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THE CAUSES OF RECURRENCE OF MALTREATMENT IN CHILD
WELFARE, AND THE IMPACTS OF THE FAMILY TO FAMILY
TEAM DECISION MAKING INITIATIVE

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
Juana Lorena Gonzalez

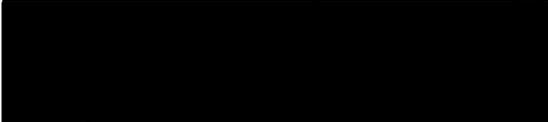
September 2011

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Approved by:


Dr. Thomas Davis, Faculty Supervisor
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6/14/11
Date


Dr. Rosemary McCaslin,
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ABSTRACT

The continuing increase in re-entry to child welfare due to recurrence of child maltreatment is a social issue that is of concern to Federal government, child welfare agencies, communities, and individuals. Several research studies indicate that length of child welfare involvement, racial composition, substance abuse, mental health, and medical issues of families are associated with recurrence of child maltreatment. Initiatives such as Family to Family's Team Decision Making (TDM) have been implemented in various child welfare agencies to reduce the rates of recurrence of child maltreatment and provide stable and permanent homes for families.

The purpose of the study was to conduct a descriptive and inferential analysis of variables associated with recurrence of child maltreatment and the Team Decision Making process. The study utilized a representative sample of 100 Child Welfare cases from Riverside County's Child Protective Services CWS/CMS system of closed and open cases. A quantitative research method to examine possible relationships among variables that influenced recurrence of child maltreatment and re-entry into the Child Welfare system, including length of

child welfare involvement, racial composition, substance abuse, mental health, and medical issues. Research findings revealed a significant relationship between substance abuse and the recurrence of child abuse.

Recommendations for further research could focus on the effectiveness of services provided to clients by conducting surveys or personal interviews from clients that received services from child welfare agencies instead of secondary data analysis.

The recurrences of child maltreatment related to substance abuse suggest that appropriate substance abuse services are either not available or effective given the constraints in treating child welfare clients. Although, other variables studied in this research did not reveal any significant findings due to the limited sample size obtained, a more in depth study could be done to better assess the multi-faceted challenges that child welfare agencies encounter when dealing with clients that have substance abuse issues and may be at risk of recurrent child maltreatment.

ACKNOWLEDGMENTS

I would like to thank Dr. Thomas Davis, Faculty Supervisor, at CSUSB's Department of Social Work, for his assistance and support during this journey for this project.

I would also like to thank Riverside County Department of Public Social Services, Children's Services Division, for their support in completing this research project.

DEDICATION

I dedicate this research project with all my love to my children and husband Manny, who patiently endured with me the long hours of homework, and for being patient when I was overwhelmed with finishing papers and projects. I want to also thank my parents and siblings who have always been there for me through the hard times and good times. But most of all, I thank my Lord Jesus for blessing me with my family and friends and for allowing me to complete this huge goal through all the good times and bad times that came along the way.

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CHAPTER ONE

INTRODUCTION

When children are removed from their home of origin, it is usually due to the children being in imminent risk of danger, and removing them from the home is the only option for ensuring safety for those children. In California there were over 10,000,000 children under the age of 18 and in Riverside County there were almost 600,000 children under the age of 18 as of 2007. In California, the rate of child abuse investigations was 49.2 per 1000 children and in Riverside it was 63.8 per 1000. Out of those investigations in California there were 38,976 first entries into the child welfare system and in Riverside County there were 3,748 children entering child welfare for the first time (Riverside County Self-Assessment, 2008)

This study will address the cause for recurrence of child maltreatment after children have been reunified with their families. Also, the literature reviewed will discuss the impacts on certain ethnic groups or at risk population, as well as deficiencies within the child

welfare system in providing appropriate services to families.

Problem Statement

Child abuse and re-entry rates continue to be a sobering and alarming issue in the state of California and throughout the United States. Public child welfare agencies throughout North America continue to struggle with the rising number of children needing to be placed in out of home care. Further, the length of time that children linger in the system continues to be lengthy and costly to the child welfare system. Nationwide, the re-entry rate in 1994 was 9.9%, in California it was 11.3% and in Riverside County it was 13% (Riverside County Self-Assessment, 2008). Most cases that re-enter the child welfare system do so within the first twelve months of reunification.

Racial Composition

The continuing increase in re-entry is a topic that is of concern to child welfare agencies, the Federal government, communities, and individuals impacted by this system. Disadvantaged families that come into the system are primarily families of color, and children between the

ages of six and fifteen. In the state of California and in Riverside County, families of African American descent continue to have the highest rates of re-abuse as well as not reunifying as a family (Riverside County Self-Assessment, 2008).

Child Welfare Agencies

Families are at risk of continued emotional trauma to children if they re-enter into the child welfare system. Much of the information compiled by agencies such as the Administration for Children and Families (ACF), and County of Riverside's System Improvement Plan, have inferred that the lack of resources, untimely return of children because of legal mandates, or inappropriate assessments from social work staff are often times the reasons for re-entry and recurrence of maltreatment in child welfare. The huge decrease in appropriate foster placements and resources available to families, have been another impact that has affected these high rates of recidivism or re-entry into the foster care system (Riverside County System Improvement Plan, 2008).

