

6-2018

CHILD ABUSE PREVENTION IN RURAL SOUTHERN CALIFORNIA: A PARTICIPATORY ACTION RESEARCH PROJECT

Nelly Zambrano
005387781@coyote.csusb.edu

Follow this and additional works at: <http://scholarworks.lib.csusb.edu/etd>

 Part of the [Agricultural and Resource Economics Commons](#), [Counseling Commons](#), [Organizational Communication Commons](#), [Organization Development Commons](#), [Political Science Commons](#), [Public Administration Commons](#), [Public Affairs Commons](#), [Recreation, Parks and Tourism Administration Commons](#), [Social Policy Commons](#), [Social Welfare Commons](#), and the [Social Work Commons](#)

Recommended Citation

Zambrano, Nelly, "CHILD ABUSE PREVENTION IN RURAL SOUTHERN CALIFORNIA: A PARTICIPATORY ACTION RESEARCH PROJECT" (2018). *Electronic Theses, Projects, and Dissertations*. 722.
<http://scholarworks.lib.csusb.edu/etd/722>

This Thesis is brought to you for free and open access by the Office of Graduate Studies at CSUSB ScholarWorks. It has been accepted for inclusion in Electronic Theses, Projects, and Dissertations by an authorized administrator of CSUSB ScholarWorks. For more information, please contact scholarworks@csusb.edu.

CHILD ABUSE PREVENTION IN RURAL SOUTHERN CALIFORNIA:
A PARTICIPATORY ACTION RESEARCH PROJECT

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Nelly Maribel Zambrano Plaza

June, 2018

CHILD ABUSE PREVENTION IN RURAL SOUTHERN CALIFORNIA
A PARTICIPATORY ACTION RESEARCH PROJECT

A Project
Presented to the
Faculty of
California State University,
San Bernardino

by
Nelly Maribel Zambrano Plaza

June, 2018

Approved by:

Dr. Deirdre Lanesskog, Research Supervisor

Dr. Janet Chang, MSW Research Coordinator

© 2018 Nelly Maribel Zambrano Plaza

ABSTRACT

This research project examines resources and services to prevent families and children from entering the child welfare system in a rural town in Southern California. There is constant struggle to get the adequate services, resources and trained staff in this rural area because it is isolated and it takes about two hours' travel time to get to the metropolitan cities. The literature review discusses child welfare services challenges, strengths and social capital to support families and children as well as the child welfare system itself in rural areas. Constructivism is the appropriate framework for this research project, because the goal of this study will be based on an exchange of understanding and ideas; therefore, the nature of the study is subjective. The engagement stage was an important stage for the constructivist approach. The researcher analyzed transcripts from the interviews and group meetings using thematic analysis to examine participants' concerns and their perceptions of the community's resources. Further, the participants, guided by the researcher, worked together to develop a strategic action plan to address child abuse and neglect in this community. This project encouraged community leaders to discuss the community's strengths and main concerns related to child abuse and neglect. Interestingly, these strengths and concerns often mirror one another. Participants' perceptions and recommendation are about safety, connectedness, human services access and child welfare of the focused rural town.

ACKNOWLEDGEMENTS

Firstly, I would like to express my sincere gratitude to my advisor Dr. Deirdre Lanesskog for her continued support of my master of social work program research project. Secondly, I would like to thank the participants of this research who were willing to share their perceptions of the focused town. Thirdly, I could not have completed this master of social program without the federal, state and county support of the Child Welfare Title IV-E program which helped me to become an effective and better social worker for the most vulnerable families. Finally, I also would like to thank to my little son, Istvan, for letting me steal our play time for mommy to study to serve children and families in a more effective way. My little son, who was 4 years old, when I started my study of master of social work had to “accept” that mommy was busy and could not play with him as much he wanted because she had to do homework to become a better social worker.

AS THE PROVERB SAYS,
“IT TAKES A VILLAGE TO RAISE A CHILD”
IT COULD ALSO SAY
IT TAKES A VILLAGE
TO PREVENT ABUSE AND NEGLECT TO A CHILD.

TABLE OF CONTENTS

ABSTRACT	iii
ACKNOWLEDGEMENTS.....	iv
CHAPTER ONE: ASSESSMENT	
Introduction	1
Research Focus	2
High Needs and Limited Services in Rural Communities	2
Focusing on Changing Behaviors	5
Alternative Services	5
Paradigm and Rationale for Chosen Paradigm.....	6
Literature Review	7
Challenges in Rural Communities	7
Favorable Conditions in Rural Areas.....	9
Social Capital in Rural Areas	9
Theoretical Orientation.....	10
Potential Contribution of Study to Micro and/or Macro Social Work Practice.....	12
Summary	12
CHAPTER TWO: ENGAGEMENT	
Introduction	14
Engagement Strategies for Gatekeepers at Research Site	14
Self- Preparation	15
Diversity Issues.....	18
Ethical Issues.....	19

Political Issues	19
The Role of Technology in Engagement.....	20
Summary	20

CHAPTER THREE: IMPLEMENTATION

Introduction	22
Research Site	22
Study Participants.....	24
Selection of Participants	25
Data Gathering	25
Phase of Data Collection	26
Phase 1: Individual Interviews.....	26
Phase 2: Group Meetings	27
Phase 3: Creating Action Plan	27
Data Recording.....	28
Data Analysis.....	28
Communication of Findings	29
Termination.....	29
Follow Up.....	30
Summary	30

CHAPTER FOUR: DATA ANALYSIS

Introduction	31
Safety.....	32
Connectedness.....	34
Family and Child-Oriented Activities	37

Access to Human Services	40
Lack of Awareness	42
Child Welfare	43
Mental Health Services	47
Conclusion	48
CHAPTER FIVE: DISCUSSION	
Introduction	49
Overview of Findings	49
Limitations.....	51
Implications.....	52
Practice	52
Policy	53
Research.....	53
Conclusion	54
APPENDIX A: INDIVIDUAL INTERVIEWS.....	55
APPENDIX B: GROUP MEETINGS	60
APPENDIX C: ACTION PLAN DEVELOPMENT	62
APPENDIX D: INFORMED CONSENT	65
APPENDIX E: DEBRIEFING STATEMENT.....	67
APPENDIX F: GROUP WORK POWERPOINT PRESENTATION.....	69
REFERENCES.....	74

CHAPTER ONE

ASSESSMENT

Introduction

This research project examines resources and services to prevent families and children from entering the child welfare system in a rural town in Southern California. There is constant struggle to get the adequate services, resources and trained staff in this rural area because it is isolated and it takes about one hour and half to two hours' travel time to get to the metropolitan cities.

Different community leaders, families, individuals and helping professionals working in the child welfare system provided information about the main worries and challenges to support families to prevent child abuse and neglect.

The literature review discusses child welfare services challenges, strengths and social capital to support families and children as well as the child welfare system itself in rural areas. Additionally, the literature review of this study guided different stakeholders to build a plan of action to overcome these different challenges and embrace the current opportunities in this rural town.

Constructivism was the appropriate framework for this research project, because the goal of this study was based on an exchange of understanding and ideas; therefore, the nature of the study is subjective. Additionally, the goal of the research project was to support community leaders to develop knowledge and actions to create a potential community action plan to support families and

children from entering the child welfare system. The constructivist paradigm fits the purpose and goal of this study.

Research Focus

This study's goal was to examine available resources to promote family well-being and to prevent families from entering the child welfare system in a rural and isolated Southern California Town.

The intention was to explore and maximize all the resources that are already in this town. This study did not focus on the scarcity of resources or services. On the contrary, it focused on the services and resources already available in this rural community and how they could support children and families to prevent them from entering the child welfare system.

It is possible that some of the gaps in resources and formal services in this community can be filled by better use of informal and less-structured services. In this way, the study focuses on the resources already available in this rural community and explores ways they might be better used to the advantage of vulnerable families and children. Few studies have examined how limited, but available services could be maximized to keep families from entering the child welfare system.

High Needs and Limited Services in Rural Communities

There is a strong consensus among scholars and governmental organizations that there is lack of services in almost all rural areas of the United States (Child Welfare Information Gateway (CWIG), 2018). Public and private

organizations and families struggle getting services such as educational, speech therapies, behavioral, religious, recreational, mental, medical and dental programs to support children's well-being due to the minimal or even the lack of services in rural towns. Additionally, social problems that cause parents and children to enter the child welfare systems are more prevalent in rural areas. Problems such as drug use in rural areas have increased 7% more than urban cities (Van Gund, 2006). Furthermore, the consumption of alcohol among young people in rural areas tends to be higher than urban areas (Van Gund, 2006). Most notably, rates for child abuse are often double in rural areas what they are in other types of communities (Child Welfare Information Gateway, 2018).

Both families and helping professionals, including therapists, social workers, teachers, pastors, and foster parents, spend much of their time traveling, making this a critical barrier to access formal services to support children and families (Lenardson, Ziller, Lambert, Race, and Yousefian, 2009). In the study community, travel to a major metropolitan area with the resources and services families need, takes approximately 90 minutes each way. Furthermore, when services are available in rural areas, there are often long wait times and long waiting lists. These conditions prevent families from getting the services they need.

There are also other complicating factors that prevent rural residents from receiving services. In small towns, people's personal, professional, and family relationships are often intertwined. Consequently, conflicts of interest, blurred

boundaries, and breaches of confidentiality tend to be exacerbated because many people know each other and some roles overlap. Sometimes these factors can interfere with people's motivation to obtain services. For instance, some may refuse to obtain therapy from an acquaintance from their own town or their former school or church. This could have negative impact on families and ultimately on the child welfare system in rural areas (Social Work Speaks, 2009). For instance, sometimes rural families fail to report mental health problems in their children because they are afraid that other community members will learn of their problems (Leonardson, et al. 2009).

