Legal Aid in Child Welfare: Evidence from a Randomized Trial of Mi Abogado

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Preliminary Draft; comments welcome

Abstract

Mi Abogado provides legal aid and social services to foster children living in institutions in Chile. We conducted a pragmatic, randomized trial of its introduction to investigate its effects on child well being. Using administrative data, we find that the program substantially increases permanency, reduced criminal justice involvement, along with suggestive evidence of improvements in schooling attendance. Effects are stronger for boys across these outcomes. The resuts show that the organization of services provided to foster children can have substantial welfare effects.

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1 Introduction

The primary aim of the child welfare system is to find permanent homes for maltreated children, typically through family rehabilitation and reunification. This system affects a large number of children. In high-income countries, 3-6% of youth spend some time in foster care during their childhood (Fallesen et al., 2014; Rouland and Vaithianathan, 2018; Yi, Edwards, and Wildeman, Yi et al.). Currently the share of children in foster care in the U.S. is approximately 0.6%; in Chile the figure is closer to 0.4% (Quiroga and Hamilton-Giachritsis, 2014).

Foster care is meant to be a temporary arrangement. In the US, the median length of stay is 15 months, although a sizeable minority spend the remainder of their youth in foster care (Bald et al., 2022). These youth who "age out" of foster care are particularly vulnerable, with high rates of homelessness, substance abuse and criminal justice involvement (Bender et al., 2015; Okpych and Courtney, 2014; Dworsky et al., 2013). More generally, length of stay is associated with greater delinquency, lower educational attainment, and poorer mental and physical health, although the causal effects of longer stays deserves more attention (Hunter et al., 2014).

As a result, a primary goal of child welfare authorities is to increase permanency and reduce length of stay in an effort to improve child well being and to reduce the cost of foster care (Becker et al., 2007; Ryan and Gomez, 2016). There is particular attention drawn to legal and other bureaucratic hurdles to permanency through adjournments and continuances (Children's Rights Organization, 2009). The 1997 Adoption and Safe Families Act required child welfare agencies to hold a permanency hearing within 12 months and initiate the process to terminate parental rights if a child spent 15 of the preceding 22 months in care in an effort to reduce bureaucratic delays (Swann and Sylvester, 2006; Becker et al., 2007). Often policies introduce advocates for children into the legal framework to recognize the focus on the best interests of the child (Bryan et al., 2010; O'Brien et al., 2012; Pilkay and Lee, 2015; Rashid and Waddell, 2019).

Nevertheless, there is little evidence on the causal effects of interventions aimed at speeding the time to permanency or their effects on child outcomes. Rashid and Waddell (2019) study the increasing use of lawyers to represent children in permanency

hearings.[1] Using the staggered roll out of mandates for these representatives across states in the U.S. and a difference-in-differences design, they find that such a mandate increases the likelihood of adoption by 14% within one year of foster care entry.

In this paper, we report the results of what we believe is the first experimental evaluation of an intervention that increases the quantity and quality of legal representation for children in foster care to test whether the program increases permanency and improves child well being. The program is "Mi Abogado" ("My Lawyer"), and it was introduced in Chile in 2017. The program provides foster children access to an attorney with a much smaller caseload compared to children not in the program. The program also provides a psychologist and a social worker who work together with each lawyer to connect children with services.

At the start of the roll out of the new program it was recognized that the program could not serve all eligible children. As a result, it was decided to structure the roll out in a way that would provide a credible evaluation. Together with the Experimental Policy Initiative of the Chilean Budget Office, the Ministry of Justice randomized the access to the program. Another innovation is that administrative data in Chile allows us to study both child welfare outcomes, such as time to permanency, as well as criminal justice involvement and school attendance as barometers of child well being.

By design, the treatment group had substantially more exposure to the program, resulting a 50% increase in program engagement compared to the control group. Our intention-to-treat estimates show that this greater exposure increases the probability of permanency by 6.5 percentage points over the following two years (a 26% increase compared to the control group mean), a 4 percentage-point reduction in criminal justice involvement over those quarters (a 30% reduction), and a 3 percentage point increase in school attendance (a 5% improvement compared to the control group). When we test heterogeneous effect by gender, the permanency effect is present for both but stronger for boys; the crime and attendance effects are concentrated among boys. These results suggest that investing in superior legal representation for children in foster care can substantively improve some key child outcomes.

The remainder of the paper is organized as follows. Section 2 describes alternative care placement in Chile, section 3 describes the program. Section 4 present details on

[1] Children receive representation from a "lawyer-guardian ad litem"

the triplets functions, training and experience. Section 5 shows the data. In section 6 we expose the evaluation design and in section 7 the empirical framework. We provide statistics of balance in section 8, in section 9 we present program participation analysis and program activities, estimation of causal effect results are shown in section 10 and section 11 concludes.

2 Child Protection in Chile

When children are suspected of being abused or neglected, child protective services investigates the allegations. Following the investigation, if a Family Court judge finds that the rights of children have been violated by their parents, the child may by placed in substitute care under article 74 of the Family Courts Act. Placement prioritizes alternative care by relatives, foster care with non-related families, and residential care. Specialized programs are also available for children with special needs.

The placement of a child in alternative care in Chile is intended to be an exceptional and temporary measure (no longer than a year). In reality, a child may spend their entire life as a child in alternative care (de Iruarrizaga 2015). When it is determined that children will not return to their families, adoptive homes are sought.

The most common arrangement is placement with kin or friends of the family (Muñoz-Guzmán 2015). Nevetheless, a substantial portion of children, 39%, are placed in congregate care. Residential care are public and private facilities, managed by state National Service for Children (SENAME), that provide formal care in a non-family-based group setting. The facilities are charged with providing everything necessary for their welfare and development (Stutzin 2018).

In July 2017, a SENAME investigative commission published a report condemning conditions in institutional care: cases including deceased, sexually abused or neglected children. The report called into question the ability of residences to protect children in need of care. In order to ensure the protection of their rights, the same year, the Ministry of Justice and Human Rights created the Mi Abogado Program to ensure children's rights and work to accelerate the process of leaving residence, through a return home or adoption.

