

## Inua Ubuntu:

### An Assessment of Program Process, Implementation and Child Welfare Involvement



**PREPARED BY**

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## CONTENTS

Acronyms 1

Introduction 2

Program Design 3

Methodology 4

Data Limitations 6

Data Analysis 6

Conclusion 24

APPENDIX A: Service Activity Description Mapping 25

APPENDIX B: Focus Group Questions 26

APPENDIX C: Family Survey 27

## Tables

TABLE 1: Inua Ubuntu Program Group Descriptions 7

TABLE 2: Inua Ubuntu Numbers, Detail by Agency and Year 8

TABLE 3: Referral Allegations by Year for Children Referred to Inua Ubuntu 9

TABLE 4: Child Welfare and Inua Ubuntu Referral Sequence 11

TABLE 5: Service Detail Group 11

TABLE 6: Age Distribution, Children Referred and Service Detail Group 12

TABLE 7: Agency Comparison of Service Hours and Visits\*, Service Detail Group 13

TABLE 8: Agency Comparison of Service Visit Activity, Service Detail Group 14

TABLE 9: Child Welfare and Inua Ubuntu Referral Sequence, All Inua Ubuntu Referrals and Participants 17

TABLE 10: Timing of Home Removal by Inua Ubuntu Service, All Service Recipients 19

**Contents***(continued)***Figures**

**FIGURE 1:** Agency Comparison of Service Hours by Child Age as Service Visit Recipient,  
Service Detail Group 13

**FIGURE 2:** CYF Referral Progression Timeline by Service Decision,  
All Inua Ubuntu Participants 18

**FIGURE 3:** Parent Survey Responses 20

**FIGURE 4:** Parent Survey Responses 21

**FIGURE 5:** Parent Survey Responses 22

**FIGURE 6:** Parent Survey Responses 23

## ACRONYMS

CYF	[DHS] Office of Children, Youth and Families, the county's public office mandated by law to protect children from abuse and neglect and to ensure permanency for children
DHS	[Allegheny County] Department of Human Services
KIDS	Key Information and Demographic System, DHS's electronic child welfare case management application, a web-based application designed to track services and outcomes for children and families involved in the child welfare system

## INTRODUCTION

“The operating premise of Inua Ubuntu is that African American children and families are better served when assessed, counseled and treated by people who look like them, live in their communities and understand the unique cultural needs of African American male children. The goal of Inua Ubuntu is to provide culturally-based intervention and child protective services aimed at keeping African American male children safely in their own homes with their families and to reduce the rate of African American males requiring home placement.”<sup>1</sup>

<sup>1</sup> Inua Ubuntu: A Community Response to Disproportionality Rates of African American Male Children in Child Welfare, Dr. Marcia Sturdivant, February 2010: <http://www.naaas.org/monograph2010>

The Inua Ubuntu program was implemented by the Allegheny County Department of Human Services (DHS) in 2010, in response to concerns about racial disproportionality in the child welfare system. Specifically, Inua Ubuntu seeks to prevent active child welfare cases and out-of-home placement. The name comes from Swahili and Bantu words meaning “to raise and lift up” and “I am because we are,” and the program is based on an African-centric concept of family and community; i.e., the Inua Ubuntu staff surrounds the family, and the community surrounds that partnership, with a continuum of supports necessary to help the family meet its goals and establish healthy habits that will prevent the need for formal child welfare involvement. Inua Ubuntu is driven by the theory that services are most effective when they are delivered by someone who lives in the family’s community and understands its culture.

With cultural insight as a foundation, the following four guiding principles were developed to achieve the goals of Inua Ubuntu:

- Open communication with child and family
- Implementation of strategies aimed at preventing child maltreatment, preserving families and promoting permanency for children
- A pledge to respect and embrace African people and culture
- Community partnerships developed from the perspective of family strength and choice

**Program Evaluation Objectives:** Given the non-traditional nature of the Inua Ubuntu model, and the importance of the issues it seeks to address, DHS was interested in carefully evaluating its impact, identifying its strengths, and addressing areas in which improvement might be warranted. The program was assessed in two ways:

- 1) A former journalist was engaged to chronicle program implementation and highlight the stories of families and staff engaged in Inua Ubuntu. The information gathered as a result is incorporated throughout this report.
- 2) An evaluation designed to integrate diverse sources of data, insight and expertise by utilizing a mixed method strategy of a) focus groups with families, staff and caseworkers; b) examination of administrative service data; c) surveys with parents who participated in the program; and d) case record reviews of clients. Findings are intended to inform and guide program decisions for a) effectively meeting the needs of African American male youth and their families, and b) preventing child welfare system involvement.

## PROGRAM DESIGN

Starting in May 2010, DHS contracted with three community-based provider agencies (Center for Family Excellence, Project Destiny and Small Seeds Development) to begin implementation of Inua Ubuntu in three Pittsburgh neighborhoods (Hill District, North Side and East End). The provider agencies, referred to as “villages,” employ community members who are trained to work intensively with families on a variety of goals identified for the purpose of preventing

The experiences of cultural consultants highlight the importance of the initial intervention in creating the intimacy and cultural understanding that is a cornerstone of the program’s philosophy. Not only does trust develop during this time, but many times the cultural consultant is able to interpret the family crisis to child welfare staff in a culturally specific way that renders the problem amenable to solutions far less drastic than removal from the home (e.g., the situation might be fueled by generational misunderstanding, a lack of proper communication, child welfare system bias, or lack of cultural understanding, all of which can be addressed within the context of family services).

formal child welfare involvement and out-of-home placement for the youth; these staff are called cultural consultants. An additional partner in the service model is a local child welfare group home provider, Mel Blount Youth Home of Pennsylvania. This partnership with the Mel Blount Youth Home was designed to allow families a period of “respite” when necessary, by providing children a temporary place to live while the home environment settled.

The goal is to address issues before they reach the level of requiring an active open case with child welfare by engaging the youth and family in ways that are culturally competent and non-traditional. When a call is received by DHS’s Office of Children, Youth and Families (CYF) about an African American male child who resides in one of these neighborhoods, the call is directed to one of a group of caseworkers

specially trained and assigned to CYF’s Inua Ubuntu unit.<sup>2</sup> The initial assessment visit with the family is then conducted jointly by a caseworker from that unit and a cultural consultant from the nearest village. At that time, the family is introduced to Inua Ubuntu and the services and supports associated with it, and the family decides if they want to participate. Because the youth is not formally involved in the child welfare system during this period of time, the cultural consultants are able to work in more collaborative and flexible ways than might be permitted

<sup>2</sup> See Table 4 for a breakdown of the reasons for calls; in cases where the child is determined to be in danger, immediate action is taken by CYF to mitigate that danger.

within the structured service system. Inua Ubuntu services are intended to last for the duration of the time it takes CYF to complete the investigation phase that usually follows a child welfare call, which can be up to 60 days.

If the family selects Inua Ubuntu participation, the family and child are introduced to the cultural consultant, who commits to consistent contact with the youth, making connections with community resources and helping to build more healthy family relationships. The consultant taps into the strong tradition of spirituality in the African American culture and helps to build a network of trustworthy, culturally familiar community supports for the child and his family so that both can thrive for the long term. As the bonds to the community become stronger, so too does the family. Over time, formal involvement with the Inua Ubuntu agency (“village”) lessens and the family moves toward interdependence, taking advantage of the new tools and connections made during the Inua Ubuntu process. For very young boys, efforts and support are primarily focused on the caregiver, addressing the family’s needs and goals in relation to the identified child. For older male youth, the cultural consultant engages the child directly through conversation and activities, always ensuring that the parents are also part of the process.

