



Family visit coaching: Improvement in parenting skills through coached visitation

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ABSTRACT

The Family Visit Coaching (FVC) model is an alternative to traditional child welfare visitation. It differs from traditional supervised visits in that parents interact with a coach before, during, and after visits to build pragmatic parenting skills and improve emotional capacity to engage with their children. Although variations on the model are used throughout the United States, no peer-reviewed research has been done to demonstrate that the intervention improves parenting. In this study, 106 parents in San Diego, California, participated in an FVC program from 2015 to 2018. They were assessed at the beginning and end of the program using the San Diego County adaptation of the Parenting Skills Assessment, 10th edition (PSA), which we validated. We found a statistically significant improvement in parenting and a statistically significant association between each additional visit and improved parenting skills on specific measures—a promising finding, as past research has shown that positive parenting skills are associated with child welfare reunification and reduced foster care reentry.

1. Introduction

At any point in time, over 400,000 children are in foster care in the United States (Children's Bureau, 2019). When children are removed from their homes, child welfare agencies use supervised visitation to maintain contact between parents and their children. This contact is crucial to ensure attachment, which has been established in developmental psychology as a key factor to ensure healthy child development (Ainsworth, 1985; Bowlby, 1982). McWey and Mullis (2004) found the number of visits a child experienced and the consistency of their mother's visits were both significantly correlated with increased quality of attachment. Additionally, a higher frequency of contact for children in foster care is related to lower levels of depression and less externalizing of problem behaviors in children (Cantos et al., 1997; McWey et al., 2010), though it should be noted that parent-child relationships are diverse and complex (Haight et al., 2003; Leathers, 2003).

Visitation also provides a context for child welfare staff to assess parenting skills and the strength of the parent-child attachment (Partners for our Children, 2011). Traditional supervised visits typically take place in a room in a child welfare or community organization building, with a visitation monitor or social worker observing interactions between the child and parent but rarely engaging with them. This structure is often uncomfortable and unnatural for the parent and does little to provide feedback about the parenting challenges that emerge in

daily life (Haight et al., 2001). Parents involved in supervised visits have reported feelings of powerlessness, emotional suffering, anger, fear, and distrust toward the system (Haight et al., 2001; Nesmith, 2013). They also have reported grief about the separation and struggled to balance their own emotions while supporting those of their children (Nesmith, 2013). Individual factors also play a role in the success of visits. One study observing parenting quality during supervised visitation found that mothers' individual factors—coherence, flexibility, expressed affection toward their children, substance abuse, mental illness, and attachment-related risk in childhood or adolescence—were associated with positive parenting during the visit (Schoppe et al., 2007).

Despite this rigid structure, research has shown that visitation is strongly related to reunification (Davis et al., 1996; Leathers, 2002; Malm & Zielewski, 2009; McMurtry & Lie, 1992) and reduced time in placement (Benedict & White, 1991; Cantos et al., 1997; Mech, 1985; White et al., 1996). Researchers in the child welfare field have not found an association between visitation and a reduction in subsequent foster care reentry, but highly rated parenting skills are associated with reduced reentry (Davis et al., 1996; Festinger, 1996; Frame et al., 2000; Jedwab & Shaw, 2017). Festinger (1996) found that parents with a lower rating of parenting skills is a strong predictor of reentry. Parenting skills also have been shown to have a positive relationship to reunification (Miller et al., 2006). In general, the field sees that parenting skills are necessary for reunification. A qualitative study found

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consensus among child welfare professionals to encourage positive parenting and training parents in parenting skills during the reunification process (Mateos Inchaurreondo et al., 2018). This article describes and demonstrates the benefits of the Family Visit Coaching (FVC) program in building the parenting skills of parents whose children have been placed out of home.

1.1. Visitation as way to build parenting skills

Parenting programs can range in type from in-home visits to therapeutic interventions; span delivery techniques such as classroom, video, or home settings; and target different populations, such as young children, at-risk families, or foster care youth. A recent meta-analysis on parenting programs aimed at preventing or reducing child maltreatment showed a significant and small overall effect size on the 51 studies reviewed (Gubbels et al., 2019). While these programs were not specific to children in out-of-home care, this indicates that parenting programs overall have the potential to reduce subsequent maltreatment. Programs such as SafeCare and Parent-Child Interaction Therapy have been used with young child populations in a visit context and sometimes in child welfare. While these two programs in particular have shown favorable results, they are not targeted exclusively to families with children in foster care and therefore are not designed specifically for structured (National SafeCare Training and Research Center, n.d.; Title IV-E Prevention Services Clearinghouse, 2020; PCIT International, 2020). While a handful of parenting education programs focus on parents with children in out-of-home care, many have been limited to group classroom settings instead of supervised visitation (Brook et al., 2012; Linares et al., 2006; Maher et al., 2011). At the time of publication, no peer-reviewed published research on outcomes existed for any of the 14 programs with a visitation focus in the California Evidence-Based Clearinghouse, including FVC.