As a result of these outcomes, the state of California has directed counties to implement a system improvement plan to re-vamp and change the negative

outcomes in child welfare. As a result of the state improvement system initiative, Riverside County as well as other counties has implemented program initiatives such as Family to Family from the Annie E. Casey Foundation to improve outcomes in child welfare.

Family to Family Initiative

Family to Family's core values is that families need to be strengthened to be able to raise healthy children and capable adults. It also values the community setting and the strength in maintaining families within their own communities and supports. Family to Family's initiative focuses primarily on achieving goals of ensuring child safety, creating permanent plans, and maintaining child/family connection. This can result in favorable impacts in reducing recurrence of child abuse, and reducing re-entry into the foster care system. Family to Family's strategies in achieving these goals is based on four core strategies:

- ❖ Recruitment, training and support of resource/foster families,
- ❖ Building and maintaining community partnerships,

- ❖ Team Decision Making (TDM), involving birth families, community partners, social workers and service providers in making decisions as a team, and
- ❖ Self-Evaluation, by using data as an important tool to analyze and make changes where needed, as well as track progress in all areas of placement decisions.

In Riverside County and other counties in California, Family to Family's core strategy of Team Decision Making has had a huge impact in the last decade in reducing the number of children taken into custody as well as reducing the number of placement changes while in out of home care (www.aecf.org).

As a result of this ongoing issue with high levels of re-entry rates into child welfare, the research question is: What are the causes of recurrence of maltreatment in child welfare, and the impacts of the Family-to-Family Team Decision Making initiative?

Purpose of the Study

The purpose of this study is to identify causes and impacts on family when children re-enter child welfare as

a result of recurrence of child maltreatment and what child welfare agencies are doing to reduce those incidences. The question that this study will address is "What are the causes of recurrence of child maltreatment in child welfare, and the impact of Family to Family's Team Decision Making initiative?"

During the last twenty years, the rates of re-abuse for child welfare dependents have been alarmingly high. The disproportionality of certain ethnic groups in re-entering and lingering longer in child welfare have implications of cultural biases from agencies, workers and the system as a whole.

This study will focus on the reasons for re-entry and re-abuse predictors in child welfare cases that have reunified to their family of origin. Data on these issues will be collected based on the following criteria: length of time case was open, services provided to families, race of family, substance abuse, mental health issues and medical issues. These issues will be presented in literature reviews that have been written and researched previously in the field of child recurrence of maltreatment in child welfare. Also, data will be collected from Riverside County Department of Public

Social Services (DPSS) Children's Services Division, as secondary data, from case files within the last 18 to 24 months. This will be done through access to CWS/CMS data systems, and reviewing of hard case files manually as permitted by the Department.

Many of the child welfare clients do not receive the benefit of services due to the parents' unwillingness to participate in their case plans, and the availability of appropriate services to meet their needs. As a result of high re-entry rates, the state has placed most counties in California under a State Improvement Plan (SIP) to address and reduce the number of re-entries into the child welfare system as well as be able to promote permanent placements for those children that are unable to reunify with their families safely.

Significance of the Project for Social Work

The significance of this project for social work is that it can hugely impact the practice and policies in place that affect re-entry or re-abuse rates in child welfare agencies such as Riverside County. Specifically, this study will address whether or not programs/initiatives such as Family to Family's Team

Decision Making and better resources can provide safety and stability to children when reunification occurs, and most of all prevent recurrence of child maltreatment that results into re-entry into the system of child welfare.

At the macro level, this research will seek to find information that can provide more effective, culturally sensitive services and resources for clients, as well as guide policy making to provide appropriate structure in timelines of reunification. By changing current policies, the legal mandates enforced by the juvenile courts as well as child welfare agencies can be more impartial or unbiased towards all families served in the child welfare system.

In the micro level, this study will provide insight into improving social work practice in the following ways. As additional resources become available to benefit the diverse populations served in child welfare agencies, the social worker and client can work collaboratively in creating appropriate case plans that address each family's specific needs. Further, ensuring that cases are opened enough time to allow the family to utilize and benefit from the appropriate services received.

In the generalist intervention process, this study will be done in the assessment stage. This assessment stage will provide the County of Riverside current research data and information that can focus on evaluating and assessing current services and resources offered to clients. Further, this study can provide insight into accessing more effective programs, and training to further reduce the high rates of recurrence of child maltreatment. Such resources can be specific to clients with issues of substance abuse, mental health, medical issues and more importantly to address the racial disproportionality in child welfare, ultimately, creating the possibility of reducing the incidences of recurrence of child maltreatment in child welfare.

CHAPTER TWO
LITERATURE REVIEW

Introduction

There are many causes that affect the recurrence of child maltreatment. These causes can be linked to the lack of available resources and services to child welfare agencies, federal timelines of reunification, risk factors of substance abuse, medical issues, and mental health issues. In the United States and specifically in Riverside County, there have been ongoing efforts to significantly reduce the re-entry rates of children because of recurrence of maltreatment within the last few years. In this chapter, there will be discussion about the existing literature on recurrent child maltreatment and re-entry. It will also include related theories, the main causes and risk factors in child maltreatment locally and nationwide.