## METHODOLOGY

The goal of this evaluation is to assess the service process, experiences, strengths and challenges of the families and staff involved in Inua Ubuntu. The evaluation strategy, as well as the details of data collection, was designed in collaboration with the three participating villages, through a workgroup formed in July of 2012. Workgroup representation was diverse in terms of age, ethnicity, professional role, geographic region and stakeholder representation (e.g., provider agency, DHS). The workgroup provided extensive information about program implementation and developed focus group and survey questions; provider agency representatives served as liaisons to staff and families for focus group engagement. Additionally, the villages provided meals and childcare for families attending the focus groups, which were held in the evening in each village’s community to allow for as much family participation as possible. There are two Family Interviewers on staff at DHS who served on the workgroup, participated heavily in project development, and provided a bridge between families and evaluators. In particular, the Family Interviewers conducted all the family focus groups in each of the provider agency neighborhoods. Both individuals are parents of children who have been involved with the human services system; they contributed firsthand system experience and culturally relevant knowledge and language to data collection design and implementation.

This evaluation encompasses two major bodies of qualitative and quantitative data: focus groups and service episode details. Supplemental information and evaluator impressions about the services, agencies and family experiences were gathered from village record reviews (n = 29 cases) and a family survey. Additional focus groups were conducted with agency staff (24 participants) and caseworkers (three participants). Data collection (record reviews, focus groups and surveys) occurred from August 2012 through March 2013. It is important to note



here that, despite best efforts by both the provider agencies and DHS staff, participation in both data collection strategies with families was quite low: Only 15 family members in total participated in the focus groups (approximately 15 percent of the families targeted) and 29 family members responded to the mailed survey (26 percent of surveys to valid addresses). Additional details regarding the data sources and collection tools can be found in Appendices B and C.

Administrative data for the time period May 2010 through August 2011 only provided information on the individuals who were referred to Inua Ubuntu, without individual service contact details. However, from September 2011 through December 15, 2012, data on all aspects of the Inua Ubuntu service events are available. Availability of the more extensive data corresponds to ongoing improvements to the Key Information and Demographic System (KIDS), DHS's electronic child welfare case management application, which enables the provider agencies to enter data; this capability became available to Inua Ubuntu providers beginning in August 2011. Additional details regarding the data sources and collection tools can be found in Appendix A on page 25.

Portions of the evaluation cover the time period from May 2010 through December 2012, while other elements focus on records from late 2011 through 2012, when data is more complete. Prior to the implementation of the formal data collection system, from early 2010 through July 2011, two of the three Inua Ubuntu provider agencies<sup>3</sup> report serving 233 families inclusive of 469 children. In August 2011, the data collection system was coordinated with that of the CYF; from that time through December 2012, the program served an additional 322 children.<sup>4</sup>

Later in this report, quantitative process analyses focus only on "Service Recipients," defined as the individuals who received Inua Ubuntu services and had a complete service log in KIDS. Administrative data detail for individual service visits were available for 322 individuals for the time period of October 2010 through December 15, 2012. It should be noted, however, that there is a group of children whose records suggest that the first Inua Ubuntu service date is significantly delayed from the referral and Inua Ubuntu start date. This is coincident with the time period of data system development and is likely reflective of data entry of service detail beginning in the middle of the service episode. For that reason, many of the following tables represent a smaller group of individuals delineated by referral and service start dates, creating a subgroup where there is a higher level of confidence that the service detail records include all service contacts for that child and referral.<sup>5</sup> The inclusion of all 2012 referrals and service records reflects the assumption that all agencies were consistently entering service data into the system and that observed gaps are truly reflective of the process with each family. This selection of a subgroup resulted in 308 service episode records for analysis, referred to as "Service Detail Group" hereafter and noted in the analysis when used (see Table 5, page 11).

<sup>3</sup> Project Destiny, Center for Family Excellence and Small Seeds Development, Inc.

<sup>4</sup> While the program was designed to serve only boys and young men, this number includes 10 young women who also received the service.

<sup>5</sup> This subgroup includes:  
1) records that exhibit a gap no greater than two weeks from Inua "Start Date" (date the referral is made to an Inua Ubuntu agency) and the date of the first service visit; 2) any Start Date in 2012 regardless of the delay between dates (only three 2012 referrals had a gap greater than 2 weeks — the largest gap was 35 days between start date and first service).

## DATA LIMITATIONS

There are limitations to be considered when viewing the administrative data in total.

In August 2011, in an effort to create a more comprehensive administrative record of the program since implementation, paper records of prior Inua Ubuntu referrals were entered into the data system. However, from these records, it is not possible to distinguish between referrals and service recipients; given this uncertainty, records prior to 2012 are categorized as referrals.<sup>6</sup> Additionally, only individuals with a service detail log are defined here as actual service recipients; this number will thus clearly not represent all children, youth and families who received this service, but only those with a full electronic record.

<sup>6</sup> MISSING

As stated earlier, provider agency records shared with DHS suggest that several hundred families and children were served in the first 15 months of program implementation. There is not a clear demarcation between the provider agency-reported numbers and those records available in the administrative system (KIDS), so when agency numbers and KIDS data is taken in sum, there may be families and children represented in both counts.

Analyses described throughout the remainder of this report focus only on KIDS data available, and may under-represent the full group of participating families and children.

## DATA ANALYSIS

The analysis below generally follows the same sequence that a family experiences when progressing through child welfare and the service delivery process — starting with child welfare referral to Inua Ubuntu services through service contacts, to the CYF decision to open an active case or close the investigation.

### Referrals and Service Recipients

**Table 1** outlines aggregate numbers available in the administrative data system (KIDS) for the Inua Ubuntu program since May 2010. This table illustrates different ways to group the data and resultant counts. It is important to establish definitions around these numbers to ensure analysis clarity. In total, administrative data (KIDS) show that 545 unique individuals were referred to Inua Ubuntu. Thirty-two children were referred multiple times, and 16 (50 percent of multiple referrals) actually received Inua Ubuntu service multiple times. The use of the term “Referral Event” reflects the fact that a child may experience several distinct referrals to child welfare. Service Episodes are defined as a service start and end date (or the last service contact date available in the data file) and service contacts associated with that child. Since a child can be referred to and experience Inua Ubuntu services multiple times, a count of Service Episodes will include a duplicated count of children.

TABLE 1: Inua Ubuntu Program Group Descriptions

GROUP DESCRIPTION	COUNT	DEFINITION
REFERRALS TO INUA UBUNTU	Events	581 Each child in conjunction with his child welfare referral event is counted; children are duplicated
	Children	545 Each unique child is counted; children can be referred to the program multiple times
SERVICE RECIPIENT	Episodes	342 Each child with any service record detail at each Inua Ubuntu service start date is counted; children are duplicated
	Children	322 Each unique child with any service record detail is counted
SERVICE DETAIL ANALYSIS	Episodes	308 Episodes of service participation; children are duplicated
	Children	285 Each unique child with a <i>complete</i> service detail log of individual service visits is counted

**Table 2** provides the number of referrals and individuals served in greater detail. Counts shown for 2010 and 2011 are artificially low because the data system was not available for tracking and, though there were efforts to “back fill” the data, it is likely that not all referrals and participants are represented. Subsequent analyses focus on referrals and service recipients for late 2011 through 2012 to ensure inclusion of only complete records (Service Detail Group). To provide a frame of reference, a recent internal analysis of all CYF referrals for July through December 2012 demonstrates that there were 1,429 children eligible for the Inua Ubuntu service, as male African American youth with a referral that progressed to child welfare investigation. Of that group, approximately six percent were referred to Inua Ubuntu.