Rural parents who are working on getting their children back to their care sometimes get discouraged due to long waiting times to get an appointment. At times, they may also feel discouraged by what they perceive as a lack of engagement from service providers who are also frustrated by the lack of availability of services such as substance abuse treatment, mental health, domestic violence, and parenting classes. Researchers agree that effective engagement among social workers, services providers, and parents, could improve reunification outcomes (Carnochan et al., 2013). Similarly, parents working with child welfare social workers may feel frustrated with workers whose long travel times may prevent them from visiting clients more regularly. Unfortunately, some workers may find it easier to discontinue services than to try to meet the needs of clients who require long distance travel. Similarly, rural parents sometimes lack access to a strong and committed support network, as

well as to information on services that could support them in their struggles to maintain a safe, stable and healthy environment for their children (McCroskey & Meezan, 1998).

Focusing on Changing Behaviors

Parents who are involved in the child welfare system are encouraged to change behaviors to protect their children and eliminate child abuse and neglect. Child welfare social workers are trained to partner with families to develop “road maps” to change their behavior. These road maps are called case plans that consist of specific goals and objectives to guide parents. The plans use the framework of Safety Organize Practice (SOP) which encourages social workers to work with parents and any other stakeholders in the child’s life to develop plans to keep children safe (Children’s Research Center, 2012). This is a new trend for social workers; in the past parents were mandated to complete services such as parenting classes, but there was minimal emphasis on the change of behaviors. This new practice provides an opportunity for workers to support parents and families without focusing on the completion of traditional services, such as parenting programs, child abuse and neglect prevention classes, counseling services, domestic violence interventions, and anger management counseling, and other services in short supply in rural communities.

Alternative Services

Typically, residents in rural areas rely on their own capacity and relationships to solve their problems. This reliance on human relationships for

support and mutual benefit is often referred to as social capita (Fukuyuma, 2000). Child welfare social workers can use this social capital to support families and children.

Furthermore, rural areas could have substitute services that could support the well-being of children and parents to prevent them from entering the child welfare system. For instance, the community college could offer parenting classes and child development classes during the school year. However, there is minimal communication, partnership, and preparedness among agencies in the study community to promote such programs. Some small efforts in this regard do exist; for example, the community's social service agency has partnered with a provider to offer counseling services to children and families.

This research project initiated conversations among local providers with the goal of identifying potential ways to leverage available services. The first step in improving services is to examine the availability of resources and to bring together stakeholders whose knowledge, expertise, and willingness to work together can be used to bolster community resources.

Paradigm and Rationale for Chosen Paradigm

The constructivist paradigm was used in this study to promote understanding about the scarcity and potential use of services to improve the well-being of families in this community. Guided by this approach, the research gathered qualitative data through individual interviews and focus groups with various stakeholders in the study community. The participants in this study had

the opportunity to share their experiences, opinions, and visions, allowing them to build understanding and action plan for addressing inadequacies.

The constructivist approach suggests that people have the wisdom, knowledge, experience, ideas and understanding about their reality to provide meaningful suggestions on how this reality could be improved (Morris, 2013). In this constructivist approach, the researcher works as a facilitator and part of the group, generating discussion and creating an action plan in conjunction with the participants.

Literature Review

The goal of the literature review was to support and guide the process of this research project. The literature review discusses the specific challenges in rural communities, the favorable conditions in these communities, and the social capital that is a particular strength of rural residents. In addition, this section describes the theories that guided the conceptualization of this study.

Challenges in Rural Communities

Child welfare challenges. There is a vast amount of research about child welfare services in rural areas. Scholars note a variety of challenges that are more prevalent in rural areas than in metropolitan communities (CWIG, 2018). These challenges include a lack of human services infrastructure due to insufficient funding, inadequate access to health and mental health care, heavy caseloads among limited numbers of service providers, and lack of access to training and professional development opportunities for rural providers. In

addition, more pervasive poverty, substance abuse, and long travel times to specialty providers in metropolitan areas exacerbate these challenges (Belanger, 2008; CWIG, 2018; Sudol, 2009). Rural areas often lack the services that parents in the child welfare system are court-ordered to access in order to reunite with their children or to keep their children in their homes (CWIG, 2018).

Further, in more metropolitan areas, child welfare workers often specialize in specific roles, such as intake, investigations, foster parent recruitment and assessment, and the maintenance or “carrying” of long-term cases. This specialization allows social workers to develop expertise and to complete their work more efficiently and effectively. In rural communities with smaller child welfare offices and fewer staff, child welfare workers must often perform all of these functions, limiting their ability to become experts in any given area (CWIG, 2018).

Substance abuse is especially problematic in rural communities. Rural youth and young adults are more likely than their urban peers to engage in binge drinking (Substance Abuse and Mental Health Services Administration (SAMHSA), 2007). Similarly, opioid abuse is also more prevalent in rural communities. A lack of recreational opportunities, employment options, and the heightened availability of alcohol and illicit drugs in rural areas likely have contributed to the spread of these social ills in rural areas. However, the limited access to substance abuse prevention and treatment services in rural areas may compound the negative impacts these social problems have on families.

Favorable Conditions in Rural Areas

Although rural areas have many challenges, they do have some strengths. Close proximity among service providers is also found in rural areas (CWIG, 2018). For instance, at the time of this study in the focused rural community, there were only three therapists, thus the communication tended to flow faster between social workers and therapists. Additionally, when social workers conduct investigations, school staffs and police officers are very familiar with the child protective social workers, so alliances and partnerships are formed between them with the goal of helping and supporting families and children in rural areas, therefore a good partnership and collaboration alliances are formed among different stakeholders because of the close proximity (CWIG, 2018).

Social Capital in Rural Areas

Social capital and collaborations are the most important attributes in rural areas (CWIG, 2018). Social capital is defined differently by a variety of scholars. Fukuyama (2000) defines social capital as “informal norms that promote cooperation between two or more individuals” (p. 4). Bourdieu (1986) defines social capital as a network of connections used to generate social relationships that provide mutual benefit for members. Coleman (1988) describes social capital as the ability of people to use their social connections in pursuit of their own self-interests. Putnam (1993) views social capital as a product of values that facilitate trust among members who then work together for mutual benefit. Regardless of how one defines social capital, in rural communities, social capital often produces

a strong sense of community among residents who need to rely on each other. Similarly, rural residents can often be creative and generous when a problem needs to find a solution. People know and trust each other; therefore, their relationships are closer and last longer (CWIG, 2018).

This study relied heavily on this social capital concept, particularly among the participants. The researcher anticipated that the stakeholders in this project were likely to have close relationships with one another and to value the usefulness of those relationships in improving services for clients. Further, the researcher expected participants to be willing to work together to examine problems, to explore alternatives, and to develop a plan to improve services in the study community.

Theoretical Orientation

The constructivist approach is to “build a shared understanding of the human condition” (Morris, 2013, p. 10). Therefore, concepts of empowerment, advocacy, and community development were utilized in this research project.

Empowerment theory supported this study because the relationships among the different stakeholders helped them to develop a community action plan to support families and prevent child abuse and neglect in the focused area. Communities and families are empowered when they make decisions together and the leadership is share among them (Perkins & Zimmerman, 1995). Furthermore, the use of empowerment theories prompts individuals to take action to change their life circumstances (Gutierrez, Parsons, & Cox, 1998)

The National Association of Social Worker (NASW) Code of Ethics promotes advocacy. Social workers “should advocate for changes in policy and legislation to improve social conditions in order to meet basic human needs and promote social justice” (NASW, 2017, p. 20). Community development theory was also applied in this research study. Tan (2009) argues “community development is perhaps the most practical framework for social workers seeking lasting change for individuals and the communities and societies in which they live” (Tan, 2009, p. 6). Therefore, this study aligned with both advocacy and community development theories by promoting improved human services supports for families and communities in an area with few resources and high needs.

These theories guided the techniques the researcher used to engage participants during this research project. The researcher used these theories to reinforce concepts of mutual collaboration and the gathering of diverse knowledge and perspectives from the participants. The researcher worked with community leaders and gatekeepers who participated in this study influenced the research question, methods, and implementation of this project. In addition, participants provided information, motivation, direction, and support, as well as opposition at times. In short, the theories that guided this study required participants to be involved and to play roles in all aspects of the study’s development.

Potential Contribution of Study to Micro and/or Macro Social Work Practice

This research project may influence social work practice on both micro and macro levels. The goal of this study was to explore services and resources to keep families and children from entering child welfare. Therefore, the findings from this study may have a positive impact services at the micro level (family) and macro level (community). The formal and informal interviews and meetings among stakeholders and families generated collaborations and new ways to approach services and resources in this rural area of Southern California.

Currently, the city child prevention council facilitates a monthly meeting with community leaders. This research project relied upon this monthly meeting to generate conversations that identified the main concerns leaders held related to child abuse and neglect in this town. Based on this discussion, the researcher implemented an effort among these leaders to develop a community action plan to address these concerns. These participants in this group had the power to influence strategies and interventions in the focus rural area to prevent child abuse and neglect.

Summary

The goal of this research project was to explore service gaps and opportunities to prevent children and families from entering into the child welfare system. This study invited community service providers knowledgeable about the area to examine the resources in their community and to identify opportunities to improve efforts. The constructivism paradigm, which suggests that people

understand their reality and have the power to change that reality, was used to guide this project. The literature review identified specific strengths and challenges in rural areas that likely applied to this community as well. Theories of empowerment, advocacy, and community development were used to guide the research methods and the researcher's efforts to facilitate participants' work in developing a community action plan.

CHAPTER TWO

ENGAGEMENT

Introduction

This research project incorporated engagement elements during all stages of the project in accordance with the constructivist paradigm. Therefore, good engagement strategies were essential parts of the research process. This chapter describes the qualifications of the researcher and description of the study site. Furthermore, a self-preparation was considered to guide the researcher to be more prepared and informed. Diversity, ethical and political issues were presented and addressed to minimize errors in the research project. The role of technology in supporting the engagement process is discussed as well.