Theories Guiding Conceptualization

Family systems theory will guide this study to better assess and understand the causes of recurrence of child maltreatment. The role that is played by systems theory occurs in both the macro and micro level. In the

macro level, it would expound on the role of the agencies of child welfare agencies and how they provide services to clients.

System theory consists of many units or members, working together in creating homeostasis and boundaries. Systems theory examines the interactions and ways in which different units work. In systems, families are viewed as one system with rules, roles, power hierarchies, and various communication structures. This can be applied to the individual families, and the agencies of child welfare (Lesser & Pope, 2007).

Because family systems are different, social workers often are unable to recognize that they are regulated by a particular set of rules, shared beliefs values, traditions and norms. In missing this important aspect of family systems, social workers are often limited in accessing available services to families in addressing their specific cultural needs, because those services and resources do not exist or are not available.

Overall, systems theories, can guide child welfare agencies, lawmakers and workers into providing the appropriate interventions and resources, knowing that

family systems work together and not against each other through appropriate communication and structure.

Risk Factors Associated with Child Maltreatment

There are many risk factors associated with child maltreatment noted in the different studies in the literature reviews. Children with health related problems, mental health issues or behavioral problems were highly vulnerable to maltreatment. Parents with mental health issues or substance abuse issues were also at greater risk of re-entry into the child welfare system after reunification. In terms of family level risks, some of the literature found that there are correlations between poverty and high re-entry rates (Kimberlin et al., 2009).

Another important predictor of re-entry due to maltreatment is the length of time services were provided to families by child welfare agencies. There is consistent research that indicates that there is a higher risk of re-entry within the first six to twelve months after reunification, especially, when services to families were short or ineffective (Connell et al., 2006).

Substance Abuse

Substance abuse continues to be a risk factor that places children at risk of neglect. The literature indicates that continued abuse of substances by the primary caregiver would continue to place children at risk of re-entering the child welfare system throughout their life span if the caregiver has not been provided with appropriate services and supports to maintain their sobriety. This is true of many cases where, because of legal mandates in juvenile court, parents/caregivers are only provided with six to twelve months of services to reunify with their children. Often times, these caregivers have been abusing substances for many years, and are expected to be clean within a short time span. As a result many substance abusers appear to be sober long enough to reunify with their children. Because sobriety is hard to assess, child welfare workers are often unable to determine whether an individual has achieved the necessary sobriety to reunify with their children. Consequently, when relapse occurs, children often times return to the foster care system, and parents face the possibility of losing their parental rights due to recurrence of child maltreatment (Fuller et al., 2001).

Mental and Behavioral Issues

Mental health issues can be due to psychological deficiencies in a person that can affect their daily cognitive ability. Many clients in child welfare, both parents and children, often come to the attention of the department for mental health issues. Many parents may present with issues of depression, bipolar or personality disorders. Children, often as a result of being removed from their families, will encounter episodes of mental health instability and other behavioral issues before and after they have been returned to their families of origin.

These mental health and behavioral issues is a large predictor of re-abuse or maltreatment after reunification. This is mostly due to the trauma associated with being taken out of a home, living in different foster placements and then being returned to their families with many unresolved anger and behavioral issues. Parents that were provided with parenting programs and mental health services may not be able to anticipate many of the mental health issues their children will have upon reunification because they had not been living with their children for an extended

amount of time. Re-referral to child welfare agencies occurs at higher rates when these types of issues have arisen in new cases within six to twelve months of reunification (Connell et al., 2006).

Child Welfare System

The greatest correlation between re-abuse and re-entry into child welfare system is social worker's practice and federal timelines. Since the 1980's the focus of child welfare agencies had been on family reunification for children instead of long-term foster care and adoption. The efficacy and practice of this system of reunification had shown to be ineffective since more and more children continue to be re-abused within six to twelve months after reunification. As of the early 2000, child welfare re-entry has been a systematic problem nationwide. Almost thirty seven percent of families reunited reenter the system within three years (Terling, 1999).

According to DePanfilis and Zuravin (1999), almost half the children returned to parents may be re-abused due to the inadequacy in available and appropriate resources to families. Other studies have found that the length of time a case is open has a huge impact on

re-entry. For example, if a case was closed and children were returned within a few months, there is a higher prevalence that the family will be re-referred for maltreatment to a child welfare agency subsequently. This is caused by the fact that services and interventions were not provided within adequate time limits to benefit from services. Also, when children are reunified with parents within a shorter amount of time, the parents may not have completed or obtained the required skills that led them to have their children removed in the first place. Also, the outside support to these families can be limited thus setting them up to fail by reunifying too soon. Lack of transition plans at reunification, and juvenile court ordering closing cases prematurely can place serious risks of re-entry and maltreatment of children. Early termination of services due to federal guidelines and inadequate services, provided to families due to the limited availability of resources are some of the reasons why children return to child welfare agencies (Riverside County Self Assessment, 2008).