**TABLE 2: Inua Ubuntu Numbers, Detail by Agency and Year**

	2010	2011	2012	TOTAL	2012 CALCULATIONS
					REFERRAL DISTRIBUTION
<b>Referrals to Inua Ubuntu</b>	<b>115*</b>	<b>254*</b>	<b>212</b>	<b>581</b>	<b>100%</b>
Agency A	21	49	31	101	15%
Agency B	27	51	57	135	27%
Agency C	67	154	124	345	58%
					PARTICIPATION RATE
<b>Service Recipients<sup>^</sup></b>	<b>10</b>	<b>168</b>	<b>164</b>	<b>342</b>	<b>77%</b>
Agency A	4	21	13	38	42%
Agency B	1	38	47	86	82%
Agency C	5	109	104	218	84%

*\*Likely does not reflect the full number of referrals since the data system was not available to providers until August 2011, and efforts to back-enter data focused on those who actually received the service.*

*<sup>^</sup>Service detail record exists; counts shown by service episode start date, which may be earlier than when data entry began.*

More than half of all Inua Ubuntu service referrals have been directed to Agency C, and both Agency B and C engage about every eight in 10 families to participate in services. Agency A has less than half the participation rate of the other agencies. CYF caseworkers reported that this agency in particular has had challenges related to cultural consultant staffing that restricts their ability to accompany caseworkers on the initial visit to a family to introduce the Inua Ubuntu program. From the caseworker perspective, this unavailability is a significant limitation in provider capacity, because without having the opportunity to interact with the cultural consultant, the family often refuses to participate.

**Table 3** below illustrates the referral reasons reported to CYF at the time of the referral call that led to a referral for Inua Ubuntu services. Any CYF referral reason categories that totaled five percent or more of all Inua Ubuntu referrals are shown. In focus groups, cultural consultants reported that some of the most common reasons that they worked with families included housing issues (availability) and the child's truancy from school. Caseworkers also noted that truancy was a frequent referral reason. Families who attended the focus groups and responded to the survey detailed a wide range of reasons for their CYF referral and involvement in Inua Ubuntu, including drug and alcohol use, sibling sexual abuse, truancy, death of a relative, and parent/child conflict. Data confirms the accuracy of the information from various sources. The most frequent reasons cited in electronic records were Inadequate Care (including Inadequate Clothing, Food or Physical Care) and Caregiver Substance Use/Abuse. There were no notable differences in referral reason distribution between those referred to Inua Ubuntu and those who agreed to participate in the program/received services.

Also included in **Table 3** for comparison purposes are the total number of all child welfare referral reasons for 2011 and 2012 (each child welfare referral may have multiple "reasons for referral"). Calculations show that Inua Ubuntu received a representative sample of the child welfare referral reasons for nearly all reason categories. However, the rate of referrals with a Dependency Petition reason sent to Inua Ubuntu is striking; eight percent of all Inua Ubuntu referrals include a Dependency Petition referral reason, while this reason represents only one percent of all CYF referrals.

**TABLE 3: Referral Allegations by Year for Children Referred to Inua Ubuntu**

REFERRAL REASON	2010	2011	2012	TOTAL INUA UBUNTU REFERRALS	ALL CYF 2011 AND 2012 REFERRALS
<b>All Referral Reasons</b>	<b>185</b>	<b>350</b>	<b>267</b>	<b>802</b>	<b>7,7043</b>
Inadequate Care	34	72	48	154 (19%)	19,759 (26%)
Caregiver Substance Use/Abuse	32	50	40	122 (15%)	12,699 (16%)
Housing	21	39	24	84 (10%)	8,180 (11%)
Truancy	22	38	23	83 (10%)	10,850 (14%)
Neglect	11	44	20	75 (9%)	8,604 (11%)
Physical Injuries	9	32	32	73 (9%)	6,695 (9%)
Dependency Petition	18	19	25	62 (8%)	977 (1%)
Domestic Violence	11	17	15	43 (5%)	3,854 (5%)

Caseworkers noted that CYF's capacity to serve families with Inua Ubuntu is limited by several vacant Inua Ubuntu caseworker positions and commented that there are additional implementation issues regarding appropriate referrals and eligibility. They reported that they have received Inua Ubuntu referrals for families who had already agreed to drug and alcohol services, which would ordinarily result in an open child welfare case and therefore make them ineligible for Inua Ubuntu services. There is also a perception that referrals to the Inua Ubuntu unit fluctuate according to

inconsistent levels of focus on the program at any given time, rather than when eligible calls come in. Inua Ubuntu caseworkers also reported high caseload numbers, exacerbated by families with court activity, requiring significant additional casework time. The high incidence of families with pending Dependency Petitions (**Table 3**) referred to Inua Ubuntu supports the disproportionate court activity reported by the caseworkers.

Review of caseloads in both May and July 2013 shows that the average caseload for the three Inua Ubuntu caseworkers is 23 families and 62 children. For other caseworkers (with five or more cases) from the same Intake office at the same time points, the average caseload is 10 families and 24 children. To bring Inua Ubuntu caseload numbers in line with other Intake units would require two additional caseworkers.

### Child Welfare Timing

Child welfare referral records from 2008 through March 2013 were reviewed to understand when children were referred to Inua Ubuntu services in their child welfare referral history (**Table 4**). Timing of the service referrals is an important topic to be highlighted in this broad overview of program data, but a more detailed analysis focused on these data elements is addressed beginning on page 13, which includes implementation issues and questions raised by these numbers.

- 56 percent of referrals to the Inua Ubuntu service occurred on the first child welfare referral call, and 44 percent occurred on the second or subsequent child welfare referral
- For those children who had multiple referrals to Inua Ubuntu (n = 36):
  - referrals most often occurred with the first and second child welfare referral event
  - 28 percent (n = 10) received Inua Ubuntu services as a result of their first or second child welfare referral call
  - 44 percent (n = 16) of children who were referred multiple times went on to receive the service at each referral time

TABLE 4: Child Welfare and Inua Ubuntu Referral Sequence

CHILD WELFARE REFERRAL SEQUENCE	REFERRED TO INUA UBUNTU* (N = 581)	% OF REFERRALS WITH AN EXISTING OPEN CASE*	% RECEIVED INUA UBUNTU SERVICE FROM REFERRAL EVENT*	% OF SERVICE EPISODES RESULTING IN AN OPEN CASE*
First^	56% (n = 327)	4% (n = 12)	55% (n = 182)	52% (n = 94)
Second	25% (n = 143)	5% (n = 7)	63% (n = 92)	54% (n = 49)
Third	11% (n = 63)	0%	60% (n = 38)	59% (n = 22)
Fourth	4% (n = 22)	4% (n = 1)	50% (n = 12)	55% (n = 6)
Fifth	2% (n = 15)	13% (n = 2)	66% (n = 10)	60% (n = 6)
Sixth or more	2% (n = 11)	0%	73% (n = 8)	100% (n = 8)

\*Duplicated across referral sequence, so a child will be counted at each referral sequence time point at which he was referred to Inua Ubuntu services.