Visitation is required by the courts in child welfare practice, but it has not consistently been harnessed as a strategy to improve parenting. Recent articles have highlighted a specific need for an evidence-based approach to a parenting intervention during early parent-child visits (Orlando et al., 2019). The FVC model was developed to make better use of family visits.

FVC is San Diego County's name for its implementation of Visit Coaching (VC) model, which is widely used across the United States. Marty Beyer, the developer, has brought the program to at least 22 states. The only publicly available research on the model is a 2017 survey across 21 programs indicating that coaches and participants had positive program experiences (Beyer, 2004). Our previous qualitative research shows that families appreciate the program (HarrisKryzwicki, 2019).

The program is based on a manual designed to allow for individualization to meet each participant's needs. FVC provides an opportunity for parents to practice parenting and for the coaches to support skill improvement and documentation. The program uses a holistic understanding of what is required to parent effectively, in part by addressing knowledge gaps such as familiarity with child development and by attending to building parents' sense of empowerment, empathy, and self-efficacy in equal measure. The latter is particularly important because having a child removed may make parents doubt their abilities as caregivers and contribute in turn to poor parenting, creating a vicious cycle. Within this article, parenting components are referred to as skills, which should be understood as a broad term for both parents' practical skills and their emotional capacity.

The FVC model's components include developing a visit meeting plan before FVC sessions; a pre-visit to remind parents of the child's needs and discuss any concerns; the visit with the child, during which coaches provide support to parents so they can be responsive to the child's needs; a post-visit to debrief; and partnering to encourage communication between parents, the child's temporary caregivers, and the child welfare agency caseworkers to discuss the child's needs.

Selecting and training appropriate coaches is critical to the model's success. The coaches hold bachelor's degrees in child development, social work, psychology, or education and are hired for their expertise in child welfare, knowledge of childhood trauma, and knowledge of parenting. Supervisors say they seek individuals who are effective communicators, organized, self-confident, tactful, and kind. Coaches also undergo extensive training, including training modules used in SafeCare (parent-infant and parent-child interaction) where they conduct role playing and shadowing to build their coaching proficiency and consult with parent partners and child welfare workers. To build their familiarity with child welfare, the coaches attend child welfare trainings and events.

Coaches devote considerable time to building rapport with parents. Coaches report that they approach parents with empathy for and understanding of the challenges they face and recognize that parents often carry over learned behaviors from their own childhoods. Coach supervisors have stated their opinion that this rapport and non-accusatory stance helps to make the program effective.

1.2. Current study

This study fills a void by examining a widely used but under-studied model for improving visitation and parenting while children are in foster care. The FVC model aims to improve parenting through interactive coaching before, during, and after supervised visits. This study explores whether FVC improves parenting skills between initial assessment and exit. The study has implications for improving reunification and reentry outcomes in child welfare.

In San Diego County, the program was implemented by four agencies: South Bay Community Services, North County Lifeline, Home Start, and Social Advocates for Youth. An average of 2108 children are in out-of-home care in the county on the first of each month. The most common allegations at the point of referral to San Diego's child welfare system are general neglect (43%), emotional abuse (33%), and physical abuse (30%) (children may have multiple allegations; (County of San Diego, 2020). The analysis encompassed visits between August 27, 2015, and November 14, 2018.

2. Method

2.1. Participants

The study protocol was reviewed and approved by the Committee for the Protection of Human Subjects, the California Health and Human Services Agency's institutional review board, and was carried out with appropriate consents and careful attention to the subjects' privacy. The target population of the FVC model is parents who have at least one child in out-of-home care in San Diego County. During the study period, 106 parents were assessed through an adapted version of the Parenting Skills Assessment, 10th edition (PSA) by their family visit coach pre-treatment (i.e., entry) and post-treatment (i.e., exit). These parents had 163 unduplicated children under age 18. Parents from the same household and/or with the same children were analyzed individually because the program treats them as individuals. Parent FVC completion was determined by their family visit coach based on whether the parent met their personal parenting goals and whether the parent and child appeared to be bonded. Child welfare workers may also consult with the coaches to decide when the parent has realized all of the benefits of the program. We assessed for significant population differences among parents referred to the program who did not participate, parents who participated but did not have entry and exit PSAs, and the study sample. Results suggest that participants in the study sample may not be comparable to the other child welfare populations because a disproportionate number of men chose not to engage in the program. In other regards, the sub-sample of parents who began and ended the program and had assessments appeared to be demographically similar to parents

who were referred and did not participate.

