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MILITARY COMMUNITIES:
FAMILIES AT RISK

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
Marlena Sue McCormic
Kristine Diane Brown

June 2005

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June 2005

Approved by:


Dr. Rosemary McCaslin, Faculty Supervisor
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6/9/05
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ABSTRACT

This project examined whether there is a change in the rates of child abuse reported in communities with active military installations, specifically Fort Irwin in Barstow and Marine Corp Air Ground Command Center in the Morongo Valley, in comparison to a comparable non-military community, during times of military conflict from October 2000 through October 2004. The method used was a quantitative approach in order to increase measurability, objectivity, and validity of the data obtained. These components also helped ensure this study can be replicated in future attempts to examine this subject. The findings indicated there is an increase in all communities studies during times without a political designation of military conflict. This project is significant for social work practice as relevant information can be used by practitioners to develop and implement intervention and prevention services to meet the needs of the population studied.

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CHAPTER ONE

INTRODUCTION

Child abuse is an epidemic that respects no socioeconomic class, race, culture, gender or political boundaries. Its effects are pervasive through every strata of society. This study examined child abuse reports generated in communities with active military bases during times prior to and during the Iraq military conflict in comparison to a comparable non-military community. Knowledge gained from the data examined could assist in the creation of intervention and prevention programs and techniques for social work professionals. The development of social service programs to assist families in similar communities may prove beneficial to the social work field by establishing appropriate services to address the specific needs of families.

Problem Statement

This study explored one aspect of child abuse in our society. Child abuse is reported in all social groups without regard to ethnicity, culture, socio-economic status, religion, family configuration or any other factor. The effects of child abuse can be seen throughout the world. The issue of child abuse is viewed as a concern

for many reasons including many negative societal impacts, the tendency of system dependency and the draining of social service resource.

Historically, child abuse is first noted as a social concern in 1874 in the case of Mary Ellen. This case illustrates a child who was being severely abused. Despite this on-going atrocity, law enforcement was not able to intervene because there were no child protection laws in existence. However, legislation prohibiting animal cruelty did exist. Mary Ellen's case went to court and it was argued that the child was an animal and therefore was entitled to rights of protection based on animal rights provisions that were in place. Statutes and policies were subsequently enacted to provide for the protection of and intervention for populations weaker than others and who are in need of protection, specifically children.

Child abuse types are classified into the specific categories of physical abuse, emotional abuse, sexual abuse, and general neglect. Child abuse has societal impacts that influence and constrain policy and procedural development. Policy has both negative and positive effects. The drain child abuse accrues on economic resources is evident in the cost of the foster care

system, increased levels of and need for law enforcement and the superior court systems.

Victims of trauma such as child abuse have a greater likelihood of system dependency. If left untreated, child abuse may be repeated across family generations, significantly impacting many public resources, such as the welfare and criminal justice systems. For example, physical abuse can result in paralysis, brain trauma, or other medical conditions that may require life long dependency on medical services. The effects of emotional abuse contribute to elevated strains on mental health services. Sexual abuse victims tend to have higher rates of teen pregnancy and prostitution and contribute to the spread of communicable diseases. Severe neglect associated with malnourishment and depression has been associated with reduced brain development and death. As adults, children who suffered from neglect and received no treatment or intervention tend to exhibit lower levels of functioning in all areas of life and also tend to be more dependent on formal public services for assistance. The effects of child abuse are also evident in the educational system. Children who are victims of abuse often exhibit decreased school attendance, decreased attention span, increased

undesirable and disruptive behavior, impaired social skills and lack of preparation to learn.

To address the systemic effects of child abuse, society seeks to create and implement programs to limit child abuse victims' trend toward system dependency. The government has enacted legislation which provides funding to support programs that provide early prevention and intervention services, and places limitations on reunification services, support early permanency planning activities to reduce foster care expenditures, provide adoption incentives and independent living or emancipation programs for older children.

Following the recognition that child abuse and out of home placement disruptions negatively impacted children's success in school, the State of California implemented AB490 to assist children in foster care. AB490 imposes new duties and rights related to the education of youth placed in foster care and group homes. The law provides for increased school placement stability and improved school transfer procedures. AB490 regulates the education of children in foster care and group homes to increase educational opportunities.

Social work practice currently follows 1998 Federal Adoptions and Safe Family Act. California subsequently

adopted AB636. The multiple agencies contributing to child welfare services include public health, probation, community care licensing, the judicial system, schools, transitional assistance, health care systems, Department of Children's Services Child Protection Services and Adoption. Concurrent with these programs, remedial mental health services and social service programs have been developed following the recognition that large numbers of clients receiving counseling and therapeutic treatment were also victims of child abuse. The agencies involved recognize that utilizing a multidisciplinary approach and treatment strategy will lead to greater rates of success in reducing incidents of child abuse and system dependence.

