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## **Peer Parental Advocacy: A Narrative Review of the Literature**

### **Abstract**

Parental Advocacy (PA) is an evolving area of academic research and policy development both in the United Kingdom and internationally. Emerging research suggests a compelling case for an expansion in Parental Peer Advocacy (PPA) within child welfare and protection systems, specifically in case, program and policy advocacy.

This narrative review focuses specifically on the evidence base on peer parental advocacy, identifying three broad themes throughout the literature: proximal goals, distal goals and challenges or barriers, with a total of eight sub-themes distributed across these. By providing a comprehensive synthesis of the interventional research evidence on peer parental advocacy, this article makes a valuable contribution to the field and highlights the unique features of this approach in supporting parents in the child protection system.

### **Introduction**

The experiences of parents in the child protection system have risen up the policy agenda recently, and the nature and extent of support they require has become an increasingly prominent policy issue. In response to this, Parental Peer Advocacy (PPA) has been described as a 'new and significant evidence-based strategy for supporting families' (Berrick et al 2011, p.22). Proponents argue that PPA has the potential to create a 'shift' that challenges the 'centrality of professionally driven case planning' (Sears et al 2017, p.80), enabling more shared decision making, better relationships between professionals and families, and a more humane and participatory system (Rockhill et al 2015; Bohannan et al 2016; Damman 2018; Trescher & Summers 2020; Berrick et al 2011; Lalayants, 2014, 2017). As parents often report feeling disempowered, marginalised, and untrusting of child protection social workers (Muench et al 2017), PPA endeavours to challenge this systematic structure, support positive change and encourage increased parental participation in child protection social work. It is this impact on parental engagement and participatory practices that this narrative review that is the key focus of this narrative review.

In the UK, there has been growing policy interest in PPA, which has seen increased investment in the intervention from Welsh Government (NYAS, 2018). Meanwhile in England, the recent review of children's social care recommended that advocacy on behalf of parents should be adopted nationally (MacAlister, 2022). However, very little research has been undertaken on how PPA works or how it impacts on parental engagement and participation in the child protection system in the UK to date. While there is evidence about the effectiveness of PPA from the USA, it is not self-evident that this learning can simply translate to different cultural, professional and policy traditions. This paper provides a summary of an expanding field and intends to provide a useful contribution to those interested in implementing or researching parental advocacy.

### ***Parental Peer Advocacy***

Parental Advocates are parents or professionals with training in advocacy methods and a deep understanding of the social care system. Parental peer advocates are distinct from professional and legal advocates who are more likely to possess specialised training but who lack the lived-experience element. Parent advocates help by supporting working relationships between parents and social workers, and ensuring parents have a meaningful say in decision-making about their children (Lalayants et al. forthcoming). Parent advocates 'also help to develop strategies to change the system' (Tobis, Bilson, and Katugampala 2021, p.20). In the USA, Parental Advocacy services (have reduced the need for children to come into care, and helped children in care to return home more quickly (Polinsky 2010, Lalayants 2019, Lalayants et al. forthcoming). In this paper, we focus specifically on peer parental advocacy as opposed to professional or legal advocacy for parents. While we acknowledge that legal advocacy and professional advocacy are important tools for supporting parents involved in the child protection process, they are outside the scope of our study for several reasons. First, the focus of this review is the application of peer parental advocacy research to the UK context, where peer parental advocacy does not typically involve legal representation. Moreover, legal and professional advocacy have a distinct and large evidence base which warrant a separate review. By excluding legal or professional advocacy from this review, we can provide a more nuanced and detailed analysis of the evidence base on peer parental advocacy as a distinct and valuable approach to supporting parents involved in the child protection system.

Tobis, Bilson, and Katugampala (2021) identify three types of Parental Peer Advocacy.

