



STRATEGY BRIEF

# HEALTHY ORGANIZATIONS

## How can we prioritize **constituent voice and choice**?

In child welfare, constituent voice and choice are achieved when birth parents, relative caregivers, foster parents, and youth in care or alumni of care provide ongoing and meaningful input and leadership that the system then utilizes for continuous improvement. This feedback and expertise, which are informed by the individuals' knowledge of their needs and personal experience receiving services and navigating service systems, **can be used to drive case plans, improve existing programs, determine what new supports and services may be necessary, and identify how to achieve positive outcomes and advance system change.**

### How have other systems approached constituent voice and choice?

Other sectors have adopted a range of guiding principles for constituent involvement and leadership:

- **Education—Student voice and choice:**<sup>1</sup> Students have the power to decide what they want to study, who they want to work with, what outcomes they expect, and when, where, and how they do their work.
- **Business Sector—Human-centered design:**<sup>2</sup> Product developers engage potential consumers in the design process and nurture innovations and solutions that are co-created, inclusive, transparent, and non-hierarchical.
- **Youth Development and Community Organizing—Nothing about us, without us:**<sup>3</sup> Lasting change can occur only when solutions to social problems



casey family programs

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are born from equal partnership with and leadership from oppressed groups and impacted persons. Youth and communities know what is best for them and must be fully integrated into routine as well as system change processes to envision, develop, implement, evaluate, and improve any policies, programs, and services that may impact their lives.

- **Developmental Disabilities—*Dignity of risk*:**<sup>4</sup> Every person has the right to experience life fully and should not be protected or sheltered from the ups and downs of everyday experiences, including making mistakes. Self-determination and the right to take reasonable risks are essential for personal dignity and self-esteem.
- **Psychotherapy—*Unconditional positive regard*:**<sup>5</sup> Individuals needing help have the agency to choose how to best respond to their own situations. No matter how dangerous, disordered, or dysfunctional individuals may appear in a given moment, they are doing the best they can.
- **Recovery—*No wrong door***<sup>6</sup> **for genuine, free, and independent choice:**<sup>7</sup> Those suffering from a substance use disorder are able to get the help they need when they need it. There is no right way or right time to seek and receive help overcoming substance use disorders, and all individuals have the right to choose the services they need for their recovery support from a range of available and accessible providers.
- **Behavioral Health—*Person-centered care*:**<sup>8</sup> Consumers have control over the services they receive, including the amount, duration, and scope of services, as well as choice of providers.

### What are examples of constituent voice and choice in child welfare systems?

There are many ways to engage constituents and design systems that are driven by their input and expertise:<sup>9</sup>

1. **Systems-level involvement** includes developing specific leadership and decision-making roles for youth, birth parents, relative caregivers, and foster parents, including on advisory councils and decision-making boards, in advocacy positions,

The National Alliance of Children's Trust & Prevention Funds' [Birth Parent National Network](#), with free membership to all birth parents, provides opportunities for parents and organizations to collaborate together to promote the voices of birth parents in child welfare policy and practice.

and as consultants and staff. In this approach, constituent voice and lived experience are foundational in developing trainings, policies, procedures, and practices, and constituent feedback is a key strategy for assessing the effectiveness of casework activities and the usefulness of programs and services. Examples include:

- Oregon's parent partnership to train agency staff and stakeholders on the best ways to engage and work with families to promote child and family well-being.<sup>10</sup>
- State and county youth advisory boards to inform the policies and practices developed for youth in care and those transitioning out of care.<sup>11</sup>
- [Child Welfare Organizing Project](#), which brings the voices and experiences of parents to New York City's child welfare system and related legislation.
- [Rise](#), based in NYC, builds parent leadership to drive child welfare solutions that parents believe will help their families thrive. Rise's parent-written magazine provides information and peer support to parents facing the child welfare system.
- The [Strengthening Families](#) framework, which includes a partnership guide, training, parent partnership toolkit, and parent/community cafes.
- Texas' [Statewide Parent Collaboration Group](#), a partnership between the Department of Family and Protective Services and parents who have been involved with child protective services to gather and incorporate parental feedback to enhance CPS policy and practice.

2. **Peer-level involvement** includes implementing peer-support models in which young adults, birth parents, relative caregivers, and foster parents support other system-involved youth and families. Examples include:

- Parent partner programs that have been developed in multiple jurisdictions and have demonstrated efficacy in in-home parenting interventions and linkages to community resources, such as the [Parents Anonymous](#) parent leaders/partners program, or in improving reunification,<sup>12</sup> such as the [Parents for Parents program in Washington state](#).
- Cultural brokers who accompany caseworkers on the initial visit with a family to assist with engagement, assessment, safety planning, and identification of support systems.<sup>13</sup>
- Birth parent-foster parent partnerships, such as the [Quality Parenting Initiative](#).
- [Sobriety Treatment and Recovery Teams](#), launched in [Kentucky](#) and [Ohio](#) for families with co-occurring substance use and child maltreatment issues, which pair child protective caseworkers trained in family engagement with parent mentors (peer support employees in long-term recovery).
- [Peer-to-peer kinship navigators](#), such as those offered through the Children's Home Network in Florida.
- New Jersey's confidential peer support helpline for resource families staffed by experienced resource parents trained in the Reciprocal Peer Support model.<sup>14</sup>

3. **Case-level involvement** includes engaging youth and families as decision-makers throughout the development, implementation, and assessment of their case plans. In this approach, caseworkers strive to meet the youth and family where they are, plan with and not for them, build on strengths, and provide timely services that youth and families deem relevant and beneficial. Examples include:

- The use of family search and engagement activities,<sup>15</sup> including a special focus on engaging fathers.<sup>16</sup>

- Culturally informed and evidence-based practices grounded in intensive family partnership and collaboration, such as [Family Assessment Response](#), [Family Group Decision Making](#), [Motivational Interviewing](#), [Signs of Safety](#), [Safety-Organized Practice](#), and [Solution-Based Casework](#).

