

ARTICLE

A Law Clinic Model for Preventive Legal Advocacy

[Cary Bloodworth](#)

Nov 14, 2023 ⌚ 11 min read



Family Law & Children's Rights

Civil Litigation

Child Welfare

Child Advocacy

Summary

- FLASC is a multidisciplinary partnership that provides civil legal services to families in need.
- Its service model is three-tiered: direct representation, limited assistance, and referral services.
- FLASC encourages child welfare workers to think critically about whether the referral is appropriate for the program and to consult with the clinic prior to making the referral.



Willie B. Thomas via Getty Images

The term “preventive legal advocacy” encompasses many different programs and models across the country, all doing impactful work. The success of these programs caught the attention of Wisconsin’s Department of Children and Families and Children’s Court Improvement Project, which sought to establish a preventive legal advocacy program in Wisconsin. The result was the Family Legal Advocacy and Supports Clinic (FLASC), a multidisciplinary legal clinic that serves both the community and students. The clinic’s goals are twofold: First, the clinic aims to deliver high-quality legal and social support services to stabilize families and hopefully prevent deeper involvement in the child welfare system. Second, the clinic aims to deliver high-quality education to law students and social work students through hands-on client work.

Services Model

Much of FLASC’s success can be attributed to its team model. FLASC is a partnership between numerous agencies and organizations, each of which offers its expertise and assistance to strengthen the program. The Wisconsin Department of Children and Families provides funding, data analysis, and support in other areas like publicity and content creation. The University of Wisconsin Sandra Rosenbaum School of Social Work provides social work students to staff the clinic. The University of Wisconsin Law School provides law students to staff the clinic and the physical space and resources to house the clinic. The Children’s Court Improvement Program provides general guidance and support. Finally, four county child welfare agencies identify and refer appropriate families to the program.

This team model has enabled FLASC to establish an efficient referral and workflow process. FLASC receives all of its referrals directly from four county child welfare agencies. The clinic’s referral criteria are broad: First, there can be no formal child welfare petition filed. Second, there must be an unmet need for civil legal services. And, third, participation must be voluntary. This last criterion is very important. County workers are trained that FLASC is not to be used as a coercive tool, and families should not be threatened with more formal legal action if they do not participate. This is necessary in order to build a strong, trusting working relationship with participants.

When initially developing the program, the four county agencies participating in the program identified family law as the largest area of need for civil legal services. Thus, FLASC focuses primarily on providing legal assistance with family law issues—such as divorce, custody and placement modification, and paternity actions—and family law-adjacent issues, such as guardianship cases. FLASC has a three-tiered model of services, providing direct representation to some, limited assistance to many, and referral services to those we cannot directly assist. Most participants receive a service appointment, which

is a one-on-one meeting with a law student during which the law student gives the participant general legal information about the participant's legal issue and assists the participant in identifying and filling out the correct forms. In addition, the clinic provides direct representation to some participants in family court cases.

Although the clinic specializes in family law, it accepts referrals for any type of civil legal services. FLASC has received referrals for non-family-law issues such as housing and eviction, immigration, restraining orders, and assistance with drafting simple wills and power of attorney documents. For these referrals, FLASC ensures a warm handoff to another organization that can offer assistance. For example, the University of Wisconsin Law School has numerous clinical programs that offer assistance with issues like eviction defense, consumer law, immigration, and restraining orders and survivor advocacy. Whenever possible, the clinic hands off referrals in these areas to another clinic at the law school. If there is not an appropriate clinic at the law school, a law student reaches out to other community organizations and nonprofits to try to find legal assistance for the participant. Through this three-tiered model of services, FLASC is able keep referral criteria broad and offer some assistance to many.

FLASC also takes a multidisciplinary approach to services. In addition to legal services, all participants are offered the opportunity to work with a social work student, who can help with nonlegal social support needs. Social work students play a critical role in the clinic; often, the legal remedy available to participants is narrow, but social work students are able to offer broader, more impactful assistance in nonlegal areas. For example, social work students have helped participants apply for and obtain public assistance like FoodShare and Medicaid, found needed supplies for participants like formula and diapers, helped participants find and set up an appointment with a new care provider, and gave moral support to participants at court hearings. Together, social work students and law students work collaboratively to holistically support participants.

Educational Model

FLASC is not only a preventive legal advocacy program; it is also an educational opportunity for both law students and social work students. Each fall, six to seven law students enroll in the two-semester clinic. The clinic has a classroom component, in which law students meet once or twice a week and are taught both substantive family law and lawyering skills. There is a strong focus on historical and current inequities in the legal system as well as trauma-informed care. Students also complete a clinical component in which they work directly with participants and are the primary team member responsible for the provision of legal services, under the supervision of an attorney. Law students are responsible for drafting legal documents, maintaining client communication, and

conducting hearings. Students have weekly supervision meetings with their supervising attorney to discuss referrals and clients, and the clinic regularly uses case rounds to get group feedback on cases or particular issues.