3 Mi Abogado Program

3.1 General description

The Mi Abogado Program consists of the delivery of specialized, interdisciplinary and independent legal defence to children who are in alternative care, with a priority toward children in congregate care. The main objective of the program is to ensure a "specialized, technical defence", built from the professional contributions of a triad composed of a lawyer, a psychologist and a social worker, in order to obtain the effective protection of the rights of children, promote their return to a family life (whether of origin, extended family or through an adoption process), and access services aimed at repairing damage caused by family separation.

The program's intervention begins when a legal protection case is delivered from a judge to the program. Then the child is assigned to the professional triad. The initial action of the triad is to study the child's legal file, visit the residence, and interview the child. In the first 30 days of the intervention, the triad is tasked with putting together an interdisciplinary plan, that is composed by a mental health evaluation, a diagnosis of social needs, and a legal strategy to overcome procedural hurdles in a timely way.

During the next 3 to 6 months the triad executes the plan to meet the legal, social, mental health and family rehabilitation needs so that children can exit the residential care and reunify with their families. This involves monthly visits with the child, as well as interviews with the child's family members.

Once a child leaves residence and is reunited with there family, the Mi Abogado Program continues to monitor the child's welfare for at least three months to verify the quality of the family reestablishment. For more detailed description of the program processes, please see the appendix. This includes details on each role and their qualifications.

3.2 Program data on processes

Compliance with the objectives of the processes of each child is monitored by the Courts as well as the health and education sector. As part of the monitoring, processes are recorded for each case. In Figure 1, working on the case as a team and documenting

the case planning is the most common process, averaging 11 per case. Next, the lawyer interacts with the child on average 4 times, as well as another 4 times with the interdisciplinary team. In this respect, the Mi Abogado program is centered on the lawyer. The next most common interaction is coordinating with the residence staff, followed by fewer interactions with the child's family. Last, relatively little time is actually spent in court.

The caseload for the Mi Abogado program is meant to be substantially lower than a typical case. Data on caseloads can be difficult to interpret, as cases may remain open even when the case is dormant. In our investigation of the data, it appears that a typical caseload outside the program is approximately 450 cases at any given time. For children in the Mi Abogado program, their lawyer's caseload is approximately 100 cases.

3.3 Evaluation Design

The roll out of Mi Abogado Program had an experimental design to facilitate its evaluation and to distribute the program in an equitable way. There was excess demand for children over the age of six, and randomization gave each child the same probability of receiving the Program. The assignment of children to the program was overseen by the Family Court, facilitated by an evaluation team the Experimental Policy Initiative of the Department of Expenditure Review of the Chilean Budget Office.

The evaluation is focused in the regions of Maule, Biobío, Valparaíso, and Metropolitan, among the population of children over six years of age and under 18, in residence of SENAME at some point during January and February of 2019. The randomization algorithm was stratified according to age group (older and under 12 years), region, and sex. The randomization of the Program occurred on March 30. 581 children were selected out of 1871 to be eligible to enter the program, with the approval of a Family Court judge. In May 2019, it was discovered that the program could be slightly larger, and 51 additional children were randomly selected to be eligible for the program.

Despite the evaluation design, judges could decide not to include a child in the program. In addition, the program was introduced to the control group over time as well. In order to evaluate the program, we take advantage of the original randomization,

which generates an exogenous, and sizeable increase in exposure to the program for the treatment group relative to the control group. We will compare the differences in outcomes to this difference in exposure.

4 Empirical Framework

Our goal is to test whether the Mi Abogado program was successful in improving permanency and other measures of child wellbeing. Given the We have longitudinal data on outcomes, which provides a way to compare the treatment and control groups over time in event studies. For child i in quarter t,

$$Y_{it} = \alpha + \beta X_i + \sum_{q \neq -1} \gamma_q 1\{Q_t = q\} + \sum_{q \neq -1} \theta_q 1\{Q_t = q\} \times T_i + \varepsilon_{it} \tag{1}$$

where q is the quarters from the second quarter of 2019 when the program was implemented. X_i include the strata indicators. The summation terms are indicators for each quarter in event time, and we are interested in the estimates of θ, the difference between the treatment and control groups in each quarter. The event study allows us to examine the time pattern of the results. The panel is balanced and individual fixed effects yield the same estimates.

We then pool periods into the pre-intervention and post-intervention period, which yields more statistical power. In particular, we estimate:

$$Y_{it} = \mathbf{X_i}\boldsymbol{\beta} + \gamma T_i + \delta Post_t + \psi T_i Post_t + \varepsilon_{it}. \tag{2}$$

where *Post* is a variable that takes the value 1 in all periods after randomization and 0 in all other cases. ψ is our main parameter of interest, which provides and average difference across the groups in the post period relative to the average in the pre-period. This provides a single estimate to summarize the visual findings presented in the event studies.

Standard errors are clustered at the child level throughout. Samples are sometimes restricted to older children for outcomes including juvenile crime and school attendance.

5 Data Description

All of the data in this paper is obtained from administrative registries from the government. We have daily data on whether each child in the sample lives in a SENAME institutional residence between January 2017 and December 2020. From these data it is possible to estimate whether participating in the program reduces the time that children stay in residence and increases permanency.

Next, we use registry data to measure criminal justice involvement. In particular, we have longitudinal data of legal reports of crimes where children from the program are suspects. The data is available from 2009 to February 2021, but children only start being reported as taking part of crimes starting from 2014 onward.

Education is another area where the program could potentially have impacts. We have monthly school attendance data and annual school performance data, coded as the average performance in all subjects with grades in a range between 1 and 7. Educational data are measured between March 2017 and December 2019. The COVID pandemic severely impacted most school activities beginning in March 2019 and through all of 2021 to date, so it is not possible to obtain outcomes for this period.

6 Results

6.1 Balance

In Table 1 the treatment and control groups are compared based upon their baseline characteristics. Prior to the randomization, they spent 60 days in care. Crime involvement per quarter was 3%; for a longer time period we can observe the fraction that were reported missing, were victims of abuse, or were victims of crimes (4%). Their attendance percentage was approximately 70%, and their grade percentile is approximately 26. All of these characteristics are similar across the groups, as expected.