- 1) Case advocacy involves a Parental Peer Advocate offering support, guidance, and information to help a parent currently involved with child protection services to participate and navigate the system. Activities of the parent advocate in a case advocacy role include regular telephone contact, attendance at child protection meetings (helping before, during and after), providing information about rights or services, providing support to access groups, and ensuring their views and wishes are heard and respected.
- 2) Program advocacy involves trained parent advocates being involved in designing, shaping and delivering programmes designed to help parents care for their children or make changes to enable their children to be reunified to their care.
- 3) Policy advocacy involves acting politically to instigate change, participating on government boards, attending conferences, teaching on social work courses and '*working at the grassroots and community levels to organise and advocate for change*' (2021, p.20).

### **Child Protection: Engagement and Partnership**

#### ***Parental engagement, partnership working and outcomes***

There is evidence that suggests that parental advocacy can assist parents and social workers to build more positive working relationships and that advocates can act as a 'bridge' between parents and social workers (Diaz et al 2022). It is therefore important to provide an overview of some of the key research relating to social workers and parents' engagement and some of the existing barriers to effective partnership working between parents and social workers.

Engagement of (and partnership with) parents has long been recognised as a crucial component of social work, enshrined in law and policy (Children Act 1989, DfE 2018), and identified as an effective way of helping children and their families (Horwitz and Marshall 2015, Sankaran 2015). Cohen and Canan (2006) highlight that engagement is an important element of any childcare social work service provision. They argue that without this, the service could not fulfil the key task of helping families function better.

#### ***Social worker perspectives on parental engagement and partnership***

Positively, amongst social workers, there is consensus that parental engagement and partnership working is valuable (Corby et al. 1996; Darlington et al. 2010). The participants interviewed in Darlington et al.'s (2010) study all agreed that participation was vital. They considered it an important ethical position but also one that was vital to improving outcomes for children. One statutory social worker commented:

*'I feel strongly that the more power you can give back to the parents, the more likely it is that they are going to feel empowered to make the changes that they need to, to keep their kids safe... the more you make people feel part of the child protection process, the more likely it is you're going to get a positive outcome'* (p.1022)

Despite this, it has proved difficult to translate the principle of partnership working in practice. For example, Corby et al's (1996) analysis of parents' views on child protection conferences found that all the parents were anxious, many felt like objects and there was an implicit understanding between social workers and parents that compliance was a key contributor in deterring further escalation of social care involvement. Consequently, parents felt that being open, especially about areas of disagreement, was potentially a risk, and felt inhibited to share their thoughts and feelings. Over twenty years later, a study by Muench, Diaz and Wright (2017) interviewed 26 parents going through child protection processes and concluded that most parents felt unsupported throughout the child protection conference. Many parents reported finding their social worker unhelpful. Parents interviewed in the study commented *'the first conference was terrifying, I didn't know what was happening'* and *'I wanted more support for the initial conference, I felt blindfolded'* (p.9). The authors considered it likely that these experiences would decrease engagement and impinge upon likelihood of change.

More recently, Bekaert et al. (2021) carried out a meta-synthesis examining 35 studies of family members' perspectives of the child protection system. They found that many parents feel unduly pre-judged, disempowered, and confused by the social worker and their expectations, and the child protection system itself. In turn, many parents responded with anger, upset, and confusion which could lead to despondency or resistance. When confronted with concerns about their child, some parents felt attacked and reacted defensively. Other parents understood that compliance was

rewarded, and therefore would engage even if they didn't think the plan would help to avoid negative and punitive consequences. Overall, family members felt the child protection system to be paternalistic rather than collaborative.

***The challenges of meaningful engagement and involving parents and children: social worker and parents' perspectives***

There are multiple explanations provided to account for the discrepancy between the ambition of policy and individual social workers to cultivate collaborative relationships and the issues documented in the research, most notably, the experiences of parents.

In the study carried out by Darlington et al. (2010), practitioners identified two factors: the parents, and the system. Firstly, most social workers considered that participation was dependant on a parent's willingness to engage and them developing insight into their behaviour. In other words, if parents cannot or do not recognise their behaviour is causing harm and take responsibility for this, then meaningful participation is not possible. Practitioners also identified two system-related barriers: an imbalance of power (both real and perceived) and a lack of time due to high caseloads and burdensome amounts of paperwork.