Engagement Strategies for Gatekeepers at Research Site

Prior to the study's initiation, the researcher obtained a letter of support from the study's sponsoring agency, as well as informal support from the members of the community collaboration of providers that made up the majority of study participants. The researcher initiated informal conversations with members of the local community collaboration about this research project. On January 17, 2017, the researcher asked members of this local nonprofit organization if they were interested in participating in this research study, they all were in agreement and expressed their support to complete this research project in the community. Additionally, participants affirmed their support of the project

by signing the informed consent document when they completed individual or group interviews.

The researcher has participated in the monthly meetings of the hermeneutic dialectic circle. The hermeneutic dialectic circle consisted of the participants of the collaborative group. This collaborative group's main discussions have been on what to teach the community and what to do to prevent child abuse and neglect in the area. The researcher guided this group to gain more understanding about the needs, strengths, weaknesses and opportunities regarding preventions of child abuse and general neglect in the focused community.

A synopsis of the research project was presented during the monthly meeting of the local collaboration shortly after the project gained approval of the researcher's university Institutional Review Board (IRB). The members of this group were the gatekeepers of this study; they were invited to give feedback and ideas to make the research project more meaningful for the community. These formal and informal conversations with these stakeholders generated better understanding of this study and promoted collaboration, partnership, and community ownership of the project.

Self- Preparation

The researcher is a child protective services social worker from a county agency in Southern California, who already works in the isolated and rural community of this research project. Additionally, this researcher completed a

MSW field practicum as a community outreach social worker in the focused rural town for about four months in the fall of 2016. Therefore, there was a solid rapport between the researcher and participants of this research project.

In this rural area, there was a local nonprofit that worked towards prevention of child abuse and neglect in this community. This organization meets every month and the researcher of this study participated in the monthly meetings as a part of the community outreach work. During her professional field practicum, the researcher collected information about social services agencies in the community with the goal of creating a community resources directory. Additionally, the researcher invited different community leaders to participate in the monthly meetings of this local organization that promotes prevention of child abuse and neglect. As a result, attendance rates increased for the monthly meetings, suggesting that members of this local organization were satisfied with the outcome of this researcher's intervention in the community. This outcome raised the credibility of the researcher, the community leaders, and the study.

The constructivist paradigm supported the researcher's intent to share understanding and knowledge with participants (Morris, 2013). The previous work completed during the MSW practicum supported the researcher intent with the gatekeeper to share understanding. Additionally, there was no separation between the researcher and participants; their perspectives complemented each other. Being aware of the role of the researcher in the constructivist approach was crucial. It was important to note that the researcher became more like a

facilitator in the exchange of the understanding and knowledge among of all participants in the study. However, the researcher was also mindful that her intervention was temporary; therefore, she did not become a leader of the group or create false expectations of her role. There were explanations of the researcher's role during the individual and group interviews. Having a good understanding of the organization's and participants' environment and culture helped the researcher to be more prepared during the presentation of this project. The researcher investigated and learned about the group that supported this research project.

The researcher read the literature regarding the challenges and child welfare services in rural areas as well as the favorable conditions and social capital in rural areas. Additionally, the researcher studied community participatory approaches to help her to guide the group to complete an action plan. The researcher also reviewed community organization strategies and engagement techniques such as active listening skills and effective interview techniques to be more effective in the hermeneutic dialectic circle. The researcher gained understanding of the culture of the target organization and community, and this helped the researcher to be sensitive during the conversations and interviews. Moreover, the topics of well-being, child abuse and neglect sometimes were very sensitive because of prior personal experiences. Therefore, it was important to recognize these feelings among participants of this research project during the engagement process.

Finally, the researcher consulted with the university research advisor to refine this process during the execution of this research project.

Diversity Issues

Diversity issues arose during the execution of this research project because participants were from different backgrounds, culture, and socioeconomic levels. Additionally, participants had different motivations for participating in this research and in the collaborative group. Honest and respectful conversations were completed during the implementation of this research project. The researcher needed to be aware and sensitive about these differences in order to provide a comfortable and safe environment for the participants. The researcher invited participants to make an agreement about respecting diversity cultural beliefs and ethical issues. The researcher encouraged participants to express their opinion with respect and honesty.

The researcher emphasized the goal of the study and the target organization, promoting and focusing on the goal of the organization, which was preventing child abuse and neglect in this rural area. The researcher was respectful with the different perspectives and realized that each participant had their own agenda regarding child abuse and neglect preventive interventions. The researcher was able to check in with her researcher advisor about the different diversity issues to assure that the approaches used were always creating a safe environment for everybody to accept everyone's differences with respect.

Ethical Issues

The researcher was guided by the National Association of Social Worker Code of Ethics as well as university standards for research with human subjects. The researcher emphasized participant confidentiality. The researcher distributed and collected signed consent from participants prior to their participation in this research project. The researcher consulted with research advisor, supervisors and professors when ethical issues arose. The researcher promoted safety and comfort of participants during the execution of this research project. The researcher continuously asked participants about the things that needed to be improved during the project as well as their willingness to continue participating in the study. The researcher maintained notes, names, and collection of the information in a locked drawer at her desk. The researcher was the only person who had access to the key and the information. The researcher used numerical codification instead of names of participants to maintain the confidentiality of participants.

Political Issues

This research project generated political issues because the discussions were about the well-being of children and families, and preventing them from entering the child welfare system. The constructivist approach encouraged the theory of sharing power; therefore, the researcher explained the scope of this research project. Additionally, participants had political interests on these social

problems. The researcher used her awareness of these political issues to focus discussions and interviews with participants and gatekeepers to maintain the integrity of the research project and to avoid any conflict of interest. For instance, one of the participants felt during the group interview that the group's focus should be mainly networking and did not support the development of a community action plan. Although this perspective conflicted with the study's goal, the researcher encouraged a safe environment that this participant felt safe enough to share his opinion with this researcher. The researcher thanked this participant and invited the community leaders to study this participant's different perspective in a respectful manner.

The Role of Technology in Engagement

Technology was an important tool for this research project. The Internet facilitated engagement and communication between the researcher and participants of this research project. The researcher used emails to communicate with participants. Further, a few participants did not have time to have a face to face interview; they answered the surveys and emailed it to the researcher instead. The role of technology was a crucial element for all the phases of the research project.

Summary

The engagement stage was an important stage for the constructivist approach. Self-preparation steps prepared the researcher to identify problems

during the research project. A clear understanding of ethical and political issues facilitated respect and non-judgmental positions towards the participants of the research project.

CHAPTER III

IMPLEMENTATION

Introduction

This chapter describes the different stages of the implementation. The descriptions of the research site and the process of selection of participants were defined. The chapter describes the data gathering process and the analysis of the data. The report of the findings explains the follow up engagement and the termination of the research project.

Research Site

This study was conducted in a rural town in Southern California. The town is located 150 miles away from the main metropolitan cities in Southern California. This rural town has about 20,000 residents (City Data, 2015). The composition of the population consists of the following groups; 27.2% are “White alone”, 54% are Hispanic, 14.5% are African American, 2.2% are Asian, 0.2% are American Indian, 1.9% are of two or more races, and 0.4% are Native Hawaiian and Pacific Islander (City Data, 2015). In 2015, 24.4% of residents were living in poverty. The unemployment rate of this rural area in 2015 was 6.3%. Approximately 55% of the population is not affiliated with any religious group, 27% of the population is Catholic, 11% is Evangelical Protestant and 7% belong to other religious affiliations. The median household income was \$44,000 (City Data, 2015).

This city is isolated; however, it has services of every kind. Sometimes there is only one provider of a specific service. For instance, there is only one office for child and adult protective services, and one office for medical insurance, welfare, food stamps and unemployment assistance. There is only one hospital, one college, one high school, one office of the Department of Motor Vehicle, one library, and one office for mental health services. There are four elementary schools. Two therapists provide services for the child welfare population. There are three supermarkets and three gasoline stations. Residents are able to access services; however, most of the time there are waiting lists for appointments. Residents need to travel to bigger cities to receive specialized services.

Crime rates in this community are nearly one-third higher than average rates for the rest of the state (AreaVibes Incorporated, 2017). There is a significant problem with drugs and prostitution and are alarming numbers of murder, rape, robbery and assault.

The community benefits from a local nonprofit organization that has been working since 2013 to “promote the safety of children and prevent abuse and neglect through raising community awareness; education and training of professionals, parents and the community; services to child abuse victims and families impacted by abuse and neglect; and advocacy efforts influencing public policy” (Rural Helping Agency website, 2017). This research project helped this local organization to gain more understanding about issues related to neglect

and abuse in the town. Additionally, community leaders started meaningful conversations to develop a goal for this collaborative group. Finally, this research project helped the group to create a strategic action community plan to guide the group to intervene more efficiently and effectively in the community with the limited resources available.

Study Participants

The goal of this research project was to bring together community leaders and service providers to examine this community's resources to prevent children and families from entering the child welfare system. The researcher interviewed individual providers and members of a community collaboration whose goal was to raise awareness and reduce child abuse and neglect in this isolated rural area. Participants included therapists from the local mental health clinic, counselors from the local schools, facilitators of the organization, police officers, child and adult protective social workers, representatives of the local social services agency, staff from the recreational center, domestic violence prevention advocates, a dancing school director, a music school director, and various other representatives.

The researcher has participated in the monthly meetings of the potential hermeneutic dialectic circle. The group's main discussions were on what to teach the community and what to do to prevent child abuse and neglect in the area with a small budget from the county.

This project encouraged several community leaders to have conversations about the main worries of the community in regard of child abuse and neglect. Additionally, the collaborative group developed a general goal to focus its intervention. Finally, the researcher supported the participants to develop a strategic action community plan for the year of 2017-2018 to have a more meaningful intervention in this rural town.