2.2. Treatment

The FVC model recommends a one- to three-hour family visit one to three times per week for three to six months. Visit frequency may be limited by transportation challenges, the parents' work schedules, or other life factors. Parents may still participate in the program even if visits cannot happen as frequently as intended.

2.3. Measures

Parenting improvement was measured using San Diego County's adaptation of the PSA, an assessment of parenting behavior that coaches administered during the initial and closing FVC sessions. After receiving training through a combination of role playing and shadowing, coaches selected PSA responses based on their observations of parent-child interactions. The goal was to assess parents' baseline parenting skills and then determine whether their skills had changed at the end of the FVC sessions.

The original version of the PSA consisted of 25 indicators across five domains: communication with child, child management and supervision, parent/child activities (play), nurturing, and enriched environment. A previous study (Reed et al., 2009) showed that all PSA indicators have an average inter-rater reliability greater than 0.50 except for one indicator, which San Diego excluded from the adapted version. A few months after FVC implementation began, coaches started using the adapted version of the PSA, which excluded 10 indicators total after discussions with program providers revealed that the items were not applicable to children of the ages served under the program and the type of services offered. Each of the 15 remaining items on the adapted PSA item had four response options, and each response had an associated score: Not Evident (1), Emerging (2), Practicing (3), and Mastery (4). Indicators 3 and 5 in the assessment had a "not applicable" response option for use when young children were involved.

The PSA's 15 indicators are grouped into the five domains. Parents who participated in FVC were expected to improve their skills across the domains through the mechanism outlined in Table 1. We validated San Diego County's adaptation of the PSA, as previous validations used a longer version of the assessment and had been limited to young children. We found an acceptable level of internal consistency across four domains, as indicated by Cronbach's alpha scores performed on all of the entry assessments available in the sample. The remaining domain had only one indicator in it and could not be validated (Table 1).

2.4. Procedure

We used three sources of administrative program data from the four agencies: scanned copies of paper records, the original *Efforts to Outcomes* database, and the newly updated *Efforts to Outcomes* database. Data included the PSA scores, number of FVC visits, the agency that provided the visit, and whether the parents completed the FVC program per their coach. The data were matched to California's child welfare system case management system (CWS/CMS) to establish demographic information and child welfare history.

We analyzed scores for parents with completed entry and exit assessments only. When more than one entry assessment existed for a participant, we chose the score from the oldest assessment. An additional 62 parents were excluded from the full analysis as they had only an entry assessment, but we assessed their baseline scores. In cases with more than one exit assessment per participant, we chose the score from the most recent assessment. This selection was made to measure overall parenting skills growth.

There were 106 parents with both an entry and exit assessment, though some indicators were not completed for all parents and had to be imputed. All of these parents had at least one FVC visit. We

performed 50 imputations with 20 iterations using the MICE package in R. Missing items on entry and exit PSAs used the following predictors to impute missing data.

- Items on the respective assessment outside of the domain of the item being imputed (e.g., items in the "Communication With Child" domain were only predicted based on items in the other three domains and the environment item)
- Parent's race/ethnicity
- A variable indicating whether the youngest child was under age 3
- Parent's age on the date of the respective assessment
- Parent's sex

Additionally, missing items on exit PSAs used the following predictors to impute data.

- A variable indicating whether the parent completed FVC
- The number of FVC visits the parent attended between their entry and exit PSA dates

We pooled the multiply imputed data both for the Cronbach's alpha presented above (Béland et al., 2016) and to calculate the following results.

3. Results

3.1. Descriptive statistics

Almost all parents spoke English (92.5%) as their primary language. Just under half of parents were White (45.3%), and the majority were female (60.4%; Table 2). The average age of parents was 32 at the entry assessment.

About half of the children of parent participants were under the age of 3. The most common primary reason for the child being removed was general neglect (41.7%), emotional abuse (12.9%), and caretaker absence/incapacity (12.9%). Children of parents in FVC were most often White (44.2%) or Hispanic/Latinx (33.1%). The majority of children spoke English as their primary language (96.3%). These children had varied prior child welfare experience, with about half (49.1%) having no prior investigations and a quarter (25.8%) having four or more prior investigations. This may be an account of the young ages of the children. The majority (87.7%) of children were in their first removal during the FVC timeframe (see Table 3).