Another factor identified is the contradiction between social work functions of "care" and "control"; a well-recognised dilemma that exists in the heart of social work practice. Consequently, the prospect of, or actual statutory involvement of children's services undermines parents' capacity to trust and hinders engagement (Corwin 2012; Sankaran et al. 2015). As pointed out by Lady Hale, a key author of the Children Act 1989, *"the aspiration of developing a partnership between children's services and families with children in need proved very difficult to achieve... The trouble is that, if efforts to work with families run into difficulties, the local authority can always resort to care proceedings and the families know that"* (Hale 2019).

From a parent's perspective, Frame et al. (2010) have posited that parents involved in the child protection system are often surrounded by professionals – social workers, health visitors, mental health workers, lawyers etc – who, despite their best intentions, are unable to empathise or relate to them from a personal perspective. Thorpe (2007) likewise found that parents feel disempowered and outnumbered by professionals. Thorpe also notes that the plan derived from social work meetings often imposed unrealistic time frames upon parents and denied them support for engaging in the

support services, leaving them feeling overwhelmed. These challenges can result in parents feeling alone and isolated, thus compounding feelings of shame that derive from experiencing child protection involvement (Gibson 2015, Chambers 2019).

Brown (2006) argued that not only do parents need to resolve the issues that warranted social work involvement, but they also need to develop skills that help them successfully navigate the system. The range of skills identified by mothers interviewed in Brown's study included effective communication skills, ability to research (rights, services, charitable help), problem-solving ability, knowledge of child protection practices and emotional regulation. These skills were considered necessary to secure *'positive evaluations from social workers, having apprehended children returned home, or escaping the surveillance of the state'* (p.365). However, social workers did not support the parents to develop these skills; instead they had to learn from *'their everyday trial and error experiences of working the system'*. (p.368).

This complex interplay of factors renders parental engagement and participation a stubborn and difficult issue to resolve. Approaches to reducing barriers to engagement are desperately needed (Lalayants 2013). There remain ongoing and very challenging obstacles, despite the UK substantially increasing the implementation of different frameworks for practice (e.g., signs of safety, systemic practice, restorative approaches, motivational interviewing) in the past 15 years intended to improve relations between social workers and families in the child protection arena. It has been argued however that *'without adequate support, reframing practice can only achieve a particular and limited set of outcomes'* (Laird 2017, p.50). Therefore, different strategies for improving participation are needed instead of simply relying on individual social workers to change their practice (Kemp et al. 2009, Featherstone et al. 2018).

## **Method**

While there are many methods for reviewing the literature base within a specific field of research, we have chosen to adopt a narrative review approach, with the aim of engaging in a critical and objective analysis of the current knowledge on peer parental advocacy. This approach is distinct from a systematic review which employs a clear methodology to be reproduced by other researchers and follows a set of clearly defined inclusion criteria.

Though not methodologically reproducible, narrative reviews are useful for obtaining a broad, comprehensive perspective on a topic. They benefit from less strict conditions for inclusion criteria or method for appraisal than other types of review (Macdonald 2003). Because of this, narrative reviews can have greater scope, tackling more wide-ranging topics than systematic reviews and give a less exhaustive picture of the evidence base (Collins and Fauser 2004).

The narrative review was based on a defined search strategy, exploring the following research question:

- What is the evidence on the effectiveness of parental advocacy, especially in relation to parental engagement when child and family social workers are working with families?

The search was conducted between October and December 2021 using a range of national and international databases and journal repositories. General internet-based searches were also used to identify 'grey literature' such as reports commissioned by governmental and third-party organisations on existing advocacy programmes. In addition, the Snowballing Technique (Coleman, 1959) was implemented to identify any additional, relevant papers and reports that were not identified in the original search.