Selection of Participants

Maximum variation and snowball sampling were used to include a broad range of diverse individuals in the project. According to Morris, “maximum variation sampling identifies the diversity of experience with a social phenomenon and gives in depth description of unique cases as well as any important shared patterns that are common to diverse cases” (Morris, 2013, p.124). Participants were encouraged to invite others to participate in the project; this is known as snowball or chain sampling. Morris (2013) explains that the “snowball or chain sampling is a way of understanding and utilizing networks between key people in relation to the study focus” (Morris, 2013, p.125). Thus, the study used a broad inclusion criterion: any provider with a vested interest in or knowledge of the topic was encouraged to participate.

Data Gathering

The study gathered qualitative data through face to face interviews and group meetings. The researcher developed questions which were used a semi-

structured interview guide to conduct the interviews and the community meetings. The interviews lasted between 20 to 45 minutes. The community meetings lasted approximately one hour.

Phase of Data Collection

Data were collected in three phase: individual interviews, group meetings, and via the process of creating the action plan with participants.

Phase 1: Individual Interviews

The first phase was initiated with face to face interviews between the researcher and participants. The researcher developed six types of open-ended questions to elicit participants' experiences and behaviors, opinions, values and feelings, knowledge, sensory information, and demographics (see Appendix A). These questions generated individual and joint constructivism (Morris, 2013, p.208). Questions included: "What is your opinion regarding the services and resources to support families from entering the child welfare system in your community?", "Who do you think should be responsible for creating services and resources to prevent child abuse and neglect?", and "Do you have a lot of information or knowledge about the services and resources that the community has?. The researcher created these questions (see Appendix A).

Sixteen participants completed face-to-face individual interviews. Two participants preferred to answer these questions via email.

Phase 2: Group Meetings

The researcher facilitated three group meetings during three months in the fall of 2017. The researcher developed an open-ended interview guide to stimulate group discussion (see Appendix B). Questions included: “What are the mission and vision of the collaborative group?”; “Who is responsible for keeping children safe in the focused rural area?”; and “What are the most prominent worries in the community?” These questions provided a structure and generated joint and individual constructivism (Morris, 2013). The constructivist approach required a constant interaction between researcher and participants.

Phase 3: Creating Action Plan

The third phase of data collection was to share with participants the ideas generated during the individual interviews and group meetings. The researcher created some questions to generate conversations (see Appendix C). During this final stage, the researcher provided information to the participants about strategic action plan and logic model framework to help the members of the collaborative group consider specific actions aimed at reaching the collaborative group’s goal.

The creation of a community action plan supported the empowerment of the members to strengthen their partnerships. The researcher helped the group complete an action plan with the following elements: activities, tasks, beneficiaries of the actions, outcomes/impacts, responsible/who can help, materials needed/how much, and timeframes for when action should occur.

Data Recording

The researcher asked permission of participants to record the face-to-face interviews and group meetings using an audio recording device. Additionally, the researcher used the minutes of the meetings to collect data. Furthermore, the researcher incorporated data gleaned from participants' emails with feedback about the research project. Finally, the researcher used flipcharts to record the contributions and ideas that participants of the hermeneutic group give during the check-in meetings. These flipcharts helped participants visualize the joint constructivism that they were creating during the collaborations and served as meeting notes.

Data Analysis

The researcher transcribed the audio recordings from interviews and group meetings. Morris (2013) explains, "data analysis will depend on the sources of data for constructions developed from the hermeneutic dialectic circle" (Morris, 2013, 279). Therefore, the researcher used open coding to identify the patterns in the collected from the individual interviews, group meetings, personal communications, and researcher field notes. The researcher developed codes and noted the variations and characteristics of these codes. Next, the researcher used axial coding to identify relationships between the different categories. The themes emerged based on the relationships between the categories. These coding processes helped to create the joint construction process in the research project.

Communication of Findings

The researcher communicated the findings during future monthly meetings using a PowerPoint presentation. Additionally, the researcher presented the action plan on an excel document created by the hermeneutic circle for easy visualization and reference. Finally, the researcher provided a copy of the summary of the research project to participants.

Termination

The constructivist paradigm invites participants of the study to take actions when the research project has been completed and findings have been shared. The participants of the hermeneutic circle will continue to participate in the monthly meetings that the local nonprofit organization regularly conducts in the community.

The termination of this study initiated a new stage of the action plan created during this research project. Members of the research project continued meeting and monitoring the activities already planned on the community action plan. The community action plan was adopted by the collaborative group to guide its strategies and impact in the community.

The researcher helped the collaborative group to develop a goal for the fiscal year 2017 to 2018. Based on this goal, the participants developed a community action plan to implement by members in this rural area. The goal of this project aligned well with the local nonprofit organization, the project aimed to

help the collaborative group to develop a specific goal supported by community strategic action plan.

Follow Up

The researcher will be participating as a participant in the monthly community meetings that the local nonprofit organization conducts in the community since October 2016. The researcher is able to guide the members to execute and modify the community action plan because the researcher is a member of the collaborative group. Therefore, without a formal engagement as a researcher, the researcher supports and motivates the implementation of the action plan in the community. The researcher provides her expertise as another member of the group supporting the goal of the organization.

Summary

In this chapter, there was a brief description of the research site, study participants, the selection of participants. Furthermore, data gathering was through face to face interviews and check in group meetings to develop the hermeneutic circle. There was the explanation of the three phases for the data collection that allowed creating the individuals and joint constructivism. Finally, the analysis was completed manually. The termination and the follow up of this study were initiated with the implementation of the action plan whose goal was to support the well-being of families and children preventing them from entering the child welfare system.

CHAPTER FOUR

DATA ANALYSIS

Introduction

The findings of the research project are discussed in this chapter. A total of 18 participants completed individual interviews. Ages of the participants ranged from 24 years to 64 years old. Nine (50%) participants were Caucasian, 5 (28%) were Hispanic, 2 (11%) were African-American, 1 (6%) was Asian-American, and 1(6%) was biracial. There were only two males and the rest were female participants.

The three group participatory meetings were held to develop a strategic plan that promotes child abuse prevention in this remote location. Sixteen professionals/members participated in the first meeting, 26 people participated in the second meeting and 14 people participated in the third meeting.

The first meeting was to identify the most prominent worries regarding child abuse and neglect in the selected rural area. The second group generated ideas for resources for education and partnerships among community members, the primary goal identified in the first group meeting. During the third meeting, the group created a strategic action plan with activities focused on preventing child abuse and neglect in the community.

It is important to note that 12 (72%) participants were born or have lived in the focus area more than 30 years. Four people (22%) of participants have lived

in the area less than 5 years and 1 (6%) participant lived in the area for around 12 years. Therefore, participants possessed a clear understanding of the strengths and concerns associated with this small rural town. The main themes related to the strengths of the community are safety, connectedness, and minimal but stable resources available.

Safety

Participants reported that the community was quite safe. Interestingly, the police officers seemed most likely to consider the community safe. They indicated that the crime rate, violence and gun activities are much higher in the urban cities than in this community. One participant stated:

It's pretty safe. As long as you're not out with criminal elements. You know. Like my family's safe all the time. I don't have any problems going to the grocery store or getting assaulted. It's all kind of how you make it.

(Interview # 14, September 2017)

Participants also stated that children are able to walk safely to their school without any concern. Neighbors are vigilant when children are unsupervised by their parents in the streets. A participant reported:

You live in a community for that many years you get to know everybody which is a real benefit because you know, just the other day they were saying oh have you seen little Marylou because she was missing. Within a matter of minutes, we were able to locate little Marylou and we locate her with her parents because when you live in a small community you just

communicate easily. They put it on the Facebook page of the Neighborhood Watch. Which I think is a wonderful resource because of a lot of times we have two kids missing. Within minutes, they are able to locate their kids. (Interview # 7, September 2017)

In general, the majority of participants felt that the town is safe for the most part, especially if the town is compared with the bigger cities. However, a few participants expressed concerns that the safety of the town might be threatened by drug and prostitution activities, as well as by the lack of activities for teenagers, who sometimes chose dangerous activities out of boredom. One participant explained:

Well you've got a lot of low income families. You'd have minimal things to do for kids. So the kids are going to find things to do that are unsafe like doing drugs, or swim in the canals. Break into abandon houses. They have nothing else to do. They don't have the money to go do things. Some of them can't play sports. Um, the rivers are not safe. They need swim lessons if they're going to be out in the river. The river would be great but the kids need supervision and lessons. (Interview # 18, September 2017)

Other participants reported that parents sometimes do not supervise their children, leaving their children unattended in the street. This concern was mentioned by community leaders in the focus group and was related both the role of law enforcement and to the issue of children and families not having kid-friendly activities. A participant stated that the following:

I see kids walk up and down in the street and then we know that the parents are absent. It is so easy to know what children will enter the system at any given time. There is too much neglect and lack of supervision. Sometimes, police don't stop children who are walking up and down the street; they don't ask where your parents are. (Interview # 16, September 2017)

Similarly, participants reported a strong desire to work towards addressing drugs and crime. However, participants recognized that this task required a community partnership between varieties of professions. Participants wanted police officers to do more drug raids and to hold people accountable when they have outstanding warrants as a means of addressing concerns about crime. Participants also agreed that there is a need for more activities to promote an environment free of drugs among children, teenagers, and young people.

In conclusion, most participants considered the community was safe. Yet, a few participants expressed safety concerns due to drugs activities, human trafficking, or crimes.

