

CO-LOCATION OF DOMESTIC VIOLENCE (DV) ADVOCATES IN NYS CHILD WELFARE OFFICES RESULTS OF A DV ADVOCATE SURVEY

Background

The New York State Office of Children and Family Services (OCFS) contracted with the Center for Human Services Research to study the effects of co-locating Domestic Violence (DV) Advocates within Child Protective Services (CPS) offices. One evaluation component consisted of surveying DV Advocates working in 68 DV programs in all New York counties outside of New York City. A total of 458 advocates responded¹: 52 who had experience as a co-located DV Advocate in CPS offices (currently or in the past) and 406 who had never been co-located. Significant differences were found between these two groups on self-report about collaborative case practice, CPS-DV systems coordination, and knowledge and attitudes about CPS. All findings reported in this research brief are statistically significant ($p < .05$).

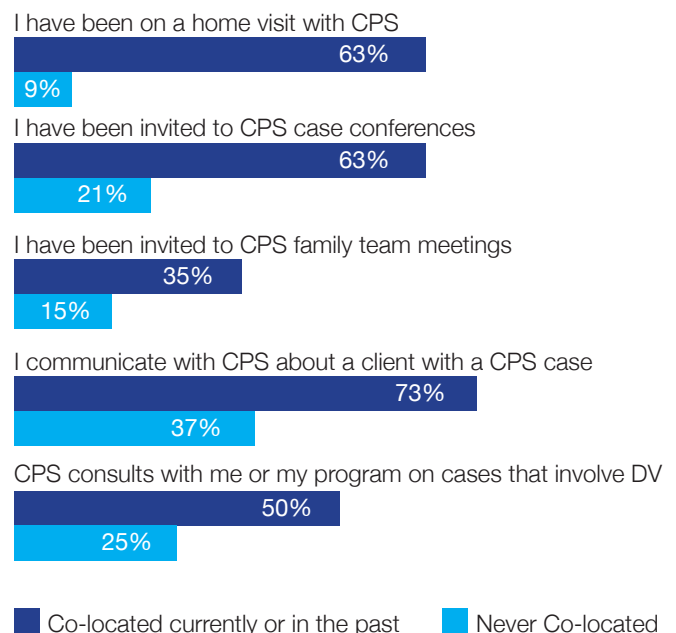
¹ A total of 543 respondents received the survey, generating an 84% response rate.

Findings

COLLABORATIVE CASE PRACTICE

As presented in Figure 1, co-located DV Advocates were seven times more likely than other DV Advocates to have attended a home visit with a CPS caseworker, and just as many (63%) had been invited to CPS case conferences. About one-third (35%) of co-located Advocates had been invited to CPS family team meetings, as compared with 15% of Advocates who had never co-located. Additionally, co-located Advocates were twice as likely to communicate with CPS workers about families with whom they both were working than other Advocates (73% vs. 37%) and believed that CPS workers usually consulted with a DV Advocate on DV cases (50% vs. 25%).

Figure 1
DV ADVOCATE CASE PRACTICE



Findings, Continued

DV AND CPS COORDINATION

Co-located DV Advocates were more likely than other DV Advocates to know a CPS worker by name (92% vs. 67%) and believe that they could get timely help from CPS (94% vs. 83%). Co-located advocates were also more likely to receive referrals personally from CPS (83% vs. 60%) and to report that CPS referred most DV cases to a DV program (88% vs. 75%) (Figure 2).

ORGANIZATIONAL CONSTRAINTS

As displayed in Figure 3, co-located DV Advocates were significantly less likely to report agency restrictions related to conducting home visits with CPS (17% vs. 57%). DVAs who were not co-located more frequently reported that they wished it were easier to provide client information to CPS (38% vs. 56%).