Family to Family's Team Decision Making Initiative

In Riverside County and throughout the United States, there have been federal mandates that have imposed improvements on outcomes of children in foster care on all child welfare agencies. In many states and counties in California, there is an initiative founded by Annie E. Casey Foundation named Family to Family. The main focus of this initiative is on strengthening families within distressed neighborhoods, as well as finding appropriate resources and life long supports for families.

Since the onset of Family to Family in 1992 in the Midwest, there had been progress made in agencies that have implemented this program. The three areas of improvement noted were: outcomes for children in out of home placement (reducing placement moves), changes in child welfare policy and increased abilities of states to collect and analyze data. The findings in the literature about the Family to Family initiative are that there have been positive outcomes in agencies using Family to Family in reducing the number of children removed from their home of origin, placing children in their own

neighborhoods, and making fewer placements while in care (Mattingly, 1998).

In Riverside County, the re-entry rate was one of the largest in the state. However, there are data that show that since the onset of Family to Family in 2005, there has been a slight decrease in the re-entry rate as well as the placement change rates of children in foster care. Family to Family's initiative is based on the foundation that children need families to be strong and self sufficient, and providing appropriate resources, and support, will ensure that children and families can reunite and become empowered to address any other issues on their own and within their communities, without intervention from systems of child welfare.

Summary

In conclusion, this chapter provides an overview of the findings and important facts and issues on previous research that addresses the causes associated with child abuse recurrence and maltreatment, as well as the impacts of initiatives such as Family to Family Team Decision Making in the overall reduction of child maltreatment and re-entry into child welfare. Reviewing and researching

the various aspects of child welfare's policies and practices on reunification efforts, and how it impacts those at risk can create the information necessary to provide to child welfare agencies to implement and design targeted social work practices and policies to further reduce and create stable families upon reunification from child welfare.

CHAPTER THREE

METHODS

Introduction

In this research study, the question that was addressed is "What are the causes of recurrence of maltreatment in child welfare, and the impacts of the Family to Family's Team Decision Making Initiative?" The study hypothesized that those families where there are children with mental health issues, medical issues, substance abuse, minority status, and short length of services, would experience a higher rate of child maltreatment recurrence. Reviewing and surveying actual child welfare case records provided answers to this research question. Secondary data was used in order to assess data trends in child maltreatment recurrence in Riverside County.

The collected sample was obtained from Riverside County Children's Services Division's case management system's database (CWS). The independent variables, racial composition, mental and medical issues, substance abuse effects, length of time services were provided to families and impacts of Family to Family's Team Decision

Making were tested to see what their association is with the dependent variable, child maltreatment recurrence.

Study Design

Riverside County's Children's Services Division has been impacted in reducing the high rates of child maltreatment due to the availability of appropriate resources and services to address client needs. This study is relevant to child welfare practice as it appears that in the last five years and since the onset of the initiative Family to Family, there may have been a steady decrease in the rates of child maltreatment recurrence in this county. Providing appropriate services and ensuring enough time for families to benefit from these services while linking families to outside support and resources are part of the initiative Family to Family's Team Decision Making that has been used when successfully reunifying families in the child welfare system in Riverside County.

The study design that was used for this research was qualitative, and quantitative research of closed and open case records from Riverside County. Qualitative research was useful in reviewing and surveying the actual case

files that were provided by the county. Qualitative research provided a more in depth understanding of a small sample rather than a larger one.

The secondary data that was reviewed was done in a quantitative study, as it comes from the pre-extracted database from the CWS/CMS (Child Welfare Services/Case Management System). This database has documented cases of substantiated child maltreatment cases that re-entered the system within twelve months of closure as well as those that were closed and did not re enter the child welfare system within the last twelve months. The researcher developed a data extraction protocol to document the extracted information from the databases and case files.

The study had strengths and limitations. The strengths were that the information gathered from the extraction protocol will not be based on human feedback but will be based on certain factors that are documented in the cases and database. The limitations in this study were that the information extracted was not for the last five years when the Family-to-Family Team Decision making initiative began in Riverside County, many cases were not

appropriately project coded as Family to Family Team Decision Making when the cases were closed and re-opened.

Sampling

The sample was obtained from one hundred total cases from Riverside County that had opened due to child abuse substantiations, and was provided services. Of those hundred cases, fifty cases were cases that were re-opened due to recurrence of child maltreatment, and fifty cases remain closed with non recurrent abuse. The families in non recurrent abuse cases were reunified and the case was closed and did not return to the system. The other fifty cases were re-opened due to a recurrence of child maltreatment. More than half of the sample selected was coded as having been part of Family to Family's Team Decision Making.

Simple random sampling was done to allow only about one hundred cases out of the hundreds to be extracted and studied. Fifty cases were selected with recurrent child maltreatment and fifty cases were selected with non-recurring child maltreatment. The study will be done for the last four years to the present.

This sample size was chosen to be able to fully capture and analyze the independent variables such as racial composition, mental health issues, medical issues, substance abuse issues, and length of services provided by child welfare, and their impact on the dependent variable of child maltreatment recurrence.

Another reason for choosing this sample design was to be able to have a representative sample. Riverside County will gain more information regarding the current issues and factors that relate to the high incidences of child maltreatment recurrence.