Within these agencies, the role of a social worker varies. The common practices and expectations of a social worker involve an array of duties including interviewing, assessing, and providing counseling, case management, working with multiple disciplines, consulting and training.

The social service provider often uses theoretical approaches and treatment strategies tailored to suit the needs of the family. Some successful approaches currently used by social workers are family to family, culturally

competent practice, systems theory, person in environment and the bio-psycho-social approach. Each theory and perspective, or a combination thereof is utilized by the social worker in attempts to advocate for rights and assist individuals and families in improving behaviors, functioning and quality of life.

Purpose of the Study

This study examined the occurrence rate of child abuse reports among communities with military installations having family members who are either expected to, or are currently engaged in international military conflict. In addition, the study examined a comparable non-military community to serve as a control group. The period to be covered includes reports preceding the Afghanistan Conflict (2000) through the Iraq War (up to 2004). The study examined the numbers of child abuse reports received by Department of Children's Services both prior to and during these times of conflict. The study also examined data collected regarding possible differences in child abuse reports made on families living in areas with active military bases during times of military conflict. The communities to be studied are in the Barstow Region and Morongo Valley in California.

Within the Barstow region is the active Army facility, Fort Irwin. Located within the Morongo Valley, is an active Marine base, Marine Corps Air Ground Command Center (MCAGCC). The control group studied was the community of the Victor Valley in California.

The rationale for research and data collection follows the assumption of systems theory, which asserts that when one component of a system is stressed there will be changes in the remaining components. This research is being conducted to address the possible effects of military conflict on families reported for suspected child abuse. Elevated levels of emotions, anxiety, stress and pressures associated with a time of military conflict can compromise a family's ability to function and cope resulting in increased child abuse. Changes in a family's state of homeostasis, which may occur while living in a community with an active military base, can impact their ability to function and cope within normal ranges of general community standards.

Greater understanding of trends and the effects of changes within communities may assist service providers to prepare about prevention programs, early intervention and social services to assist with educating families of preventative measures and de-escalation techniques.

Strengthening vulnerable families prior to military conflicts may deter the frequency and severity of incidents or reduce or eliminate existing abuse in families.

The population of San Bernardino County accessed for this research is summarized by the 2002 County of San Bernardino Demographic Profile. Statistics reported by The Department of Economic and Community Development show a population of nearly 2 million for the county with two racial groups predominant: 44% white and 39.2% Hispanic. There is an average of 85 persons per mile for a total of approximately 21,000 square miles. Approximately 850,000 are employed with an average income of \$50,000 a year. Major job classifications for San Bernardino County include agricultural, education, production and professional.

The 2000 U.S. Census Bureau states that the MCAGCC base has a population of nearly 8,500. Approximately 6,800 are males leaving approximately 1,700 as female representation. The median age is twenty-one (21) years old. The racial composition when reported as one race result in approximately 5,900 Caucasian, 1,000 Hispanic and 870 African American as racial majorities reported.

The average income for military family is approximately \$30,000 a year.

The demographics of Fort Irwin are reported as a population of approximately 11,000. Gender distribution is reported as 40% female and 60% male. The median household income is reported at \$40,000 a year. The average age is twenty-one (21) years old.

The study was conducted using a quantitative method to collect data from existing case files, using a data extraction protocol. Gathering data in this manner should eliminate additional trauma to the subjects studied in the research. In addition, the study considered data collected from child abuse referrals in the zip codes that encompass the Barstow, Morongo Valley and Victor Valley regions, rather than deal specifically with the military bases themselves in an effort to minimize bias. Cases utilized will be those documented through the Child Welfare Services and Case Management computer system.

Significance of the Project for Social Work

The significance of this project for social work applies to child welfare practice because it focuses on and examines the behaviors of a specific subset of society under the stress of war. This study focuses on the

possibility of changes in frequency of child abuse, and interventions and treatment strategies. The data collected from this study may provide a base for additional areas of research regarding military communities and concerns of abuse.

Through research of child abuse reports occurring in communities with active military bases, there is a possibility of findings that may contribute to policy and procedural changes. These changes may occur in the Department of Children's Services' (DCS) and the United States Military's planning and future responses to families in these communities during times of military conflict. The findings of this study may provide information regarding a difference in child abuse reports. The Department of Children's Services may consider developing a response or tactical approach to working with families in military based communities during periods of military conflicts. DCS may need to develop additional contract services with professionals and agencies equipped to address and treat symptoms that could contribute to, or factor into the abuse cycle. DCS may also need to develop and provide training specifically to equip social workers addressing and working with families who may be responding

to the extreme circumstances and strain of military conflict.

The military may utilize findings of this study to better prepare military service staff and contracted services in the communities to provide for families impacted by military conflict. The military may develop additional training and services to provide increased levels of debriefing for military staff and local community members. The military may also find a need for additional support services to assist soldiers and their families reenter society, and adapt to and integrate into civilian communications and behaviors after military combat and conflict duty. This process could utilize social workers to rebuild and train military staff to guide role integration for their families in daily operations, and social settings.