The average number of visits between entry and exit PSAs was 17 (SD = 12.33), but the number of visits varied greatly. Half of the participants had 17 or fewer visits, and just under one quarter had 23 or more visits (Table 4). The average number of days between entry and exit PSAs was 105 (SD = 77.58). Families participated at the agency that was closest to where they lived. For the purpose of this analysis, we assigned parents who had visits at more than one agency to the one they visited most. San Diego has demographic differences across the county, so the four agencies served parents with different characteristics and had different rates of program completion for families.

We compared scores for parents who completed the program and those who did not to ensure that ability to complete the program would not bias the results. Examination of all participants with an entry assessment ($N = 168$) showed no statistical difference in baseline assessment scores between those who completed FVC ($n = 78$) and those who did not ($n = 90$), except for the indicator of "Positive interaction is apparent" and the indicator for showing empathy (Table 5).

3.2. Parenting skills

The analysis showed that the mean scores improved for every indicator at the time of the exit assessment compared with the entry assessment, and there was a statistically significant difference between

Table 1
PSA Domains and FVC.

PSA Indicators	Mechanism Through Which FVC Applies to PSA Indicators	Cronbach's Alpha	n
Communication With Child			
1. Words and tone directed to child are positive, with praise and encouragement.	FVC includes a pre-session to prepare parents to give their full attention at the visit and prepare for their children's reaction to the visit. For infants, the focus can be teaching the parent how the baby is communicating with them and how the parent responds to the baby's messages. For teenagers, the focus begins by helping the parent and child enjoy something together and working to improve communication.	0.764	167
2. Communication between parent and child is responsive and reciprocal (conversational).			
3. Parent facilitates reading/literacy activities with child.			
Child Management and Supervision			
4. Parent expresses realistic, age-appropriate expectations.	Active parenting is a key principle of VC; parents learn how their words, actions, and attitudes have a direct impact on their child's behavior. Coaches are encouraged to support parents in learning about effective discipline and stimulation and expectations that fit the child's age.	0.753	168
5. Child management plan is consistently applied for the purpose of teaching child self-control.			
6. Parent follows child management plan that is essentially nonphysical (does not rely on infliction of physical pain to control behavior).			
7. Uses positive words and tone in child management.			
Parent/Child Activities (Play)			
8. Interactive, positive, enjoyable participation between parent and child.	The sessions are tailored to focus on parenting to the child's unique needs, not prescribed parenting techniques. A benefit of the FVC model over traditional parenting classes is that the parent gets hands-on experience to apply these practices. This "learning-by-doing" approach encourages parents to practice playing with their child and to bring activities to the session, which the coach and parent brainstorm ahead of the visit. The model encourages teaching parents songs and games to use during visits.	0.856	168
9. Parent uses appropriate methods of teaching child new skills.			
10. Expands on child's activities to encourage development.			
Nurturing			
11. Parent reads and responds appropriately to child's cues.	VC is intended to help parents learn to identify and develop techniques to meet their child's unique needs. Prior to each meeting, the coach and parent develop a visit plan to identify the child's needs and how the parent intends to meet them during the visit. A post-meeting occurs to reflect on the visit.	0.876	168
12. Positive interaction is apparent.			
13. Parent displays empathy—identifies with and cares about child's feelings.			
14. Parent describes child in positive terms, sees behavior as normal, responds positively to praise of child offered by visitor.			
Enriched Environment			
15. Environment is safe.	Before each visit, coaches and parents reach consensus about the child's needs that must be addressed during the visit and link that to the concerns that led to the child being removed. Further, visits are often held outside a "safe" office setting (such as a home, park, or library), which can allow parents to display protective behaviors in settings that better reflect their typical life.	N/A	N/A

Table 2
Demographics of FVC Participants (N = 106).

	n	%
Race/Ethnicity		
Asian/Pacific Islander	8	7.5%
Black/African American	18	17.0%
Hispanic/Latinx	29	27.4%
White	48	45.3%
Missing	3	2.8%
Sex		
Female	64	60.4%
Male	42	39.6%
Primary Language		
English	98	92.5%
Spanish	4	3.8%
Other	4	3.8%
Age at Entry PSA		
18 to 24	25	23.6%
25 to 34	43	40.6%
35 to 44	30	28.3%
45 or older	8	7.5%

entry and exit scores for all indicators except indicator 6 on use of physical discipline (Table 6). If an item was incomplete after multiple imputations, we dropped the pair of observations from the analysis.

