

Opening Up Possibilities: Father Engagement Lessons During the COVID-19 Public Health Emergency

The COVID-19 public health emergency unleashed an unparalleled shock on the child welfare system, raising unexpected barriers to delivering services. For teams using a continuous learning method—specifically, a Breakthrough Series Collaborative (BSC)—to engage fathers and paternal relatives in child welfare, the public health emergency also revealed new opportunities. Leveraging elements of the BSC during this time enabled the teams to reconsider how they approach family engagement broadly, including engagement of fathers and paternal relatives.

When the crisis began, child welfare services had to rapidly shift their methods of delivery, leaning heavily on technology and other nontraditional service strategies. Despite the challenges that arose from these shifts, participants in the BSC found that the sudden changes also cleared some obstacles and challenged some assumptions about how services should and could be delivered to fathers. The BSC supported rapid innovation in response to the public health emergency, which could ultimately lead to long-lasting improvement.

This brief is based on the experiences of six child welfare teams participating in the Fathers and Continuous Learning (FCL) in Child Welfare project, both before and during the public health emergency. Their collective experience reveals timely, nuanced insight about how they were supported and positioned through the BSC to adjust their work to confront the unique barriers raised by this unusual time. The BSC also enabled the teams to find opportunities by using and tracking small tests of change that helped them break down their strategies for engaging fathers into manageable steps.

The FCL project

Positive father involvement can improve a child's cognitive, behavioral, and academic outcomes; increase the frequency of visitation; and decrease the reliance on mothers alone to engage in services (Amato and Gilbreth 1999; Greene and Moore 2000; Leon et al. 2016; Pruett et al. 2017). Nevertheless, data from federal Child and Family Service Reviews (CFSRs) indicate that fathers are often not well engaged in services: they are not as involved in case planning as they could be, and they are less likely than mothers to receive accurate needs assessments and appropriate services. Overall, they receive fewer direct contacts from workers than mothers do (JBS International 2019).

The Administration for Children and Families (ACF) recognizes the importance of fathers and paternal relatives and, through the FCL project, is seeking to work toward a culture in the child welfare system that prioritizes engaging fathers and paternal relatives. Mathematica and the University of Denver are conducting this project. FCL aims to test the use of a collaborative, continuous learning methodology (a BSC) that will strengthen fathers' and paternal relatives' engagement with child welfare. The goal is to improve the stability of children's placement situations and reunite more children permanently with their families.

The FCL project began in September 2017, and the BSC was launched in 2019. Starting in August 2019, six teams representing five state or county public child welfare agencies participated in the BSC. These agencies were chosen because they had already demonstrated their dedication to engaging more fathers and paternal relatives, and they had experience with, or openness to, the work involved in continuous learning.

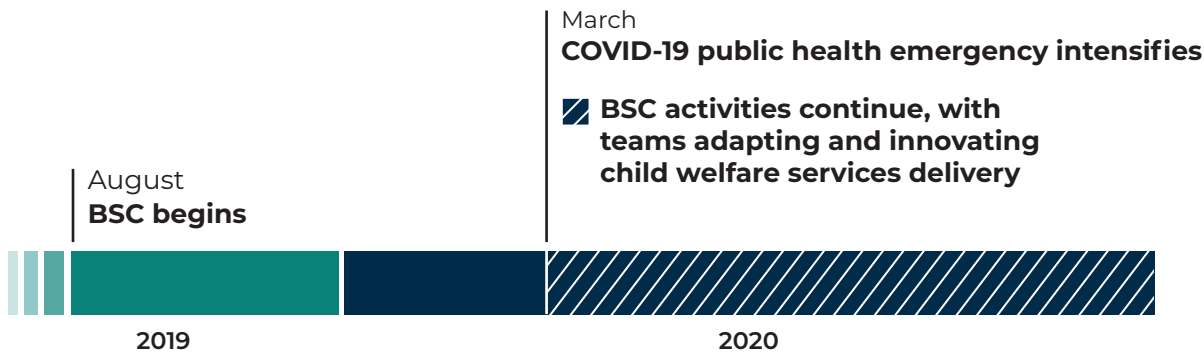
Throughout the project, each team identified, implemented, and studied a unique group of strategies to engage fathers and paternal relatives. This brief presents insights into these teams' experiences participating in a BSC during the COVID-19 public health emergency. These insights were shared in group meetings and virtual site visits from March to June 2020, but the BSC continues until March 2021.

A BSC is a continuous learning methodology developed by the Institute for Healthcare Improvement (IHI). Organizations use the methodology to test and spread promising practices that help them improve in an area of focus (IHI 2003). A key element of a BSC is the Model for Improvement, a collection of strategies teams use to conduct small tests and reinforce continuous learning. Throughout this BSC, each team used Plan-Do-Study-Act (PDSA) cycles, or small tests of change that helped them identify, implement, and study a unique group of strategies to engage fathers and paternal relatives. Teams also developed processes to collect, organize, and report data so they could gauge whether the engagement strategies produced improvements.

