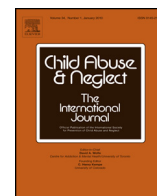


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## Child Abuse & Neglect



# Perceptions of parental substance use disorders in cross-system collaboration among child welfare, alcohol and other drugs, and dependency court organizations<sup>☆</sup>



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### ABSTRACT

Cross-system collaboration among child welfare (CW), alcohol and other drugs (AOD), and court organizations shows promise in addressing the many needs of CW-involved families experiencing parental substance use disorders (SUDs). Research has suggested that differing perceptions of parents with SUDs among staff in these organizations may hinder the collaborative process. Using a sequential explanatory mixed-method approach, this study explored staff perceptions of parental SUDs among CW, AOD, and court organizations. Logistic regression analyses indicated that, compared to CW respondents, AOD respondents were: (a) less likely to believe that parents could provide effective parenting; (b) more likely to believe that abstinence should be a criterion for reunification; (c) more likely to agree that parents should receive jail time as a consequence for noncompliance with court orders; and (d) more likely to believe that parents could succeed in treatment. Thematic analyses of these focal areas identified two core themes (focus on the primary client and mandated time frames for permanency), as well as multiple subthemes, that provided a nuanced understanding of differing perceptions on these matters. Suggestions for the development of anticipatory cross-system training and practices and implications for policy evaluation are discussed.

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### Introduction

Parental substance abuse is a persistent problem in child welfare (CW) systems, with an estimated one third to two thirds of CW cases involving substance misuse (U.S. Government Accountability Office [USGAO], 1998; Wulczyn, Ernst, & Fisher, 2011; Young, Boles, & Otero, 2007). Children who are involved with CW and have a parent with a substance use disorder (SUD) are more likely to experience lengthier stays in out-of-home placement, recurrent involvement with CW, and lower rates of reunification (Brook & McDonald, 2007; Choi & Ryan, 2006; Grella, Hser, & Huang, 2006; U.S. Department of Health and Human Services, 1999). There are also unique challenges for parents with SUDs in CW. For example, stipulations from the Adoptions and Safe Families Act (ASFA, 1997), which require permanency hearings to take place after 12 months of foster care placement, make CW-involved parents with SUDs particularly vulnerable to losing their parental rights (Green, Furrer, Worcel, Burrus, & Finigan, 2007). Because addressing issues of parental SUDs are more common in CW case plans, many CW systems have begun adopting strategies for cross-system collaboration with alcohol and other drugs (AOD) and

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court systems to improve timeliness of and access to treatment services (Darlington, Feeney, & Rixon, 2005; Drabble, 2007; Green, Rockhill, & Burrus, 2008; Kerwin, 2005; Young & Gardner, 2002).

Existing studies on cross-system collaboration have primarily focused on front-line practice issues and organizational factors that affect the collaboration process, including funding, organizational structure, and policy development (Johnson, Zorn, Tam, Lamontagne, & Johnson, 2003; Page, 2003; Young & Gardner, 2002). Emergent literature on cross-system collaboration among CW, AOD, and court organizations has suggested that differing professional values among organizations may affect collaboration (Drabble, 2007; Laudet, 2003; Percy-Smith, 2006; Young & Gardner, 2002). Among human services organizations such as CW and AOD, in which staff members are responsible for carrying out the everyday tasks and duties involved in the collaboration process, it is vital to consider differences in disciplinary perceptions of parental SUDs (Fishbein & Ajzen, 1975; Jaccard & Becker, 1985) because this may hinder collaboration (Drabble, 2007; Percy-Smith, 2006).

Drawing from theories on organizational culture, which indicate that staff members within an organization hold more similar views than staff from outside of the organization (Cooke & Szumal, 1993), this study examined CW, AOD, and court staffs' perceptions on issues related to parental SUDs. The objectives of this study were to (a) compare the extent of differences and similarities in perceptions and values regarding CW-involved parents with SUDs among staffs from CW, AOD, and court organizations, and (b) explore possible explanations for why these perceptions were different or similar among these organizations.

### *Theoretical framework*

Osterling and Austin's (2008) review of cross-system collaboration literature involving CW and AOD organizations identified various promising collaborative models, including: (a) co-locating AOD staff in CW offices; (b) creating joint case plans; (c) establishing collaborative committees; (d) developing cross-system training; and (e) establishing policies for sharing confidential information. Challenges to effective collaboration between CW and AOD systems include organizational differences in: (a) how the client is defined; (b) defining case goals and outcomes; (c) time constraints; and (d) training and educational background of staff (Young et al., 2007).

Adding to theories and models of collaboration, recent studies have suggested that differences in how staffs from varying organizations view parental SUDs may affect collaboration efforts (Drabble, 2007; Livingston, Milne, Fang, & Amari, 2012; Young & Gardner, 2002). For example, perceptions of SUDs as a disease, compared to viewing SUDs as a choice that led to negative behaviors or moral failings, influence how helping professionals approach issues related to parents with SUDs (Corrigan, Kuwabara, & O'Shaughnessy, 2009; Livingston et al., 2012; Weiner, 1995; White & Kelly, 2011). Therefore, differences in epistemological attribution of SUDs among CW, AOD, and court staffs can influence various aspects of the collaborative process (i.e., developing joint case plans, setting time frames for substance abuse treatment requirements, and making recommendations to the court). Thus, examining perceptions of parental SUDs among organizations may deepen our understanding of the varying and at times conflicting approaches taken by CW, AOD, and court staffs in their work with parents with SUDs.

### **Methods**

Using a sequential explanatory mixed-method approach, this study analyzed quantitative data provided by the Children and Family Futures (CFF), followed by a qualitative study intended to complement the quantitative segment and expand the breadth of inquiry. The use of a sequential explanatory design allowed for the examination of *how* and *why* perceptions of parents with SUDs differ among CW, AOD, and court staffs (Johnson & Onwuegbuzie, 2004). Implemented in two distinct interactive phases, the sequential explanatory design is a mixed-method approach with a strong quantitative orientation and "lends itself to emergent approaches where the second phase can be designed based on what is learned from the initial quantitative phase" (Creswell & Plano Clark, 2011, p. 83; see Fig. 1 for sequential explanatory design procedures). The quantitative and qualitative phases of the present study were connected through the development of the interview protocol, which was based on preliminary statistical findings from the quantitative phase (Creswell & Plano Clark, 2011). In addition, this study provided a unique opportunity to present perspectives from a nationally diverse vantage point because quantitative and qualitative data were gathered from individuals across the United States.

### **Quantitative data**

This study used secondary data collected by CFF to determine the relationship between organization types and beliefs on issues related to CW-involved families experiencing SUDs. Data were collected from staff in sites working with CFF in various programs, including Family Drug Courts, Regional Partnership Grants, and the National Center on Substance Abuse and Child Welfare. Data used for this current study were collected from 2004 to 2008 and consisted of a purposive sample of frontline staff, managers and supervisors, and court personnel from CW, AOD, and court organizations who worked with CW-involved families and for organizations involved with cross-system collaboration. The sample consisted of 1,619 respondents who self-identified as being affiliated with a CW, AOD, or court organization.

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