[More controls to be added to the balance table]

6.2 Program Engagement

Figure 2 shows the direct result of the randomization in terms of entering the program in different moments of time. The solid line represents the proportion of children of the treatment group to whom the court allowed into the program. The dotted line represents the same proportion for the control group. The vertical line represents the date of randomization. After a short period, the treatment group enters the program and the fraction grows to 70% by the end of the sample period. The control group gradually enters the program until roughly 60% of the control group is in the program by the middle of 2021.

Table 2 shows that the treatment group is part of the program 18 more days per quarter compared to the control group, or 55% more than the control group mean. This estimate is stable to the inclusion of controls. To summarize this difference, the per-diem cost of the program is XYZ, so over the 18 months of the program, program spending on the treatment group averaged $XYZ more for the treatment group compared to the control group.

One potential mechanism through which the program may act is the intensity of legal processes pursued by the lawyer. In our data, we observe writs submitted to the court. Figure 3 shows the evolution in the difference of for children in the treatment vs. control group. We can see that there is a significant difference immediately after treatment. The difference fades, potentially in response to children in the treatment group exiting the system.

6.3 Permanency

We can observe when a child returns home or begins living in an adoptive home. Using this variable, we construct an outcome measure for "permanency", which equals one if the child exited foster care in this way and has not returned to foster care in a given quarter.[2]

Figure 4 reports an event study, showing how the difference in permanency by month between the treatment and control group changes with time. We can see that before the randomization the groups are mechanically no different as they are in res-

[2]If a child turns 18 after having been home, we continue to label the person as achieving permanency.

idence. In the three quarters after the program began, the treatment group is more likely to achieve permanency, rising to 8% higher per quarter, which remains stable over time. Recall that the program participation rose sharply for the treatment group after randomization, and the two groups' engagement converges over time. It appears that this head start in program participation yielded a continuing gain in permanency, one that we might expect to converge in later quarters but we do not observe at the end of the sample period.

Table 3 summarizes the impacts of the program in permanency. Column (1) shows that returning and continuing to live with family is 6.5 percentage points higher for the control group each quarter, which is 26% higher than the control group mean. The estimate is stable to the inclusion of controls, as expected. In the appendix, we show that this increase in permanency is the result of fewer days in congregate care. Columns (3) and (4) show that permanency rises for girls by 4.5 percentage points (s.e. = 0.025) and a larger 8.7 percentage points for boys (s.e. = 0.028).

With so much attention devoted in the child welfare literature to time in care, these results show that procedural barriers contribute to longer stays, and that legal-aid intervention can have a substantial effect on speeding children through the system toward the goal of achieving permanency.

6.4 Criminal Justice Involvement

There is a close link between child welfare and juvenile delinquency. One measure of whether a child welfare intervention is successful in improving child wellbeing can be measured by whether the program reduces criminal justice involvement.

Figure 5 shows how the difference in crimes by quarter between the treatment and control group changes with time. The plot is quite steady at zero difference across the groups prior to the randomization and then fall approximately 5 percentage points after just one quarter of involvement. The difference rises slightly toward the end of the sample period, perhaps reflecting the convergence of the program participation across the two groups.

Table 4 summarizes the result, showing that children in the treatment group are approximately 4 percentage points less likely to be suspected of a crime. The rate of

criminal justice involvment each quarter is relatively high, at 12% for the control group, and the intent-to-treat estimate suggests a fall of 30%. Column (3) shows the same estimation as in column (1) but only for girls. We see that the mean is much lower (6%), and the treatment effect is much smaller and no longer statistically significant effect. Column (4) shows that there is a negative and statistically significant effect of the treatment for boys: a reduction of 6.4 percentage points, or 32% of the mean.

[ADD CRIME TYPES HERE]

6.5 Crime Victimization

The crime data not only allow us to observe criminal offenses, we can observe victimization as well. For children, this includes measures of being reported missing (runaways), as well as criminal allegation of child abuse.

Figure 6 shows the event study for runaways. Here, we see an imbalance where the treatment group is more likely to be missing prior to the randomization, and then a fall after randomization. Figure 7 presents the event study for child abuse. Here the measure is fairly noisy. Given the increase in the rate at which children return home, it is reassuring that we do not detect an increase in child abuse, although the estimate is imprecise. When we examine the data by sex, we find a statsitically-signficant reduction for girls and point estimate for boys that is close to zero.

6.6 School attendance

Figure 8 shows how the difference in monthly school attendance average between the treatment and control group changes with time. The figure suggests a spike in the treatment groups attendance in the second quarter after randomization. This happens to be the quarter when school children are often absent. It is possible that the program had an impact when the decision to attend school is most discretionary. Of course, we only see this effect in one quarter, so it is also possible that the program had little or no effect on attendance and this spike in relative attendance reflects noise in the series. For completeness, Table 6 shows our estimation results for school attendance. We see attendance rises by 3 percentage points in the period after the randomization, or approximately 5%. Again, the increase is concentrated among boys, which is consistent

with the larger effects on permanency and crime found above.

7 Cost effectiveness PENDING

8 Conclusion

Child protection involves far-reaching interventions into the lives of children and families, and more rigorous evidence is needed to inform child welfare policy. As new programs are introduced, the roll out can be staggered in a way that provides useful variation to evaluate their effects.

This paper examines a laudable example of a program designed to be introduced in a way to provide evidence of whether the program improves child wellbeing. Coupled with administrative data, we can examine effects on a primary goal of the program: the stable placement of children back home with family or in an adoptive home. We can also examine criminal justice and schooling outcomes.

We find that the randomly-assigned treatment group had greater 50% greater exposure to the program over the 18 months after the program's introduction. This additional treatment resulted in substantial increases in permanency, a decline in criminal justice involvement, and suggestive evidence of improvement in school attendance. For all of these outcomes, results were larger for boys, which adds credence to the effects stemming from the program.

The results suggest that expanded legal aid is a reform that can speeding the time to permanency, which causes improvements in child wellbeing measures. This should add urgency to policy and practice that attempts to reduce procedural hurdles and reduce time in foster care, and provides an example of policy making that allows for rigorous evaluation in the context where the reforms are employed.

