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Children and Youth Services Review

journal homepage: www.elsevier.com/locate/childyouth



Out-of-home placement and regional variations in poverty and health and social services spending: A multilevel analysis



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ARTICLE INFO

Article history:
Received 1 September 2016
Received in revised form 8 September 2016
Accepted 12 October 2016
Available online 17 October 2016

Keywords: Placement Poverty Regional effects Longitudinal Multilevel

ABSTRACT

This paper examines the extent to which regional variations in poverty and health and social services spending impact the risk of placement, after controlling for individual-level risk factors and regional latent differences in delivery of child protection services. Clinical administrative child protection data were merged with income and health and social services spending data for the province of Quebec; the final data set included all children (N=122,466) investigated for maltreatment for the first time between April 1, 2002 and March 31, 2010, of which 22.6% (N=27,710) were placed in out-of-home care. Multilevel hazard results indicate that poverty, controlling for health and social services spending, contributes to the increased risk of placement. Specifically, poverty and health and social services spending account for 57.1% of the variation in regional placement for younger children <5 years of age and 38.1% for children age 5 to 11 years.

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1. Introduction

Poverty is a well-established risk factor for various indicators of child maltreatment (Cancian, Slack, & Yang, 2010; Chamberland, Bouchard, & Beaudry, 1986; Drake & Pandey, 1996; Lindsey & Shlonsky, 2008; Pelton, 1989; Rothwell & Boer, 2014; Slack, 2004; Sedlak et al., 2010), and placement in out-of-home care (Berger, 2004; Berger & Waldfogel, 2004). However, far less is known about the extent to which poverty reduction policies and family support services might mitigate this relationship (Jones, Finkelhor, & Halter, 2006; Steinberg, Catalano, & Dooley, 1981). The influence and strength of the relationship between poverty and child maltreatment is particularly interesting to consider in jurisdictions that have made clear and sustained efforts to reduce the effects of poverty through socially progressive family-centered policies.

The province of Quebec has been one of the most socially progressive jurisdictions in North America, offering an array of poverty reduction and family support services, ranging from universal free health care, subsidized public child care and early learning services, affordable tuition fees, higher parental leave benefits, and a very progressive income tax redistribution system (Fréchet, Lechaume, Legris, & Savard, 2013; Swift & Callahan, 2006). Among the provinces in Canada, Quebec

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has the second lowest rate of relative poverty among both children and single-parent female-headed families (Statistics Canada, 2015a). As a result of the redistribution system, Quebec maintains the lowest level of after-tax and transfer income inequality when compared with other large Canadian provinces (Fréchet et al., 2013). In Quebec, income inequality as measured by the Gini coefficient, is reduced from 0.443, using market income, to 0.292 after taxes and transfers. This 34% decrease is the largest proportionate reduction across Canadian provinces (Statistics Canada, 2015b). This is primarily because Quebec, compared to the rest of Canada, has adopted a socially progressive model establishing a social minimum through province-sponsored universal services and relatively high tax rates and income transfers (Boychuk, 2004).

Despite Quebec's socially progressive model, socioeconomic disadvantages continue to be important risk factors for child maltreatment and subsequent out-of-home placement (Chamberland et al., 1986; Esposito et al., 2013). Esposito et al. (2013) found that neighborhood-level socioeconomic disadvantages of the clinical population served by child protection significantly contribute to the increased risk of out-of-home placement for all children, but are most influential for younger children investigated primarily for reasons of neglect and parents' high-risk lifestyle. Beyond the influence of neighborhood socioeconomic disadvantages of the clinical population served, this paper examines the extent to which regional variations in poverty and health and social

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Regions represent territorial aggregations used to organize the delivery of provincial government services. They are often referred as Quebec administrative regions.

services spending impact the risk of placement, after controlling for individual-level risk factors and regional latent differences in delivery of child protection services.

2. Theoretical framework

Ecological and life-course perspectives that focus on the combination of environmental factors and the timing of life experiences (Belsky, 1993; Cicchetti & Lynch, 1993; Gill & Jack, 2007; Jack, 2000; Laub & Sampson, 2001) serve as theoretical frameworks in understanding how poverty, and health and social services spending influence the risk of out-of-home placement. Child placement is assumed to result from a wide array of interconnected risk factors at multiple levels associated with children's age-specific vulnerabilities (Wulczyn, Barth, Yuan, Harden, & Landsverk, 2005). Children's security and developmental well-being are influenced not only by experiences of proximal environments, such as relationships within the immediate family, but are also thought to be influenced by environments that impact the financial statuses and support networks for families (Kauppinen, Kortteinen, & Vaattovaara, 2011; Rivaux et al., 2008; Tremblay & Nagin, 2005).

Poverty plays a particularly strong predictive role in the quality of parenting received by children. When families experience income constraints, they may encounter stressors that affect relationships and parenting capacity (Conger & Conger, 2002; Elder & Caspi, 1988), and can result in forms of maltreatment, particularly child neglect (Berger, 2007; Slack, 2004). However, child protection legislation attributes the primary responsibility for conditions associated with neglect to parents, with relatively little emphasis on the role that poverty plays in creating these conditions (Trocmé et al., 2013). Families who are poor struggle to balance basic financial demands, such as the cost of food, accommodation, transportation, clothing, and education, which results in overall difficulties in daily living. In addition, the stress of low income places psychological demands on individuals that affects their judgement and decision making abilities (Mani, Mullainathan, Shafir, & Zhao, 2013). Parental difficulties, poverty, and a lack of resources and supports may aggravate the challenges these vulnerable families face, which altogether decreases parental ability to provide safe and adequate environments for their children and increase the risk of out-ofhome placement in situations of maltreatment.