^“First” in the history of KIDS data system, beginning August 2008.

### Process Evaluation: Inua Ubuntu Services and Activities

The Service Detail Group, as described in the Methodology section (page 4), is the focus of the following process analyses. This group was selected for evaluation of implementation of the Inua Ubuntu model because they best represent a child’s/family’s full experience of the service, from referral to CYF and Inua Ubuntu through the involvement of the cultural consultant, but not necessarily service closure (because of data file cut-off). Many of these records also reflect a child’s complete Inua Ubuntu experience, meaning the “close” of that service, which should be coincident with the CYF service decision (e.g., the opening of a child welfare case, or no child welfare involvement warranted). **Table 5** outlines the distribution across agencies of the number of service episodes and unique individuals reflected in this group. Service Episode is defined as a service start and end date (or the last service contact date available in the data file) and service contacts associated with a child. Since a child can be referred to and experience Inua Ubuntu services multiple times, a count of Service Episodes will include a duplicated count of children.

TABLE 5: Service Detail Group

AGENCY	NUMBER OF SERVICE EPISODES*	UNIQUE INDIVIDUALS
Agency A	20	19
Agency B	83	77
Agency C	205	189
<b>Total</b>	<b>308</b>	<b>285</b>

\*Children may be duplicated.

Families were referred to Inua Ubuntu services, on average, six days after the child welfare call. For the Service Detail Group, the first date of service most often occurred the same day as the referral to Inua Ubuntu. Half of families referred experienced their first Inua Ubuntu service within five days, and 75 percent received their first service within ten days. On average, each client had contact with a cultural consultant every two to three days, excluding unsuccessful contact attempts.

The average referral age to Inua Ubuntu was nine years old, and the most common referral age group was infants less than one year old. For those with confirmed participation in the program (Service Detail Group), the children's average and median age was seven years old, with the largest age category of children served less than one year old. **Table 6** illustrates the distribution across agencies. Agency A served very young children, and Agencies B and C had mostly equal distributions across age groups.

TABLE 6: Age Distribution, Children Referred and Service Detail Group

	AGENCY A	AGENCY B	AGENCY C
Average Child Referral Age	8 years	8 years	9 years
SERVICE PARTICIPANTS, SERVICE DETAIL GROUP			
Average Child Age	6 years	8 years	7 years
Median <sup>7</sup> Child Age	4 years	8 years	7 years
0 to 5 years	57%	37%	35%
6 to 12 years	32%	30%	36%
13 to 17 years	11%	32%	30%

<sup>7</sup> Median is the middle number in a sequence of numbers, i.e., half of the observances/cases are less than this number and half are greater than this number.

In order to more completely understand the impact of the program on child and family outcomes, it is essential to establish whether there were any differences in implementation of the model among providers.

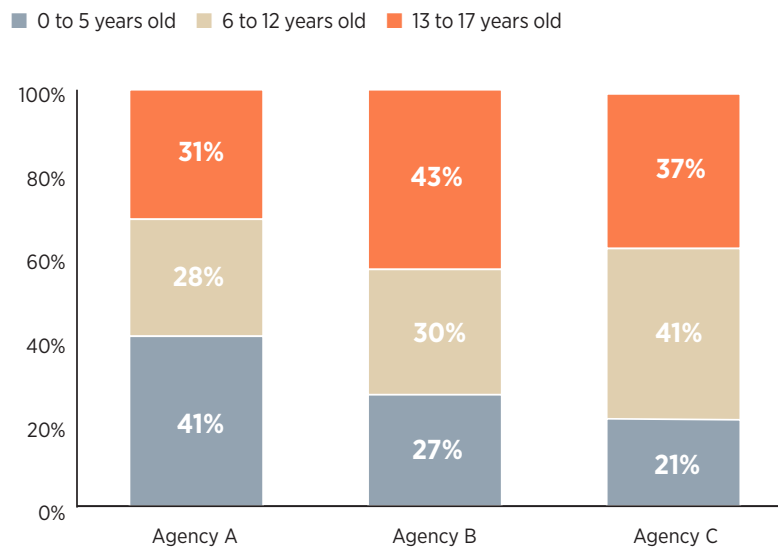
As shown in **Tables 7 and 8**, there are differences in dosage (service hours and visits per child/family) and service array/implementation by provider for the Service Detail Group. **Table 7** data shows a wide spread in both service intensity (number of hours) and frequency (number of visits), with Agency B offering nearly four times more service and visits than Agency A. Additional implementation differences reflected in **Table 7** suggest a real contrast in who is receiving services (service recipient is identified for every service contact and should reflect the targeted individual for that interaction). At Agency C, service hours are comparable between the child and the parent. Agency A, although it serves a large infant/young child population (**Table 6**) and would be expected to have more involvement with the parent(s), focuses the majority of service hours on the child. Additional detail provided by **Figure 1** shows that Agency A does spend a larger proportion of time focused on the youngest children as the service recipient.



**TABLE 7: Agency Comparison of Service Hours and Visits\*, Service Detail Group**

	AGENCY A N = 20	AGENCY B N = 83	AGENCY C N = 205
<b>SERVICE HOURS PER CHILD/FAMILY</b>			
Average	17	63	47
Median	13	38	30
<b>SERVICE VISITS PER CHILD/FAMILY</b>			
Average	12	54	31
Median	11	32	21
<b>PERCENTAGE SERVICE HOURS BY RECIPIENT</b>			
Percentage service hours by recipient: Child	64%	37%	51%
Percentage service hours by recipient: Mother	18%	55%	43%
Percentage service hours by recipient: Father	3%	7%	4%
Percentage service hours by recipient: Sibling	14%	0%	1%

\*Excluding attempts.

**FIGURE 1: Agency Comparison of Service Hours by Child Age as Service Visit Recipient, Service Detail Group**

A review of provider records offered additional information that supports the variability in implementation among villages that was reflected in the administrative data. The comprehensiveness of records for Agency B in particular, including documentation from other service systems such as schools and physical health, appears to be in direct correlation with the hours of service per client reflected in the data from KIDS. This could reflect additional implementation variability between agencies, i.e., more detail in agency records may be correlated with service quality, family engagement, or child and family outcomes.

Although there were overall age differences in children/youth served by each agency, as shown in **Table 6** above, **Table 8** shows that there is some variability in specific service activities between agencies. Only categories with three percent or greater interagency variability are shown in the table. In particular, Agency C has a high rate of recording Travel (staff travel without families) and Service Linkages in comparison with Agencies A and B. Conversely, Agencies A and B spend more time on Contacts than Agency C. Additionally, none of the categories excluded from this table totaled more than two percent of all the activities recorded. Other activity groupings included Meeting, Case Management, School Visit, Transportation (transporting a family), Court, and CYF Meeting. Additional analysis by child age group shows that Contacts were more frequent for youth aged five and below, and School Visits were non-existent for the youngest children but reflected in very low percentages for the older age groups.