In addition to looking at differences in mean scores, we used a generalized linear regression model assuming a normal distribution to examine the relationship between dosage and parenting skill score, controlling for region. Across all 14 validated items on the PSA, for each additional visit attended by a parent, there was an observed improvement in parenting skills, controlling for agency providers.¹ This improvement was statistically significant for nine of the 14 items ($p \leq 0.05$), indicating that dosage is related to positive observed parenting skills (Table 7).

4. Discussion

This study contributes to the literature in two ways. We validated the San Diego adaptation of the PSA as an instrument for measuring parenting skills for children ages 0 to 17 in a child welfare visitation

¹ Reference category for agency is NCL.

Table 3
Demographics of Children of FVC Participants (*N* = 163).

	<i>n</i>	%
Age at Entry PSA		
Under 3	79	48.5%
3 to 5	33	20.2%
6 to 10	39	23.9%
11 to 15	11	6.7%
16 to 17	1	0.6%
Primary Reason Child Was Removed		
Caretaker Absence/Incapacity	21	12.9%
Emotional Abuse	21	12.9%
General Neglect	68	41.7%
Physical Abuse	12	7.4%
Severe Neglect	3	1.8%
Sexual Abuse	7	4.3%
Missing	31	19.0%
Race/Ethnicity		
Asian/Pacific Islander	7	4.3%
Black/African American	30	18.4%
Hispanic/Latinx	54	33.1%
White	72	44.2%
Sex		
Female	78	47.9%
Male	85	52.1%
Primary Language		
English	157	96.3%
Spanish	6	3.7%
Prior Investigations		
None	80	49.1%
One	12	7.4%
Two	16	9.8%
Three	13	8.0%
Four or more	42	25.8%
Prior Removals		
None	143	87.7%
One	15	9.2%
Two	5	3.1%

Table 4
Program Descriptives (*N* = 106 parents).

	<i>n</i>	%
Number of FVC Visits Between Entry and Exit PSA		
None ¹	4	3.8%
1 to 10	34	32.1%
11 to 20	36	34.0%
21 to 30	19	17.9%
31 to 40	8	7.5%
More than 40	5	4.7%
Number of Days Between Entry and Exit PSA		
0 to 30 days	15	14.2%
31 to 60 days	15	14.2%
61 to 90 days	25	23.6%
91 to 120 days	21	19.8%
121 to 150 days	9	8.5%
151 or more	21	19.8%
Agency That Provided FVC		
HS	13	12.3%
NCL	26	24.5%
SAY	39	36.8%
SBCS	24	22.6%
Missing	4	3.8%
Program Completion (As Determined by FVC Coach)		
Completed	75	70.8%
Did not complete	31	29.2%

¹ Note that assessment takes place at a visit, so parents without visits between PSAs had one visit prior to their exit PSA.

setting. We further demonstrated that parenting skills improved between entry and exit for parents who participated in FVC and that FVC dosage is significantly associated with improved parenting skills on specific measures. This finding is important to the child welfare field, as

visitation is broadly required under reunification services but not often in an evidence-based way to improve parenting.

While peer-reviewed literature has shown that visitation is strongly related to reunification, research has not supported the assertion that visitation decreases subsequent child welfare involvement because parents improve their parenting skills. Strong and consistent visitation may indicate a parent's commitment to the child and an ability for the parent to work with the agency. But visitation in itself is complex and may function in this analysis as a proxy for other parental characteristics because barriers to visitation, such as mental health and substance abuse, may also be barriers to reunification. On the other hand, parenting skills have been shown to be a strong preventive measure for subsequent child welfare involvement (Festinger, 1996; Miller et al., 2006). To disentangle the relationship between visitation and reunification from the relationship between parenting skills gained through visitation and reunification, it is important to independently test the effect of visitation programs on parenting skills and, in turn, the effect of those skills on reunification and reentry. This study tackled the first part of this process by testing the relationship between a visitation program that addresses parenting skills and tangible changes in how parents interact with their children.

The work is also important because it shows visitation can be harnessed as an opportunity to help parents gain important skills and competencies. Visitation is a major part of child welfare practice, but it has been treated less as an opportunity and more as an obligation. The typical supervised child welfare visit is uncomfortable for parents and is clearly in need of reform (Haight et al., 2001). This study is the first to demonstrate that FVC is an alternative to visitation that may be more effective in moving families toward greater independence of the child welfare system.