Connectedness

Participants suggested that everybody knows everybody and that many residents are related to one another. This phenomenon is an advantage for the community, because it generates social capital and support for children and families. A participant stated the following:

The community itself is a service because the community is a very small town, and everybody knows everybody, so this is really helpful to support families and children. (Interview # 5, August 2017)

Another participant said:

If someone is seeing a kid doing something, that person will approach to that kid to stop or call the parents. Here the saying “It takes a village to raise a child”; it really applies here in this town. (Interview # 7, September 2017)

Additionally, participants stated that the community is able to pull resources in a very short time when a family is in need, for instance when someone died and the community is able to come together and help the family. One of the participants stated that “there was a cancer walk and the community raised \$50,000 to\$70,000” (Interview # 7, September 2017).

Although, connectedness is a great strength for this community, there are limitations to this phenomenon. Participants agreed that local residents sometimes do not access services because they do not want others to know they are receiving services. People might not use services because of their pride, shame, embarrassment, or stigma. One participant shared “I know when I was doing counseling. I was embarrassed because of the name, but it was embarrassing receiving this service because people will talk down about me” (Interview # 5, August 2017). Yet, this participant shared that she wanted to

change her life and she embraced the services and her life style changed.

Another participant expanded on this topic, saying:

I very much think that because it is a small community, people do not want to lose their anonymity and they don't want people to see they are looking for help or even know that they have a problem. The reality is that there is not anonymity or confidentiality in this small town. (Interview # 2, August, 2017)

Another participant confirmed this assertion, saying:

Ashamed, embarrassment, and you know people think that people will think that they are crazy. People say I am not crazy I don't need to receive mental health services. You don't need to be crazy to participate in counseling, but there still they have these stigmas that you have to be crazy in order to receive mental health services. People think that in order to receive counseling, they are supposed to be crazy. So embarrassment. And even people that qualify for cash aid, food stamp, but they are too proud to come in, but I can take care myself. (Interview # 1, August 2017)

Participants also noted an unwillingness to accept services from strangers or resistance to accept new ways of service delivery. Mental health services and substance abuse programs are available in town, yet people do not utilize these as they should. For instance, telemedicine is offered in the community. The main telemedicine service is for psychiatry and counseling sessions; however many children and adults do not feel comfortable with this way of interaction. They

prefer the traditional direct contact with counselors; this is especially true of children. Some prefer to drive 105 miles away to have this direct interaction with mental health staff. People want to feel the connectedness that comes from face-to-face interactions with services providers.

One participant emphasized this connectedness and the need for more support from extended family members whose help is more likely to be well-received by residents, if it is intervention from government authorities. This participant stated:

I really feel like, there's a huge opportunity for, child protective services to provide preventative services through the Team Decision Making (TDM), the TDM process and through the Safety Organized Practice. I think that's really the key. But more than anything, I think here in this town specifically because it's such a tight knit community and people are somewhat closed to outsiders and there's somewhat this culture, you know, the big brother like government suspicion around CPS. We really need to have the community involved. I really think that it does take a village and you know if you know grandparents, aunts, uncles, however, they can if they know how to um intervene um it would prevent CPS from having to get involved.
(Interview # 8, August 2017)

Several participants expanded on the notion that families needed more preventive support from each other as well as from child protection authorities. They suggested that if families had more positive interactions with child

protection staff via prevention programs, they might be more willing to reach out to child welfare workers when they needed more significant help. Participants noted that the child protection agency's image needed help, as families were fearful of child protection staff, rather than viewing these workers as resources.

Family and Child-Oriented Activities

All participants indicated a lack of recreational activities for children and families. Families are not able to engage in activities such as going to the cinema. There are no after school programs, there is limited tutoring available, and few sporting events and "hang out" spots such as malls. Consequently, one participant noted that children and caregivers are spending too much time inside of their homes, especially in summer. Another participant stated "they start to be anxious and mad and they end up losing control, disciplining inappropriately their children leading CPS to enter in their life" (Interview # 4, September 2017). One participant explained that, "children are not learning to engage with parents, families and community because they are 'plugged' into their tablet, computer, or phones" (Interview # 1, August 2017). Participants viewed this phenomenon as generating a negative impact on children because they are not encouraged to talk about their problems in school or share their feelings with their parents or caregivers. Another participant observed that, "working parents do not have time to have quality time with their children because they are working in two jobs and they are tired, so their children get angry and start getting in the wrong paths" (Interview # 3, August 2017).

There is a clear desire that there should be more activities for children and families to be created in the community. A participant advocated for “allocating funds to create a movie theater, bowling alley, shopping malls, so families have places to go outside the home to connect with others and offer children options for than the streets” (Interview # 1, August 2017). Another participant advised that children need to be out doing sports, dance, karate, learning how to play an instrument or anything to teach them discipline to raise their self-esteem and positive self-worth. Participants stated that the rural town used to have a bowling alley, roller skating rink, and movie theater, but now these places are closed.

On a more positive note, participants agreed that the town’s river and natural area provided a place where families can relax and spend time together, which can increase their connectedness. A participant said, “families can just go to the river and pack a lunch and, just hang out in the river, have a good time” (Interview # 6, August 2017). Yet, participants suggested that the city should create a public pool where children and families can refresh themselves, because the river can be dangerous as some people have drowned in it. Participants stated that families and children could be happier if there would be more places to have fun outside in a safe way. Participant also expressed their desire to have recreational parks near the river where families can relax together safely. If families could enjoy more time together, social supports would increase. Families may not feel too isolated if there were more recreational activities for children and families.

Access to Human Services

Participants identified that the community has the basic human services available, although these programs often run with minimal staff, funds, and equipment. Still, residents are able to utilize them if they need to.

Participants identified that there is closeness and easy access with different organizations such as schools, mental and medical health clinics, Alcoholics Anonymous (AA)/ Narcotics Anonymous (NA) support groups, about 20 churches, two senior centers, one community recreational center, a food bank, one child protective services office, one hospital and one police department office. Residents can walk into each building to request a document or to talk to a staff member regarding a case or family without any complicated process or bureaucracy. Police and social workers also stated that child abuse investigations can be completed in an efficient manner because a social worker or police officer can just request written or verbal reports from each other without too much delay. Similarly, these professionals are able to visit families together to support the family and complete their investigations.

Participants noted that these services are adequate and the customer service is generally good. In fact, participants agreed that child protective social workers do an excellent job helping families. Participants also stated that families are able to receive the basic governmental help such as food stamp, health care and emergency assistance, and that the local welfare office is a valuable resource in the community. A participant stated the following:

The Welfare department offers classes to get the GED test and opportunity to talk to a counselor. It is important services for families because people can gain work experience and if people get a job it is helpful for families therefore for their children. (Interview #5, August 2017)

The school system also has different supports for students and families, including 504 plans, Individual Education Plans (IEP), and Student Study Teams (SST) to support children who have special needs. The school district has two school psychiatrists, a nurse, and two counselors. There is a team in place to support students in crisis. It was also stated that the school staff work closely with mental health staff to support children in crisis.

Participants also noted that the police department has two programs for children which prevent child abuse and neglect and community involvement. The town also has Boy and Girl Scout clubs. The high school also offers the Junior Reserve Officer Training Corps (JROTC) program. The community also has a community center where about 30 to 50 children participate in after school or summer vacation activities.

Participants also stated that there is little traffic in this rural area and everything is close by. They also indicated that this is one of the factors that attract outsiders to live here. All participants stated that one of the things that they enjoy most it is the ease of traffic and access to the different agencies and organizations that are found in the community.

Lack of Awareness

Participants expressed that residents in the community lacked awareness of human services programs within the community. Even further, when asked what resources and services were available in the community, most of the participants had trouble identifying services, even though they all lived and worked in the community for considerable time. Participants often responded that services were not available in the community; that they were only available in the nearest metropolitan area 105 miles away. Only with prompting and reminding from the researcher did participants recall services provided by the social services agency, mental health clinic, the law enforcement, and other small organizations are already offering services in the town.

This lack of knowledge of services seemed to translate into underutilization of services. A participant stated:

Sometimes the problem is because we don't know what it is here. So someone can come in and set up a program and because we're not aware, you know, we don't know, we don't utilize it. (Interview #1, August 2017)

Participants had a variety of suggestions for how to improve the community's understanding of its own resources. These suggestions included developing regular networking activities for helping professionals, strengthening partnerships among different agencies, and developing joint activities in which human service professionals come together to plan motivational events for youth.

These activities should also include the local hospital, college, area churches, and small clubs. Especially around the issue of child abuse, participants suggested that human service professionals needed to be more involved in community activities with children and families. These suggestions were highly supported among participants even as they recognized the increased workload they would require. Additional suggestions from participants focused on leveraging financial resources to address certain issues. For example, it was suggested that human service agencies need to hire local trained and licensed professionals from the community, but that when agencies must hire people from outside of the community, the agency should provide attractive incentives or bonuses to retain well-prepared and licensed people to work long term in the community to avoid high turnover rates. Similarly, one participant suggested using small incentives to encourage families and children to get educated, especially because these small incentives will increase participation in the community.

The lack of awareness related to services seemed to be a pressing issue in this community. Yet, participants seemed to agree upon many low-cost efforts that could be undertaken to begin to combat this problem.

Child Welfare

When participants were asked about the resources and services to prevent families from entering the system, most participants agreed that there simply were not enough supports for struggling families. There seemed to be a

great need for more foster families, more parenting classes, parent peer mentors, and programs from child protective services.

The majority of participants expressed concerns about the lack of foster families in the community, which meant that children who had to be placed in foster care were removed not only from their parent's home, but also from their community and school. Currently, there are only two certified foster home available in this town. Participants expressed deep concern over the trauma this caused children. As one participant stated:

Putting children away from their community origin, it is such a horrible disserving thing to do to our families. This really negates a lot of positive stuff that parents may have for the CPS; this affects parents' motivation and hope to get their children back. (Interview #2, August 2017)

Another participant noted that there are no resources for foster parents in town and all foster parent trainings are held out of town; both of which deter people who might be interested in becoming foster parents. A foster parent participant remarked that, "I don't get any help when I need help to serve my foster children, for instance, if I get my car broken, no one will come to help me, so we need more help" (Interview # 17, September 2017).