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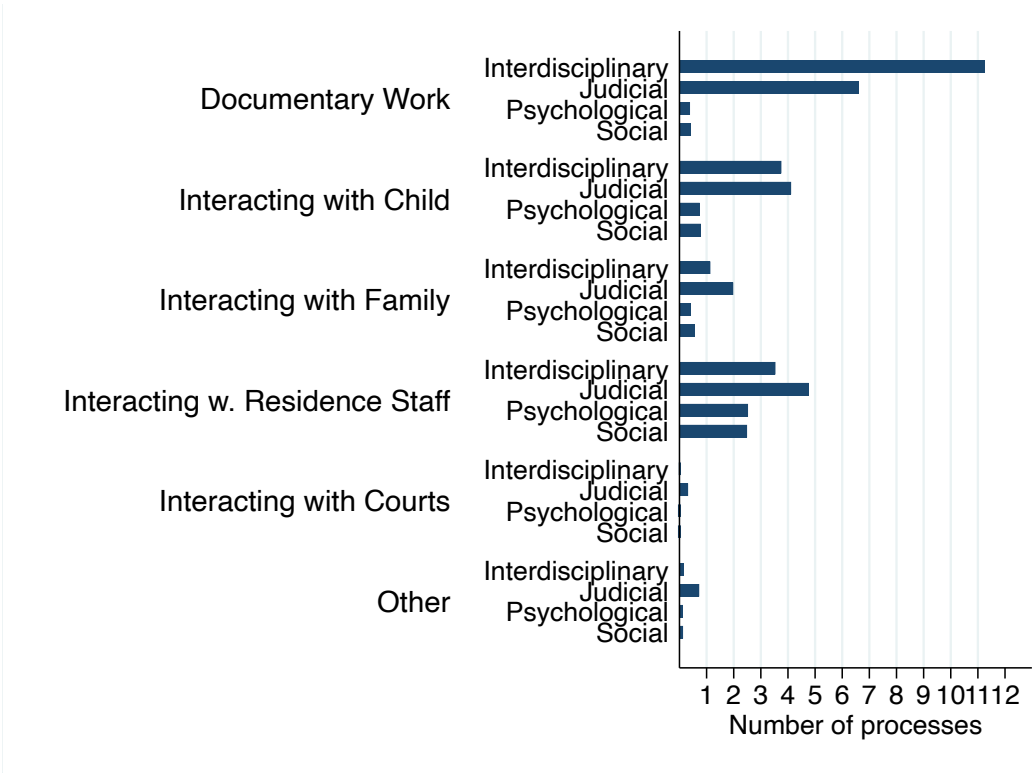
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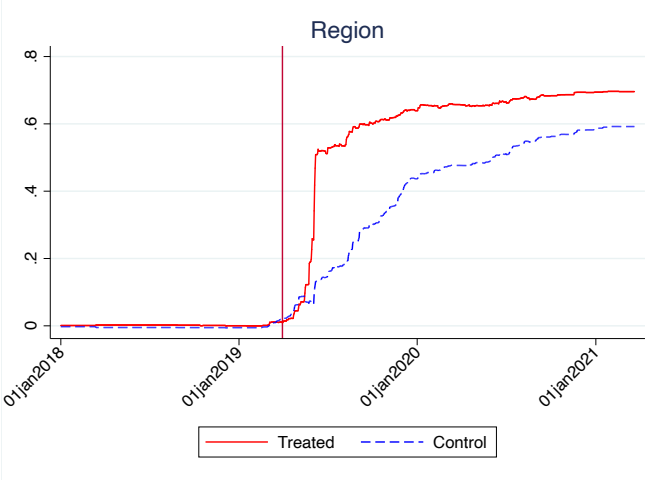
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Figure 1: Processes per child



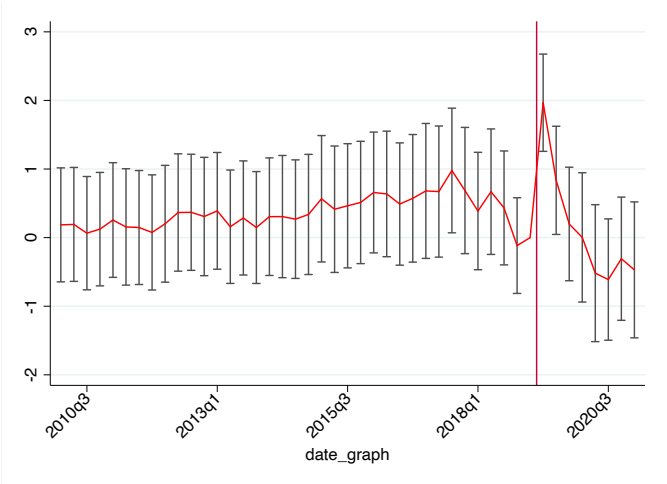
Note: Processes are tracked for each member of the triad. This figure presents average number of processes per case for children in the program.

Figure 2: Participation in program by experimental group



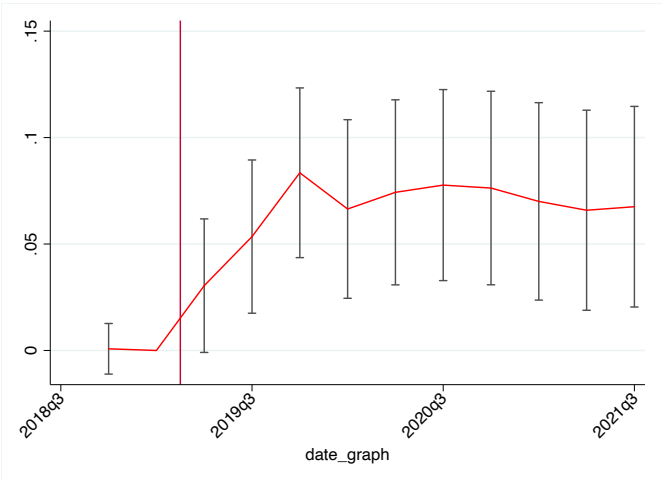
Note: This figure shows, for each day, the number of children in the program My Lawyer. The red line represents the proportion of children of the treatment group to whom the judge designated the curation by the Program. The dotted line represents the same proportion for the control group. The confidence intervals are for the mean of each of the two groups. The vertical line shows the time of randomization.

