administrative practitioners can use these predictors to focus resources on learning what attitudes and activities make families feel satisfied, and then craft interventions that will promote satisfaction in these areas, assuring the rendering of quality services and a satisfactory experience for clients.

Client satisfaction is a crucial aspect of a competent programme evaluation process. It is difficult to capture the service experience in its entirety without addressing client satisfaction. In addition, client satisfaction is a critical outcome worthy of clinical and administrative attention. The PSFCSS presents a viable method for measuring critical dimensions of satisfaction that can be used to assess, evaluate and improve foster care services. Further research that

examines the linkage between client satisfaction and other more traditional outcomes, such as reunification, would contribute significantly to the understanding of the relationship between client satisfaction and longer-term service outcomes.

A thorough discussion of client outcomes described by Wells & Johnson (2001) portrayed an uneven treatment of client satisfaction. Client satisfaction appears to be ignored in the accepted outcome measures utilized routinely by federal and private foundation circles. At the state level, client satisfaction has been included in some cases. For example, in May 1997 the Comptroller of the City of New York Task Force on Foster Care Performance Standards developed a mandated system of accountability based on several outcome measures that included client satisfaction (Wulczyn 1997).

We would argue that client satisfaction measurement should routinely be included in outcome schemes to assess programme performance. Client satisfaction measurement is consistent with the National Association of Social Workers (1996) *Code of Ethics* which emphasizes the dignity and self-determination of the client. In addition, this type of measurement captures the intimacy with the service delivery process that is not revealed in other forms of measurement. Consequently, the evaluation of foster care services is incomplete without client input.

The PSFCSS was developed to systematically collect information from parents about their service experiences. The instrument proves to be a solid method for obtaining vital data from a group of service consumers that is typically neglected in the evaluation process. The PSFCSS expands a limited knowledge base regarding the impressions of parents whose children are in foster care. This information allows direct service and administrative practitioners to begin to understand the importance of client satisfaction for the purposes of managing and implementing services with an emphasis on giving parents a positive experience. Additional research can expand on the findings of this investigation by helping to gain a more complete understanding of parental satisfaction and its relationship to more traditional outcomes.

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