**TABLE 8: Agency Comparison of Service Visit Activity, Service Detail Group**

	AGENCY A	AGENCY B	AGENCY C	TOTAL AVERAGE
<i>Activities noted below reflect any interagency spread of 3% or greater</i>				
Percentage of service activity — Contacts*	81%	85%	76%	<b>79%</b>
Percentage of service activity — Travel*	0%	0%	9%	<b>6%</b>
Percentage of service activity — Service Linkages*	2%	4%	8%	<b>6%</b>
Percentage of service activity — Group Activity*	3%	0%	0%	<b>0%</b>

*\*Services grouped by prominent activity noted in event description; further details included in appendix.*

The differences shown in the data tables above are an indicator of some variability in program implementation in service hours, frequency of visits, types of activities, and service recipients. These observations advocate for a more focused look at both the practice level and child and family outcomes for interagency differences. Deeper investigation of these elements, however, is somewhat limited: The extent of administrative data related to process has been discussed here. Additional data related to a child and family's outcome is available, but differences between agencies cannot be explored with any statistical confidence due to the small numbers.

Although variability in service hours and activity descriptions can be seen in the administrative data across provider agencies, focus group themes from family members were consistent. Individual family experience varied by interactions with their specific cultural consultant, but

overall, caregivers agreed that the cultural consultants provided important supports for the family and the children. Caregivers reported that the cultural consultant often functioned as a guide, helping individuals navigate service systems (e.g., courts, housing assistance, school) and providing connections to appropriate service providers (e.g., mental health counseling, parenting classes). At times, the support took the form of concrete assistance, such as membership dues to local community organizations (e.g., YMCA, Kingsley Center) or provision of necessary goods such as clothing or furniture. Cultural consultants also provided caregivers with assistance and mentoring in life skills areas such as organization, time management, family communication and decision making. In one example shared by a cultural consultant, a parent of a child with an autism diagnosis was linked to another family in her community who was able to share caregiving responsibilities for her special-needs child, enabling her to be employed and provide for the rest of her family. One caregiver reported that she struggled with the conflict of wanting to improve her family's life with the knowledge that when she achieved those goals, her cultural consultant — and related support — would disappear.

Caregivers did not provide concrete details about the activities and support received by their male children, although there were plentiful comments about positive changes observed in their children. Consequently, specific information about the work with the boys and young men came directly from the cultural consultants. Some cultural consultants spoke of serving a mentoring role, sharing their own experiences of growing up in the neighborhood or providing a caring outside perspective on the child's family and home life. Illustrating the difficulty in finding appropriate activities for the youth, one agency had to create an evening athletic program to provide a safe place for the youth to go and interact with other youth. This supports the record review finding that, rather than utilizing existing community resources, families were heavily referred to internal programming organized by the provider agencies.

In some domains of need, cultural consultants reported a scarcity of neighborhood services or resources. Housing was identified as an issue in 11 percent of referrals, and presented a unique set of challenges. For example, a caregiver's personal history or a child's involvement with law enforcement often resulted in ineligibility for public housing. Even when a family was eligible for housing supports, there was simply not enough affordable housing available to meet the demand. Accessing resources through CYF, such as concrete goods, was also identified as a challenge. Likewise, the Inua Ubuntu unit caseworkers reported examples of cultural consultants providing families with inaccurate information about CYF's role and responsibilities, such as needing to visit and approve of a family's new apartment before they could move in. This would indicate that further training is necessary to clarify realistic expectations of CYF and to help agencies identify other avenues of available support.

Concerns were also identified in regard to the cultural consultants' sometimes-conflicting roles as advocate for the family and representative of a child welfare-contracted agency. In particular, it was noted that, in some cases, caseworkers were concerned that cultural consultants did not reveal important information to the caseworker regarding family progress and safety. This also

suggests the need for improved training and support for the cultural consultants, as they might see their communication with CYF as conflicting with the desires of the family with whom they are focused on establishing a relationship.

During all the discussions with families and cultural consultant staff, there did not appear to be a strong connection with the Mel Blount Youth Home for temporary respite care. Cultural consultant staff spoke minimally of taking groups of youth to the home for weekend day trips, but the intended service of respite out-of-home care was not evident. Investigation of service records and discussions with the Inua Ubuntu caseworkers and other CYF administrators provided conflicting information. The Youth Home shared internal records that indicated both residential respite care and day/weekend visits for Inua Ubuntu program-involved youth. In total, from July 2011 through December 2012, the Youth Home reported serving approximately 103 Inua Ubuntu youth through their programs.

It should be noted that the rich detail of family experiences and staff perspectives available from Inua Ubuntu staff was only captured through focus groups and surveys, and is not evident in the existing administrative data. For a program with more fluid family-staff activities and reliance on connections to local resources, administrative data fall short of providing a comprehensive view of services and experiences. Regular efforts to collect qualitative data and family perspective should be incorporated into the standard business process for this and similar services or programs.

### Child Welfare Involvement

For the purposes of this analysis, it was pertinent to include a brief examination of child welfare involvement for children who had any service record detail (service episodes,  $n = 342$ ).

**Table 9** again outlines a child's CYF referral history (e.g., a first referral to CYF, through six or more referrals; records from 2008 to December 2012) and indicates at which of these CYF referral points children are receiving connections to Inua Ubuntu. Additional data in the table reflect children who had an open case at the time of Inua Ubuntu referral (contrary to the service model), individuals who actually received the service, and, finally, the instances of service receipt that had an open case as the next event.

- Over half of the referrals to Inua Ubuntu occur at a child's first child welfare referral call, while another quarter are connected to Inua Ubuntu at their second child welfare referral.

Referral to Inua Ubuntu services at a child's first child welfare referral conforms to the intended model to prevent child welfare involvement. Subsequent child welfare referrals do not conclusively indicate prior active involvement, so the premise of preventing an active case may still be relevant.

- Six percent of referrals to Inua Ubuntu occurred during an active CYF case, which is contradictory to the service model.
- Overall, 58 percent of referrals to Inua Ubuntu result in receipt of cultural consultant services, and 55 percent of service episodes end in an open child welfare case.

The incidence of an open CYF case outcome connected to Inua Ubuntu service episodes increases steadily from a low of 52 percent for services associated with a child's first CYF referral to 100 percent of those receiving Inua Ubuntu services at their sixth or greater CYF referral.