Figure 3: Impacts on Monthly Writs Submitted



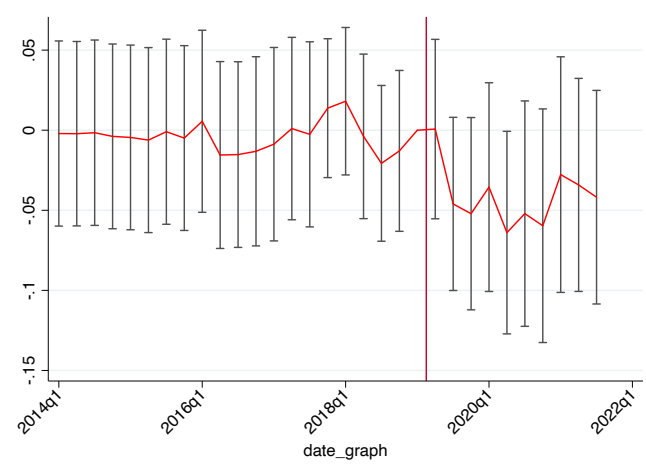
Note: This figure shows, for each quarter, the effect of the Mi Abogado Program in the number of writs sent, estimated from daily data. Each regression includes one indicator for each period (minus the base, i.e., T-1 indicators) and an additional indicator for each period interacted with the treatment. We control for sex, region of residence and age group. The vertical line shows the time of randomization.

Figure 4: Effect on Permanency



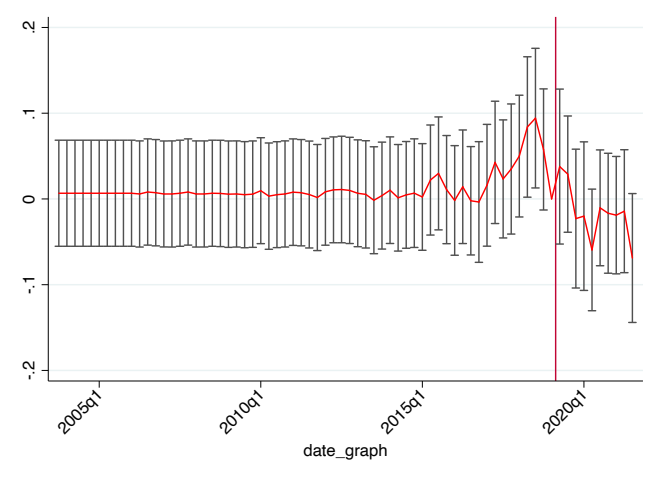
Note: This figure shows, for each quarter, the effect of the Mi Abogado Program in the amount of days living with a family, estimated from daily data. Each regression includes one indicator for each period (minus the base period, i.e., T-1 indicators) and an additional indicator for each period interacted with the treatment. We control for sex, region of residence and age group. The vertical line shows the time of randomization.

Figure 5: Impacts on Quarterly crime reports



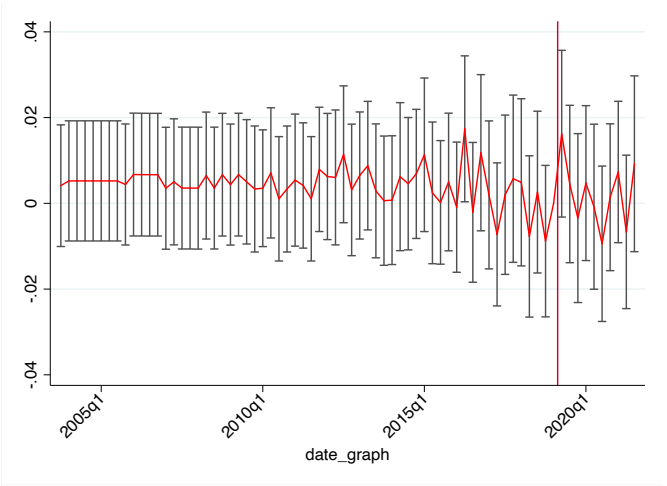
Note: This figure shows, for each quarter, the effect of the Mi Abogado Program in the amount of crime reports, estimated from daily data. Each regression includes one indicator for each period (minus the base period, i.e., T-1 indicators) and an additional indicator for each period interacted with the treatment. We control for sex, region of residence and age group. The vertical line shows the time of randomization.

Figure 6: Cases of children missing



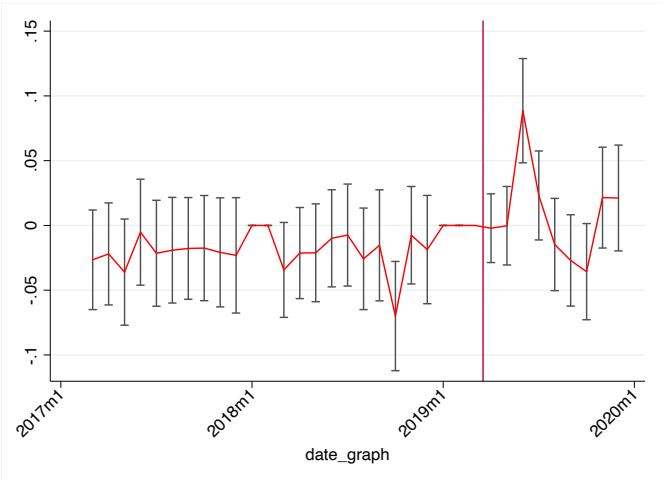
Note: This figure shows, for each quarter, the effect of the Mi Abogado Program in the amount of cases of children missing, estimated from daily data. Each regression includes one indicator for each period (minus the base, i.e., T-1 indicators) and an additional indicator for each period interacted with the treatment. We control for sex, region of residence and age group. The vertical line shows the time of randomization.