In addition to law students, two to three students from the University of Wisconsin Sandra Rosenbaum School of Social Work are placed with the clinic to complete their two-semester field placement requirement. They provide nonlegal social support services to participants. Social work students receive weekly supervision from both a supervising attorney and a social work supervisor, and they also have related coursework as part of their field study program. Together, social work students and law students provide comprehensive assistance to participants, learn and practice professional skills, and learn from each other's differing perspectives.

Impact in Year One

FLASC is a three-year pilot program, and the first year ended on August 31, 2023. In that first year, the clinic received 136 referrals from the four participating counties. The majority of the individuals referred to the clinic were referred for legal assistance with family law issues—like post-judgment motions in family law, paternity, and divorce—or family law-adjacent issues—like guardianship and domestic violence restraining orders. The clinic also received referrals for other civil legal issues, like housing, survivor advocacy, immigration, and simple wills. In addition, child welfare workers identified 54 referrals as also needing support from a social work student to address nonlegal needs. The greatest areas of nonlegal needs were in applying for benefits and finding affordable housing.

Within the first year, 56 individuals received service appointments related to various family law issues, and 13 individuals received referral services. Additionally, 13 individuals were offered direct representation by the clinic, affecting 37 children. In addition to legal services, 32 individuals received social support services from a social work student in the first year. Social support services included helping participants obtain public benefits like Medicaid and FoodShare; finding supplies for participants like formula, diapers, a wheelchair, and lice medication; and helping participants find providers like doctors and childcare.

The impact of the clinic is perhaps best demonstrated by the effect it has had on individual families. For example, one client we will refer to as Michael was referred to FLASC for assistance with an uncontested guardianship as well as help in applying for Medicaid and FoodShare. Michael's long-time girlfriend, with whom he had a young child, had recently passed away. She had an older child whom Michael had raised since the child was four, and Michael needed help getting guardianship of him now that his girlfriend, the

child's mother, had died. During the guardianship proceedings, it became clear that Michael had larger social support needs than just Medicaid and FoodShare. Ultimately, the clinic was able to help him in obtaining reliable transportation, employment, Medicaid coverage for himself and his two children, FoodShare assistance for the family, childcare, survivor benefits, primary care providers, and mental health treatment. Ultimately, the court awarded him full guardianship. After hugs and tears in the courthouse hallway, the family celebrated by going bowling.

Another family deeply impacted by the clinic is that of a woman we will call Shelby. Shelby was referred to FLASC after the father of her children severely abused her youngest child, resulting in significant and permanent injuries. Her legal and nonlegal needs were numerous and complicated. When we started working with Shelby, the state had already filed a paternity action seeking to establish the abuser as the legal father of the victim child. FLASC was able to get the paternity action dismissed despite genetic testing confirming biological paternity. This was important to Shelby because had the abuser been established as the child's legal father, he would have been entitled to exercise his parental rights until the child turned 18. Having the paternity action dismissed ensured that there is no legal relationship between the abuser and the victim child and that the abuser will have no future say in the child's life, no access to the child, and no access to information about the child. FLASC then also assisted Shelby in extending a restraining order and in obtaining sole custody and primary placement in the family court case involving her older child. In terms of nonlegal assistance, social work students assisted her with obtaining public benefits; identifying childcare and therapy services; and finding supplies like diapers, formula, clothes, and a crib. Most recently, FLASC assisted Shelby in advocating for herself in the criminal child abuse case still pending against the father. While our work with Shelby is not finished, Shelby has made significant progress in protecting herself and her family and in rebuilding her life after tragedy.

Lessons Learned

While the clinic has had success in its first year, it has also had challenges. One of the biggest has been data collection and sharing. The structure of the clinic means that two different agencies are collecting data. The clinic is collecting data on the people who are referred and on what services the clinic delivers. The Department of Children and Families is collecting data on whether those referred have further contact with the child welfare system and, if so, whether the children are ultimately removed from the home. Ideally, we would be able to connect these two pieces of information to see which services are more or less effective than others in preventing future involvement in the child welfare system. However, because of confidentiality restrictions on both sides, the data cannot be commingled at this point. The FLASC partners continue to discuss this to try to find a way

to commingle the data so that we can get an even better understanding of the effectiveness of FLASC services.