The research question that was explored is, Do child abuse reports vary prior to and during periods of active military conflict?

CHAPTER TWO

LITERATURE REVIEW

Introduction

Chapter Two consists of a discussion of the relevant literature. Specifically, the literature includes articles related to child abuse in the general population, child abuse in the military and characteristics specific to military families, and studies that compare the two populations.

Theories Guiding Conceptualization

In developing a theoretical framework for this study, one of the most important theories used to guide conceptualization is systems theory. According to Zastrow and Kirst-Ashman (2001), systems theory emphasizes the interactions of the various subsystems within a larger system. Of significant importance to the study, it stresses the importance of the environment and its impact on other systems. People in all environments are in constant interaction with various systems. The interactions are dynamic and constantly changing and evolving. In discovering the interactions between military families and the other systems and subsystems in their environments, social work practice can focus on improving

those interactions to improve the quality of life for all involved.

System theory assumes that all members of the system have assigned roles, which are culturally determined patterns of behavior expected of a person in a specific social relationship. When considering the military family, some roles that should be examined are the role of each family member as a part of the family system, as well as part of the larger military system. Within relationships, each family member has boundaries, that is, repeatedly occurring patterns of behavior that characterize the relationships within a system. In addressing the issue of child abuse, it is imperative to recognize what boundaries are expected, and what boundaries exist in actuality.

From the perspective of treatment programs, strengths-based practice appears to be one of the keys in creating positive outcomes for the families involved. Finding, enhancing and building on existing family strengths appears to be fundamental in creating any kind of treatment or intervention program. Understanding the nature of the problems could lead to identifying strengths and weaknesses for the development of more beneficial prevention and treatment programs.

Child Abuse in the General Population

Children can fall victim to abuse and neglect in a variety of ways. Different forms of child abuse include general and severe neglect, physical abuse, sexual abuse, emotional abuse, exploitation and medical neglect.

Kadushin and Martine (1988) report that the average victim is around 7 years old, with younger children being more vulnerable and underrepresented in the statistics. Boys tend to be victims more than girls up to the age of 10 or 11; after which girls are more likely to be victims.

While abuse occurs in all social areas, Russell and Trainor (1984) report that there are some indicators in families which appear to increase the risk to children. They tend to have lower incomes and at least two to three children. Female, single parent households, typically receiving public assistance, are over represented in the statistics. These families appear to be more likely to experience financial and emotional stress, and are also more involved with social service agencies, thereby increasing the likelihood that the abuse is reported.

Child abuses and maltreatment continues to be a subject that is central to the profession of social work. In a 1998 report in Orthopaedic Nursing, Patterson reports that according to the National Statistics on Child

Abuse and Neglect, more than 3 million children are abused each year, representing 25 out of every 1,000 children who are being physically, sexually or emotionally abused or neglected by their caretakers.

Child Abuse in the Military

According to Chamberlain et al. (2003), child abuse and maltreatment in military families is a subject that has gained considerable attention in recent years. It appears as though most of the studies that have addressed the issue have been based on reports from military Family Advocacy Program records, and that no standardized method for recording child abuse in the military exists at this time. As a result, prevalence statistics tend to be unreliable.

In an effort to determine how successful efforts to decrease child abuse in the military have been, a 1999 study examined trends in child maltreatment reported by the US Army Central Registry during 1975-1997 (McCarroll, et al.). According to this study, minor physical abuse and neglect showed decreases over time, while major physical abuse remained virtually unchanged, and sexual and emotional abuse showed fluctuations.

Since approximately the late 1970's, there seems to be a trend toward creating and implementing programs that do make an attempt at providing an array of services to military families to produce more positive outcomes for the families involved. For example, Operation READY is a program that has attempted to teach active and reserve military families strategies for coping with the stresses of common difficulties in military life, including separations and deployments (Knox and Price, 1995). Another such example is the Family Task Force, created at Lakenheath Air Base in England. It is a model for improving the interaction between professional and natural support systems to help military families better address their difficulties and utilize more healthy coping strategies (Bowen, 1984). While this example is outside the United States, it illustrates an increasing awareness of the unique difficulties and stressors that military families face on a daily basis.

In 1979, child advocacy programs were evaluated in a Report to Congress. Various programs were evaluated in the areas of prevention and identification, intake and assessment, treatment, follow-up, and reporting. One of the most important findings of the study was that each branch of the military established its own program to deal

with child abuse, however, there were no overall guidelines in establishing the programs or procedures, which resulted in significant inconsistencies.