**TABLE 9: Child Welfare and Inua Ubuntu Referral Sequence, All Inua Ubuntu Referrals and Participants**

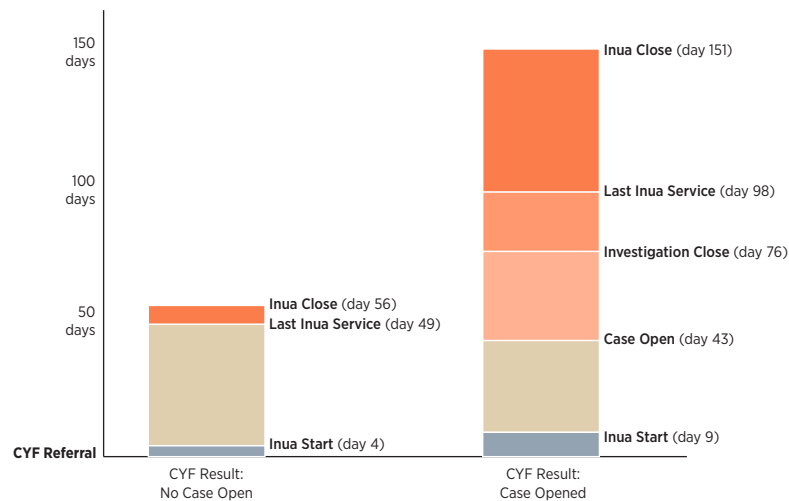
CHILD WELFARE REFERRAL SEQUENCE	REFERRED TO INUA UBUNTU* (N = 581)	% OF REFERRALS WITH AN EXISTING OPEN CASE*	% RECEIVED INUA UBUNTU SERVICE FROM REFERRAL EVENT*	% OF SERVICE EPISODES RESULTING IN AN OPEN CASE*
First^	56% (n = 327)	4% (n = 12)	55% (n = 182)	52% (n = 94)
Second	25% (n = 143)	5% (n = 7)	63% (n = 92)	54% (n = 49)
Third	11% (n = 63)	0%	60% (n = 38)	59% (n = 22)
Fourth	4% (n = 22)	4% (n = 1)	50% (n = 12)	55% (n = 6)
Fifth	2% (n = 15)	13% (n = 2)	66% (n = 10)	60% (n = 6)
Sixth or more	2% (n = 11)	0%	73% (n = 8)	100% (n = 8)
<b>Total</b>	<b>581</b>	<b>6% (n = 22)</b>	<b>58% (n = 337)</b>	<b>55% (n = 185)</b>

\**Duplicated across referral sequence, so a child will be counted at each referral sequence time point that they were referred to Inua Ubuntu services.*

^*"First" in the history of KIDS data system, beginning August 2008.*

The model of Inua Ubuntu services is designed to provide community supports and services to families prior to (and to prevent) the opening of a child welfare case. This is roughly equivalent to the "Investigation" phase of a child welfare referral call, which can last up to 60 days. **Figure 2** provides detail on the timing of CYF and Inua Ubuntu events in relation to a case's investigation phase and service decision.

- Families who had a case opened (investigation indicated that child welfare involvement was warranted) received services for a longer period of time than those families who did not have a case opened: 89 days versus 45 days.
- Families who had a case opened, on average, continued to receive services nearly two months after case open date.

**FIGURE 2: CYF Referral Progression Timeline by Service Decision, All Inua Ubuntu Participants**

**Table 10** illustrates the timing of children's home removal episodes (since 2008) in relation to their receipt of Inua Ubuntu services. Also presented is the average number of service hours they received and average number of days in care. A reasonable expectation of success for Inua Ubuntu, having been built as a home removal prevention service, is that a child will not experience a home removal during service or within a specified time frame after service ends. Home removal experiences after service, therefore, were categorized by the time elapsed from service end.

- Twenty-eight children experienced a home removal that may have been impacted/prevented by Inua Ubuntu services (during or within six months of service end). This represents nine percent of service recipients or 15 percent of service recipients who had a case opened.
- Contrary to the service model, five percent (n = 15) of Inua Ubuntu service recipients were already in placement or were removed at the same time that services started.
- Children who were removed from their homes at the same time as Inua Ubuntu service start received the most service hours of children who had experienced home removal.
- Children who were removed from their homes within 30 days after service end spent on average 100 more days in care than other children who had experienced home removal.

TABLE 10: Timing of Home Removal by Inua Ubuntu Aervice, All Service Recipients

REMOVAL TIMING	COUNT	AVERAGE SERVICE UNITS RECEIVED	AVERAGE # OF DAYS IN CARE
<b>REMOVAL BEFORE INUA UBUNTU SERVICES</b>			
Did not overlap with service	12% (n = 7)	50	30
Did overlap with service	7% (n = 4)	85	62
<b>REMOVAL COINCIDENT WITH INUA UBUNTU SERVICE</b>			
Removal on service start date	19% (n = 11)	135	48
Removal during service	19% (n = 11)	80	101
<b>REMOVAL AFTER INUA UBUNTU SERVICE</b>			
Removal 1-30 days after of end* of service	7% (n = 4)	49	210
Removal 1-6 months after end* of service	22% (n = 13)	84	75
Removal 7+ months after end* of service	15% (n = 9)	54	33

\*Used Inua Close Date; if missing, used Investigation Close Date

Results from focus groups and surveys with families who received Inua Ubuntu services add another dimension to the discussion of outcomes associated with the program.

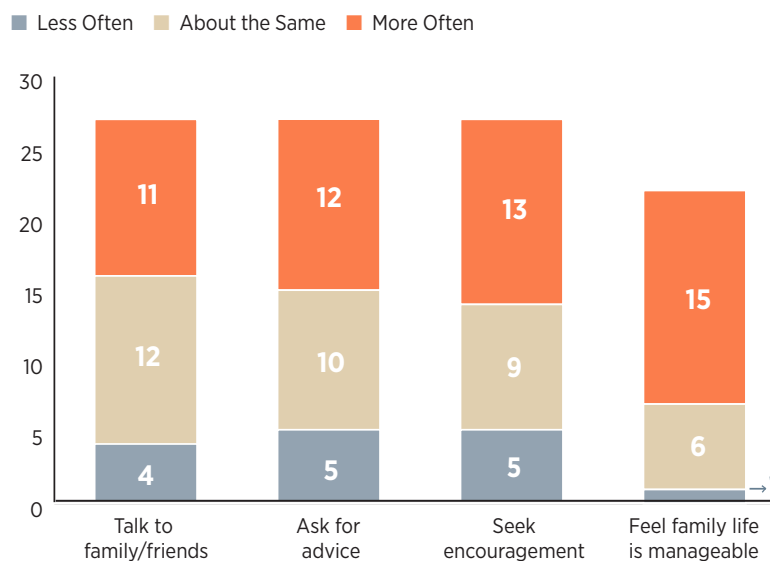
When asked to talk about the outcomes of their participation in the program, families participating in the focus groups shared many experiences and reported on changes that they observed in themselves and their children. Keeping in mind the small participation rate (n = 15), the following statements are drawn from these focus groups:

- Almost universally, caregivers talked about feeling better able to communicate or “more open.”
- Nearly all participants reported less isolation; sharing about the isolation she felt after almost four years of being a Pittsburgh resident, a caregiver said she now knows her neighbors and has an interest in making friends.
- A caregiver learned to take care of herself to be able to provide for her family.
- A mother saw how self-respect resulted in receiving more respect from others .
- A participant revealed her new understanding that she’s not always right and that it’s valuable to listen to her child.
- A parent learned the importance of making time for herself and for fun family activities.
- A caregiver spoke about her struggle with drug use and her belief, prior to her involvement with the Inua Ubuntu program, that she could not overcome her addiction. Since her connection with a cultural consultant and the appropriate services, she has quit using drugs and is pleased with the positive changes that she sees in herself.

Survey results displayed in **Figures 3 and 4** suggest that while many caregivers felt more successful and confident in their own family leadership and parenting skills as a result of their involvement with Inua Ubuntu (**Figure 4**), reliance on family and friends for support and encouragement in times of crisis improved for some respondents, but did not change for a roughly equal group (**Figure 3**). Parenting skills were another area in which progress was reported by caregivers in focus groups, which was mirrored by a parenting item that received the highest score on the survey results. Caregivers also rated themselves highly on feeling more capable to make decisions for the family since their Inua Ubuntu involvement, in turn suggesting that the program strengthens caregivers.