## What are some implementation considerations and resources?

In order to promote the full engagement of families within these three levels, youth, parents, relatives, and foster parents have to be given meaningful opportunities to participate, provide advice, and contribute to decisions. This requires agencies to recognize constituents are the experts on their particular situation, and to value their knowledge and opinions of the child welfare system and family support programs. In tandem, agencies have to proactively and consistently encourage and empower constituents to participate in different stages of the program and policymaking process. Creating opportunities to move beyond cursory involvement is vital for building family-agency partnerships and establishing rapport with child welfare-involved families, many of whom are likely to distrust the system. Families are more likely to volunteer information or feedback and invest their time in other ways when there is a strong demonstrated agency commitment to:

- Seek out constituent voice.
- Provide needed supports to constituents who participate.
- Use findings to modify and strengthen programs and services.
- Report back decisions and progress.

Families need to feel and see that their voices and choices will be employed to improve services. Whether an agency chooses to involve families in case planning, establish a birth parent council, administer an annual foster parent feedback survey, support youth or birth parent advocate positions, or schedule exit interviews with youth transitioning out of care, meaningful constituent voice and choice means going beyond simply changing a policy or mission statement. They involve reframing and reforming existing institutional culture from top to bottom. Resources to support this culture shift are provided below:

# How can we prioritize constituent voice and choice?

1. [Strategies to Increase Birth Parent Engagement, Partnership, and Leadership in the Child Welfare System: A Review](#) explores barriers and proactive strategies to engaging birth parents with child welfare at all levels of the continuum.
2. The [Family Engagement Inventory](#) is designed to help family-serving systems use family voice to improve and shape programs and practices. It provides updated information regarding how family engagement is defined and examples of implementation across systems, including child welfare, juvenile justice, behavioral health, early education, and K-12 education.
3. The [Birth Parent National Network](#) offers a range of resources presented from the parents' perspective, including virtual convenings and the Parent Partnership Compendium that highlights parent partner programs, peer support programs, advocacy, and training at organizations across the country.
4. The [Youth Engagement Blueprint Series](#) describes how to build capacity in four areas: viewing young people as organizational assets; having the right people; implementing flexible and innovative programs and practices; and using science and technology effectively.

1. See <https://www.edutopia.org/blog/voice-and-choice-more-than-what-andrew-miller>
2. See <https://www.childtrends.org/human-centered-design-can-create-more-efficient-and-effective-social-service-programs>
3. See <https://digitalcommons.library.tmc.edu/cgi/viewcontent.cgi?referer=https://www.google.com/&httpsredir=1&article=1111&context=childrenatrisk>
4. See <http://mn.gov/mnddc/parallels2/one/video08/dignityofRisk.html>
5. See [http://www.adpca.org/system/files/documents/journal/Tyler%20UPR%20PCJ%206\\_2.pdf](http://www.adpca.org/system/files/documents/journal/Tyler%20UPR%20PCJ%206_2.pdf)
6. See [https://www.naadac.org/assets/2416/sheedyckwhitterm2009\\_guiding\\_principles\\_and\\_elements.pdf](https://www.naadac.org/assets/2416/sheedyckwhitterm2009_guiding_principles_and_elements.pdf)
7. See <https://www.samhsa.gov/sites/default/files/samhsa-recovery-5-6-14.pdf> and [https://www.naadac.org/assets/2416/sheedyckwhitterm2009\\_guiding\\_principles\\_and\\_elements.pdf](https://www.naadac.org/assets/2416/sheedyckwhitterm2009_guiding_principles_and_elements.pdf)
8. See <https://www.samhsa.gov/section-223/care-coordination/person-family-centered>
9. National Technical Assistance and Evaluation Center for Systems of Care. (2008). *Family involvement in public child welfare driven systems of care*. Retrieved from <https://www.childwelfare.gov/pubs/acloserlook/familyinvolvement/familyinvolvement1/>
10. National Technical Assistance and Evaluation Center for Systems of Care, 2008
11. See <https://www.childwelfare.gov/topics/systemwide/youth/engagingyouth/>
12. Enano, S., Freisthler, B., Perez-Johnson, D., & Lovato-Hermann, K. (2017). Evaluating Parents in Partnership: A preliminary study of a child welfare intervention designed to increase reunification. *Journal of Social Service Research*, 43, 236–245.
13. See <http://www.cebc4cw.org/program/cultural-broker-program/>
14. Rutgers University Behavioral Health Care. (n.d.). Resilience for resource families (R4R) peer support program. Retrieved from <https://www.state.nj.us/njfoadopt/services/links/R4RFlyer.pdf>
15. See <https://www.casey.org/family-search-engagement/>
16. See <https://www.casey.org/media/BirthParentEngagement.pdf>

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