Figure 7: Cases of Children Reported Missing and Abuses



Note: This figure shows, for each quarter, the effect of the Mi Abogado Program in the amount of cases of child abuse, estimated from daily data. Each regression includes one indicator for each period (minus the base, i.e., T-1 indicators) and an additional indicator for each period interacted with the treatment. We control for sex, region of residence and age group. The vertical line shows the time of randomization.

Figure 8: Impacts on Attendance



Note: This figure shows, for each quarter, the effect of the Mi Abogado Program in school attendance. Each regression includes one indicator for each period (minus the base, i.e., T-1 indicators) and an additional indicator for each period interacted with the treatment. We control for sex, region of residence and age group. The vertical line shows the time of randomization.

Table 1: Balance in Baseline Covariates

	Obs	Mean T	Mean C	SD	Dif	p
Days Living In a Residence/Qtr	3,130,575	64.013	61.602	44.053	2.411	0.206
Involvement in Crimes/Qtr	5,214,477	0.029	0.030	2.669	-0.001	0.425
Times Missing/Qtr	12,200,791	0.030	0.024	1.929	0.006	0.491
Times Victim of Abuse/Qtr	12,200,791	0.005	0.006	0.790	-0.001	0.290
Victim of Crimes/Qtr	12,200,791	0.041	0.036	2.803	0.004	0.643
School Percentage of Attendance	56,130	0.698	0.662	0.408	0.036	0.740
Grades Percentile	3,649	27.448	25.878	23.747	1.570	0.251

Note: Each row of the table presents the sample values in the pre-treatment period for each variable of interest. The columns indicate for each variable the number of observations, average of the treatment and control groups, standard deviation, and difference between the average of the treatment group and the average of the control group. Finally, the last column shows the p-value obtained by regressing each variable against a dichotomous variable indicating treatment assignment and controlling for strata indicators for region, sex and age.

Table 2: Participation and Program Activity

	(1) Dependent Variable: Days in Mi Abogado/Qtr. No Controls	(2) Dependent Variable: Days in Mi Abogado/Qtr. Controls
Treatment x Post	18.743	18.791
	(1.802)***	(1.803)***
Treatment Group	-1.225	-0.996
	(1.089)	(1.091)
Post Randomization	33.710	33.738
	(0.991)***	(0.991)***
Female	-2.893	-2.056
	(1.047)***	(1.052)*
Region=5	-5.258	-4.677
	(1.393)***	(1.363)***
Region=7	-1.967	-2.308
	(1.707)	(1.705)
Region=8	-2.075	-1.267
	(1.484)	(1.451)
Low Age Stratum	6.795	-7.618
	(1.146)***	(2.170)***
Constant	2.354	-79.261
	(1.051)**	(20.302)***
N	2,200,296	2,197,944
Control Group Mean	34.097	34.097

* $p < 0.1$; ** $p < 0.05$; *** $p < 0.01$

Note: This table presents regression results of program compliance with treatment assignment. Standard errors are clustered at the child level. All models include strata indicators. Column (2) adds controls including: number of siblings, school attendance last year, sexual abuse, physical abuse, neglect, previous time in residential care, age at first residential care admission, and date of birth.

Table 3: Permanency and Residences status

	(1) Dependent Variable: Ever Living w/ Family/Qtr. Model: Panel ITT No controls.	(2) Dependent Variable: Ever Living w/ Family/Qtr. Model: Panel ITT Controls.	(3) Dependent Variable: Ever Living w/ Family/Qtr. Females. Model: Panel ITT No controls.	(4) Dependent Variable: Ever Living w/ Family/Qtr. Males. Model: Panel ITT No controls.
Treatment x Post	0.065	0.066	0.045	0.087
	(0.019)***	(0.018)***	(0.025)*	(0.028)***
Treatment Group	-0.023	-0.024	0.003	-0.057
	(0.013)*	(0.012)*	(0.018)	(0.018)***
Post Randomization	0.214	0.194	0.246	0.175
	(0.011)***	(0.011)***	(0.015)***	(0.016)***
Female	0.036	0.021		
	(0.011)***	(0.011)*		
Region=5	0.013	0.004	0.033	-0.014
	(0.016)	(0.015)	(0.022)	(0.021)
Region=7	0.027	0.025	-0.004	0.075
	(0.018)	(0.018)	(0.025)	(0.026)***
Region=8	0.007	0.002	0.000	0.015
	(0.016)	(0.016)	(0.021)	(0.024)
Low Age Stratum	-0.036	0.043	-0.083	0.019
	(0.012)***	(0.022)*	(0.016)***	(0.017)
Constant	0.023	0.531	0.052	0.031
	(0.012)**	(0.201)***	(0.014)***	(0.015)**
N	31,546	31,546	17,867	13,679
Control Group Mean	0.254	0.254	0.254	0.254

* $p < 0.1$; ** $p < 0.05$; *** $p < 0.01$

Note: Note: This table reports the causal relationship between the Mi Abogado Program, Permanency and Residences status. ITT regressions are estimated, with standard errors clustered at the child level. Ever living with family per quarter (is a dummy variable that takes the value of 1 if a child is adopted, living with her nuclear family, living with an extended family or living with an external family in a particular day of the covered period). Column (2) adds controls for the following covariates: number of siblings, school lag, sexual abuse, physical abuse, neglect, previous time in residential care, age at first residential care admission, and date of birth.

Table 4: Crime Reports

	(1) Dependent Variable: Crime Reports/Qtr. Model: Panel ITT No controls.	(2) Dependent Variable: Crime Reports/Qtr. Model: Panel ITT Controls.	(3) Dependent Variable: Crime Reports/Qtr. Females. Model: Panel ITT No controls.	(4) Dependent Variable: Crime Reports/Qtr. Males. Model: Panel ITT No controls.
Treatment x Post	-0.037	-0.037	-0.014	-0.064
	(0.013)***	(0.013)***	(0.009)	(0.027)**
Treatment Group	0.010	0.013	0.027	-0.012
	(0.012)	(0.012)	(0.015)*	(0.019)
Post Randomization	0.092	0.092	0.045	0.151
	(0.010)***	(0.010)***	(0.007)***	(0.020)***
Female	-0.061	-0.060		
	(0.009)***	(0.009)***		
Region=5	-0.014	-0.015	-0.000	-0.028
	(0.010)	(0.009)	(0.009)	(0.018)
Region=7	-0.001	0.006	-0.028	0.032
	(0.013)	(0.013)	(0.017)	(0.020)
Region=8	0.030	0.030	0.007	0.067
	(0.014)**	(0.013)**	(0.010)	(0.031)**
Low Age Stratum	-0.081	0.012	-0.041	-0.124
	(0.006)***	(0.012)	(0.005)***	(0.012)***
Constant	0.084	0.253	0.027	0.081
	(0.011)***	(0.118)**	(0.008)***	(0.016)***
N	5,214,477	5,208,903	2,984,877	2,229,600
Control Group Mean	0.122	0.122	0.063	0.198