The search strategy involved multiple keywords searches using the terms 'child protection', 'parental engagement', 'participation' and 'parent peer support', 'peer mentor', 'parent partner', 'peer advocates', 'parent advocate' and 'representatives'. Review searches were limited by language (English) and those published between 2005 and 2021. No restrictions were imposed on the research design for this review if the study was about parental engagement or parental peer advocacy. Studies were excluded if they were published before 2005 or were not published in the English language. This narrative review is based on an analysis of the final sample of 52 papers. In reviewing and analysing the research, three broad themes were identified: proximal goals of PPA, distal goals of PPA and challenges of PPA. There are eight sub-themes distributed across the three broad themes.

**Table 1: Summary of reviewed programmes and main findings [INSERT HERE]**



## **Findings**

As already noted, Tobis, Bilson and Katugampala (2021) identify three types of Parental Peer Advocacy: case advocacy, program advocacy and policy advocacy. Most of the research has focused on the first two of these three types of parental advocacy, therefore they will be the focus of this review.

In terms of reviewing aims and intended outcomes of PPA, Berrick et al. (2011) make a useful distinction between proximal and distal goals that will be used as a broad framework within which to present the findings of this review. The proximal goals are to help parents understand how to effectively engage in children's services; increased motivation to access support and understand the implications of their actions, or inaction; benefits to the advocates; and improved relations between social workers and parents. The distal goals are to reduce maltreatment, reduce the need for children to be placed into alternative care and improve the likelihood of reunification when children have been removed (Berrick et al., 2011).

The following section will explore in more depth the proximal goals, summarising the literature and drawing upon the existing literature base surrounding three key themes identified by Berrick et al (2011) (shared experience, communication and support). It will then consider the distal goals of PPA, investigating the research looking at the impact of parental advocacy organisations on (1) reduction of child maltreatment and (2) reunification. Finally, we provide a summary of the challenges of Parental Advocacy and from this identify three themes in existing literature: professionalization, supervision and implementation.

### ***Proximal goals of parental advocacy***

In a study analysing interviews with 25 parents who received peer parental support and six mentors who provided the support, Berrick et al. (2011) identified three proximal goals which parents and mentors frequently referred to in interviews: the value of shared experiences, communication, and support.

Shared experience: Parents often described the benefit of being supported by someone who had ‘been there’ and could empathise with their situation. The shared experience meant that parents were more trustful of their advocates and were more receptive to their encouragement. One parent in the study said the following about her parent advocate:

*‘She makes you stand tall through it all...and especially because your parent partner can kind of tell you what they went through; the situation they went through. And it’s like whoa; you went through all that and you got your kids and you’re doing good? I can do this. I can do this’* (p.184).

Receiving support from someone with a similar background and/or shared experiences was also found to be a key aspect of PPA by other researchers (Bohannon et al. 2016; Lalayants et al. 2015; Rockhill et al. 2015; Leake et al. 2012). A parent peer mentor in a study by Lalayants (2013, p.116) described it in the following way:

*‘I’ve been there, so I can be of some support and to assure them that they’re not the only ones that have been through what they’ve been through. That other people make mistakes too. There are people out there to help you come around, to come through what you’re going through’*

Importantly, not only did the advocates provide encouragement and hope, but they would also outline the consequences of not engaging with services and making changes.

Communication: Parents in Berrick et al.’s (2011) study reported that their advocate functioned as a mediator between them and the services, especially in respect of translating social work jargon and courtroom terminology. The advocates supported them to ask the questions they had and model appropriate communication styles with other professionals. Parents also reported that their advocates were much more available than other support services were, including in the evening and on weekends. One parent in the study described the style of communication within court proceedings as ‘*gibberish*’ and said that:

*‘[My mentor] pretty much explained it to me in layman’s terms, telling me in my own language what was going on. So, when I stood there, dumbfounded,*

*looking at the judge like...okay? Looking at my lawyer – okay, I’m an idiot; I didn’t understand any of that. That’s when she pretty much blurted it out in my own words...Because they’ve been through it all and they know, and they know everything in and out...So they just put it in layman’s terms and guide you through it’ (p.186).*

This finding that advocates functioned as a ‘conduit’ (Acri et al. 2021, p.19) or ‘cultural brokers’ (Marcenko et al. 2010) was echoed in Lalayants (2012, p.35) study involving 21 parents in which parents described their mentors as being able to “*speak their language*”, literally and figuratively and “*explain things in a way that they could understand*”. In one of the few UK studies, Featherstone et al. (2011) interviewed 18 parents who received parental advocacy and eleven of these found that the support facilitated their ability to effectively communicate with children’s social care.