**FIGURE 3: Parent Survey Responses**

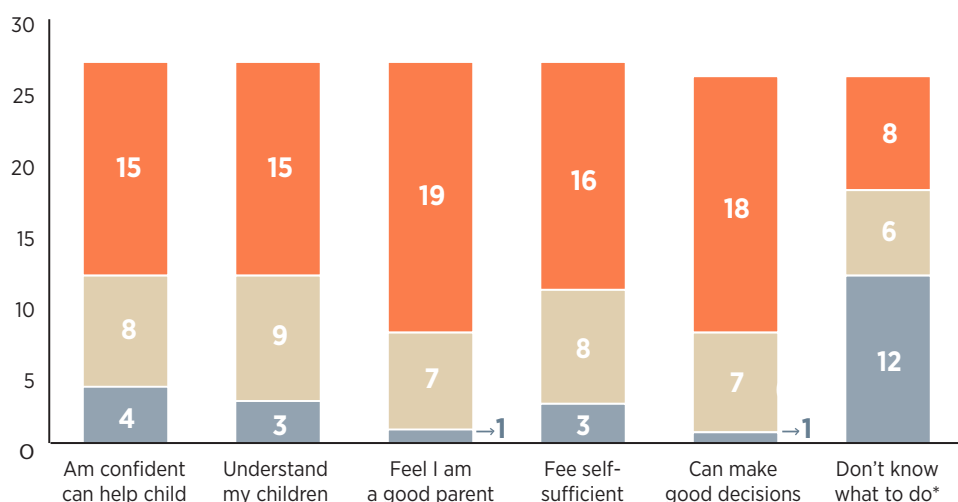
*“Since my involvement with Inua Ubuntu, in times of crisis, I:”*





**FIGURE 4: Parent Survey Responses***“Since my involvement with Inua Ubuntu, I:”*

■ Less Often ■ About the Same ■ More Often

*\*“Less often” is a positive result*

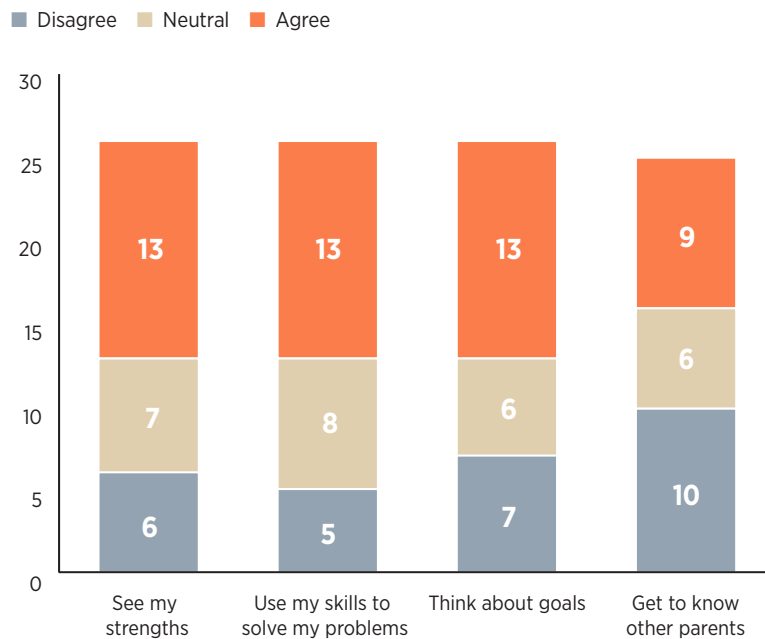
For the boys and young men involved in the program, parents cited numerous improvements in behavior, attitude and overall engagement with the family. Specifically, several caregivers noted their male children being more respectful. One parent said that the cultural consultant helped her son find his identity, while another said that her children became more interested in school and wanted to share what they were learning and doing. One mother reported that her son was working on new ways to express his feelings to her; another talked about how the cultural consultant provided mentoring to her younger sons about being respectful and to her older son about how his good grades could offer him the opportunity to attend college. However, one parent expressed concern that her son still did not understand the gravity of his inappropriate behavior with his sister and that the cultural consultant was not qualified to address her son’s behavior. Another parent felt that the “program” of Inua Ubuntu did not provide anything for her, but that her cultural consultant had been an important support and confidante in recent months. In general, though, parents attending focus groups felt that participation in Inua Ubuntu helped to improve home life, children’s behavior and their outlook on life as caregivers.

From the cultural consultant perspective, significant changes were observed in the families served. A frequent example concerned a parent with mental health issues, who, once engaged in activities outside the home, exhibited increased motivation to accomplish daily tasks, accompanied by less stress, a willingness to share feelings, and healthier parent-child interactions. Overall, cultural consultants report that families are more aware of the things they do and say, and are more likely to appreciate the impact of their behavior on their children. They believe that caregivers have hope, stability, a more positive demeanor and a better outlook on the future.

Survey results for questions about the cultural consultant and their role in the family's Inua Ubuntu experience are reflected in **Figures 5 and 6**. Survey questions were written in partnership with the agencies and were focused on activities and supports that cultural consultants provide.

**FIGURE 5: Parent Survey Responses**

*"My cultural consultant helped me:"*



As the eldest of nine children with no father in the household, the young boy took on the role of man of the house at an early age to support his working single mother. He mostly cared for his younger siblings and completed household chores until his mom got home from her job. Overwhelmed by long hours of responsibility, and with his mother increasingly looking to him as both son and right-hand man, it wasn't long before the young man started longing for the freedom and fun that he felt he was missing.

By the time he was a teenager, he began to rebel, leaving home for days at a time to hang out on the streets or in homes where he was exposed to drugs, drinking and other negative influences. His once-close bond with his mother dissolved in an environment of arguments, ineffective discipline and lost trust.

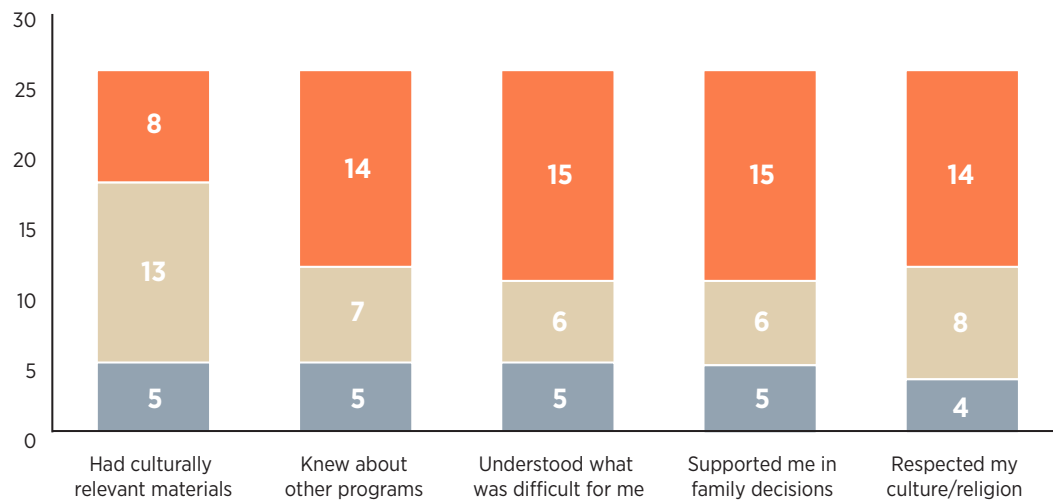
By the time Inua Ubuntu got involved, the missed school days, disregarded curfews and arguments had led to the young man and his mother facing truancy charges, his expulsion from Clayton Academy, his enrollment in a school for disruptive students, and the possibility of child welfare officials removing him from his home.