All 18 participants and the members of the focus group stated that parenting classes are crucial for parents and caregivers to support them and children. A participant noted that parenting classes are especially important for teens parents and young adults, noting that "when a client or potential clients are

young, and they are at a more moldable time in their life, that they are more receptive to change and they still have not already learned bad habits” (Interview # 2, August 2017). Participants believed that early intervention and education will most likely impact positively children and families. Along the same lines they believed that families who investigated repeatedly by child protective services should be offered voluntary Family Maintenance Services to help them avoid entering further into child welfare system. In these cases, a social worker provides high-risk families up to six months of support to help the family stabilize.

In addition, participants suggested that families who have successfully reunified with their children should be invited to serve as peer mentors to parents struggling with similar challenges. As one practitioner noted:

We don't know what it is like to walk in someone else's shoes, but we do know that if we have a room full of people whose children have been detained, they may not have the same problem, but they may be able to serve and support each other... I really think that we need to let our clients, families work towards empowering each other. (Interview # 2, August 2017)

Similarly, just under half of respondents suggested that schools could play a larger role in this issue by providing trainings for families at PTA meetings, helping parents understand social workers' roles, and encouraging the use of positive parenting approaches. One participant explained:

I think the school could be a source of information, and I don't know what the legalities are regarding that, but simple flyers that they could send home with the children just like they send something else home, like you know 10 positive things to do with your children or just parenting tips all that could be sent home, and that could be an assistance for parents.

(Interview # 1, August 2017)

Further, a few participants expressed frustrations that mandated reporters, including teachers, sometimes seemed unaware of their responsibilities or unwilling to report abuse, sometimes with fatal consequences. Participants expressed a desire for more locally held trainings on mandated reporting, which they thought should be provided to children, parents, and professionals, including police and social workers who sometimes violated policies by disclosing the name of the reporting party to the family under investigation.

In summary, this discussion served as a starting point of conversations about the particular challenges that this town faces related to child abuse and neglect. Participants were very clear about the gaps in services and had strong opinions about how to best address those gaps, including prevention and improving the general well-being of families. The main take-away of this discussion was the need to continue exploring new ways for the community to collaborate to improve child welfare.

Mental Health Services

One-third of the participants expressed concern about the lack of anger management or domestic violence classes in the community. One participant suggested that a lack of financial resources and small numbers of clients who need these services limited the community's ability to provide such services. The participant noted:

The problem is that to get services here, the bottom line is money; and there is not enough money or clientele to have people from out of town to come here and provide the services. That's what it comes down to! So, unfortunately, that's the reality. (Interview # 1, August 2017)

On the other hand, another participant noted that sometimes people do not use the services because the programs are during working hours. Another participant noted that long waiting lists for mental health services sometimes resulted in 5150 holds for people in crisis who were unable to access services. Further, patients may be placed in the local hospital to be stabilized, but there are limited specialized services available for clients or their families even when they are hospitalized.

Again, participants suggested that schools might be the appropriate settings in which to provide additional services to children and families, especially in mental health. Participants suggested additional curriculum which could help children and parents, "learn social and emotional skills to learn how to make healthy decisions and deal with conflict resolution" (Interview #8, August 2017).

Asking schools to become partners in mental health services seemed especially important given the limited number of trained mental health professionals in town. Participants expressed concern with the number of interns providing much needed services in the community. Even though these interns were learning valuable skills and proving themselves valuable, participants worried that their skills may not be as developed as those of licensed professionals.

Mental health services are key components in any child welfare system. Therefore, the participants' concerns about the need for improved mental health services in this community seem particularly timely and important.

Conclusion

The data generated through formal interviews and group meetings generated momentum among participants, especially when they were asked about their hopes for this study. The majority stated that the study could generate seeds for ideas of activities and programs for professionals, agencies, and families to prevent child abuse and neglect in the community. When asked to dream of their vision for the future of their community, participants revealed thoughtful, useful suggestions designed to improve the community's human service system and the well-being of families.

CHAPTER FIVE

DISCUSSION

Introduction

Chapter five is a reflection and overview of the research project completed in this rural community from August to October 2017. It is important to know that all these collections of data were statement regarding at the circumstances during this determined time. The researcher is aware that the circumstances may have changed regarding services and resources to prevent child abuse and neglect in the focus area. For instance, new services may be putting in place or have been pulled out from the focused community. Nevertheless, the goal of this research project is to provoke conversations among community leaders, governmental and private organizations as well as families regarding services, resources, activities and programs to prevent child abuse and neglect in the focused area.

Overview of Findings

This study identified both challenges and strengths in this rural community in an effort to develop a plan to improve services for children and families. Study findings suggest that there is a strong sense of connectedness among families and community leaders. Yet, this connectedness sometimes leads residents to avoid using services because they do not want others to know of their problems. Additionally, findings suggest that residents feel the town is safe,

for the most part, although increased drug activity and crime threaten that sense of safety.

The findings also show that some services are limited in this community, in part because of a lack of resources and programs, but also due to high turnover in human services professionals. Further, there is a lack of awareness of the services and resources that do exist in town, which may stem, in part, from weak community engagement and outreach from existing service providers.

The results indicate that additional collaboration among service community leaders, service providers, agencies, and families is needed. For instance, participants emphasized the need for child protective services social workers and agencies to lead the way in providing preventive programs for families. Participants suggested greater use of child and family team meetings, community and professional trainings, and expanded availability of supportive services for struggling families.

These findings are supported by the literature review on human services in rural areas. Findings related to the lack of health and mental health programs, trainings and challenges accessing available services are supported by Sudol's (2009) research on rural communities. Additionally, the findings related to this community's high unemployment rate, limited resources for learning life skills such as parenting, and programs to address substance abuse problems are consistent with the literature (Child Welfare Information Gateway, 2018). Additionally, the concerns in this community regarding substance abuse

threatening the safety of this town are consistent with literature that suggests that substance abuse issues are prevalent in rural communities, but that those communities often lack treatment options and experience considerable stigma related to substance abuse (SAMHSA, 2007).

Interestingly, although the literature emphasizes social workers' need to serve as generalists, rather than specialists, in rural communities (Child Welfare Information Gateway, 2018), the participants in this study did not explore this topic in their discussions, suggesting that this concern is not prevalent in this community.

Finally, the study's finding that this rural community possesses a variety of conditions which are favorable, in addition to the challenges it experiences, are consistent with the literature on rural communities (Child Welfare Information Gateway, 2018). The strong sense of community, willingness of residents to help one another, and connectedness are all noted as particular strengths of rural areas in the literature on social capital (Bourdieu, 1986). Yet, the findings of this study suggest that the social capital in this community could be further developed via expanded and deeper collaboration among human services providers.

Limitations

The study has several limitations. First, the researcher has worked for the in this community as a child protective social worker and as a social work intern community outreach. Therefore, the researcher's personal and professional experiences in this community may generate biases which influenced the

outcome of this study. The researcher worked to manage these biases by consulting with community members as well as with her research advisors on a regular basis. Second, participants in this study were volunteers, whose views of the community may have been considerably more positive than those of their peers who chose not to participate in the study. Third, the researcher interviewed professionals in the helping professions and not direct clients in the child welfare system. Finally, this study focused on one specific rural area in Southern California. Therefore, the findings may not apply to other rural communities.

Implications

Practice

The findings suggest that this community had a strong desire for child protective social workers to be more involved in the community, whether attending community meetings, providing trainings, and becoming more involved in child abuse prevention efforts. Child welfare agencies should consider expanding roles for social workers as well as expanding programs in response to this finding. These efforts could be built upon and could leverage the strong connectedness in this community and identified in this study. This connectedness could serve as a strong foundation for developing supportive networks for families and children. Additionally, agencies could expand their use of child and family team meetings, as these are viewed by participants as powerful tools that could include additional community partners such as churches, schools, mental health staff, and other formal private and public organizations.

Policy

There is a great need to for advocacy to garner resources needed to expand services that support human service professionals and their clients in this town. The researcher can attest to this need, as when she began her work in the community, she had no access to bus passes or a drug testing center, mainly because there was little advocacy to promote the addition of these services. Fortunately, after a year of struggle, these services were provided via the child protective service office. The researcher's experience, and that of the participants, suggests that this community would benefit from increased advocacy efforts to encourage federal, state, and county organizations to bring much needed resources to the community.

Research

This study highlighted the slow, yet noticeable decline in this rural community, which lost many of its jobs, its professionals, and its community services and recreational activities in recent decades. Future research should address this decline and identify macro level interventions to revitalize rural areas. Additional research on specific human service challenges such as the recruitment of rural foster parents and ways to improve rural agencies' collaboration are needed.

Additional research should address rural residents' reluctance to seek mental health services due to stigma and a lack of confidentiality in rural communities. This is particularly important in child welfare, as many families and

children who enter into the system have mental health problems and substance abuse issues. Therefore, future research is needed to examine and find new strategies to reduce clients' fear and embarrassment about accessing these services.

Conclusion

This research project generated conversations among community leaders and professionals in the focused community regarding services and resources to prevent families from entering the child welfare system. The community members and practitioners who participated in this study felt that this project could be useful for their community; their responses highlighted their hope to improve partnership, collaboration, and the maximization of existing services and resources. As one participant explained that the process could help identify, "all the players that already are providing services together, so we can all find out who is doing what? Where is the overlap? And get to know these agencies and be more collaborative on work together. Like I say making lemonade with lemons. We may have minimal resources, but with what we have we could capitalize on it!" (Interview # 2, August 2018). This statement captures the purpose of this project; to bring together community leaders and professionals who have the desire and the skills to implement activities, projects and programs to improve the well-being of children and families and to prevent them from entering the child welfare system.