It also appears as though there are many correlates of child abuse unique to the military family. Dubanoski and McIntosh (1984) examined 357 cases of child abuse and 170 cases of neglect. Participants reported that the stresses of family discord, new babies, continuous child care, relocation and isolation played important roles in the occurrence of abuse. However, the major contributing factors identified were loss of control resulting from the extreme structure and lack of flexibility in military life as well as a lack of tolerance from superior officers.

Another issue is that, as suspected, it is often difficult to address issues of child abuse and neglect due to secrecy and the desire for military personnel to "handle their own business." As Gustavsson (1979) mentioned, the "don't ask, don't tell" philosophy that pervades military thinking and action serves to perpetuate discrimination as well as hinder the respect and honesty necessary to the therapeutic process. Kohen (1984) discusses the existence of a military culture that is not only not conducive to family life, it is also so firmly entrenched in its traditions and rules that it does not

easily respond to outside intervention. This could serve to make it all but impossible to provide a model of service delivery that is adequate to meet the needs of this population.

In response to an increased interest in and attention to child abuse in military families, many programs have been implemented to provide services and supports to those families. The Joint New Parent Support Program Hawaii (Joint NPSP) is one such program. It is a prevention program for child abuse that includes screening all pregnant military families in Hawaii. A 2001 study determined that this program not only serves a population at increased risk for child abuse, but that intense application of services appeared to decrease the potential for child abuse, as measured by the Child Abuse Potential (CAP) Inventory (Cerny and Inouye, 2001).

Comparing Child Abuse in the General Population and Child Abuse in the Military

There appear to be few studies that compare rates of child abuse in military families with those of families in the general population. In 1997, Raiha and Soma reported that the overall rate of child maltreatment was lower in the Army than in the general population, and that the rate

of child neglect reports was markedly lower. In addition, younger children and children with lower ranking family members were at higher risk for major physical abuse and neglect.

The researchers concluded that a possible explanation for the lower rates of abuse is the military's policy of excluding people who are serious substance abusers, chronically unemployed, and those who are diagnosed with mental illness. A 2004 study reports similar findings. McCarroll, et al., reported that overall rates of child maltreatment in US civilian population were about double the rates in the Army from 1995 to 1999, perhaps because of an increased rate of neglect in the US data. However, they concede that it may be because some factors are present in the general population that are more controlled in the Army, such as poverty, severe substance abuse, homelessness and other overt social problems.

Summary

The literature important to the project was presented in Chapter Two. Literature covered included articles regarding child abuse in the general population, child abuse in military families and characteristics specific to

these families, and studies that compare the two populations.

CHAPTER THREE

METHODS

Introduction

Chapter Three documents the steps used in developing the project. Specifically, topics discussed include how the study was designed, the populations studied, procedures and instruments used in collecting data, the procedures used in implementing data collection, and the methods utilized in analyzing the data. In addition, the issue of the protection of human subjects is addressed.

Study Design

The specific purpose of this study is to explore child abuse reports in two active military communities and a comparable community without active military involvement prior to and during times of military conflict. The research method used was a quantitative approach in order to increase measurability, objectivity, and validity of the data obtained. In addition, these components will help ensure this study can be replicated in future attempts to examine this subject.

The data collected and analyzed was divided into the following categories: numbers of child abuse referrals, characteristics of child abuse referrals, frequency of

reports and outcomes from the referrals. Data extracted from existing case files in the Child Welfare Services and Case Management System (CWSCMS), Program Management Reports and CAD IQ will be analyzed for statistical frequencies and possible correlations.

There were some notable limitations of this study. One limitation involves high profile case confidentiality. Certain child abuse referrals are classified as high profile due to issues of politics. Examples of high profile cases include child abuse referrals made against DCS employees or any public figure. Because of the sensitive nature of these referrals, access to them is severely restricted, which resulted in them being excluded from this study. Another limitation of this study is lack of documented information both in the computer systems and case records. At times, there is information missing in case records. To limit missing data, multiple databases and systems were utilized. During the collection of data, thorough considerations were given to research limitations.

The research question explored was, Do child abuse reports vary prior to and during time periods of active military conflict?

Sampling

Data for this research project were gathered using existing case records. Data were collected which pertains to all child abuse referrals from October 2000 through October 2003. The data will be obtained from the County of San Bernardino, specifically focusing on the Morongo Valley, Barstow Region and Victor Valley area. Barstow was utilized for its active Army facility. The Morongo Valley is home to an active Marine base. The Victor Valley was chosen as a control area for comparison of child abuse rates. Data on child abuse referrals were available for these regions and accessible through the Department of Children's Services and Child Welfare Services and Case Management Systems.

Data Collection and Instruments

Data were collected regarding child abuse referrals that were made from October 2000 through October 2004. The dependent variable for this study is number of child abuse reports. The independent variables include location by zip code, ethnicity, income levels, gender, age, characteristics by allegation, referrals that become legal filings, referrals with prior investigations & dates and referrals for families with previous legal DCS cases.

