



Fifteen-month follow-up of children at risk: Comparison of the quality of life of children removed from home and children remaining at home

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Abstract

This is a prospective, longitudinal study of the psychological, physical, social and cultural quality of life of 93 children at risk who were removed from home or kept at home. Assessments were made by social workers who made the decisions, at three points of time. The findings show that the quality of life of the children who were removed from home improved incrementally over the 15 months, while that of the children who stayed at home remained at the same low level as at the first measure. The findings suggest that removing children at risk from abusive or neglectful homes can improve their quality of life, while leaving them in such homes generally does not. Pending further research on larger samples and using multiple sources of information, they also suggest that it may be worth reexamining current policy on removal.

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1. Introduction

The need for outcome studies of policies and interventions is widely recognized by practitioners and researchers in the field of child welfare. Such studies are needed to better provide for the well being of children under agency care, to permit follow up of the consequences of policies and practices, and to make it possible to base policies and practice

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on empirically obtained information rather than on personal proclivities or political considerations (Fluke, 1993; Maluccio, Ainsworth, & Thoburn, 2000; Poertner, McDonald, & Murray, 2000).

The need for outcome studies is particularly acute with regard to children at risk, towards whom society bears a legal obligation (Poertner et al., 2000). A central dilemma in this area is the question of whether to remove a child at risk from home. It is not only that decisions on removal and alternative placement are bound to have significant long-term effects on the children, their families, and the society as a whole. It is also that such decisions are notoriously difficult. The laws that govern the decisions tend to be ambiguous (Besharov, 1985, 1986). Our present knowledge of child development does not provide clear guidelines about when the child's well being would be best served by removal and when by being kept at home (DePanfilis & Scannapieco, 1994; Lindsey, 1992; Munro, 1996). Complicating matters is the fact that the instruments used to assess risk suffer from multitudinous shortcomings (Camasso & Jagannathan, 1995; Doueck, English, DePanfilis, & Moote, 1993; English & Pecora, 1994; Lyons, Doueck, & Wodarski, 1996).

The safety of the child standard used for removal is in itself problematic. Most children at risk are in what is known as the "gray area", where they are not in clear, immediate danger of physical harm (Petras, Massat, & Essex, 2002; Rossi, Schuerman, & Budde, 1999), but are from homes where their parental care is so poor that it is viewed as endangering their normal, healthy development. Moreover, there is increasing evidence that removal from home does not necessarily guarantee children's physical safety and that children placed in foster or institutional care may be exposed to neglect and to physical and sexual abuse (Benedict, Zuravin, Brandt, & Abbey, 1994; Groze, 1990; Rosenthal et al., 1991; Blatt, 1992).

To be sure, a large number of outcome studies have been conducted on children removed from home. Most of these, with relatively few exceptions (Festinger, 1983; Hell, Triselitis, Borland, & Lambert, 1996), found high rates of psychological, behavioral, educational, and social problems. They record high rates of psychological disorders (Clausen, Landsverk, Ganger, Chadwick, & Ltownik, 1998; McIntyre & Keesler, 1986), adjustment problems (Iglehat, 1994; Schor, 1987), depression, and hospitalization (Barth, 1990; Cook, 1992), as well as low self-esteem (Cook, 1992; Hagino, 2002), and problems in intimacy and interpersonal relations (Buehler, Orm, Post, & Patterson, 2000; Cook, 1992; Hagino, 2002; Rest & Watson, 1984; Stein & Corey, 1986). They note high rates of behavioral problems in the clinical or borderline range of the Child Behavior Checklist (Clausen et al., 1998; Heath et al., 1989; Iglehat, 1994; McIntyre & Keesler, 1986), as well as relatively high rates of antisocial behavior and criminality (Benedict et al., 1996; Famshel, Finch, & Grundy, 1990; Kraus, 1981). They also observe school problems and low educational achievement (Heath et al., 1989; Blome, 1997; Buehler et al., 2000; Heath, Colton, & Aldgate, 1994; Iglehat, 1994), and, in adulthood, high unemployment and welfare dependence and low objective and subjective economic well being (Barth, 1990; Blome, 1997; Buehler et al., 2000; Famshel et al., 1990).

The problem with these studies is that it is not at all clear that the multitudinous difficulties to which they point stem from the children's placement in out of home care. Several researchers have pointed out that the prevalence of these problems among persons who have been removed from home is not significantly different from that among persons

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