Support: Parents in the study by Berrick et al. described receiving emotional, material, and practical support from their parent advocates. Advocates often had a comprehensive understanding of the available resources and support services, having needed them themselves before and were thus able to help parents access the services. The authors note that it might not just be the emotional and practical support, but also, who provides that support which is the key ingredient.

Parent advocates therefore supported parents to improve knowledge about resources and support, understand their rights and how to advocate for themselves, and increase their social support (Thorpe 2007; Frame et al. 2010; Watson et al. 2010; Lalayants 2015). In this way, parent advocates are intended to complement, not replace the social workers in providing social, emotional, and practical help (Leake et al. 2012).

In addition to the advantages bestowed upon parents because of receiving PPA, benefits to social workers have also been noted. It has been reported that PPA facilitates engagement between social workers and parents and increases empathy of social workers for parents (Lalayants 2012, Sears et al. 2017, Leake 2012, Heubner et al. 2018). This is encapsulated by two different social workers:

*‘We may have an understanding of what our family is going through but to have actually been there, like mentors have, it helps bridge that gap. Some families don’t really want to communicate because [caseworkers] don’t understand what they’ve gone through... Through the mentor, I was able to maintain a relationship*

*with [the client] and communicate with her and she ultimately ended up getting her kids back and did really well...'* (Sears et al. 2017, p.84).

*'Because not only do they know the process, but they know about their emotions and feelings that come along with that. They've been through that. So, they know what the family is feeling. They know what they are afraid of...They've been through the same emotions. So, they know how to address it with them. Whereas I could say "Oh yes, I understand you're sad or upset" and everything of that nature, but I've never been through the process.* (Lalayants 2012, p.28).

Finally, PPA has also been shown to have numerous benefits for the advocates (Damman 2018). Lalayants et al. (2015) points out that a defining and important benefit of parent peer advocacy lies in the mutuality – that is, the helper is helped in the process as much as those receiving the help. PPA *'may confer as much or more benefit to parent partners as they do for families in the system'* (Leake et al. 2012: 19).

PPA facilitated the development of professional job skills, a sense of purpose, confidence and provided further opportunities. Heubner et al. (2018) carried out a study into 28 peer parent advocates supporting parents with maltreatment and substance misuse (783 families over an 8-year period). This research concluded that whilst ten had experienced challenges thus requiring them to leave their position, eight had left to take advanced positions with four having earned further education qualifications and ten remained in position for an average of 5.8 years' employment. In other words, 64.3% of mentors experienced opportunities and success in carrying out this role.

Interestingly, Leake et al. (2012) note research highlighting high rates of recurrence of maltreatment and propose that being a PPA may serve as a protective factor against future maltreatment. It can therefore function as an effective *'aftercare program for those who have exited the system'* (2012: 15). As pointed out by one parent interviewed in Berrick et al.'s (2011, p.189) study:

*'It never lets me forget where I came from. It keeps me humble and keeps me sober. They (the families) give me more than I give them. To see their success, the daily impacts of my work, makes my life richer'.*

Given the problems that many non-professionals have experienced, a helping role can prove rehabilitative, supporting individuals with resolution of ambivalence to one's own

problems by persuading others (and by default, themselves), achieving social status inherent in the role and function as distraction from past unhealthy patterns and self-concern (Reissman, 1965).