APPENDIX A
INDIVIDUAL INTERVIEWS

Date:

Location:

Participant's role in the community:

Experience/Behavioral Questions:

1. What is your opinion regarding the services and resources to support families from entering the child welfare system in your community?
2. Do you work in providing services or for an agency that is involved in preventing child abuse and neglect?
3. What services do you think are the most important to have in this rural area to prevent child abuse and neglect?
4. Why is the most important service to you?
5. Have you ever been involved in activities or services to prevent child abuse and neglect? Which ones? What was the most important benefit for families in the services that you were involved in?

Opinion/Values Questions?

1. Do you know what neglect and abuse means to the local social services agency or child protective services agency?
2. Who do you think should be responsible for creating services and resources to prevent child abuse? Why?
3. Do you think this rural area has adequate services? Why or why not?
4. What kind of services and resources would you like to see in this rural

area?

5. Do you think this research will be useful for your organization? Who do you think would like to know about the findings of this study? Why?
6. What do you think should be done to support services and resources to prevent child abuse and neglect?
7. Do you think social services agencies should be involved in the creation or development of these services and resources? Who else?

Feeling Questions:

1. Do you feel happy with the services and resources that this rural area has? Why do you feel happy or unhappy?
2. Are you satisfied or unsatisfied with the customer services that child protective services agencies offer to families and children in this community? Why?
3. What would you like for the child protective services agency to do in order to prevent child abuse and neglect at your community?

Knowledge Questions:

1. Do you have a lot information or knowledge about the services and resources that the community has? How did you find out about these services and resources?
2. What else should be done for families and children to have access to

services to promote their well-being and avoid child abuse and neglect?

3. What is neglect and abuse for you? Can you provide a definition with your own words for abuse and neglect? Please be specific.
4. What do you think is child safety in your community? Who is responsible for children's safety in your community? Who else should be?
5. Who should prevent child abuse and neglect at home?
6. Do you think children should be involved in these topics? Why or why not? How?
7. What worries you about child safety in your community?
8. What do you think keeps people from using services and resources in your community?

Sensory Questions:

1. What do you see resources and services having in common and what are their differences? What should happen to improve the services and resources in your community?
2. What do you think families and children should do to avoid child abuse and neglect?
3. Besides of the traditional services that families participate in child welfare system, what additional resources and services that are available in this rural area to families should be utilized to prevent child abuse and neglect?

Background Demographic:

1. What is your sex?
2. What is your age?
3. What is your race?
4. What is the highest level of education you have completed?

APPENDIX B
GROUP MEETINGS

Date of the meeting:

Participants' roles:

Open questions will be administered in a group meeting such as:

1. What worries do individuals have about child safety, neglect and abuse in this rural community?
2. What is the perception of the role of child protective services, school, church, family and society to prevent child abuse and neglect and promote the well-being of families?

The researcher anticipates that participants might also analyze aspects regarding about past, present and future actions to prevent child abuse and neglect.

That is, services and resources the community previously had, currently has and should have in the future to prevent child abuse and neglect.

1. What have families and parents done in the past to prevent child abuse and neglect?
2. Who helped them in this prevention?
3. What do parents/caregivers/families do now to prevent child abuse and neglect now?
4. Who helps to reach out for help to prevent child abuse and neglect and promote their well-being now?

These open questions will generate new understanding of the past, present and ideas for the future regarding child abuse and neglect.

APPENDIX C
ACTION PLAN DEVELOPMENT

The researcher will encourage and empower participants of the hermeneutic circle to create an action plan with the goal of strengthening the partnership among various stakeholders to prevent child abuse in this vulnerable and rural town.

The researcher would ask questions such as:

1. What should happen next to prevent child abuse and neglect?
2. What is the goal or objective of this activity?
3. Who is the responsible of this activity?
4. What will be the outcome or result of this activity?
5. What materials will be needed to complete this activity successfully?
6. Who will monitor this activity?
7. Who will be the participants?
8. Who will benefit from this activity?
9. Where will this activity happen?
10. Who will be involved?
11. When will this event/activity happen?

12. How much money will be needed for this activity or event?

13. Is the activity one event or it is an ongoing activity?

These questions should be asked during the check- in meetings. This action plan will need to have specific elements of a plan such as who, what and when to help the members of the hermeneutic circle to implement, monitor and evaluate the goal of this action plan on preventing child abuse and neglect in this rural community.

APPENDIX D
INFORMED CONSENT

College of Social and Behavioral Sciences
School of Social Work

INFORMED CONSENT

The study in which you are asked to participate is designed to explore and generate conversations among community leaders and individuals regarding services and resources to support the families' well-being to prevent them from entering the child welfare system in the selected rural area in the Southern California. The study is being conducted by a candidate of the MSW program, Nelly Zambrano, under the supervision of Dr. Deirdre Lanesskog, Assistant Professor, in the School of Social Work, California State University, San Bernardino. The study has been approved by the Institutional Review Board Social Work Subcommittee, California State University, San Bernardino.

PURPOSE: The purpose of the study is to discuss and explore the availability of resources and services to prevent families and children from entering the child welfare system in a rural town of Southern California.

DESCRIPTION: Participants will be asked a few questions on the past, current and future status of resources and services in support of families in the prevention child abuse and neglect.

PARTICIPATION: Your participation in the study is totally voluntary. You can refuse to participate in the study or discontinue your participation at any time without any consequences.

CONFIDENTIALITY OR ANONYMITY: Your responses will remain anonymous and data results will be reported as a group only.

DURATION: It will take 20 to 30 minutes to complete the survey.

RISKS: There are no foreseeable risks to the participants.

BENEFITS: There will not be any direct benefits to the participants.

CONTACT: If you have any questions about this study, please feel free to contact Nelly Zambrano, 714-820-3570 or email her 005387781@csusb.edu or the researcher's advisor Dr. Deirdre Lanesskog, 909-537-7222 or email her at Deirdre.Lanesskog@csusb.edu

RESULTS: After June 2018, a sample of the research project will be available online at the Scholarworks website through the schools online Pfau Library (<http://scholarworks.lib.csusb.edu>). Please contact the student, Nelly Zambrano at 005387781@csusb.edu, if you would like to get the result from the student.

909.537.5501 · 909.537.7029

5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393

The California State University · Bakersfield · Channel Islands · Chico · Dominguez Hills · East Bay · Fresno · Fullerton · Humboldt · Long Beach · Los Angeles Maritime Academy · Monterey Bay · Northridge · Pomona · Sacramento · San Bernardino · San Diego · San Francisco · San Jose · San Luis Obispo · San Marcos · Sonoma · Stanislaus

APPENDIX E
DEBRIEFING STATEMENT

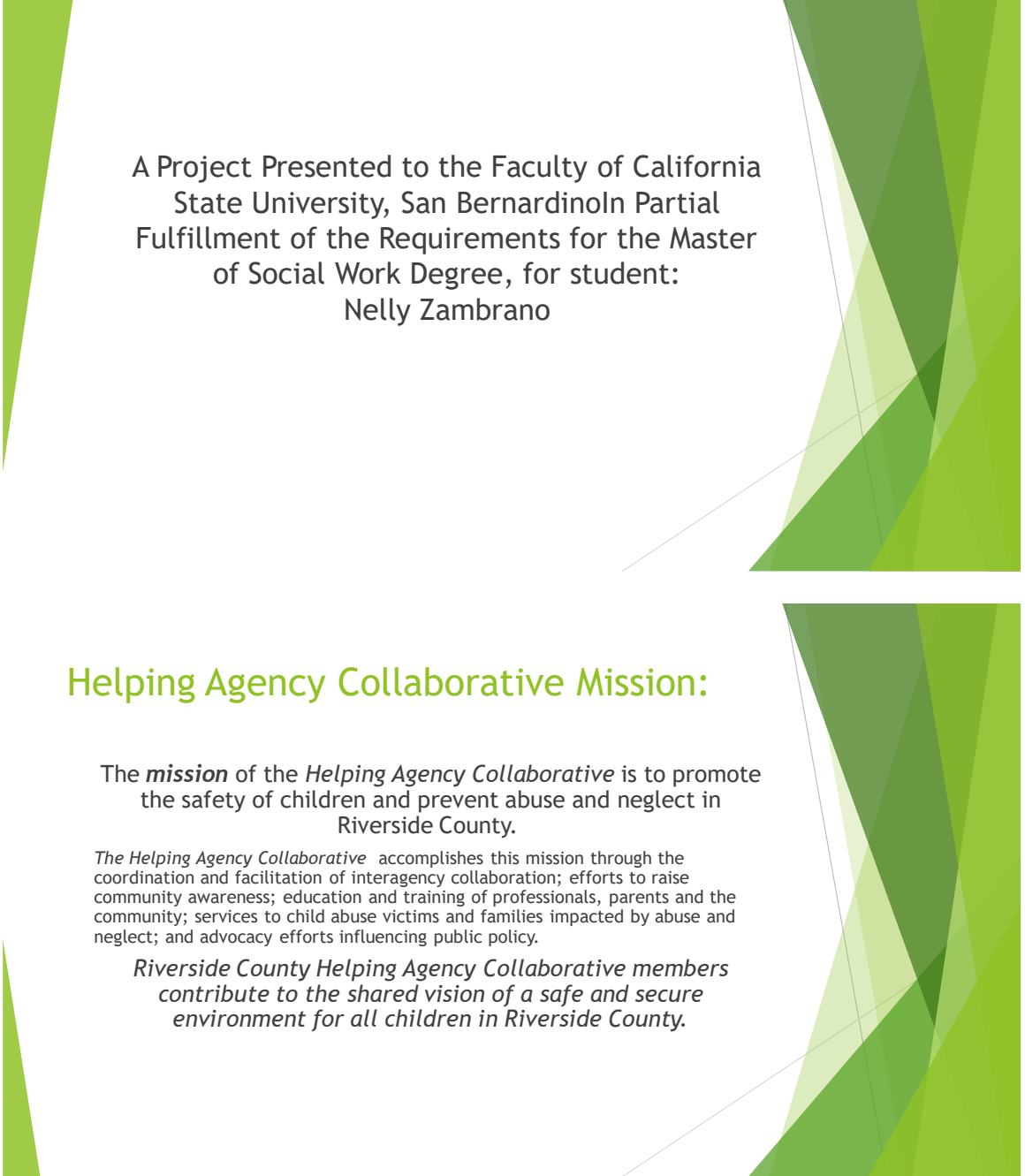
The study you have just completed was designed to discuss and explore the availability of resources and services to prevent families and children from entering the child welfare system in the selected rural town from Southern California.

