



Crisis nursery services and foster care prevention: An exploratory study



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ARTICLE INFO

Article history:

Received 25 March 2015

Received in revised form 1 January 2016

Accepted 1 January 2016

Available online 6 January 2016

Keywords:

Crisis nursery services

Case management

Parenting education

Foster care

Race/ethnicity

ABSTRACT

Objective: To examine whether receiving crisis nursery services reduces the chances of subsequent placement of children into foster care.

Method: The study includes a sample of 322 children from the administrative data from a crisis nursery in Ohio. Generalized estimating equations analysis was conducted to assess the relationship between crisis nursery services (case management and parenting education) and subsequent foster care placement.

Results: The generalized estimating equations analyses indicated that case management and parenting education provided from the crisis nursery were associated with reduced likelihood of subsequent foster care for children who were placed in the crisis nursery. Foster care placement during the previous 12 months and Caucasian race were also associated with higher odds of subsequent foster care placement.

Conclusions: Crisis nursery services delivered with case management and parenting education may be an effective intervention to reduce children's subsequent foster care placement.

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1. Introduction

Abuse and neglect in early childhood pose an immediate threat to children's health and safety as well as to their long-term development. Early childhood maltreatment prevention programs and interventions provide an efficacious opportunity to intervene while young children's brains are most responsive to improved surroundings (Klein & Jones Harden, 2011). Although there is a growing research base for understanding the ecological experiences of young children in the child welfare system, we know less about how to intervene effectively in these cases. Crisis nurseries, which provide temporary child care and various support services to families of children at risk of abuse and neglect, may play a critical role in improving child welfare service outcomes, including number of out-of-home placements. However, only few studies have been conducted to investigate how and to what extent crisis nursery services may be associated with these improved outcomes. Therefore, this exploratory study addresses the need for additional research by examining how crisis nursery services, parenting education and case management in particular, may reduce the risk of out-of-home placements.

Crisis intervention theory offers a useful framework for understanding how instant and targeted services may assist families at risk and prevent further negative consequences. Crisis intervention theory posits that families are most amenable to change when faced with an

overwhelming life crisis and emphasizes the importance of providing immediate and focused services over a short period (Parad & Caplan, 1960). In line with crisis intervention theory, the crisis nursery model assumes that some families experience a short-term crisis that puts their children at risk of child abuse and neglect, and by receiving respite, parents can focus on their crisis and reduce the risk (ARCH, 1994; Cole, Wehrmann, Dewar, & Swinford, 2005). "Crisis nursery" refers to a type of respite care that is designed to provide temporary child care for young children at risk of abuse and neglect and to offer an array of support services to the families and caregivers of these children (ARCH, 1994).

Previous studies that evaluated the effects of crisis nursery services and respite care on child welfare service outcomes have yielded mixed findings. Some studies have suggested that crisis nursery services may be associated with improved child welfare service outcomes, including fewer out-of-home placements (e.g. Bruns & Bujrchar, 2000; Cole & Hernandez, 2011; Cowen, 1998). For example, in a study of 240 families who received crisis child care in rural Iowa counties, there was a significant decrease in the reported incidence of child maltreatment in the rural counties with crisis child care programs compared with counties that did not offer crisis care programs (Cowen, 1998). In a controlled, longitudinal study of the effectiveness of respite care services, families who received respite care had significantly fewer incidents of out-of-home placement than the control group (Bruns & Bujrchar, 2000). Similarly, Home and Darveau-Fournier (1995) found that respite care (planned and crisis) for families in a high-risk neighborhood resulted in reduced incidents of foster care placement, keeping the children in the local community. In an evaluation study of five crisis nurseries in Illinois, children whose families received crisis nursery

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services prior to foster care placement had significantly higher odds of being reunited with their biological families compared with children whose families received only foster care services (Cole & Hernandez, 2011).

On the contrary, there were some studies that found no significant link between crisis nursery services/respite care and better child welfare service outcomes. For example, Aniol, Mullins, Page, Boyd, and Chaney (2004) found no significant relationship between respite care and child abuse potential in parents of children with developmental disabilities. Similar to this study, Cole and Hernandez (2008) also reported that crisis nursery services did not have a significant effect on potential for abuse and neglect.