Each variable was collected using reported and collected statistical information documented in existing computer databases and the Department of Children's Services case records. The dependent variable was recorded using the interval level of measurement. The independent variables location by zip code, ethnicity, gender and income levels will be recorded using the nominal level of measurement. The variable, characteristics by allegation, will be recorded using ordinal level of measurement. The variable age will be recorded as continuous.

Data regarding referrals with prior investigations, referrals requiring legal filing and referrals with prior cases will be recorded using interval level of measurement. For these variables, data will be gathered regarding a family's history of reported child abuse referrals and possible legal filings would be documented if applicable. These data would be applied for analysis to assist in the study's findings.

Procedures

Data was gathered by accessing computer database systems and The Department of Children's Services case records. Data collection began in August 2004 and continued through May 2005. Data collection took place at

the Department of Children's Services offices located in Victorville, Yucca, and Barstow during the office hours of 8am through 5pm. Both researchers participated in the extraction, collection and record of data through contact to agency representatives for access and collection of variable data and input into SPSS.

In addition, statistical assistance for data extraction was obtained from the Administrative Resource Division. This request involved data collected and documented by the Department of Children's Services. The request for assistance in gathering data for specified variables included that identifying information was removed from the data collected.

Protection of Human Subjects

To increase the protection of human subjects as well as decrease the likelihood of re-traumatizing subjects, case records were utilized for data extraction. Confidentiality of the child abuse reports was achieved by eliminating the names of subjects and any descriptive or identifying factors obtained from case information.

Consent from the Department of Children's Services to permit access to existing data, which are classified as confidential, was obtained. The Director of Children's

Services, Cathy Cimbalo, reviewed the formal proposal and consented to the utilization of departmental data for the purpose of this study.

Data Analysis

Data was analyzed using quantitative procedures to test the hypothesis, "In a time of military conflict, there will be an increase in child abuse reports." The variables chosen for analysis were based on some common indicators of child abuse documented in the literature. The variables being analyzed in this study are child abuse report, location by zip code, ethnicity, gender, age, income levels, characteristics by allegation, referral open to case, referrals with prior investigations & dates, referrals with prior cases. The relationships between these variables were examined for possible correlations.

Data was analyzed using univariate, bivariate and multivariate analyses. Statistical analysis of the frequencies, standard deviation, median, mode, and Pearson's Correlation will be utilized. In addition, cross tabulations provided beneficial analysis of data. Statistical testing such as t tests and analysis of variance (ANOVA) were also utilized to analyze and process data collected.

Summary

Chapter Three discussed the steps taken in the design of this study. Specifically, topics discussed included how the study was designed, the populations studied, procedures and instruments used in collecting data, the procedures used in implementing data collection, and the methods utilized in analyzing the data. In addition, the issue of the protection of human subjects was addressed.

CHAPTER FOUR

RESULTS

Introduction

Included in Chapter Four is a presentation of the results. Data were analyzed using a variety of methods, including bivariate analyses, paired samples and descriptive statistics. The chapter concludes with a summary of findings regarding the child abuse reports in two active military communities and a comparable community without active military involvement prior to, during and after times of military conflict.

Presentation of the Findings

Data were input creating a table of information that provided time specific separation. The time period spanning October 01, 2000 through September 15, 2001 combined with the time period covering October 01, 2003 through October 31, 2004 was considered the time referred to as peace. The time period beginning September 16, 2001 through September 30, 2003 was considered time of military conflict. Data were arranged to these time lines based on political actions that occurred. The time line provides for twenty-four and a half (24.5) months of data for time of peace and time of military conflict.

The months were not of specific focus or importance for comparison for the data analysis. The data were arranged setting a numeric order of one through twenty-five without significance for this project. The presentation of each variable is in chronological order and can be referenced to specific time period for further analysis.

For the purpose of this project the variables examined were total number of child abuse referrals, abuse allegation type, response time period, abuse allegation conclusion, and ethnicity. Data from each variable were additionally divided into specific time of events and regions. The time periods of data variable information were recorded as a cumulative total of month and year. The data were categorized by regions. For this study, the regions were Fort Irwin, the Barstow Area, Twenty Nine Palms, the Joshua Area and the Victorville Area.

Fort Irwin findings from October 2000 through October 2004 were a total of 420 of children received at least one child abuse referral of which 65 children received more than one child abuse referral during that same time period. Data revealed fifteen (15%) percent of children were reported regarding more than one incident of child abuse.

Barstow Area findings from October 2000 through October 2004 were a total of 4641 children who received at least one child abuse referral of which 1937 children received more than one child abuse referral during that same time period. Data revealed forty-two (42%) percent of children were reported regarding more than one incident of child abuse.

Twenty-Nine Palms findings from October 2000 through October 2004 were a total of 2568 children who received at least one child abuse referral of which 995 children received more than one child abuse referral during that same time period. Data revealed thirty-nine (39%) percent of children were reported regarding more than one incident of child abuse.

