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Timing matters: A randomized control trial of recovery coaches in foster care

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ABSTRACT

Substance use disorders are a major problem for child welfare systems. The abuse of and dependence on alcohol and drugs by parents increases the risk of child maltreatment and interferes with efforts to locate a permanent home for children in foster care. The current study focuses on an intervention designed to increase the probability of reunification for foster children associated with substance using families. We focus specific attention on the timing of the intervention, in particular the timing of comprehensive screening and access to substance abuse services in relation to the temporary custody hearing. A diverse group of children ($n = 3440$) that were placed in foster care and associated with a parent diagnosed with a substance use disorder were randomly assigned to either a control (services as usual) or experimental group (services as usual plus a recovery coach for parents). Binomial logistic regression models indicated that early access to substance use services matters (within two months of the temporary custody hearing) but only when parents were connected with a recovery coach. Additional findings indicated that the recovery coach model eliminated racial disparities in reunification. The implications of these findings are discussed.

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1. Introduction

There is a well-documented and long-standing problem of parents struggling with substance use disorders in the child welfare system. The problems associated with parental substance use disorders increase the risk of all forms of child maltreatment and interfere with the system's ability to secure residential and legal permanency and ensure the long term safety of children (Fuller and Wells, 2003; Green et al., 2007; Grella et al., 2009; Rittner and Dozier, 2000; Ryan et al., 2016). The current study focuses on permanency as a primary outcome. Specifically, the current study focuses on family reunification – which occurs when children exit the foster care system and return to their biological parents.

1.1. Child protective service procedures & judicial stages

Following a substantiation of maltreatment, child protective services (CPS) files a petition if court protection is necessary for child safety. The court process then proceeds through several judicial stages including: (a) the temporary custody hearing; (b) the adjudicatory hearing; (c) the dispositional hearing; and (d) permanency hearings (Duquette and Haralambie, 2010; see Fig. 1.) For the purposes of the current paper, it is important to note that children are not removed from the family home solely on the basis of a substance use disorder. Children

can only be legally removed from the biological family home when their safety is in jeopardy. The determination of substance use as a primary or contributing factor comes later in the process – at a point in time when assessments are completed and treatment plans developed.

Generally, within 24–72 h after an emergency removal of a child, an expedited hearing is held to review custody. The legal terminology varies across child welfare jurisdictions, but for the purpose of the current study, we will use the term “temporary custody (TC) hearing” to refer to the hearing after the child's emergency removal. The purpose of the TC hearing is to address temporary orders (such as placement, pretrial services, and visitation). Judges at the TC hearing may grant biological relatives limited or full custody of the child under certain circumstances (Duquette and Haralambie, 2010). In the meantime, the child welfare agency is obligated to develop a case plan for the family within 60 days of the child's removal (Duquette and Haralambie, 2010). This is the window of time when caseworkers and judges can order individualized assessments to better inform the treatment planning process. An adjudicatory (fact-finding) hearing is then held to respond to the allegations (i.e., whether the maltreatment charges have been proven true), and a dispositional hearing is scheduled to make a legal determination on the child care and reunification plan (Garland and Besinger, 1997; Sagatun-Edwards et al., 1995).

1.2. Importance of timeliness

Specific laws govern the completion of child protection tasks (e.g., investigation) and establish fairly strict guidelines for the timing of

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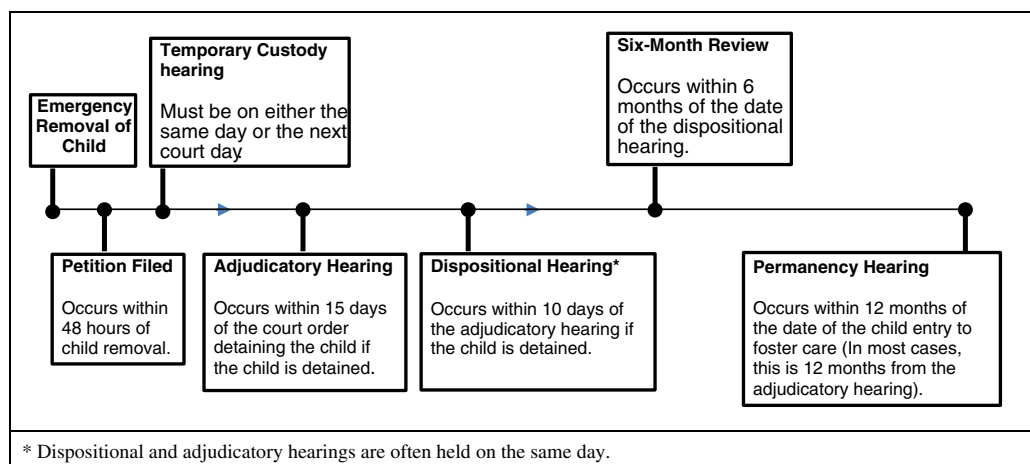