These inconsistent findings warrant further investigation as to whether crisis nursery services are associated with improved child welfare service outcomes, including reduced foster care placement. According to the ARCH National Respite Network and Resource Center (ARCH, 2014), previous research on respite services is limited in terms of its scope, depth, and methodological rigor. Cole and Hernandez (2011) have identified several challenges to evaluating whether crisis nurseries can prevent and reduce child maltreatment and foster care. For example, the respite services are often extremely short in duration (in some cases, just a few hours) and therefore are unlikely to have sustained benefits. In addition, the crisis nature of the need for services makes random selection of families into respite unethical. Even many quasi-experimental designs (e.g., waiting list designs) are not feasible in a crisis situation. Cole and colleagues have acknowledged the need for more objective measures of improvement (Cole & Hernandez, 2008, 2011) and responded to this need by conducting research that links crisis nursery services to public child welfare services. For example, they have used this linked data method to show how the receipt of crisis nursery services may have positive effects on the children's ultimate placement outcome after foster care placement (Cole & Hernandez, 2011).

The present study takes this approach of linking the administrative data obtained from a crisis nursery to public child welfare records. Although crisis nursery services, including parenting education and case management, may play a pivotal role in preventing and reducing child abuse and neglect, more research is needed concerning how the services help children at risk. This investigation builds on previous crisis nursery research to explore how crisis nursery services delivered in a different state may relate to fewer foster care placements. More specifically, through a study of a crisis nursery, we explore an engagement model suggested by the social workers in the crisis nursery that a short-term crisis presents an opportunity for social workers to engage with caregivers and to use that engagement to encourage the caregivers to participate in parent education and case management services that may have long-term benefits that extend beyond the resolution of the crisis that lead the caregivers to seek emergency help. Although services offered by crisis nurseries may vary, ranging from parent education to mentoring to case management and aftercare, this study focused on two core services provided by the crisis nursery: parenting education and case management. To our knowledge, no studies to date have examined how other supportive services beyond temporary respite child care, such as parenting education and case management, may be associated with subsequent foster care placement. We hypothesized that families who are more engaged with the recommended parenting education and case management services would have a lower risk of their children entering foster care.

2. Methods

2.1. Subjects

A secondary data analysis was conducted using administrative data provided by Providence House, a crisis nursery in Cleveland, Ohio. The study sample included all families (186 families and 322 children)

who received respite services from the crisis nursery between 2006 and 2009.

2.2. Procedures

An administrative data file, which includes demographics, referral sources, reason for referral, type of crisis nursery services received, and the dates of inquiry, placement and discharge, was obtained from the crisis nursery. It was found that many families had numerous contacts with the agency and many children were placed in the agency multiple times. Thus, by matching the mother's first and last name, the mother's date of birth, the child's first and last name, and the child's date of birth, we removed duplicates and built a new file that had a single record per child.

To assess the relationship between families receiving crisis nursery services and their involvement with the local public child welfare agency (DCFS, the Department of Children and Family Services), including foster care placement, the crisis nursery data on children and their mothers were matched to the Childhood Integrated Longitudinal Data (CHILD) System. The CHILD is maintained by the Center on Urban Poverty and Community Development at Case Western Reserve University as an evaluation tool for Cuyahoga County's early childhood initiative, which is called the Invest in Children (IIC) initiative. The CHILD system integrates birth records with records from many health and human services agencies to create a longitudinal record for all children who reside in Cuyahoga County from birth through age 6 and who appear in one or more of the agencies' data systems. At the time of this study, the CHILD system included all children with any DCFS involvement from July 1999 through 2010.

We used probabilistic matching to match the crisis nursery children to the CHILD. The variables used for matching included child's date of birth, child's first name, child's last name, mother's date of birth, mother's first name, mother's last name, street name, street number, city, zip code, sex, race, and social security number. Once the matching was completed, we used the CHILD system to identify which children in the crisis nursery records had subsequent foster care placement.

2.3. Measures

2.3.1. Dependent variable

The dependent variable of interest was children's foster care placement at any time after their first contact with the crisis nursery. It was assessed using the public child welfare records in the CHILD system and coded 0 = no and 1 = yes.

2.3.2. Independent variables

Focal independent variables in the present study included two types of services (case management, parenting education) provided by the crisis nursery. For case management and parenting education variables, the following categories were used to code the receipt of recommended services: 1 = participation, 2 = nonparticipation, and 3 = exception/not recommended. The participation group indicates families who received the recommended crisis nursery services (i.e., case management, parenting education), whereas the nonparticipation group indicates families who refused the recommended crisis nursery services. The exception/not recommended group indicates families who were not recommended for case management and/or parenting education. The nonparticipation group in each variable was used as the reference group for the generalized estimating equations (GEE) analyses in this study.

2.3.3. Control variables

Based on theoretical relations and previous research, several covariates were identified and tested. They included child gender, child race, child age, number of children in the household, mother's age, length of placement in the crisis nursery, reasons for referral to the crisis

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