4.1. Limitations

The study was limited to examining parenting skills among parents who were referred to FVC by their County of San Diego child welfare caseworkers. Forthcoming studies will randomly assign eligible parents to program participation and will measure parenting skills in non-program participants at the start and end of child welfare involvement, as other aspects of child welfare system practice also could improve parenting skills. Program dosage was limited to number of visits, not the number of hours of the visits. The study did not use randomized design, so it is unknown whether the parents in this study are typical of the county's overall child welfare population. It is also possible that the coaches who completed the assessment were biased in their assessments of the parents or biased in perceiving improvement in parenting behaviors. Inter-rater reliability was not assessed in this study; only internal consistency was. While the tool has been validated, such problems are common to all parenting assessment tools, as parenting behavior is nuanced and culturally embedded.

5. Conclusions

This article is the first step toward filling a gap in the research literature in child welfare on evidence-based strategies for using visitation to improve parenting. Ultimately, the child welfare field is deeply concerned with allowing more children to reunify permanently with their parents, but such outcomes can be quite distal from the programs that are intended to achieve those goals. The first step toward measuring whether child welfare programs work is to determine whether improvements in parenting behaviors that are associated with maltreatment and abuse can be achieved in the short-term. This study accomplishes an important goal by showing multiple dimensions of parenting improved over time after parents experienced FVC. Ultimately, these improvements could be associated with improved reunification and improved reentry, given past studies on the relationship between parenting skills and these child welfare outcomes. We recommend that

Table 5
Means for the Entry PSA by FVC Completion.

Item	Entry—Did Not Complete FVC			Entry—Completed FVC			Difference in Mean	SE	p value
	n	Mean	SD	n	Mean	SD			
Communication With Child									
1. Words and tone directed to child are positive, with praise and encouragement.	90	2.984	0.816	78	3.211	0.727	0.227	0.120	0.061
2. Communication between parent and child is responsive and reciprocal (conversational).	90	3.013	0.730	78	3.074	0.766	0.061	0.116	0.596
3. Parent facilitates reading/literacy activities with child. ²	89	2.584	0.856	78	2.621	0.916	0.037	0.160	0.817
Child Management and Supervision									
4. Parent expresses realistic, age-appropriate expectations.	90	2.785	0.714	78	2.914	0.732	0.129	0.112	0.251
5. Child management plan is consistently applied for the purpose of teaching child self-control. ³	90	2.614	0.710	78	2.779	0.711	0.164	0.116	0.158
6. Parent follows child management plan that is essentially non-physical (does not rely on infliction of physical pain to control behavior).	90	3.535	0.775	78	3.652	0.679	0.117	0.118	0.321
7. Uses positive words and tone in child management.	90	3.130	0.729	78	3.260	0.721	0.130	0.113	0.249
Parent/Child Activities (Play)									
8. Interactive, positive, enjoyable participation between parent and child.	90	3.009	0.783	78	3.188	0.726	0.179	0.118	0.130
9. Parent uses appropriate methods of teaching child new skills.	90	2.705	0.758	78	2.900	0.691	0.195	0.113	0.086
10. Expands on child's activities to encourage development.	90	2.731	0.696	78	2.900	0.637	0.169	0.104	0.104
Nurturing									
11. Parent reads and responds appropriately to child's cues.	90	3.000	0.756	78	2.956	0.718	-0.044	0.114	0.698
12. Positive interaction is apparent.	90	3.103	0.831	78	3.378	0.680	0.275	0.118	0.021*
13. Parent displays empathy—identifies with and cares about child's feelings.	90	3.103	0.713	78	3.311	0.664	0.209	0.107	0.053*
14. Parent describes child in positive terms, sees behavior as normal, responds positively to praise of child offered by visitor.	90	3.013	0.798	78	3.178	0.773	0.165	0.122	0.177
Enriched Environment									
15. Environment is safe.	90	3.216	0.730	78	3.381	0.686	0.165	0.111	0.138

* $p \leq 0.05$. ** $p \leq 0.01$. *** $p \leq 0.001$.

² N size is smaller due to N/A option.

³ N size is smaller due to N/A option.

Table 6
Means for the Entry and Exit PSA.