Different community leaders, families, individuals and helping professionals working in the child welfare system have participated by providing information about the challenges and opportunities that families and children face when receiving and benefiting from local services and resources.

The goal of the research project is to support community leaders to develop knowledge and actions to create a potential community action plan to support families and children from entering the child welfare system.

Thank you for your participation. If you have any questions about the study, please feel free to contact Nelly Zambrano at 714-820-3570 or Dr. Deirdre Lanesskog at 909-537-7222. If you would like to obtain a copy of the group results of this study, please contact Nelly Zambrano (email: 005837781@csusb.edu) or Dr. Deidre Lanesskog (email: Lanesskog@csusb.edu) after June 2018.

APPENDIX F
GROUP WORK POWERPOINT PRESENTATION



A Project Presented to the Faculty of California
State University, San Bernardino
In Partial
Fulfillment of the Requirements for the Master
of Social Work Degree, for student:
Nelly Zambrano

Helping Agency Collaborative Mission:

The *mission* of the *Helping Agency Collaborative* is to promote the safety of children and prevent abuse and neglect in Riverside County.

The Helping Agency Collaborative accomplishes this mission through the coordination and facilitation of interagency collaboration; efforts to raise community awareness; education and training of professionals, parents and the community; services to child abuse victims and families impacted by abuse and neglect; and advocacy efforts influencing public policy.

Riverside County Helping Agency Collaborative members contribute to the shared vision of a safe and secure environment for all children in Riverside County.



What have we discussed?:

What is child abuse and neglect means to the group in order to begin discussion on focus area?

Collaborative members were asked to define what they believe child abuse is and the types of child abuse that occurs within the community



Who is responsible for keeping children safe in Focused Rural Community?

Collaborative member identified the following are responsible: CPS, Mental Health providers, schools, family members, relatives, churches, neighbors, police, city leaders, medical personnel, and the whole community.

- ▶ **What are the most prominent worries in Focused Rural Area?**
- ▶ Lack of supervision both in and outside the home, parents are not aware of what their children are doing, and are also under the influence.
- ▶ Lack of Child development classes, young people are having children, with no knowledge of how to care for them.
- ▶ Failing to provide mental health services to children who are in a crisis state.
 - ▶ SIDS Sudden Infant Death Syndrome
- ▶ Lack of reporting, most recently there was an incident where a report was not made during a hospital visit and child care, as result a child died.
- ▶ **Human Trafficking**
- ▶ Lack of activities for children in Focused Rural
- ▶ Families do not have information about the different organization and resources in Focused Rural or near areas
- ▶ The lack of jobs and poor attendance for youth, and not being accountable at home
- ▶ Children need to be involved in the community
- ▶ Lack of Communication among community leaders and organizations
- ▶ Facebook page for City of Focused Rural Area does not have any information to help families and children

What will be the goals for the community of Focused Rural Area targeting Child Abuse?

- ▶ Education to parent and families
- ▶ Education and knowing what roles everyone plays in knowing what and how to report.
 - ▶ By educating the community we can intervene
 - ▶ Increasing communication and accountability
 - ▶ Host Mandated reporter trainings for professionals
 - ▶ Working with local medical professionals
 - ▶ Education in schools
 - ▶ Partnering with a church
 - ▶ Plan Resource Fair
 - ▶ Offer classes to parents
- ▶ List of people to contact to support parents and children

Helping Agency Collaborative Goal:

Helping Agency Collaborative goal is to have Community and Family Education to prevent and reduce child abuse and neglect, and strengthen partnership among community leaders, organizations, and families in the city of Focused Rural Area in the fiscal year 2017-2018.

Proposed activities by members:

- ▶ Great Activities were proposed in our last meeting on 8/24/2017!!
- ▶ Lets prioritize activities and decide what are we going to do? Who is going to be the lead and the support for the activities? How much money will we need? What are the specific tasks to do? When are we going to do it, how often? Who is going to be the participants? Do you have new actions for our strategic action plan?

Any important action that we are forgetting?

Developing an action plan can help change and achieve the mission and vision. It helps us to increase efficiency and accountability within the organization. It helps turn our dreams into reality!

You can still add actions during this year. This strategic action plan is your!
It can be modified, changed and revised at any time!

Activities	Tasks	Participants/who will benefit	Outcome/Impact	Responsible/ Who can help?	Materials Needed/ How much \$	When?/Is this action one event or ongoing?

Thank you and lets not forget that:

As the proverb says,
“It takes a village to raise a child”
It could also say
it takes a village
to prevent abuse and neglect to a child.

Thank you again for all your help, patient and collaboration with me.
It has been a great pleasure to complete my research project with this wonderful group of people.

Muchas Gracias!

REFERENCES

- Area Vibes, Inc (2017). Reported annual crime. Retrieve from <http://www.areavibes.com/blythe-ca/crime/>
- Belanger, K. (2008). The welfare of rural children: A summary of challenges. *National Advisory Committee on Rural Social Services*. Retrieved from http://www.hunter.cuny.edu/socwork/nrcfcpp/downloads/teleconferences/Welfare_of_Rural_Children.doc.
- Carnochan, S., Rizik-Baer, R., & Austin, M. (2013). Preventing re-entry to foster care. *Journal of Evidence-Based Social Work*, 10(3), 196-209. doi: 10.1080/15433714.2013.788949
- Child Welfare Information Gateway (2018). Rural child welfare practice. Retrieve from <https://www.childwelfare.gov/pubPDFs/rural.pdf>
- Children's Research Center, 2012. *Introducing safety-organized practice*. Retrieved from <http://bayareaacademy.org/wp-content/uploads/2013/05/SOP-Handout-Booklet-9-20-12.pdf> .
- City Data (2015). Focused rural town. Retrieve from <http://www.city-data.com/>
- FBI's Uniform Crime Report for the year of 2016 (2016). *Reported annual crime in Blythe*. Retrieved from <http://www.areavibes.com/blythe-ca/crime/>
- Fukuyama, F. (2000). Social capital and civil society. *IMF Working Paper*. Retrieved from <https://www.imf.org/external/pubs/ft/wp/2000/wp0074.pdf>

Fundamentals of Social Capital (2000). Retrieved from:

<https://www.ideals.illinois.edu/bitstream/handle/2142/46166/Fundamentals%20of%20Social%20Capital.pdf?sequence=2>

Gutierrez, L. M., Parsons, R. J., & Cox, E. O. (1998). *Empowerment in social work practice*. Pacific Grove, CA: Brooks/Cole.

Hope Collaborative. (2017) *Mission*. Retrieve on from: <http://www.hopecollaborative.org/>

Lenardson, J., Race, M., & Gale, J. (2009). *Few and far away: Detoxification services in rural areas*. (Research & Policy Brief). Portland, ME: University of Southern Maine, Muskie School of Public Service, Maine Rural Health Research Center.
Retrieved from

Winter, I. (2000). *Towards a Theorized Understanding of Family Life and Social Capital*. Working Paper, 21, 2000. Retrieved from <https://aifs.gov.au/publications/towards-theorised-understanding-family-life-and-social/introduction>
http://digitalcommons.usm.maine.edu/cgi/viewcontent.cgi?article=1013&context=behavioral_health

National Association of Social Worker (2017). Code of Ethics of the National Association of Social Workers. Retrieve from
<http://www.naswma.org/page/71/Code-of-Ethics-of-the-National-Association-of-Social-Workers.htm>

McCroskey J. & Meeza, W. (1998). *Family-Centered Services, Approaches and Effectiveness*. Retrieved from:

https://www.princeton.edu/futureofchildren/publications/docs/08_01_03.pdf

Morris, T. (2014) *Practice informed research methods for social workers*. Thousand Oaks, Ca. Sage

Social Work speaks (2009) Rural Social Work. Retrieved from:

<https://www.socialworkers.org/assets/secured/documents/da/da2010/referred/Rural%20Social%20work.pdf>

Perkins, D.D. & Zimmerman, M. A. (1995). Empowerment theory, research and application. *American Journal of Community Psychology*, 23(5) give page #s
Retrieved from

<https://my.vanderbilt.edu/perkins/files/2011/09/empintro.proquest.pdf>

Substance Abuse and Mental Health Services Administration (SAMHSA) (2007). *Rural Substance abuse: Overcoming Barrier to Prevention and Treatment*. Retrieved from http://archive.samhsa.gov/SAMHSA_News/VolumeXv_4/article1.htm

Sudol, T. (2009), *Rural Issues in Child Welfare*. Retrieve on January 28, 2017 from:

http://www.hunter.cuny.edu/socwork/nrcfcpp/info_services/Sudol_Info%20Pack_Rural%20Issues_Aug%202009.pdf

Tan, A. (2009). Community development theory and practice: Bridging the divide between 'micro' and 'macro' levels of social work. Indianapolis, IN. Retrieve from <https://www.nacsw.org/Publications/Proceedings2009/TanACommunity.pdf>

Van Gundy, K. (2006). Substance abuse in rural and small town America building knowledge for rural America's families and communities in the 21st Century. Vol. 1. Durham, NH: Carsey Institute. pp. 1–38.