### ***Distal goals of Parental Peer Advocacy***

As summarised above, parent advocacy has shown some promise, with rich qualitative data illustrating the benefits and potential to improve access to support, improve relations between social workers and parents and thus, engagement. PPA can also provide a meaningful emotionally supportive relationship with someone who has had a similar experience. We will now examine whether PPA improves distal goals, namely reducing child maltreatment and likelihood of reunification.

#### ***Reduction of child maltreatment***

Findings were overall positive with respect to reduction of child maltreatment. Polinsky et al. (2010)'s evaluation of Parents Anonymous found that parents showed improvements in child maltreatment outcomes, risk factors, and protective factors, with statistical significance for parenting distress and rigidity and psychological aggression toward children. More recently, Hall et al's (2021) study of the Sobriety Treatment and Recovery Teams (START) found subsequently lower rates of child maltreatment amidst higher reunification rates, when compared to children receiving standard services. Echoing this, a quasi-experimental design used to examine the effectiveness of Parents Anonymous found that it *'may have a positive, long-term impact on improving safety for children'* and *'parents involved in Parents Anonymous were significantly less likely to have a subsequent maltreatment referral or substantiated maltreatment finding at the 12-month follow-up period compared to parents who did not participate in Parents Anonymous'* (Burnson 2020, p.23).

However, it should be noted that the long-term potential for reduced child maltreatment is not yet established in studies on parent advocacy. For example, Lalayants, Wyka and Saitadze (2021) study of peer support programmes suggests that this impact may not be sustained or improved over a longer period of time and is of particular concern where interventions are, by design, temporally limited. This study in particular highlights a clear need for research to examine peer support services beyond initial child safety conferences to establish the ongoing potential for a reduction in child maltreatment.

### Reunification

Findings in relation to rates of reunification were also positive, albeit more mixed than for reduction of child maltreatment, especially when more rigorous research methods are utilized. Berrick et al.'s (2011) study of the 'Parent Partner Program' found that children whose parents were involved with the program were four times more likely to be reunified with their children (58.9% compared with 25.5%) than the comparison group. A further study (Chambers et al., 2019) of the same program using a quasi-experimental method found that children whose parents were supported by the programme were significantly more likely to be reunified (62% compared to 55%). In addition, children were less likely to subsequently re-enter into care within 12 months (13% compared to 22%). However, the effect between the groups was eroded within 24 months indicating short term, rather than sustained positive effects.

Similar findings were identified in Bohannon et al.'s 2016 study of Parents for Parents (P4P) which found higher rates of reunification with their children (2.1 times more, or 60% v 39%) than counterparts who didn't access P4P. A more recent study, utilising a quasi-experimental design found that 70% of parents were reunified with their children who accessed P4P compared to 53% who did not. Another study of a pilot program, 'Parents in Partnership' found that parents who accessed the advocacy support were 5.6 times more likely to be reunified than children whose parents didn't access the service (Enano et al. 2017).

The variation in effects of parental advocacy depending on the research method is illustrated by several studies exploring the impact of START (Sobriety Treatment and Recovery Teams). A study by Heubner et al. (2012) found that women who were supported by START had nearly double the sobriety rate of non-START controls and children of parents accessing START were half as likely to enter care (21% versus 42%). In 2015 however, a study using a quasi-experimental design found that children served by START were more likely to enter care (32%) compared with the control group (27%), although they were less likely to experience recurrence of child abuse or neglect within 6 months (4.6% versus 10.1%) and less likely to re-enter foster care 12 months (0% versus 13.2%). More recently, a Randomized Control Trial found favourable albeit considerably more modest outcomes than the 2012 study detailed

above. Children whose parents were supported by START were marginally less likely to enter care (24.6% compared with 26.1%), more likely to be reunified (61% versus 47%) and rates of reoccurring abuse were not statistically significant (12% versus 11%).