* $p < 0.1$; ** $p < 0.05$; *** $p < 0.01$

Note: This table reports the effect of Mi Abogado on crime reports. ITT regressions are estimated using a panel structure, clustered at the child level. Crime Reports per quarter is the main dependent variable. The regression in column (2) control for the following covariates: number of siblings, school lag, sexual abuse, physical abuse, neglect, previous time in residential care, age at first residential care admission, and date of birth.

Table 5: Children Reported Missing and Abuses

	(1) Dependent Variable: Times Missing/Qtr. Model: Panel ITT No controls.	(2) Dependent Variable: Times Missing/Qtr. Model: Panel ITT Controls.	(3) Dependent Variable: Child Abuses/Qtr. Model: Panel ITT No controls.	(4) Dependent Variable: Child Abuses/Qtr. Model: Panel ITT Controls.
Treatment x Post	-0.027	-0.027	-0.002	-0.002
	(0.015)*	(0.015)*	(0.002)	(0.002)
Treatment Group	0.001	0.002	-0.000	-0.000
	(0.005)	(0.005)	(0.001)	(0.001)
Post Randomization	0.116	0.116	0.012	0.012
	(0.011)***	(0.011)***	(0.002)***	(0.002)***
Female	0.008	0.010	0.001	0.001
	(0.004)**	(0.004)**	(0.001)	(0.001)
Region=5	-0.005	-0.003	0.002	0.002
	(0.005)	(0.005)	(0.001)**	(0.001)**
Region=7	0.006	0.008	0.001	0.001
	(0.007)	(0.006)	(0.001)*	(0.001)*
Region=8	-0.010	-0.009	0.003	0.003
	(0.006)*	(0.006)	(0.001)***	(0.001)***
Low Age Stratum	-0.047	-0.025	-0.005	-0.001
	(0.003)***	(0.007)***	(0.000)***	(0.001)
Constant	0.038	-0.195	0.005	-0.020
	(0.005)***	(0.075)***	(0.001)***	(0.009)**
N	12,200,791	12,187,749	12,200,791	12,187,749
Control Group Mean	0.141	0.141	0.018	0.018

* $p < 0.1$; ** $p < 0.05$; *** $p < 0.01$

Note: This table reports the effect of Mi Abogado on children reported missing and abuses. ITT regressions are estimated using a panel structure, clustered at the child level. Times reported missing per quarter and reported child abuses per quarter are the main dependent variables. The regressions in columns (2) and (4) control for the following covariates: number of siblings, school lag, sexual abuse, physical abuse, neglect, previous time in residential care, age at first residential care admission, and date of birth.

Table 6: Attendance

	(1) Dependent Variable: School Attendance. Model: Panel ITT No controls.	(2) Dependent Variable: School Attendance. Model: Panel ITT Controls	(3) Dependent Variable: School Attendance. Females. Model: Panel ITT No controls.	(4) Dependent Variable: School Attendance. Males. Model: Panel ITT No controls.
Treatment x Post	0.030	0.029	0.019	0.045
	(0.013)**	(0.013)**	(0.018)	(0.019)**
Treatment Group	-0.007	-0.014	0.000	-0.016
	(0.017)	(0.016)	(0.023)	(0.027)
Post Randomization	-0.069	-0.069	-0.072	-0.065
	(0.008)***	(0.008)***	(0.011)***	(0.012)***
Female	0.010	0.013		
	(0.012)	(0.011)		
Region=5	0.052	0.054	0.034	0.074
	(0.016)***	(0.015)***	(0.022)	(0.024)***
Region=7	0.086	0.072	0.077	0.095
	(0.019)***	(0.017)***	(0.024)***	(0.030)***
Region=8	0.005	-0.002	0.005	0.003
	(0.018)	(0.016)	(0.024)	(0.028)
Low Age Stratum	0.125	-0.015	0.146	0.100
	(0.011)***	(0.021)	(0.015)***	(0.017)***
Constant	0.599	0.881	0.609	0.602
	(0.015)***	(0.233)***	(0.017)***	(0.020)***
N	56,130	56,070	32,130	24,000
Control Group Mean	0.594	0.594	0.588	0.600

* $p < 0.1$; ** $p < 0.05$; *** $p < 0.01$

Note: This table reports the causal relationship between the Mi Abogado Program and school attendance. ITT regressions are estimated using a panel structure, clustered at the child level. School attendance per quarter is the main dependent variable. The regression in column (2) control for the following covariates: number of siblings, school lag, sexual abuse, physical abuse, neglect, previous time in residential care, age at first residential care admission, and date of birth.

ONLINE APPENDIX

A Mi Abagado Detailed Processes

These are all the actions carried out by the interdisciplinary team of the Mi Abogado Program granting specialized legal defense.

- Diagnosis of the situation of children: Each child that enters the program is diagnosed, determining the urgency and prioritization of the legal decisions to be made. The diagnosis is an interdisciplinary exercise agreed between the psychosocial-judiciary triplet of the Program. For this diagnosis, the interview or observation of the child within the first month from the acceptance of the appointment of curatorship ad litem is fundamental.

- The elaboration of the legal strategy includes the psychosocial aspects raised by the specialist professionals: from the diagnosis of the judicial situation of the child carried out in the previous stage, the teams develop a legal strategy to represent the interests of the children by appointment of a curator ad litem The elaboration of the legal strategy will include the following sub-processes:
  - Strategy scheme: The objectives of legal representation must be established according to each case, defining the particular actions to be developed before the courts of justice.
  - Feedback of the legal strategy: The strategy must be fed back with the observations and contributions of the actors, people, and institutions that relate directly to each child.
  - Registration of the legal strategy: Information and background information that accounts for the strategy implemented, including the contributions of other actors, must be incorporated into each child's folder.