Item	N	Entry		Exit		Difference in Mean	SE	p value
		Mean	SD	Mean	SD			
Communication With Child								
1. Words and tone directed to child are positive, with praise and encouragement.	106	3.198	0.761	3.585	0.660	0.387	0.069	< 0.001***
2. Communication between parent and child is responsive and reciprocal (conversational).	106	3.054	0.801	3.613	0.684	0.560	0.072	< 0.001***
3. Parent facilitates reading/literacy activities with child. ⁴	105	2.598	0.936	3.032	0.895	0.434	0.107	< 0.001***
Child Management and Supervision								
4. Parent expresses realistic, age-appropriate expectations.	106	2.927	0.742	3.500	0.694	0.573	0.705	< 0.001***
5. Child management plan is consistently applied for the purpose of teaching child self-control. ⁵	106	2.739	0.757	3.381	0.771	0.641	0.082	< 0.001***
6. Parent follows child management plan that is essentially non-physical (does not rely on infliction of physical pain to control behavior).	106	3.626	0.745	3.673	0.741	0.047	0.089	0.603
7. Uses positive words and tone in child management.	106	3.260	0.752	3.637	0.661	0.377	0.071	< 0.001***
Parent/Child Activities (Play)								
8. Interactive, positive, enjoyable participation between parent and child.	106	3.150	0.797	3.642	0.605	0.491	0.070	< 0.001***
9. Parent uses appropriate methods of teaching child new skills.	106	2.887	0.787	3.472	0.720	0.585	0.078	< 0.001***
10. Expands on child's activities to encourage development.	106	2.830	0.749	3.396	0.726	0.566	0.076	< 0.001***
Nurturing								
11. Parent reads and responds appropriately to child's cues.	106	2.981	0.756	3.538	0.733	0.557	0.076	< 0.001***
12. Positive interaction is apparent.	106	3.302	0.795	3.679	0.670	0.377	0.072	< 0.001***
13. Parent displays empathy—identifies with and cares about child's feelings.	106	3.283	0.765	3.613	0.698	0.330	0.072	< 0.001***
14. Parent describes child in positive terms, sees behavior as normal, responds positively to praise of child offered by visitor.	106	3.189	0.794	3.598	0.652	0.409	0.072	< 0.001***
Enriched Environment								
15. Environment is safe.	106	3.392	0.738	3.670	0.686	0.278	0.078	< 0.001***

* $p \leq 0.05$. ** $p \leq 0.01$. *** $p \leq 0.001$.

⁴ N size is smaller due to N/A option.

⁵ N size is smaller due to N/A option.

future studies expand on this analysis by using experimental designs to show whether the improved parenting skills measured in this study are associated with future increases in reunification and reductions in re-entry.

CRedit authorship contribution statement

Sierra Fischer: Conceptualization, Methodology, Formal analysis, Writing - original draft, Project administration. **Elizabeth Harris:** Conceptualization, Methodology, Writing - original draft, Supervision,

Table 7
Summary of Regression Analysis for Variables Predicting Change in Entry and Exit PSA Scores.

	Estimate	Std. Error	t value	p Value
Communication With Child				
1. Words and tone directed to child are positive, with praise and encouragement.				
Constant	0.324	0.169	1.920	0.058
Agency: SAY ⁶	-0.164	0.175	-0.935	0.352
Agency: HS	-0.506	0.235	-2.154	0.034*
Agency: SBSCS	-0.221	0.196	-1.129	0.262
Agency: None	-0.074	0.385	-0.193	0.848
Number of FVC visits	0.014	0.006	2.518	0.013*
2. Communication between parent and child is responsive and reciprocal (conversational).				
Constant	0.521	0.168	3.102	0.003**
Agency: SAY	-0.383	0.175	-2.191	0.031*
Agency: HS	-0.663	0.234	-2.835	0.006**
Agency: SBSCS	-0.357	0.196	-1.822	0.0716
Agency: None	-0.021	0.383	-0.055	0.956
Number of FVC visits	0.021	0.006	3.631	< 0.001***
3. Parent facilitates reading/literacy activities with child.				
Constant	0.044	0.258	0.169	0.866
Agency: SAY	-0.027	0.260	-0.103	0.918
Agency: HS	0.003	0.365	0.007	0.994
Agency: SBSCS	0.192	0.305	0.629	0.531
Agency: None	0.351	0.590	0.595	0.553
Number of FVC visits	0.021	0.008	2.428	0.017*
Child Management and Supervision				
4. Parent expresses realistic, age-appropriate expectations.				
Constant	0.539	0.153	3.529	< 0.001***
Agency: SAY	-0.435	0.159	-2.730	0.008**
Agency: HS	-0.469	0.213	-2.204	0.030*
Agency: SBSCS	-0.036	0.177	-0.204	0.839
Agency: None	-0.789	0.348	-2.265	0.026*
Number of FVC visits	0.017	0.005	3.375	0.001**
5. Child management plan is consistently applied for the purpose of teaching child self-control.				
Constant	0.507	0.196	2.592	0.011*
Agency: SAY	-0.061	0.207	-0.294	0.770
Agency: HS	0.082	0.261	0.314	0.754
Agency: SBSCS	0.018	0.223	0.082	0.935
Agency: None	0.243	0.419	0.580	0.563
Number of FVC visits	0.008	0.006	1.271	0.207
6. Parent follows child management plan that is essentially nonphysical (does not rely on infliction of physical pain to control behavior).				
Constant	0.149	0.221	0.674	0.502
Agency: SAY	-0.099	0.235	-0.420	0.675
Agency: HS	0.046	0.308	0.150	0.881
Agency: SBSCS	-0.312	0.258	-1.207	0.230
Agency: None	-0.899	0.500	-1.798	0.075
Number of FVC visits	0.002	0.008	0.258	0.797
7. Uses positive words and tone in child management.				
Constant	0.424	0.172	2.469	0.015*
Agency: SAY	-0.371	0.178	-2.083	0.040*
Agency: HS	-0.479	0.237	-2.019	0.046*
Agency: SBSCS	-0.268	0.198	-1.355	0.179
Agency: None	0.446	0.416	1.071	0.287
Number of FVC visits	0.012	0.006	2.007	0.047*