In summary, these studies are important contributions to understanding the impact of parental advocacy and reveal the potential positive effects on outcomes for children and their families. However, there are several methodological issues that mean that caution should be applied. For example, engagement with parental advocacy is voluntary, therefore the studies are likely biased to select for those most motivated to engage in support services and capable to make change (Berrick et al. 2011, Chambers et al. 2019, Enano et al. 2017, Polinsky 2010, Burnson 2020). Some studies used a comparison group based on a historical cohort of parents involved with children and this probably undermined internal validity and the positive effects could be due to other system changes (Berrick et al 2011, Bohannan 2016). One had a small size (Enano et al. 2017) and another was a once-in-time examination (Heubner et al 2012). Therefore, the empirical evidence is not sufficient to make strong conclusions about its impact (Cohen and Canan 2006, Chambers et al. 2019, Acri et al. 2021, Fitt et al. 2021, Lalayants 2021).

In addition, the quantitative findings about PPA derive from different types of parental advocacy within different systems. For example, START involves advocacy *plus* intensive, specialized case management, therefore it is not possible to make causal links between outcomes and the role of advocates (Heubner et al. 2012, Hall et al. 2015, Hall et al. 2021). Furthermore, parents supported by the START programme are provided with Motivational Interviewing, which has a wealth of strong, robust evidence and research demonstrating its efficacy in supporting people who use substances (Forrester, Wilkins and Whittaker, 2021). Finally, most of the studies reported above were undertaken in the USA. We therefore need robust studies to be undertaken in the UK to consider whether it is effective at supporting parents, reducing maltreatment, and safely reducing the rates of children in care.

### ***Challenges of Parental Advocacy***

*'Inclusion of peer mentors in conventional child welfare practice is hardly straightforward'* (Frame et al 2010 p.2)

### Professionalisation

Though PPA is distinct from professional or formal legal advocacy which are outside the scope of this review, we recognise that there may be an element of professionalism to the role of peer advocate. One key debate within the literature is about the paraprofessional nature of the role, and the extent to which parent advocates are or should be professionalised. For example, some have noted that Parent Peer Advocates may have had limited pre-employment experience and will require training and ongoing support to understand the requirements of a paraprofessional role, such as dress code, time keeping, record keeping, managing conflict, etc (Berrick et al. 2011; Frame et al. 2010). Similarly, Cohen and Canan (2006) note advocates need training at all levels of the organisation to learn how to navigate internal systems and work effectively within groups. On the other hand, Frame et al. (2010) caution that a balance needs to be struck between providing sufficient training to provide peer parent advocates with adequate skills and knowledge whilst ensuring that they are not over professionalised.

### Supervision

Supervision was identified as a crucial need for parent advocates. In a paper examining the role of supervision for peer advocates, Riley (2010) found that peers who received regular and supportive supervision were more likely to remain in their roles for longer periods. Riley noted that peers often expressed deep gratitude and satisfaction for undertaking the work they did. However, advocates could at times feel rejected, devalued, manipulated, or be drawn into over-identification due to shared experiences. Supervision provided a space to examine their relationships to ensure these dynamics didn't interfere with the help they provided. Relatedly, not all parents connected with their parent advocate, challenging the assumption that shared experience will automatically create a bond (Rockhill et al. 2015). In addition, peer parent advocates were likely to face setbacks, especially under stress, and supervision was an important antidote to prevent advocates using old unhealthy coping strategies.

It is important to note that even with supervision, parents could re-encounter personal difficulties. Heubner et al. (2018) highlight that although any professional may have trouble, parent advocates may be especially vulnerable due to a risk of relapse and unresolved difficulties interfering with their role. In their study of 28 mentors, the



authors found that ten (35.7%) left the role after experiencing challenges with their roles after between five and 35 months of starting. The difficulties included relapse, violation of boundaries or ethical/policy breaches. Similar challenges were found in a study by Lalayants (2021, p.9), where 35 parent advocates were interviewed in relation to Secondary Traumatic Stress. The study found that 23 of 35 (65.71%) advocates affirmed that 'it can become overwhelming', with one parent advocate stating, '*there are some cases that do take a huge toll*'.

