



The complexity of child protection recurrence: The case for a systems approach



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ABSTRACT

Objective: Research on child protection recurrence has found consistent child, family, and case characteristics associated with repeated involvement with the child protection system. Despite the considerable body of empirical research, knowledge about why recurrence occurs, and what can be done to reduce it, is limited.

Method: This paper reviews the empirical literature and analyses the approaches of prior recurrence research. Four related conceptual challenges are identified: (1) a tendency to conflate child protection recurrence with repeated child maltreatment; (2) uncertainty about how best to operationalize and measure child protection recurrence in research; (3) inconsistency between prevailing explanations for the most frequently observed patterns of recurrence; and (4) difficulty in developing coherent strategies to address child protection recurrence based on research.

Results: Addressing these challenges requires a greater consideration of the effects of decision-making in the child protection system on recurrence. This paper proposes a methodology based in systems theory and drawing on existing administrative data to examine the characteristics of the child protection system that may also produce recurrence.

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Recurrence in child protection (also termed re-victimization or recidivism) refers to repeated involvement with the child protection system over time (Deans, Thackeray, Groner, Cooper, & Minneci, 2014; Jonson-Reid, Chung, Way, & Jolley, 2010). Recurrence is considered problematic for children if it indicates chronic or repeated maltreatment, as well as their families who may experience repeated child protection intervention without necessarily receiving adequate services. It is also problematic for government, firstly because recurrence may signal problems with risk assessments and services, and secondly because repeated investigations and other interventions consume a substantial amount of public resources.

Over the last two decades, recurrence studies using administrative data have been conducted on repeated reports and notifications (Way, Chung, Jonson-Reid, & Drake, 2001; Zhang, Fuller, & Nieto, 2013), investigations (Connell, Bergeron, Katz, Saunders, & Tebes, 2007; English, Marshall, Brummel, & Orme, 1999), and substantiations (Bae, Solomon, & Gelles, 2009; Sinanan, 2011). Multivariate techniques, particularly Cox Proportional Hazards, have been employed to distil the child, family, and case characteristics associated with recurrence at the initial stages of family contact with the child protection

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system. As studies have used increasingly detailed administrative data sets drawn from multiple jurisdictions, the factors predicting recurrence have become clearer.

In spite of this, understandings of child protection recurrence remain limited. Debates about the best way to operationalize child protection recurrence for the purpose of empirical research and even how recurrence should be conceptualized have not been resolved (Fluke, Shusterman, Hollinshead, & Yuan, 2008). Relationships between child protection recurrence, child maltreatment, and the services designed to address maltreatment are not understood (Bae, Solomon, Gelles, & White et al. 2010; Fluke et al., 2008; Putnam-Hornstein, Simon, Eastman, & Magruder, 2015), and explanations for often observed correlates of child protection recurrence are piecemeal and at times contradictory. The lack of coherent theoretical explanation for child protection recurrence confounds interpretation of recurrence based measures, which are used as indicators of child safety by child protection authorities throughout the USA, Canada, and Australia (Alberta Government Department of Human Services, 2014; British Columbia Ministry of Children and Family Development, 2012; Children's Bureau of the US Department of Health and Human Services, 2015; Ontario Ministry of Children and Youth Services, 2015; Steering Committee for the Review of Government Service Provision, 2015). Measures of child protection recurrence are also used to develop and test the validity of tools used by practitioners to assess risk of harm to children (Baird & Wagner, 2000; Coohy, Johnson, Renner, & Easton, 2013; D'Andrade, Austin, & Benton, 2008; Johnson, 2011). Without a clear understanding of the relationship between recurrence, maltreatment and service provision, these tools provide ambiguous guidance for practitioners. Furthermore, if research does not articulate a causal mechanism for child protection recurrence, policy makers will continue to struggle to translate knowledge about the correlates of recurrence to strategies that effectively reduce rates of recurrence.

The purpose of this paper is to describe the underlying conceptual challenges for recurrence research and propose a way forward. Four key challenges are set out. These relate to the conflation of child protection recurrence and maltreatment, the measurement of recurrence, explanations for patterns of recurrence, and approaches to reducing recurrence. It will be argued that resolution of these challenges requires a theoretical approach that considers the complex interactions between children and the multiple decision makers implicated in patterns of recurrence. Given that current approaches have struggled to capture the inherent complexity of child protection recurrence, a new methodology based upon systems theory that draws on existing administrative data is proposed. The paper outlines implications for researchers in broadening the focus of inquiry to include decision making, implications for policy makers relating to how to allocate services, and implications for practitioners who make decisions at the frontline, often with the assistance of recurrence-based risk assessment tools.

1. Key conceptual challenges

1.1. Challenge 1: conflating child protection system contact with maltreatment

Research, policy, and risk assessments tend to conflate child protection system contact with maltreatment, assuming that a report, notification, or investigation is indicative of abuse or neglect. However, the relationship between child protection system contact and maltreatment is not straightforward. Firstly, a large proportion of child maltreatment is never reported to child protection authorities as evidenced by population based surveys (Cyr et al., 2013; Finkelhor, Ormrod, & Turner, 2005, Finkelhor, Ormrod, & Turner, 2009), which reveal rates of maltreatment are more than ten times the rates of substantiated maltreatment in those same jurisdictions

(Children's Bureau of the US Department of Health and Human Services, 2015; Public Health Agency of Canada, 2010). Secondly, in the majority of cases reported to child protection authorities, maltreatment is not substantiated, with an average substantiation rate in U.S. jurisdictions where most recurrence research takes place of 19% (Children's Bureau of the US Department of Health and Human Services, 2015). Nor can it be assumed that reporting relates directly to service need given that in 2014 in the U.S. just 39.3% of reports resulted in service delivery (Children's Bureau of the US Department of Health and Human Services, 2015). Put another way, there is under-reporting of child maltreatment and over-reporting of children who have not been maltreated or who are not eligible for services from the child protection authority. As a result, child protection reports capture a minority of cases of maltreatment, and they are mainly cases that do not involve significant intervention.

This over-inclusion of cases that do not involve serious maltreatment, and under-inclusion of cases that do involve maltreatment, result from the conditions of uncertainty and imperfect information in which decision makers operate (Mansell, 2006; Munro, 2010). Given this complexity, there is a disjunct in the relationship between measures of child protection recurrence and experiences of repeated maltreatment. This disjunction creates problems for recurrence studies, depending on the dependent variable that is used to measure recurrence. While there are different dependent variables used, for example, focusing on particular types of maltreatment (Palusci & Ondersma, 2012; Sinanan, 2011) or focusing specifically on parents (Jonson-Reid, Chung et al., 2010) or family units (DePanfilis & Zuravin, 1999; English et al., 1999), studies generally examine either subsequent reports or subsequent substantiations after an initial index event. Problems with these two recurrence measures will be addressed below.

1.2. Challenge 2: re-report or re-substantiation?

The problem associated with measures of re-substantiation is under-inclusion. It may be reasonable to assume that children subject to repeated substantiations have experienced ongoing or repeated maltreatment, but maltreatment is

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