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The Institute for Healthcare Improvement describes the Plan-Do-Study-Act cycle as shorthand for testing a change by developing a plan to test the change (Plan), carrying out the test (Do), observing and learning from the consequences (Study), and determining what modifications should be made to the test (Act).

Figure 1. BSC timeline in relation to COVID-19



Challenges

Child welfare system local policies and procedures influence the methods and timing of services provided to families. Policies and procedures are reflected in—and reinforced by—systems and structures, including training, supervision, and required paperwork. They can also influence which family members are included at important milestones in the life of a case, including investigations, case planning meetings, and ongoing services for children in out-of-home care. For example, searches for fathers and paternal relatives might only be required at the beginning and ending

of a case, missing important opportunities to engage fathers in the life of the case. Supervised visits might be provided during limited times in spaces that are less than family friendly and that discourage frequent, high quality visits. These policies and procedures aim to ensure that staff carry out practices consistently. But if child welfare staff see them as rigid expectations, with no processes in place that allow for improvement efforts, such policies and procedures can also make it difficult to engage fathers and to operate with flexibility and innovation.

When the COVID-19 public health emergency intensified in spring 2020, child welfare authorities were suddenly faced with the challenge of providing key child welfare services in an unprecedented historical moment. Public health guidance shifted rapidly, and many important system partners—like courts, mental health providers, and family programs—closed, shifted to virtual services, or limited access to services. As a consequence of the public health emergency, families faced unemployment, school closures, and social isolation.

When states began ordering lockdowns, and travel was restricted, BSC teams were about seven months into using the BSC methodology to expand and deepen fathers' engagement. As face-to-face engagement became impossible, BSC participants had to find new ways to support fathers and paternal relatives. The shift to other service strategies, particularly using technology in virtual settings, posed new challenges because some participants had no access to high-speed Internet or didn't know how to use online meeting rooms.

Emerging priorities in response to the public health emergency threatened to crowd out work on the BSC. The use of small tests of change on new engagement strategies was slowed down in some cases, and in others stopped altogether. The public health emergency at first led to increasingly complicated schedules and new responsibilities for child welfare administrators, competing for the time they would otherwise have spent on BSC activities. Some teams had to meet less regularly or virtually, and senior staff members and community partners struggled to participate in team meetings. After the initial efforts to respond to the emergency settled down and the "new normal" of their work was established, administrators were able to reengage with BSC activities.

In some cases, financial support for fatherhood programs was reduced or cut altogether. As fathers lost this source of therapeutic, educational, and financial support, agency staff on teams felt pressured to fill the void. In other cases, the innovative ideas teams had about how to engage fathers and paternal relatives more effectively were no longer possible to implement. Teams could not introduce community resources in court sessions that were cancelled or on hold; in-person visits to build relationships and provide fatherhood-focused materials

and products were not allowed; and paternity testing at home or in courts had become impossible.

Benefits of a BSC in responding to a public health emergency

Although the public health emergency's shock to the system brought on new service challenges and derailed some planned innovations in father and paternal relative engagement, teams worked quickly to respond. The collaborative support offered through the BSC, the out-of-the-box thinking the teams were using to develop and implement innovative engagement strategies, and the community relationships they had built through the project all positioned them to respond effectively. The teams also described how the public health emergency itself helped break down some barriers and assumptions about how child welfare services should or might be provided—primarily in how technology could be used and how often they could engage fathers.

“We've had the opportunity to build, in a unique way, an assessment around COVID-19, and some of what we found from the data is...we are able to engage fathers in a much larger way than we were prior to COVID-19.”
—Frontline staff

The teams talked about how supportive and collaborative it was for them to participate in the BSC during this time, both at the team level and across sites. Engaging fathers and paternal relatives is challenging work under normal circumstances, and teams were grateful to have their colleagues' support, ideas, and camaraderie from the beginning. Having their established team and project relationships helped team members weather this difficult time and keep working toward project goals. One team member described participating in the BSC as a “welcome distraction.”

The BSC methodology requires teams to generate ideas rapidly and implement new strategies. Teams were tasked with generating, collecting data on, and adjusting multiple strategies at once. This rapid, out-of-the-box thinking helped teams stay agile during the public health emergency because it showed them how quickly ideas can be turned into action. Although the transformation

was forced on the system, the BSC methodology helped sites navigate the challenges because they were able to quickly collect and use COVID-19-specific data and call on the community partnerships they had built to help them respond to the public health emergency.