Joshua Tree Area findings from October 2000 through October 2004 were a total of 3465 children who received at least one child abuse referral of which 1509 children received more than one child abuse referral during that same time period. Data revealed 44 (44%) percent of children were reported regarding more than one incident of child abuse.

Victorville Area findings from October 2000 through October 2004 were a total of 22236 children who received at least one child abuse referral of which 8148 children

received more than one child abuse referral during that same time period. Data revealed thirty-seven (37%) percent of children were reported regarding more than one incident of child abuse.

Table 1. Total Abuse Reports by Region

Region	# of children with at least one referral (Oct 2000-Oct 2004)	#of children w/more than one referral (Oct 2000-Oct 2004)	% w/More than one referral (Oct 2000-Oct 2004)
Fort Irwin	420	65	15%
Barstow Area	4641	1937	42%
29 Palms	2568	995	39%
Joshua Tree Area	3465	1509	44%
Victorville Area	22236	8148	37%
Total	33330	12654	38%

The total population of children with at least one referral of child abuse for the five regions equaled 33,330 children with 12,654 having received more than one child abuse referral during October 2000 through October 2004 resulting in thirty eight (38%) of the child abuse referred population.

Data were available for multiple ethnicities in these regions from October 2000 through October 2004. Data regarding ethnicities which had produced 40 or more cases were utilized for analysis. These ethnicities were American Indian, Black, White, Hispanic and Other/Unknown.

The Barstow Area findings were 2.4% American Indian, 14.8% Black, 21.4% Hispanic, 45.7% White and 15.8% Other/Unknown population out of 4804 child abuse referrals.

Table 2. Ethnicity in Barstow

Region	Ethnicity	Total # of children in referrals (Oct 2000-Oct 2004)	Percent of Referrals by Ethnicity (Oct 2000- Oct 2004)
Barstow Area	American Indian	114	2.4%
Barstow Area	Black	710	14.8%
Barstow Area	White	2195	45.7%
Barstow Area	Hispanic	1026	21.4%
Barstow Area	Other/Unknown	759	15.8%

The Joshua Tree Area findings were 0.7% American Indian, 8.7% Black, 12.2% Hispanic, 58.8% White and 19.6% Other/Unknown population out of 5838 child abuse referrals.

Table 3. Ethnicity in Joshua Tree

Region	Ethnicity	Total # of children in referrals (Oct 2000-Oct 2004)	Percent of Referrals by Ethnicity (Oct 2000- Oct 2004)
Joshua Tree Area	American Indian	38	.7%
Joshua Tree Area	Black	510	8.7%
Joshua Tree Area	White	3430	12.2%
Joshua Tree Area	Hispanic	715	58.8%
Joshua Tree Area	Other/Unknown	1145	19.6%

The Victorville Area findings were 0.3% American Indian, 15.3% Black, 26% Hispanic, 48.1% White and 10.3% Other/Unknown population out of 22236 child abuse referrals.

Table 4. Ethnicity in Victorville

Region	Ethnicity	Total # of referrals per region (Oct 2000-Oct 2004)	Percent of Referrals by Ethnicity (Oct 2000- Oct 2004)
Victorville Area	American Indian	77	.3%
Victorville Area	Black	3403	15.3%
Victorville Area	White	10689	26%
Victorville Area	Hispanic	5787	48.1%
Victorville Area	Other/Unknown	2280	10.3%

Barstow Area findings from October 2000 through October 2004 were a total of 4339 children who received at least one child abuse referral. Data revealed sixty-five (65%) percent of allegations warranted a ten day response, ten (10%) percent Immediate response, one (1%) percent N/A Secondary response before initial contact and twenty-four (24%) percent as information only/evaluated out without response.

Table 5. Response Type in Barstow

Response Type: Barstow Area	Number of Referrals	Percent
Ten Day	2836	65%
Immediate Response	444	10%
N/A Secondary	24	1%
Evaluate Out	1035	24%
Total	4339	

Joshua Tree Area findings from October 2000 through October 2004 were a total of 6160 children who received at least one child abuse referral. Data revealed sixty-two (62%) percent of allegations warranted a ten day response, eight (8%) percent Immediate response, eight (8%) percent N/A Secondary response before initial contact and twenty-one (21%) percent as information only/evaluated out without response.

Table 6. Response Type in Joshua Tree

Response Type: Joshua Tree Area	Number of Referrals	Percent
Ten Day	3826	62%
Immediate Response	513	8%
N/A Secondary	522	8%
Evaluate Out	1299	21%
Total	6160	

The Victorville Area findings from October 2000 through October 2004 were a total of 20120 children who received at least one child abuse referral. Data revealed fifty-eight (58%) percent of allegations warranted a ten day response, nine (9%) percent Immediate response, two (2%) percent N/A Secondary response before initial contact and thirty-one (31%) percent as information only/evaluated out without response.