Data Collection and Instruments

The data collected was cases that were substantiated for child maltreatment and more than half were coded as Family-to-Family Team Decision making cases from Riverside County. The instrument used was a Child Maltreatment Recurrence Data Extraction protocol (Appendix A). This extraction protocol tool was developed to quantify the risk factors for child maltreatment recurrence.

The dependent variable of this study was whether or not maltreatment of children recurred. This variable was

measured at a nominal level. Child maltreatment is categorized as a person under the age of eighteen that had substantiated abuse that can consist of any of the following: sexual, physical, emotional, and or general neglect, as coded by Riverside County DPSS Children's Services Division. Child maltreatment recurrence can occur when one incident of substantiated child maltreatment occurs after a case was closed. A substantiated allegation of child maltreatment is done when a child abuse referral is investigated and determined to be true.

In the study, the cause of child maltreatment recurrence was examined, as well as the impact of Family to Family's Team Decision Making within the child welfare system in Riverside County. The length of time of services, substance abuse, racial composition, mental health and medical issues were the independent variables. All these variables were measured at a nominal level, except for the variable of length of time, which was measured at interval level.

The data source that was used is called CWS/CMS, and is updated and maintained consistently with information that can be accessed at any given time by social workers

and child welfare agencies. There are ongoing system improvements in maintaining this system and also social workers are trained frequently on proper use in entering and extracting information from this data system.

The limitations of creating the extraction protocol tool were that all the information desired was not available through CWS/CMS database and had to be manually extracted from the actual case files.

Procedures

The data was gathered primarily through secondary data extraction from Riverside County DPSS Children's Services Division case records of cases. The records requested were stored in the CWS/CMS database system that can only be accessed by administrators or social workers at the department. The data was assigned a random identification number by the researcher in order to protect client confidentiality. There was no solicitation for participation from child welfare clients for this research. A list of sample files was compiled and stored in a locked office at the County of Riverside while the research was being conducted.

The data collection took place at a County office on Kidd Street in Riverside. The time that was allotted for the data to be extracted was May 1, 2010 until May 1, 2011.

Protection of Human Subjects

Children's Services Division clients were studied through their hard copy case files. The researcher assigned random identification numbers to each case and recorded on the extraction protocol tool (Appendix A). The extraction forms with the data researched had no identifiers included and were stored and locked in an office cabinet at a County office to secure confidentiality on the subjects being researched.

Data Analysis

Both univariate and bivariate analyses were utilized, first identifying actual distribution of frequencies. The variables of recurrence of child maltreatment, substance abuse, minority status, mental health issues, medical issues and length of time of services provided by child welfare and Team Decision Making were analyzed. Bivariate analyses were used to research what the association was between the dependent

and independent variables studied. A chi-square was analyzed to study the relationship between the use of Family to Family's Team Decision Making in child welfare and recurrence of child maltreatment. A chi-square was utilized to analyze the relationship between substance abuse, mental health issues, medical issues and racial disproportionality and recurrence of child maltreatment. This analysis was done with nominal variables.

Summary

At this time, both quantitative and qualitative methods of research were used in this research. Chi-squares were employed for the bivariate analysis. The study used a systematic random sample of one hundred cases that are currently opened or closed due to child maltreatment since the onset of Family to Family Team Decision Making in the County of Riverside. Data was extracted from Riverside County's Child Welfare Services/Case Management System (CWS/CMS), and was documented on the Recurrence of Child Maltreatment Data Extraction Protocol that is stored at the county office selected. Confidential identifying information and actual subject names remained anonymous.

CHAPTER FOUR

RESULTS

Introduction

Chapter Four is a presentation of the outcomes from this study. The findings provide information about the frequencies of the nominal type variables that were tested against other nominal variables and all the results of the tests that were conducted. The variables of substance abuse, mental health, minority composition, length of services and Team Decision Making were cross-tabulated with recurrence of child maltreatment. One significant relationship in predicting child maltreatment recurrence is substance abuse issues.

Presentation of the Findings

The sample utilized was 96 of 100 cases randomly selected from Riverside County DPSS Children's Services Division's CWS/CMS system. Four cases were not utilized due them being coded as sensitive, and therefore, the data was not extracted, as there was no access to these cases. Within the 96 cases reviewed, there were 47 cases with recurrence of child maltreatment and 49 cases of non-recurrence of child maltreatment. The dependent

variable was recurrence of child maltreatment. The independent variables were substance abuse, mental health, medical issues, racial composition, length of services and Team Decision Making (TDM). For each independent variable, a test was conducted against the dependable variable.

Table 1 presents the demographic composition of the sample collected. In the selected sample 49% of the cases had recurrence of child maltreatment and 51% of the cases did not have child maltreatment. The racial composition of the sample collected was 25% White children, 21.9% Black children, 28.1% Hispanic children, 11.5% Asian children, 11.5 % American Indian children and 2.1 %, other race children. 80.2% of the sample had substance abuse issues, and 19.8 did not have substance abuse issues. 40.6 % of the sample had mental health issues and 59.4% did not have mental health issues. 14.6% of the sample had medical issues, and 85.4% did not have medical issues. 18.8% of the sample had 6 months or less of services, 10.4% received 7 to 12 months of services, 27.1% received 13 to 18 months of services, 18.8 received 19 to 23 months of services, and 25% received over 24 months of services.