- Visits to the family of the child: According to what the legal strategy defines, the appropriate actions must be established and executed, if applicable, with the family or significant adults of the child, namely:
  - Communication with the family or significant adults about the legal strategy to be adopted and permanent feedback regarding the status of the cause, if applicable.

  - Collaborate in monitoring the work of the residence, or another agency or program, in the strengthening of parental powers for decision-making regarding judicial actions.
  - Relationship with the community in which the child is inserted.

- Intersectoral coordination: Because situations of violation of rights generate effects beyond the strictly legal, teams must ensure that whoever is responsible for the child's care uses referral mechanisms to other relevant public services to cover the integrality of children's needs present. Similarly, suppose deficiencies are detected in this area. In that case, the Regional Coordination of the Program will monitor that the child's representation team complies with the duty to represent the situation to SENAME or to whom it corresponds or make a presentation to the court, as required.

- Procedural processes: Corresponds to the execution of the legal strategy and essentially concentrates the set of actions that are carried out in a judicial process in the family courts, with jurisdiction in 10 criminal courts, superior courts of justice, and any other instance or headquarters in which the child is involved. As in the previous stages, all the actions carried out must be registered in each child's folder and be aimed at guaranteeing the exercise of children's rights recognized in the Convention.

- Follow-up of the child's situation once the situation of alternative care is over: The Technical Unit will verify that the regional teams of the Program supervise the fulfillment of the sentences to guarantee adequate protection of the children. The duration of the follow-up must be extended for a minimum of three months until the practical completion of the sentence. The Social Worker will be in charge of the follow-up.

- Children exit the Program: The triplet team evaluates if the objectives of the legal strategy have been met if the processing of the cases has been completed and if the follow-up period has been exhausted. Some causes of discharge are consistent with the end of alternative care, for example, successful adoption, return to the family of origin, completion of 18 years, etc.

- Referrals: The triplet in charge of the child's defense informs the residence of SENAME, the need for referral of the child, by findings made during the representation process, for example referrals to the health system or other programs of the SENAME Network.

A.1 Lawyers

Lawyers are responsible for processing cases before courts of law, especially family courts, courts with jurisdiction in criminal matters, civil courts, and higher courts of justice, related exclusively to the execution of the "My Lawyer" Program and hired part-time (50%) in Charge of 60 children.

A.1.1 Functions

- Develop the legal strategy for each child who accesses the service in conjunction with the psychosocial duo.
- Manage the appropriate legal actions in all the matters in which the represented child might be involved.
- Responsible for the complete processing of the cases of children him/her represents.
- Attend all hearings in which the law courts summon him.
- Conduct in-person interviews or observations with the children, family, or whoever is involved.
- Exhaust all procedural options to obtain a judicial decision favorable to the child's interests he represents legally.
- Periodically inform, if appropriate, relatives or significant adults of the child's procedural status of the cases he represents.
- Periodically inform the child of the procedural status of the cases in which he is represented, according to his stage of evolutionary development.
- Participate in case analysis meetings.

- Provide support to professionals of complementary projects regarding the orientation, care, and protection of a child who must appear at a hearing and, in general, during the processing and management of the case.
- Keep track of all the procedures carried out and incorporate required verifiers.

A.1.2 Training and Experience

Qualified lawyer with desirable specialization in human rights, child and adolescent rights, criminal law, criminal procedural law, family law, or similar. With experience in litigation before the courts of the first instance of family, in ordinary and extraordinary procedures; before criminal courts of the first instance and before the superior courts of justice, with knowledge in prevention, promotion, protection, and restitution of rights, threat, and violation of rights and crimes committed against children. With experience in work, coordination, and articulation in the inter-institutional and intersectoral network. With skills for conflict resolution and interventions in crises. Desirable experience in interviews with children in situations of high complexity.

A.2 Social worker

Professional social worker, with training and experience in family law, the law of childhood and adolescence, child abuse and intersectoral management, with skills to work and link with children violated in their rights, and work in multidisciplinary teams. In addition, experience and knowledge are required regarding the family courts' functioning, the health and education network, and the SENAME Network and hired full time, in charge of 200 children.

A.2.1 Functions

- Responsible for delivering social support to the Program team in problems associated with serious violations of rights.
- Socio-family care and follow-up, home visits, interviews, work in and with networks, as strictly required by the legal strategy, and in permanent coordination with professionals of complementary projects to the Program, when appropriate.

- Conduct interviews or observations with the children, family, or others involved that correspond and must move if necessary. Permanent coordination with the network involved.
- Contribute to the elaboration of the diagnosis of the judicial situation and the development and execution of the legal strategy of each child. Record all the actions performed and incorporated required verifiers.
- Other functions specific to the work methodology and legal strategy adopted for the program's execution.

A.2.2 Training and Experience

A qualified social worker with specialized training in family and childhood matters, desirable training in criminal law or child abuse, experience working with children in violation of rights, and health and education networks. Desirable experience in interviews with children in situations of high complexity.

A.3 Psychologist

Professional psychologist with training and experience in matters of the law of family, the law of childhood, adolescence, and reparation of the damage, with skills to work and link with children whose rights have been violated, and work in interdisciplinary teams.

A.3.1 Functions

- Assess the child's mental health is entering the Program by pre-existing reports.
- Assistance in emergencies or crises of the child in the context of the hearing, when appropriate.
- Contribute to elaborating the diagnosis of the judicial situation and legal strategy of each child.
- Permanent coordination with the network involved. Conduct interviews or observations with the children, family, or others involved that correspond and must move if necessary.

- Record all the actions performed and incorporated required verifiers.
- Other functions specific to the work methodology and legal strategy adopted by the Programme.

A.3.2 Training and Experience

Qualified psychologist with specialized training in family and childhood matters, desirable training in the field of criminal law to child abuse, and experience in working with children in situations of violation of rights.