Table 7. Response Type in Victorville

Response Type: Victorville Area	Number of Referrals	Percent
Ten Day	11750	58%
Immediate Response	1781	9%
N/A Secondary	406	2%
Evaluate Out	6180	31%
Total	20120	

Table 8. Allegation Conclusion in Barstow

Allegation Conclusion: Barstow Area	Number of Referrals	Percent
Inconclusive	1657	19%
N/A Sec. EVO	1815	21%
Substantiated	2083	24%
Unfounded	3262	37%
Total	8817	

The total number of referrals promoted to cases in the Barstow Area was 960. The total number of children with prior referrals during October 2000 through October 2004 were 1725. The number of children with prior referrals who had a new case opened was 571. Therefore 59% of the children with an opened case had prior referrals.

Table 9. Allegation Conclusion in Joshua Tree

Allegation Conclusion: Joshua Tree Area	Number of Referrals	Percent
Inconclusive	450	4%
N/A Sec. EVO	3075	26%
Substantiated	1640	14%
Unfounded	6608	56%
Total Allegations	11773	

The total number of referrals promoted to cases in the Joshua Tree Area was 694. The total number of children with prior referrals during October 2000 through October 2004 were 2246. The number of children with prior

referrals who had a new case opened was 436. Therefore 63% of the children with an opened case had prior referrals.

Table 10. Allegation Conclusion in Victorville

Allegation Conclusion: Victorville Area	Number of Referrals	Percent
Inconclusive	5292	13%
N/A Sec. EVO	11513	28%
Substantiated	4880	12%
Unfounded	19402	56%
Total Allegations	41087	

The total number of referrals promoted to cases in the Victorville Area was 2539. The total number of children with prior referrals during October 2000 through October 2004 were 8148. The number of children with prior referrals who had a new case opened was 1580. Therefore 62% of the children with an opened case had prior referrals.

Paired Sample t-Test Results

A series of paired-samples t tests were conducted to evaluate whether Total Number of Referrals received in military communities in time of peace varied from referrals received during time of military conflict. The peacetime span covered October 1, 2000 through September 15, 2001 and October 01, 2003 through October 31, 2004.

The military conflict time span covered September 16, 2001 through September 30, 2003.

First each region's referrals in times of peace and conflict were compared to the mean for Total Number of Referrals for the Barstow area during time of conflict ($M = 169.80$) was not significantly greater than the mean total number of referrals during time of peace in the Barstow area ($M = 173.84$) ($t = -.297$) = 24, $p = .769$).

The mean for Total Number of Referrals for the Fort Irwin area during time of peace ($M = 7.12$) was greater than the mean total number of referrals during time of conflict in the Fort Irwin area ($M = 5.76$) ($t = -1.840$) = 24, $p = .078$), which is approaching statistical significance.

The mean Total Number of Referrals for the Barstow area during time of conflict ($M = 169.80$) was significantly greater than the mean total number of referrals during time of conflict in the Fort Irwin area ($M = 5.76$) ($t = -29.314$) = 24, $p = .000$).

The mean Total Number of Referrals for the Barstow area during time of peace ($M = 173.84$) was greater than the mean total number of referrals during time of peace in the Fort Irwin area ($M = 7.12$), t (-14.261) = 24, $p = .000$, which shows statistical significance.

The mean Total Number of Referrals for the Joshua Tree area during time of peace ($M = 142.88$) was greater than the mean total number of referrals during time of conflict ($M = 138.48$) ($t = -.462$) = 24, $p = .648$), but the difference is not statistically significant.

The mean Total Number of Referrals for the Twenty Nine Palms area during time of peace ($M = 94.36$) was greater than the mean total number of referrals during time of conflict ($M = 83.36$) ($t = -1.842$) = 24, $p = .078$), which is approaching statistical significance.

Base communities were also compared with their nearby cities. The mean Total Number of Referrals for the Joshua Tree area during time of conflict ($M = 138.48$) was significantly greater than the mean total number of referrals during time of conflict in the Twenty Nine Palms area ($M = 83.36$) ($t = 8.731$) = 24, $p = .000$), which is statistically significant.

The mean Total Number of Referrals for the Joshua Tree area during time of peace ($M = 142.88$) was significantly greater than the mean total number of referrals during time of peace in the Twenty Nine Palms area ($M = 94.36$) ($t = 6.947$) = 24, $p = .000$).

The mean Total Number of Referrals the Victorville area during time of peace ($M = 8.1736$) was greater than

the mean total number of referrals during time of conflict in the Victorville area ($M = 807.44$) ($t = -.255$) $n = 24$, $p = .801$), but the difference is not statistically significant.