Table 1. Illustrates Demographic Characteristics of the Case Samples Collected

Variable	Frequency N	Valid Percent
<u>Race (N=96)</u>		
White	24	25.0
Black	21	21.9
Hispanic	27	28.1
Asians	11	11.5
American Indian	11	11.5
Other	2	2.1
<u>Recurrence of child Maltreatment</u>		
Yes	47	49.0
No	49	51.0
<u>Team Decision Making</u>		
Yes	54	56.3
No	42	43.8
<u>Timelines Of Case Open</u>		
Less than 6 months	18	18.8
7-12 months	10	10.4
13 to 18 months	26	27.1
19-23 months	18	18.8
24 or more months	24	25.0
<u>Substance Abuse</u>		
Yes	77	80.2
No	19	19.8
<u>Mental Health Issues</u>		
Yes	39	40.6
No	57	59.4
<u>Medical Issues</u>		
Yes	14	14.6
No	82	85.4

In order to determine the relationships between recurrence of child maltreatment and the impacts of substance abuse, mental health, medical issues, racial composition, length of services and Team Decision Making, data from several variables were cross-tabulated and evaluated using chi-squared analyses and one t-test. In each variable, significance was evaluated against a two-tailed probability level of .05. The cross-tabulation of recurrence of child maltreatment and substance abuse, mental health, medical issues, racial composition, length of services and Team Decision Making were analyzed.

Recurrence of Child Maltreatment and Minority Composition

A chi-square test was conducted to test the significance of the relationship between the independent variable of minority composition and the dependent variable of recurrence of child maltreatment. There were 14 cases of recurrence of child maltreatment among white families. There were 10 cases with no recurrence of child maltreatment among white families. There were 33 cases of recurrence of child maltreatment among non-white families. There were 39 cases with no recurrence of child maltreatment among non-white families. For this test, the

value was 1.125, the degrees of freedom were 1 and the significance was .289. The chi-square findings indicate that there is no significant finding between the composition of race and recurrence of child maltreatment (Table 2).

Recurrence of Child Maltreatment and Mental Health Issues

A chi-square test was also conducted to test the significance of the relationship between the independent variable of mental health and the dependent variable of recurrence of child maltreatment. There were 19 cases with recurrence of child maltreatment that had mental health issues. There were 20 cases with no recurrence of child maltreatment that had mental health issues. There were 28 cases with recurrence of child maltreatment that had no mental health issues. There were 29 cases with no recurrence of child maltreatment that had no mental health issues. For this test, the value was .007, the degrees of freedom were 1, and the significance was .933. The chi-square findings indicate that there is no significant finding between recurrence of child maltreatment and mental health issues (Table 2).

Recurrence of Child Maltreatment and Team Decision Making (TDM)

A chi-square test was also conducted to test the significance of the relationship between the independent variable of Team Decision Making (TDM) and the dependent variable of recurrence of child maltreatment. There were 28 cases with recurrence of child maltreatment that had Team Decision meetings. There were 26 cases that did not have recurrence of child maltreatment that had Team Decision Making meetings. There were 19 cases with recurrence of child maltreatment that did not have Team Decision Making meetings. There were 23 cases with no recurrence of child maltreatment that did not have Team Decision Making meetings. For this test, the value was .414, the degrees of freedom were 1, and the significance was .520. The chi-square findings indicate that there is no significant finding between recurrence of child maltreatment and Team Decision Making (Table 2).

Recurrence of Child Maltreatment and Substance Abuse Issues

A chi-square test was also conducted to test the significance of the relationship between the independent variable of substance abuse and the dependent variable of

recurrence of child maltreatment. There were 42 cases with recurrence of child maltreatment with substance abuse issues. There were 35 cases with no recurrence of child maltreatment with substance abuse issues. There were 5 cases with recurrence of child maltreatment with no substance abuse issues. There were 14 cases with no recurrence of child maltreatment with no substance abuse issues. For this test, the value was .4.860, the degrees of freedom were 1, and the significance was .027. The chi-square findings indicate that there is significant finding between recurrence of child maltreatment and substance abuse (Table 2).

Table 2. Chi-Square Testing Results between Recurrence of Child Maltreatment and Minority Composition, Mental Health Medical Issues, Team Decision Making, and Substance Abuse

	Recurrence of Child Maltreatment		Value	Degrees of Freedom	Sig.
	Yes	No			
Minority Composition			11.058	5	.050
White	14	10			
Non Whites	33	39			
Mental Health			.007	1	.933
Yes	19	20			
No	28	29			
Team Decision Making (TDM)			.414	1	.520
Yes	28	26			
No	19	23			
Medical Issues					
Yes	7	7	.007	1	.933
No	40	42			
Substance Abuse			4.860	1	.027
Yes	42	35			
No	5	14			

A t-test was conducted to test the significance of the relationship between the independent variable of timelines that cases were open, and the dependable

variable of recurrence of child maltreatment. The timelines of case open ranged from less than 6 months of services, 7 to 12 months of service, 8 to 23 months of service and 24 or more months of service. 18 cases received less than six months of services, 10 cases received 7 to 12 months of services, 26 cases received 13 to 18 months of services, 18 cases received 19 to 23 months of services and 24 cases received 24 or more months of services. For this t-test, the mean for timelines and recurrence of child maltreatment was 3.44, and for no recurrence of child maltreatment, the mean for timelines was 3.05. The standard deviation for recurrence of child maltreatment was 1.410, and the standard deviation for no recurrence of child maltreatment was 1.420, the F was .399, and the significance was .529. The t-table findings indicate that there is no significant finding between recurrence of child maltreatment and timelines that cases were opened (Table 3).