Table 7 (continued)

	Estimate	Std. Error	t value	p Value
8. Interactive, positive, enjoyable participation between parent and child.				
Constant	0.371	0.162	2.289	0.024*
Agency: SAY	-0.308	0.167	-1.840	0.069
Agency: HS	-0.742	0.223	-3.325	0.001**
Agency: SBSCS	-0.094	0.187	-0.503	0.616
Agency: None	0.129	0.364	0.353	0.725
Number of FVC visits	0.021	0.006	3.712	< 0.001***
9. Parent uses appropriate methods of teaching child new skills.				
Constant	0.427	0.182	2.349	0.021*
Agency: SAY	-0.420	0.188	-2.231	0.028*
Agency: HS	-0.389	0.251	-1.548	0.125
Agency: SBSCS	0.126	0.230	0.599	0.551
Agency: None	0.338	0.446	0.756	0.452
Number of FVC visits	0.019	0.006	3.154	0.002**
10. Expands on child's activities to encourage development.				
Constant	0.513	0.186	2.751	0.007**
Agency: SAY	-0.330	0.194	-1.704	0.092
Agency: HS	-0.160	0.260	-0.616	0.539
Agency: SBSCS	-0.164	0.216	-0.757	0.451
Agency: None	-0.263	0.425	-0.618	0.538
Number of FVC visits	0.015	0.006	2.311	0.023*
Nurturing				
11. Parent reads and responds appropriately to child's cues.				
Constant	0.381	0.183	2.081	0.040*
Agency: SAY	-0.239	0.190	-1.254	0.213
Agency: HS	-0.353	0.255	-1.384	0.170
Agency: SBSCS	0.117	0.213	0.551	0.583
Agency: None	0.619	0.417	1.482	0.141
Number of FVC visits	0.016	0.006	2.504	0.014**
12. Positive interaction is apparent.				
Constant	0.675	0.167	4.036	< 0.001***
Agency: SAY	-0.648	0.174	-3.723	< 0.001***
Agency: HS	-0.773	0.233	-3.321	0.001**
Agency: SBSCS	-0.526	0.194	-2.708	0.008**
Agency: None	-0.175	0.381	-0.459	0.647
Number of FVC visits	0.001	0.006	1.719	0.089
13. Parent displays empathy-identifies with and cares about child's feelings.				
Constant	0.593	0.162	3.661	< 0.001***
Agency: SAY	-0.715	0.168	-4.250	< 0.001***
Agency: HS	-0.852	0.225	-3.782	< 0.001***
Agency: SBSCS	-0.532	0.188	-2.832	0.006**
Agency: None	-0.343	0.369	-0.928	0.356
Number of FVC visits	0.014	0.005	2.633	0.010**
14. Parent describes child in positive terms, sees behavior as normal, responds positively to praise of child offered by visitor.				
Constant	0.356	0.172	2.068	0.041*
Agency: SAY	-0.318	0.178	-1.790	0.077
Agency: HS	-0.442	0.237	-1.865	0.065
Agency: SBSCS	0.222	0.198	1.123	0.264
Agency: None	0.644	0.388	1.660	0.100
Number of FVC visits	0.009	0.006	1.576	0.118

*p ≤ 0.05. **p ≤ 0.01. ***p ≤ 0.001.

⁶ Reference category for agency is NCL.

Project administration. **Hailey S. Smith:** Methodology, Formal analysis, Writing - original draft. **Rachel J. Polivka:** Formal analysis, Writing - original draft.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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