Summary

Chapter Four reviewed the results of the project. The various methods of data analysis were presented. Descriptive statistics and t-test results were presented and explained. The difference in child abuse reports in two active military communities and a comparable community without active military involvement prior to, during and after times of military conflict showed some statistically significant differences.

CHAPTER FIVE

DISCUSSION

Introduction

Included in Chapter Five is a presentation of the conclusions gleaned as a result of completing the project. Further, the recommendations extracted from the project are presented in regards to social work practice, policy and research. Limitations to the study are also examined. The chapter concludes with a summary of implications for future studies.

Discussion

The question being explored was whether there is a difference in the number of child abuse reports received before, during and after times of military conflict in military communities. In analyzing the data, the cities Joshua Tree and Barstow were both found to have higher rates referrals than military bases in Twenty Nine Palms and Fort Irwin in both times of peace and military conflict. Many of these differences were statistically significant. In addition, numbers of referrals were higher during times of peace than times of conflict in all areas examined. There was also statistical significance revealed. The overall findings regarding child abuse

referrals in comparable communities suggest that there is an increase in reports received during times of peace. Overall, the ethnic composition of these communities does not appear to be substantiate difference in results.

Data revealed that of the total number of children who had new cases opened during the time period studied, over fifty percent had multiple referrals.

Limitations

There are limitations that may have affected the findings of this project. The ability to gather data regarding military families' specific residential location was restricted. Data regarding military families was limited to listing their residence as military bases versus the surrounding areas by city. Child abuse referral information was limited to families within the city without specification of military enlistment. Data collection was also limited to recorded information kept by the Department of Children's Services. In addition, child abuse referrals contain limited information that is able to be utilized for statistical analysis. The information gathered for this study was limited due to a lack of documented data gathered, maintained or recorded by the Department of Children's Services.

Another important limitation was the implementation of a database that was developed in 1997. Data recorded in this database prior to the year 2000 is considered unreliable. As a result, the amount of data available to consider regarding times prior to military conflict was significantly limited, and there is no method available to accurately obtain the information needed to conduct a longitudinal quantitative study. The current political atmosphere also contributed limitations to the research process. These included the current state of military policing action, small sample of time considered at peace and revolving military activity within the communities, population and reserves.

Recommendations for Social Work Practice, Policy and Research

Social work practice can benefit from the findings of this project. The field of social work practice should continue to develop and provide necessary services to meet the needs of clients served. While the findings of this study were not those expected statistically significant, that does not negate the relevance of the importance of data gathered and analyzed. Social work practitioners can continue to utilize their skills, knowledge and values to contribute to empower clients.

Application of statistical population data analyzed may be manipulated to develop policies and procedures specific to agencies. These policies can then be implemented to service the assessed needs of the clients. Development of policies relevant to social work practice include but are not limited to allocations of resources, increase in service providers, additional provisions to community providers, and reallocation and distribution of state and federal funding.

The importance of this study can be applied in the development and establishment of additional social service provisions. Abuse rates increase during times of peace which provides insight into family dynamics when soldiers return to their homes, families and children. The data indicating the increase suggests the need for additional crisis intervention programs and reintegration provisions for the individuals and families. Additionally, services to address the needs and concerns posed by the returning soldiers and persons of the community could be implemented and increased during times of military conflict to prepare for eventual times of military peace.

This project provides the opportunity for continued research utilizing a longitudinal approach to gathering and analyzing data. Continued recording of data regarding

child abuse referrals and information accompanied by elapsed time since the call to end of military conflict will provide additional information. Evolving techniques in data gathering procedures implemented will add to the research quality, validity and reliability. Further pursuit of research and data regarding this project can gather additional information by addressing the limitations noted in this study.

Conclusions

The conclusions extracted from the project were reviewed. They provide some preliminary data indicating that there appears to be an increase in child abuse referrals during times of peace as opposed to times of military conflict. This suggests that there may be an increase of environmental stressors associated with the return of active military personnel from deployment during times of conflict. It poses questions for further study to explore qualitative factors that could be associated with the increase of child abuse reports. As military personnel continue to be involved in international conflicts, this concern will be increasingly relevant to social work practice. Further development of the social worker's role

in assessment, intervention and service delivery are key to meeting the needs of the population served.

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ASSIGNED RESPONSIBILITIES PAGE

This was a two-person project where authors collaborated throughout. Throughout each phase of the project, both authors collaborated and participated equally to complete the final product.

1. Data Collection:

Team Effort: Kristine Brown & Marlana McCormic

2. Data Entry and Analysis:

Team Effort: Kristine Brown & Marlana McCormic

3. Writing Report and Presentation of Findings:

a. Introduction and Literature

Team Effort: Kristine Brown & Marlana McCormic

b. Methods

Team Effort: Kristine Brown & Marlana McCormic

c. Results

Team Effort: Kristine Brown & Marlana McCormic

d. Discussion

Team Effort: Kristine Brown & Marlana McCormic