3. Background studies

The relationship between family-level poverty, child maltreatment, and out-of-home care is well documented (Berger, 2004; Berger & Waldfogel, 2004; Cancian et al., 2010; Drake & Pandey, 1996; Fallon, Ma, Black, & Wekerle, 2011; Gelles, 1992; Lindsey, 1991; Lindsey & Shlonsky, 2008; Pelton, 1989; Sedlak et al., 2010). In a review of child welfare research, Lindsey and Shlonsky (2008) suggest that a significant proportion of children come to the attention of child protection services as a result of poverty alone. Examining the U.S. National Incidence Study, Sedlack and associates (2010) found that risk of maltreatment is up to five times higher for low-income families compared to nonlow-income families. Similarly, examining the Canadian National Incidence study of Reported Child Abuse and Neglect, Fallon et al. (2011) found that family-level poverty was a significant and influential risk factor for child maltreatment reports resulting in services. Regarding the risk of out-of-home placement, Lindsey (1991) suggested that the income level of parents is one of the best predictors of whether children will be placed in out-of-home care. Conclusions by longitudinal studies such as Berger (2004) and Berger and Waldfogel (2004) support this claim, finding that children from low-income families are much more likely than children from non-low-income families to be placed in out-of-home care.

Beyond the immediate family and at the broader level, most evidence suggests that socioeconomically disadvantaged environments have higher child maltreatment rates. Several studies by Coulton et al.

(1995, 1999, and 2007) and a review of the literature by Freisthler, Merritt, and LaScala (2006) confirmed that neighborhood-level socioeconomic disadvantages were highly correlated with higher incidence of maltreatment. Analyzing 159 census tracts in Maryland's Montgomery County, Ernst (2001) reported similar results, suggesting that the combination of residential instability and poverty account for close to half of the variation in rates of maltreatment between census tracts. Other studies obtained a more specific result based on maltreatment type. For example, Drake and Pandey (1996) found the association with neighborhood poverty to be strongest for neglect when compared to physical and sexual abuse. In a similar fashion Kim (2004) found a correlation between neighborhood poverty and neglect, but not with sexual or physical abuse. The relationship seems to hold for income inequality as well. In a more recent U.S. national study across 3142 counties, income inequality was associated with higher maltreatment rates after controlling for child poverty, demographic and economic variables, and state-level variation in maltreatment rates (Eckenrode, Smith, McCarthy, & Dineen, 2014). However, one study found no consistent and compelling relationship between state-level measures of economic insecurity and child maltreatment rates (Millett, Lanier, & Drake, 2011).

While the association between poverty and maltreatment risk has been established, fewer studies have examined the risk on out-ofhome placement or variation in rates of out-of-home placement between broader level aggregations of populations. In a recent study, Lery (2009) examined the role of community structure and placement rates using three different spatial scales—(1) census tract; (2) block groups; and, (3) zip codes—and found that the different spatial scales produced similar results in that placement was significantly higher in poorer aggregations. Similarly, Needell, Brookhart, and Lee (2003) found that neighborhood poverty, based on zip codes, predicts a higher likelihood of foster care placement. In a more recent multilevel analysis, Rolock, Jantz, and Aner (2015) used the Chicago Community Adult Health Study data and administrative data from the Illinois Department of Children and Family Services to examine the effect of child and community-level characteristics on placement. They report a significant and positive association between community risk factors such as residential insecurity and placement in foster care.

The extent to which health and social services might mitigate the observed effects of poverty and risk of maltreatment and placement remains elusive. Studies examining the influence of broader aggregations of poverty often do not include measures of health and social services spending, which may moderate the observed effects of poverty, risk of maltreatment, and placement. Jones et al. (2006) for instance, report a negative relationship between funding and child maltreatment: U.S. states with higher funding per capita for child welfare services had lower rates of neglect. In a similar fashion, Paxson and Waldfogel (2002, 2003) report negative associations between a reduction in welfare benefits and out-of-home care. However, significant gaps remain. Studies focusing on broader aggregations have primarily focused on reports of maltreatment, but less is known about the ensuing interventions (e.g., out-of-home placement). These studies also do not differentiate between the youngest children and the oldest, thereby masking age-specific clinical differences associated with out-of-home placement. Quebec is particularly interesting in this context where adolescents, under the age of 18, may be investigated and receive child protection services for severe behavioral disturbances as a main concern, but these children will likely fall under broad categories of maltreatment (i.e., neglect) in other Canadian provincial jurisdictions and U.S. states (Trocmé et al., 2010). Lastly, studies have not examined the extent to which broader aggregations of poverty and health and social services spending explain regional variations in child protection placement risk. The present study, therefore, contributes to the child maltreatment literature by examining the extent to which regional population-based variations in poverty and health and social services spending impact the risk of placement, after controlling for individual-

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