Fig. 1. Timeline of the court proceedings through the child welfare system. Adapted from Families for Children, Inc., 2008.

permanency (e.g. returned to biological family, adoption). Therefore, for legal purposes, timeliness is essential throughout court procedures and the entirety of the case planning and treatment process. However, timeliness is also critical for influencing child and family outcomes for two other reasons. First, for substance abusing individuals, clinical activities and feelings of personal progress achieved during the early phases of treatment significantly impact recovery and positive psychosocial changes (Hiller et al., 2002). Second, professionals can form strong – and perhaps negative – opinions that likely influence child and family outcomes.

1.3. Formation and influence of authority perceptions

While under State (or county) supervision, the court process plays a significant role in the journey of the child welfare system. Moreover, throughout the process, “courts can be powerful allies of CPS agencies in actualizing corrective plans for families involved in the child welfare system” (Rittner and Dozier, 2000). The judges in court often play active, pivotal roles, adjudicating dependency, helping determine placements for children, mandating services, and ordering continued supervision or even the termination of parental rights (TPR; Rittner and Dozier, 2000). Ideally, judges issue orders (i.e., substance abuse treatment, mental health counseling, parenting classes, or child placement with relatives) that reflect CPS and caseworker recommendations (Rittner and Dozier, 2000; Testa and Smith, 2009). As a result, the ultimate decisions regarding permanency and reunification for children of substance abusing parents rest with these authorities—authorities who must base their decisions upon opinions and impressions of parental fitness.

As noted throughout the child welfare literature, parental substance abuse and dependence is a strong predictor of child maltreatment. This view is shared by child welfare professionals, substance abuse counselors, judges, legal representatives, and other interested parties (Besharov, 1990; Colker, 2004; Hindley et al., 2006; Kelleher et al., 1994; Wolock and Magura, 1996). In their 2010 study, Berger, Slack, Waldfogel, and Brush noted that caseworkers' perceptions of parental substance abuse were associated with a substantial increase in the likelihood of the caseworkers perceiving the children being at risk of harm. Similarly, Murphy et al. (1991) note that 64% of the children from substance abusing families were rated as having “very severe” or “severe” risk of maltreatment by the court investigator, in contrast to 48% of the children whose parents were found to be non-substance abusers. Substance abusing families were also significantly more likely to have their children permanently removed from their care (80% vs. 58%). It is not surprising, therefore, that CPS professionals tend to target the children of parents with prior history of substance abuse as “candidates

for protective supervision” (Fuller and Wells, 2003; Rittner and Dozier, 2000). In short, while conducting investigations and supervision, CPS actions and court decisions on placements and services are significantly influenced by professionals' perceptions on the presence of parental substance abuse.

Because these perceptions of parental substance abuse and consequent risk of child maltreatment are such powerful predictors of subsequent CPS and judicial interactions and clinical outcomes, they are crucial to get right. However, perceptions of parental capabilities and the formation of first impressions are made in relatively short order (Uleman and Kressel, 2013) and often under stressful conditions with inadequate or limited information (Stepanikova, 2012; Uleman and Kressel, 2013). Unfavorable impressions can form the longer parents remain detached from service providers. Caseworkers and judges may start to view parents as disinterested in their children or uncommitted to recovery. Consequently, a timely engagement with substance abuse services is critical for families so that the perceptions of judges and caseworkers can be more positively informed and the chances for positive outcomes improved.

1.4. Early access and why it might matter

Substance abusing parents involved with child welfare systems have historically struggled with low rates of attendance at court hearings, low rates of service engagement, and subsequently low rates of family reunification (Choi and Ryan, 2007; Brook et al., 2014; Dennis et al., 2015). In response, family drug treatment courts often institute provisions for the immediate execution of bench warrants (within hours) for parents who fail to appear at any court hearings. The argument for bench warrants (or similar methods of coercion) is that early family participation helps to improve outcomes for substance abusing families. Yet, to date, there are no studies that focus on the timing of access to or engagement with substance abuse services in child welfare. The current study addresses this significant gap in the literature. Specifically we focus on the timely screening and referral of parents to recovery coach services. We are particularly interested in whether or not the timely access to services improves the probability of achieving reunification.

1.4.1. Engagement and early access.

A primary goal of substance abuse service providers is promoting client engagement and participation in treatment as an initial key step moving toward ultimate outcomes of recovery and client functioning (Broome et al., 2007; Marsh et al., 2010). The clients' willingness to engage is central from the very beginning of treatment and believed to be a predictor of both short- and long-term outcomes (Schwartz et al., 1991). Clients who are not connected with services in a timely manner

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