Table 3. t-Test of Relationship Between Recurrence of Child Maltreatment and Timelines that Cases were Opened

	N	Mean-N Recurrence	Standard Deviation Recurrence	F	Sig.
Timelines				.399	.529
Yes	39	3.44	1.410		
No	57	3.05	1.420		

Summary

Chapter Four reviewed and discussed the results of this research. A total of 96 cases were researched for recurrence of child maltreatment. The result was that only one independent variable was significant to the dependent variable. According to the findings in this study, substance abuse is a significant variable when analyzing recurrence of child maltreatment.

CHAPTER FIVE

DISCUSSION

Introduction

Chapter Five will briefly discuss the key findings of this research project. The project studied examined secondary data from electronic case files to determine what are the impacts of substance abuse, mental health issues, medical issues, length of time case open, racial composition and Team Decision Making associated with recurrence of child maltreatment. Recommendations are made for policy, procedures, and future research related to recurrence of child maltreatment. Limitations that the researcher encountered are also discussed and presented in this study.

Discussion

This research project analyzed factors that were discussed in previous literature as being important correlates of recurrence of child maltreatment. These factors were racial composition, substance abuse, mental health issues, medical issues, timeliness of case open, and Team Decision Making (TDM).

The findings demonstrated that substance abuse played the most significant role in the recurrence of child maltreatment for the group studied. With substance abuse being the only factor that had a significant role in recurrence of child maltreatment, it poses the question of what type of interventions and services are offered to the clients of child welfare agencies? Child welfare agencies currently offer contracted services that address the immediate needs of clients such as parenting, counseling, and substance abuse referrals. However, the substance abuse programs available do not appear to provide the necessary services to clients with substance abuse issues. The available treatment services for clients through Riverside County are either an intensive outpatient drug court program called Family Preservation, and or the Riverside County Substance Abuse program. Both programs are structured around the business day, on an outpatient setting, and have limited flexibility for clients that are employed or have issues with childcare. Further, if a client is deemed as needing inpatient treatment, there are often waiting lists, and the programs available rarely admit children with their parents.

Another issue among substance abusers is that many of them have co-occurring disorders, of both mental health and substance abuse issues. Because there is no clear evidence as to what came first, the mental health issues due to biochemical deficiencies or due to substance abuse issues, many of these clients are unable to remain sober long enough and continue to have unmet mental health needs. Most substance abuse programs funded or contracted by county agencies, do not treat co-occurring disorders, but instead focus on treating the substance abuse issue first, and allowing enough time for an appropriate psychological evaluation. The problem with this type of intervention, is that many times, substance abusers are unable to maintain their sobriety long enough to receive an appropriate mental health evaluation.

Racial composition, mental health issues, medical issues, timeliness of case open, and Team Decision Making (TDM) did not appear to have a significant role in the recurrence of child maltreatment.

Racial composition did not appear to have a significant role in this study, mainly because the study sample was not large enough to include a more representative sample of the disproportionality of

minority groups in Riverside County in comparison to the low population of whites living in this area. As of 2009, Riverside County's racial composition according to the fact sheet, indicated that only 43.9% of the population was white, and the remaining 56.1% was non white, primarily of Hispanic and Black descent (CSD Fact Sheet, 2009). Also, for Hispanic families or families where English is not the native language, tend to have a lower recurrence of child maltreatment because of outside supports through extended family or Kin (Kimberlin et al, 2009).

Medical issues were also not significant in this study, as this allegation (medical neglect) is not recognized by Juvenile Court. Also, many of the medical issues are often linked to some other type of abuse substantiation resulting from the caregiver's inability to care for their child due to their own issues of substance abuse or mental health issues. Therefore, recurrence of child maltreatment is less likely to happen, after the medical condition has been treated, unless other risk factors are present, such as substance abuse, violence, or mental health.

Mental health issues did not have significance in this study as well, due to the large amount of clients in child welfare that present with co-occurring disorders. Many of the clients that have unmet mental health needs are usually a result of chronic substance abuse issues. Also, upon reviewing case files from the study, it appeared that many cases where parents had mental health issues that were severe ended up with termination of parental rights, and their children were placed in permanent out of home placements.

Timelines of cases open were not significant in this study, in predicting recurrence of child welfare. The sample studied actually demonstrated that approximately more than 72% of the sample had more than 13 months of services, indicating that the cases were opened at least a year prior to reunification.