### Implementation issues

In addition to challenges relating to the peer advocate, there may also be challenges deriving from the implementation of PPA within the pre-existing child protection system. Frame et al. (2010) claim that PPA runs contrary to the dominant, prescriptive, professionally led approach to case management. Therefore, some practitioners may feel threatened by the inclusion of parent peer advocates and find the challenge to established ways of practice or policy difficult to receive. Because of this, the introduction of PPA requires strong leadership and a spirit of collaboration.

With that said, Featherstone et al. (2011) received written feedback from 19 social workers in respect of parents receiving parental advocacy, and all of them were 'very positive' about the role of advocates with two thirds agreeing that it improved relations and engagement. Twelve child protection conference chairs also provided written feedback. The chairs welcomed parental advocacy and more than three quarters of them believed that it improved parental engagement, and in eight out of 29 cases this engagement was linked to improved outcomes for children.

Lalayants' (2017) study examined the perceptions of partnership between child protection workers and peer advocates and found a more mixed picture. Thirty supervisors and nine advocates were interviewed, and the author found that most social workers described their relationship with parent advocates positively. However, some social workers did not fully understand the role and purpose of the parent advocates. In addition, there was a power imbalance with child protection workers having the responsibility to make the decisions with the feeling that advocates didn't influence the decision-making process. Some advocates believed that social workers were fixed in their judgement and views of a family, and this hindered collaboration. Finally, some parent advocates thought that some workers preferred the 'old' way of

working that didn't promote parent participation. It was therefore important that trust was developed between the social workers and advocates, however this took time. One peer parent advocacy in the study reported the following:

*'I believe it took some time...We've done a few conferences together and they see how we work with the parents, so that it's not like we're just trying to keep all the children at home whether the parents do the right thing or not...The parents have to do the right thing for their family in order for the children to stay at home.... So, they see that we're on the same page'* (p.46)

The interviewees in Lalayants' study described monthly shared meetings between social workers and parent advocates as a way of promoting a positive working relationship, as well as understanding each other's roles. This was especially important because of the high turnover of staff. Lalayants emphasised the importance of agency readiness with substantial training required at all levels of the organisation to facilitate this implementation of PPA.

## **Conclusion**

Parental Peer Advocacy has seen growing interest with increasing research detailing the benefits and challenges. It is now being considered within children's services across the UK, drawing upon the success of similar initiatives, especially in the USA. There is a compelling case for PPA, not least as it may contribute to resolving the longstanding challenges within children services of families having the opportunity to meaningfully participate in decision making (Corby et al. 1996, Muench, Diaz and Wright 2017, Bekeart et al. 2021).

Parental Peer Advocacy is also an opportunity to utilize hitherto untapped, unrealised potential from parents who have experienced the system, whereby they can significantly help others whilst simultaneously developing their own skills, knowledge, and confidence. Preliminary evidence indicates that PPA can improve outcomes for children and families, although further research is required to develop an evidence base that is '*robust, defensible and free from bias*' (Fitt et al. 2021).

Finally, it is important to recognise that the implementation of new initiatives in practice is highly complex, and different organisations are likely to react in different ways. Therefore, it is difficult to predict how a Parental Peer Advocacy service will

interact with a particular setting, and studies are needed to assess whether PPA is being implemented effectively or not, and whether they are capable of supporting parents in different circumstances and in different contexts.

### ***Limitations***

Given the scant evidence base of PPA based research in the UK, the style of narrative review allows for a broader search of literature whereby there is less stringent conditions for the inclusion/exclusion criteria (Collins and Fauser, 2003). However, a limitation of this is that the author's bias can influence the papers utilised as well as how they are represented and described (Green et al., 2006).

Whilst this review has given some thought to methodological issues which can arise from studies relating to rates of family reunification, the review has primarily focused on substantive findings. Therefore, the methodological basis of studies related to PPA needs further evaluation. There is also little evidence which focuses on the effectiveness of PPA services in the UK context. Therefore, there should not be an assumption of the transferability of international outcomes, which have vastly different national and social contexts compared to the UK. With varying models of PA and/or PPA, there is a need for further studies looking at service outcomes in order to better inform parental advocacy practice.

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