Figure 2

DV AND CPS SYSTEMS COORDINATION

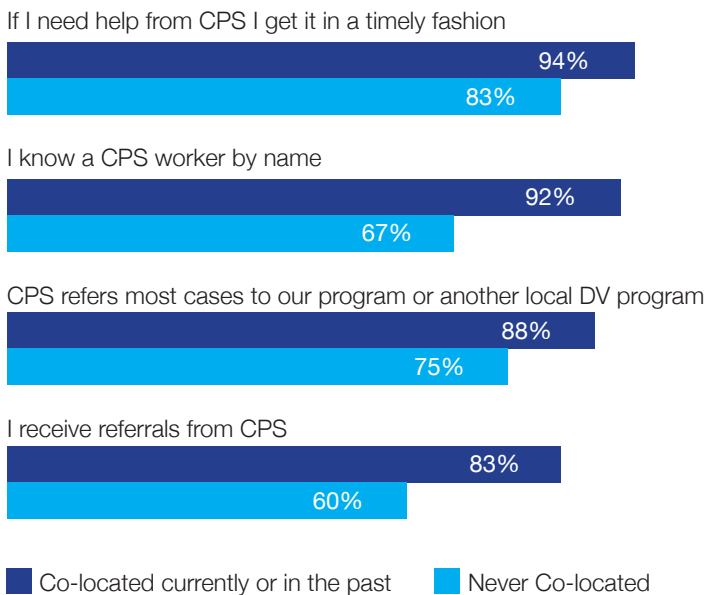
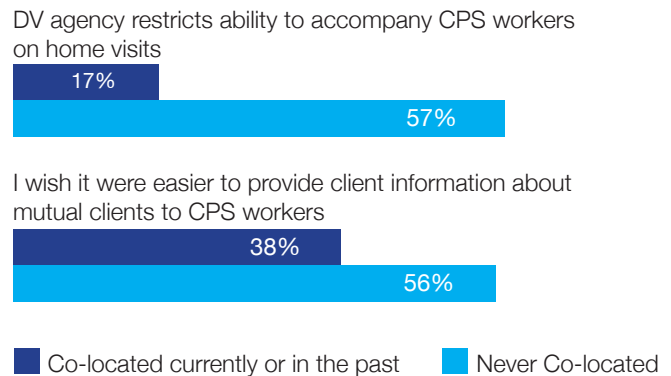


Figure 3

ORGANIZATIONAL CONSTRAINTS



Summary and Conclusions

KNOWLEDGE AND ATTITUDES

DV Advocates who had been co-located were significantly more likely than other DV Advocates to report a good understanding of what CPS can (and cannot) do (88% vs. 71%) and know enough about the CPS process to help their clients through it (92% vs. 70%). DV Advocates who had been co-located were more likely than other DV Advocates to speak with clients about keeping children safe from an abusive partner (98% vs. 84%), believe that CPS is skillful in helping families with maltreated children (94% vs. 77%), and consider communication with CPS to be a worthwhile use of time (94% vs. 88%) (Figure 4).

DV Advocates who are co-located at CPS offices are significantly more likely to engage in collaborative case practice, such as joint home visits with CPS; to experience better DV-CPS coordination at the agency level; and to feel more knowledgeable about CPS in ways that assist their work with clients. Based upon these findings as well as findings from other study components including interviews with co-located DV Advocates and a similar CPS worker survey, the evidence supports that the experience of working directly with CPS has positive effects on DV Advocates' practice and beliefs.

Figure 4

KNOWLEDGE AND ATTITUDES OF DV ADVOCATES

I talk with my clients about how to keep their children safe when their partner is abusive



I know enough about the CPS process to help my clients through it



I have a good understanding what CPS can and cannot do



Overall, CPS workers are skillful in helping families



I believe communicating with CPS workers is a worthwhile use of my time



■ Co-located currently or in the past ■ Never Co-located

About the Center for Human Services Research

The Center for Human Services Research (CHSR) is a research department within the School of Social Welfare at the University at Albany. CHSR has over 20 years of experience conducting evaluation research, designing information systems and informing program and policy development for a broad range of agencies serving vulnerable populations. CHSR studies cover a wide range of topics including children and family services, education, early childhood development, health behavior and services, youth development, and juvenile justice. Within these areas, studies address such social issues as intimate partner violence, substance abuse, child maltreatment, school readiness, and neighborhood reform. Rigorous research and evaluation methods, strong relationships with project partners, and timely, accurate and objective information are hallmarks of CHSR's work. For more information about CHSR please visit www.albany.edu/chsr

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