The young man reports that the referral to Inua Ubuntu, and the relationship he developed with the cultural consultant, changed his life. Days spent on the streets became days spent discussing his future or spending time with his mother and younger siblings. Not only did his school attendance improve, but he also made the honor roll for the first time since the second grade. His recent school progress reports show that he has continued to follow this more positive path.

FIGURE 6: Parent Survey Responses

*"My cultural consultant:"*

■ Disagree ■ Neutral ■ Agree



### Families with Multiple Service Episodes and Child Welfare Involvement

CYF caseworkers and cultural consultants did talk about families that they saw return to the service. However, unless the recurring CYF referrals were accepted for child welfare service, this is not necessarily an indication that the Inua Ubuntu services failed. Administrative records showed that 32 children did receive multiple referrals to Inua Ubuntu, and that 16 of those children received the service two or three times. No real patterns can be identified from such a small number of individuals, but a few observations can provide some context:

- Of the 34 service episodes related to children referred and participating in Inua Ubuntu services multiple times, 44 percent (n = 11 children, 16 service episodes) resulted in a new case or a re-open of an old case.
- Seven referrals with subsequent Inua Ubuntu service participation (representing three individuals) did not have any occurrence of a case opening (21 percent of all multiple referrals).
- Six individuals did not have an open case on their first referral, but did have a case opened on their second referral (38 percent) of children referred multiple times.

In closing, staff and administration from each of the agencies believe that Inua Ubuntu services are successful in keeping a number of families from active child welfare involvement and in maintaining children in their homes. Caseworkers staffing the Inua Ubuntu unit, however, remained neutral and could not comment if families were more successful after Inua Ubuntu services.

## CONCLUSION

An analysis of the qualitative and quantitative data provides some evidence that a culturally sensitive, family-strengthening approach can be successful in building caregiver capacity in parenting and family management confidence and skills. This finding has implications across the continuum of child welfare services, as do the following:

- Linking families to community resources appears to be an effective strategy for maintaining progress.
- Enhanced staff training in the following areas could improve the effectiveness of this type of approach:
  - o DHS/CYF standards of practice, process and policy
  - o Roles and expectations vis-à-vis communications with other professionals involved with the family
- In order to capture appropriate information and outcome data for community-based services with less strictly-defined processes and interventions, it will be necessary to incorporate different data collection elements and strategies, possibly in the KIDS system; alternatively, DHS should implement a regular qualitative data collection mechanism to capture elements of service delivery not seen in administrative data.
  - o Develop detailed guidelines for data entry into KIDS to ensure that agencies are being evaluated equally with comparable data entry.

**APPENDIX A: SERVICE ACTIVITY DESCRIPTION MAPPING**

ACTIVITY RECODED, REFLECTED IN REPORT ANALYSIS AND TABLES	PROMINENT ACTIVITY NOTED IN SERVICE CONTACT DESCRIPTION
ATTEMPT	Attempt
CASE MANAGEMENT	15-Day Case Review
	30-Day Case Review
	45-Day Case Review
	60-Day Case Review
	Assessment
	Case Management
	Case Review
CONTACTS	Agency Visit
	Community
	Home Visit
	Office Visit
	Phone Call
	Placement Visit
	Service Plan Goals
COURT	Court
CYF MEETING	CYF Meeting
	CYF Supervised Visit
	Mel Blount Visit
FAMILY MEETING	Family Meeting
GROUP ACTIVITY	Group Activity
MEETING	Meeting
OTHER	Other
SCHOOL VISIT	School Visit
SERVICE LINKAGES	After School
	Community Resourcing
	Counseling
	D&A Evaluation
	Employment Visit
	Medical Appointment
	MH Evaluation
	Parenting Class
	Tutoring
SHELTER VISIT	Shelter Visit
TRANSPORTATION	Transportation
TRAVEL	Travel

## APPENDIX B: FOCUS GROUP QUESTIONS

### Questions for Cultural Consultants

- What are some of the biggest/most common needs of families?
- What do you do with families and youth?
  - o Specific strategies/activities that you use?
  - o Specific community resources that you refer to or have found helpful?
- What changes do you see in the families you work with? (specific)
- What changes do you see in the professionals you work with — either start to finish with a specific family, or from when you began this work?
- What family needs are not being met?
- Has there been anything surprising about your experiences with families or Inua Ubuntu?
- What one thing should we know about Inua Ubuntu before we leave here today?

### Questions for Families

- What was your main need/concern when you agreed to receive services with Inua Ubuntu?
- What did the program do for your family?
  - o Connections to community groups, services?
- What changes did you see in your child/children/family?
- What did your child learn or gain from working with Inua Ubuntu?
- What did you learn from working with Inua Ubuntu?
  - o How will/can you apply what you learned?
  - o Do you feel more empowered/capable/strong to address family concerns?
- Is there anything else that you wish the Inua Ubuntu program could have done for you?
- What one thing should we know about Inua Ubuntu before we leave here today?

## APPENDIX C: FAMILY SURVEY

### Survey Questions

- What was the reason for the CYF referral that led to your involvement in the Inua Ubuntu program?
- What goal(s) did you want to achieve through your Inua Ubuntu involvement? (please be as specific as possible)
- Are you satisfied with the progress on your goal(s)?
- Have you completed your involvement with the Inua Ubuntu program?

### Less Often -> More Often

- Since my involvement with the Inua Ubuntu program, in a crisis, my family talks to trusted relatives and friends
- Since my involvement with the Inua Ubuntu program, in a crisis, my family asks for advice from trusted relatives and friends
- Since my involvement with the Inua Ubuntu program, in a crisis, my family seeks encouragement from trusted relatives and friends
- Since my involvement with the Inua Ubuntu program, I feel my family life is manageable
- Since my involvement with the Inua Ubuntu program, I feel confident in my ability to help my child grow and develop
- Since my involvement with the Inua Ubuntu program, I have a good understanding of my child/children and their needs
- Since my involvement with the Inua Ubuntu program, I feel I am a good parent
- Since my involvement with the Inua Ubuntu program, I feel I am self-sufficient
- Since my involvement with the Inua Ubuntu program, I feel I am able to make good decisions for my family
- Since my involvement with the Inua Ubuntu program, there are times when I don't know what to do for my family

### Strongly Agree -> Strongly Disagree

- My cultural consultant helped me to see strengths in myself I didn't know I had
- My cultural consultant helped me to use my own skills and resources to solve problems
- My cultural consultant encouraged me to think about my own personal goals or dreams
- My cultural consultant respected my family's cultural and/or religious beliefs
- My cultural consultant had materials for my child that positively reflect our cultural background
- My cultural consultant knew about other programs I could use if I needed them

- My cultural consultant understood when something was difficult for me
- My cultural consultant supported me in the decisions I made about myself and my family
- My cultural consultant provided opportunities for me to get to know other parents in the community