A second challenge the clinic faced in its first year was the surprising number of referrals for private guardianship actions. Many of these referrals were appropriate and raised no concerns. For example, we represented one woman whose health was rapidly declining. She wished to establish a guardianship for her son with a family member so that when she was no longer able to care for him, the family member could seamlessly step in. Another example was a mother we represented in terminating a guardianship. Her daughter had been under the guardianship of her grandmother for several years, but the relationship had soured, and the grandmother had kicked her out of the house. Our client was in a stable place and able to care for her daughter, and we were able to assist her in terminating the guardianship so that she could reunite with her daughter.

However, some of the guardianship referrals raised some concerns about the clinic inadvertently participating in the hidden foster care system. Hidden foster care can occur when child welfare agencies encourage relatives to care for children outside the foster care system. While this is often done with the good intention of keeping a child out of foster care, parents receive fewer procedural protections in family or probate court proceedings than they would in juvenile court proceedings, and parents and children do not receive the same services and assistance to aid with healing and reunification that they would in juvenile court proceedings. In the first year, FLASC received some referrals for guardianships where the party being referred was the proposed guardian and where the living arrangement of the child living with the proposed guardian had come about only after child welfare involvement. These types of referrals were concerning, especially when we learned that some of the parents were opposed to the guardianships.

One of the purposes of FLASC is to keep families together, and participating in the hidden foster care system is antithetical to that. Therefore, we worked with the four referring counties to develop guidelines for guardianship referrals going forward. Together, we identified a few types of guardianship referrals that are appropriate: a referral where there are no living parents; a referral where the parent is the party being referred; or a referral where the living arrangement was informally developed by the family prior to child welfare involvement, and the family wishes merely to formalize it. We also identified some potential red flags, including a referral where a parent is opposed to guardianship or a referral where the living arrangement has been facilitated by a child welfare worker. In these situations, FLASC is now encouraging child welfare workers to think critically about whether the referral is appropriate for the program and to consult with the clinic prior to making the referral. In addition, FLASC is strongly encouraging child welfare workers to refer parents to the clinic instead of proposed guardians. This will ensure that parents receive legal representation in the guardianship proceeding. This will also ensure

that parents have access to social support services from FLASC so that they can receive assistance in stabilizing their own situations and work toward reunifying their family.

Looking Ahead

FLASC is now in the second year of the three-year pilot. The program has received a lot of positive feedback from the legal community and child welfare workers. However, we are also working to get the direct feedback of those whose perspective matters most—the participants. The clinic is in the process of surveying past participants and will continue to survey participants both at the time our services are complete as well as six months later. With this, we hope to get information on what is working and what is not, in order to improve the clinic and the services it provides.

Another goal for FLASC is to increase the number of referrals to the clinic. To do this, clinic staff visited each of the four county agencies that refer participants to get feedback from child welfare workers and raise awareness of the program among workers. Clinic staff, along with a FLASC team member from the Department of Children and Families, have also given presentations on the program at child welfare working groups and conferences this summer to raise awareness of the clinic and the work it is doing. So far, the clinic is on pace to meet its goal of serving more families. In September of 2023, FLASC received more than twice as many referrals as in September of 2022.

As we reflect on the successes and challenges of our first year, we are excited for what the second year will bring. New students, new participants, and new challenges bring new opportunities to support families. And if the clinic helps only one family avoid foster care and remain together, FLASC will have been successful in its mission.

Author



Cary Bloodworth

Cary directs the Family Legal Advocacy and Supports Clinic (FLASC), where she works with both law students and social work students in providing legal and non-legal services to families at risk of formal involvement with the...

[View Bio →](#)

Committees

This content was produced by:

[Children's Rights Litigation Committee →](#)

Related Content

[Civil Litigation](#)

Preventing Legal Deserts in Our Rural Communities

Nov 14, 2023

[Civil Litigation](#)

Tips for Lawyers: Empowering Our Clients in Their Transitions to Adulthood

Oct 30, 2023

[Civil Litigation](#)

Empowering Child and Youth Clients: Advocating for Joy in the Legal System

Oct 16, 2023

[Civil Litigation](#)

Improving Access to Medicaid Coverage for Former Foster Youth with the SUPPORT Act

Mar 15, 2023

[Civil Litigation](#)

Cornerstones of Interdisciplinary Prevention Advocacy

Feb 09, 2023

[Advancing the Profession, Civil Litigation](#)

The F.I.R.S.T. Legal Clinic: A New Frontier of Partnerships to Stop Trauma

Jul 14, 2022

ABA American Bar Association |

[/content/aba-cms-dotorg/en/groups/litigation/resources/newsletters/childrens-rights/fall2023-a-law-clinic-model-for-preventive-legal-advocacy](#)