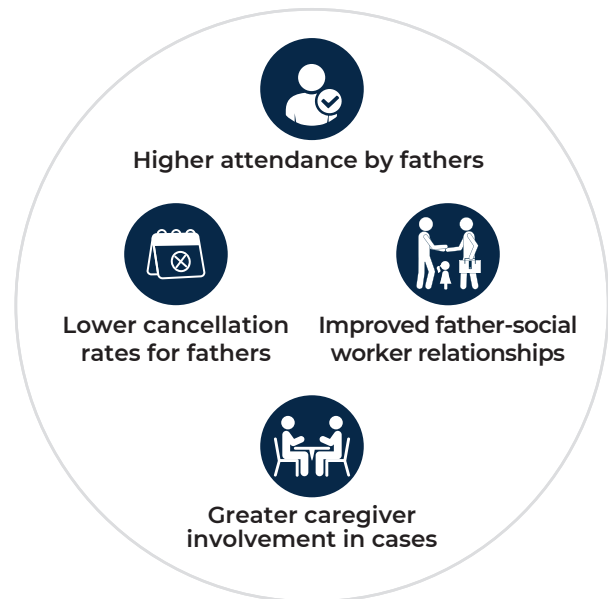
Benefits and improvements

Although the sudden need to deliver services using technology presented challenges to teams, many were able to support the use of technology and adjust their existing strategies to produce some positive results. Throughout the public health emergency, teams have been providing one-on-one support for technology to ensure fathers can stay involved and engaged. For example, one team has used federal Title IV-E waiver funds to buy tablets for families that do not have access to the technology required for virtual meetings. Virtual meetings and classes can reduce common service barriers such as transportation, scheduling conflicts, and child care, and several teams reported higher attendance and lower cancellation rates for sessions held online. Though the project was not designed to measure the effectiveness of the BSC in the context of a pandemic, team members described how beneficial their participation in the BSC was to developing, implementing, and maintaining strategies in response to the public health emergency.

“We immediately switched our fatherhood groups to conference calls, and we found that the fathers were really grateful to continue the connections with the group, and we’ve also noticed a huge increase in participation.”
—Community partner

Many teams also developed ways to adapt existing engagement strategies virtually. For example, using the BSC methodology as part of FCL, one site developed a Father Strong Achievement Award to recognize social workers who were effectively engaging fathers and paternal relatives. Before COVID-19, these workers would be honored at large staff meetings. After the public health emergency, the team used a prerecorded message so staff members could hear how their work has impacted the fathers they work with. This small test

Figure 2. Improvements reported as a result of engagement strategies developed during COVID-19



of change showed the value of building relationships between social workers and fathers and allowed the team to quickly develop a strategy to maintain interconnectedness, even when physically apart.

Engagement innovations implemented by teams were not limited to technology. For example, some teams used creative social distancing strategies to continue in-person visits with fathers and paternal relatives, like bringing lawn chairs to local parks and arranging them at a safe distance apart. Others used more accessible low-tech strategies like weekly telephone calls and text messages to continue their engagement efforts. Teams said they have dedicated more time and energy to increasing the frequency and variety of their methods for checking in with fathers. Teams used the BSC meetings and their continuous efforts to implement these small tests of change to advance father engagement through the public health emergency.

COVID-19 presented unique challenges to the teams that, in combination with continuous BSC efforts to develop and test new strategies, also opened up new and different patterns of father engagement. FCL teams reported that relationships between fathers and social workers improved because they were using multiple and

more frequent engagement strategies, some of which were more approachable than previous methods. As a result of less time spent traveling for in-person meetings and services, child welfare frontline staff now have more availability, and they are communicating with fathers more often and in new ways. There is a general sense that virtual meetings help workers and fathers be more receptive to and less intimidated by each other. Some social workers have noted that virtual contact is easier as a starting point because it allows both parties to interact in a safer, less intimidating space. Fathers have reported positive changes in how they interact with social workers, saying that the social workers are more responsive and more open.

Impact moving forward

Teams plan to continue to use elements of the BSC moving forward, beyond the BSC and the COVID-19 public health emergency. BSC participants found the rapid innovation and learning useful before and throughout the public health emergency. Despite the challenges raised by the competing priorities of this complicated time, the teams saw their participation in BSC as valuable. Participants believed they would continue to use small tests of change over the long term, and that the BSC methodology helped them break large, complicated challenges into more manageable steps.

“ I feel more knowledgeable and educated around this and I can't imagine that would just go away. Knowing that the outcomes are so much better when fathers are involved, I just can't forget that. ”

—Team manager

Teams participating in FCL want and plan to continue to use the technology they have been using during the public health emergency, along with the practices that have stemmed from it. For example, participating staff would like to keep using virtual visitation as one of many possible innovative engagement strategies, even when in-person meetings can happen again. The public health emergency and the use of technology have revealed that it is indeed possible to get a broader range of family members involved in child welfare.

Although some of the adaptations made during the public health emergency have produced positive results, there are also important limitations and nuances to consider. For example, some staff are concerned that fathers will have only virtual visits with their children while mothers maintain face-to-face visits. They hope that virtual visits will instead be used as a supplement to in-person visits, or used when in-person visits are not possible.

Conclusion

Many of the challenges facing child welfare, both long-standing and unexpected, are complex and can easily become overwhelming. The BSC methodology's emphasis on small tests of change, rapid innovation, and collaboration has the potential to break complex problems into manageable steps and provide more forms of support to teams as they work to solve the problems. The same nimble thinking and collegial support that helped BSC teams begin to move the dial on father and paternal relative engagement might also help child welfare respond to complex, unexpected challenges like the COVID-19 public health emergency.

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