Family to Family's Team Decision Making (TDM) meetings, did not have significance in this study at this time, because there is no way to track whether or not a worker adequately coded the cases that had Team Decision Making meetings. Also, the TDM's were only held during emergency removals and placement changes until last year, when the County implemented TDM's when the family is

ready to reunify. Although, the finding was not significant at this time, TDM's are continuing to evolve in Riverside County and are being held more consistently when families are ready to reunify. The approach of Team Decision Making meetings in cases is to preserve placements and provide stable homes for children, while reducing recurrence of child maltreatment.

Limitations

This research project had significant limitations. The first was small sample size. The original data sample set consisted of 100 electronic cases. However, 4 cases were excluded due to them being coded as being sensitive and therefore not accessible by the researcher. A small sample size could have been the issues with low external validity and non-significance on the variables tested, and therefore not generalizable to detect a trend or association among variables.

Another limitation in the project was the use of only secondary data from case files. Because data is entered into CWS/CMS by child welfare staff there were many inconsistencies how they were coded, and often times, resulting in possible margins for error as

information could be incorrect in the case management system or incomplete. Therefore, the researcher had to navigate through different narratives and reports of every case. Also, use of only quantitative numerical data did not allow for any correlations to be analyzed about the data or relationships between multiple independent variables and dependent variable.

Recommendations for Social Work Policy, Practice and Research

This study has shown that substance abuse plays a significant role in the clients that have recurrence of child maltreatment in Riverside County. Many of the clients that come to the attention of Riverside County DPSS Children's Services Division have chronic history of substance abuse issues that are challenging to address within the federally mandated timelines. As a result of the lack of adequate substance abuse resources and legal mandates in child welfare, families may be reunified without having achieved sufficient time in recovery, resources, and support from family and community to ensure family permanency. Many parents fail to remain sober and recurrence of child maltreatment occurs.

The implications for social work policy, is that appropriate services and engagement of clients need to be established for families struggling with substance abuse issues before reunifying children back in the home. There are studies around evidence based interventions, such as family based behavioral treatments or Family Based Therapy (FTB) that are designed to provide interventions for substance abusers to eliminate or control drug use, increase family communication, stress control strategies and other specific needs of families (Donohue et al., 2006).

It is recommended in direct practice, for child protective service social workers, to be able to be more effective in assessing and engaging clients with appropriate case plans and interventions. Additional training for social workers in needs assessments for chronic substance abuse users and utilizing motivational interviewing skills can provide clients with appropriate and effective case plans to meet their specific needs during and after their child welfare cases have been closed.

Future research studies on recurrence of child maltreatment could focus on surveys or personal

interviews from clients of child welfare agencies, instead of secondary data analysis. A more in depth study should be done in order to gain a clearer understanding of recurrence of child maltreatment through various approaches.

One approach can focus on environmental factors that are related to recurrence of child maltreatment, such as poverty levels and lack of resources in the communities served by child welfare clients. A study of poverty levels and access to resources in counties like Riverside can reveal a need for additional interventions that will provide families with adequate resources. If the communities where there are higher rates of recurrent child maltreatment are further researched, specific needs of that community may be revealed. For example, desert regions have limited resources available for families in cases of child maltreatment.

Another approach could be to provide families with more in home family behavioral therapies that work intensely with families providing the necessary services to address the stressors and issues that increase the likelihood of substance abuse relapse in families.

Finally, an approach that utilizes multi-variate testing can help identify the difficult and complex problems of families that have recurrence of child maltreatment. A study that will research the correlations among variables such as substance abuse, mental health, current child welfare timeliness of reunification, and types of services provided to families in child welfare system, could reveal significant relationships among the variables studied.

Conclusions

This research project focused on the causes of recurrence of child maltreatment and the impacts of Family to Family's Team Decision Making Initiative. It was demonstrated that substance abuse has a significant role in the well-being of children. Since more than 80% of clients in this study had substance abuse issues, it continues to be a risk indicator in continued recurrence of child maltreatment if appropriate services and resources do not become available to child welfare agencies to provide to child welfare clients.

In addition, this research project revealed that recurrence of child maltreatment is a multi-faceted

concern for child welfare agencies. Child welfare social workers need to continue being trained and aware of the presenting issues that families in child welfare agencies present, and that place them at risk of recurrence of child maltreatment.

APPENDIX
DATA EXTRACTION TOOL

Child Maltreatment Recurrence
Data Extraction Protocol

ID: _____

1. Racial Demographics

- 1. White
- 2. Black
- 3. Hispanic
- 4. Asian
- 5. American Indian
- 6. Other

2. Type of Substantiated Abuse

- 1. Sexual
- 2. Physical
- 3. Emotional
- 4. General Neglect
- 5. At Risk of Abuse

3. Number of Substantiated Abuse Allegations

- 1. One
- 2. Two
- 3. Three or more

4. Substance Abuse issues

- 1. Yes
- 2. No

5. Mental Health issues

- 1. Yes
- 2. No

6. Medical issues

- 1. Yes
- 2. No

7. Timelines of case open

- 1. Less than 6 months
- 2. 7-12 months
- 3. 13-18 months
- 4. 19-23 months
- 5. 24 months or more

8. Family to Family Team Decision Making Project Code

- 1. Yes
- 2. No

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