



Developmental Screening in Pennsylvania Child Welfare Services (Ages & Stages)

Research Notes



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DEPARTMENT OF PUBLIC WELFARE

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Issue #8 (December, 2011). Caregiver Interviews: Results of the Strengths -Based Practice Inventory and Client Engagement in Child Protective Services Measure

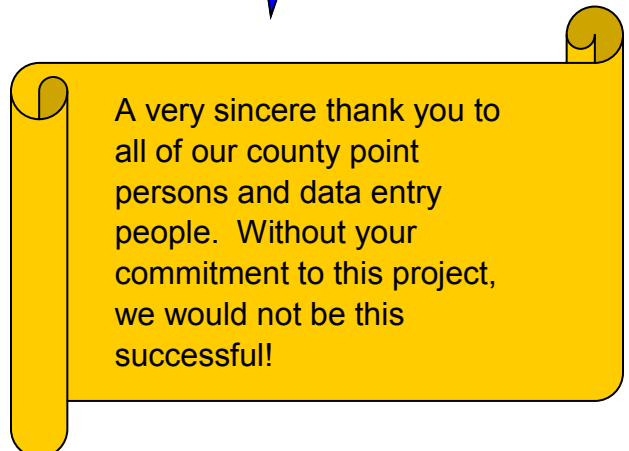
The third phase of this research study, the caregiver interviews, began in June 2010. A total of 30 counties were randomly selected to participate in this phase of the research project based on their location in the state, the amount of data they had entered into the Developmental Screening Database (ASQ Database), and what group of children were being screened. Caregivers were randomly selected from the Developmental Screening Database and asked to participate in the study by their CYS caseworkers. Interviews occur primarily in the caregivers' homes and take about an hour to an hour and a half to complete. Caregivers are compensated with a \$40 gift card for their time.

Introduction:

In September 2008, the state government implemented a policy that all children under age 3 who are substantiated for maltreatment be screened using the Ages & Stages Questionnaires® (ASQ™; Squires et al., 1999) and its Social-Emotional version (ASQ:SE™; Squires et al., 2003). The ASQ is a series of age-appropriate questionnaires designed to identify children who need further developmental evaluation. The primary objective of this screening initiative is to identify



Congratulations to Erie & Lackawanna counties for successfully completing their caregiver interview quotas!



A very sincere thank you to all of our county point persons and data entry people. Without your commitment to this project, we would not be this successful!

children with concerns and refer them to early intervention for further evaluation.

Strengths-based practices and engagement have been discussed in human services literature for more than a decade. In therapeutic settings, research has shown that discussing concrete steps to change behaviors and possible treatment barriers (with adequate solutions) increase caregivers' treatment attendance (McKay et al., 1996 & Nock & Kazdin, 2005), parental motivation, and opinions of the quality of therapy (Nock & Kazdin, 2005).

However, with the mandatory nature of child welfare involvement, strengths-based practices and client engagement may be more challenging to utilize. Bundy-Fazioli and colleagues (2009) examined the effects of power differentials between child welfare family preservation workers and caregivers. Their results support previous research that show a move in child welfare services toward shared power between parents and workers. However, both workers and parents share feelings of powerless when dealing with public child protection agencies. De Boer & Coady (2007) interviewed pairs of caregivers and caseworkers to determine the factors of a good working relationship in child welfare services. Two emergent themes were found:

- 1) Appropriate use of power (i.e., empathy, follow-through, being aware of power differential and parents' fears), and
- 2) A humanistic approach (i.e., use of small talk, personal disclosure, getting to know parent in a full context, not solely relying on intake case)

In this edition of the research note, the scores of two standardized scales developed to measure strengths-based practices and client engagement used in our caregiver interviews

will be discussed.

Research:

Research is being conducted by the University of Pittsburgh, School of Social Work to understand county, child, and family needs concerning screening and early intervention.

A total of 30 counties were selected for this portion of the study, and so far data has been collected in 28 counties. This data represents 260 caregivers across the state of Pennsylvania.

Measures:

The Strengths-Based Practice Inventory (Green et al., 2004) is a 16 item measure with four subscales (Strengths, Cultural Competency, Relationship-Based, and Staff Competence). Caregivers were read each item during the caregiver interview and asked to respond on a scale from 1 (strongly disagree) to 7 (strongly agree). Scores for the subscales and total were derived by calculating the means of the items.

The Client Engagement in Child Protective Services (Yatchmenoff, 2005) is a 19 item measure with four subscales (Buy-in, Receptivity, Working Relationship, and Mistrust). Caregivers were read each item during the caregiver interview and asked to respond on a scale from 1 (disagree strongly) to 5 (strongly agree). Scores for the subscales and total were derived by calculating the means of the items.

Results:

Strengths-Based Practice Inventory:

Overall, the results echo the positive experiences with child welfare as reported in the 6th research note (Child Welfare Education and Research Programs, 2011, Report No. 6). Table 1 contains the means and medians for the subscales and total score.

The Staff Competence Subscale had the highest mean indicating caregivers agreed that the child welfare staff were competent in their jobs, followed closely by the Strengths Subscale (acknowledging and building on caregiver’s strengths), and Cultural Competency. The only Subscale that caregivers rated on the low side was Relationship-Based. Green et al. (2004) define the Relationship-Based subscale as “the extent which staff facilitate parents’ relationships with other parents and community members.” Although important for family empowerment, this task may be difficult considering the rural nature of the majority of Pennsylvania’s counties.

Table 1: Results of the Strengths-Based Practice Inventory

	Mean	Median
Strengths Subscale	4.83	5.20
Cultural Competency Subscale	4.52	4.75
Relationship-Based Subscale	3.77	3.75
Staff Competence Subscale	5.06	5.67
Total Score	4.52	4.75

Client Engagement in Child Protective Services:

As with the results shared above for the Strengths-Based Practice Inventory, means for the subscales and total score of the Client Engagement in Child Protective Services are generally positive. Table 2 lists the means and medians for the total score and subscales. The subscale that received the highest score was Working Relationship. The items in this subscale ask about mutual respect, empathy, and goal setting. The mistrust subscale is also on the high end (3.66), which is not surprising given that half of the caregivers were involved with child welfare themselves as children and about a quarter spent time in out-of-home care (Child Welfare Education and Research Programs, 2011, Report No. 6). The third highest

subscale is Buy-In, which encompasses working with child welfare to improve the family’s future. Receptivity, the belief that there is a good reason why child welfare became involved in the family, has the lowest score, indicating a neutral rating by the caregivers.

Table 2: Results of the Client Engagement in Child Protective Services Measure

	Mean	Median
Buy-In Subscale	3.53	3.75
Receptivity Subscale	3.18	3.25
Working Relationship Subscale	3.99	4.25
Mistrust Subscale	3.66	4.00
Total Score	3.57	3.74

Summary:

Although child welfare workers are placed in a challenging position with the inherent power differential and mandatory nature of their work, the developmental screening initiative provides a unique opportunity to engage caregivers in goal setting and highlight the positive qualities of their children. The majority of caregivers reported that the caseworker conducting the screening commented on things their child was doing well (Child Welfare Education and Research Programs, 2011, Report No. 7), which may contribute to the caregivers rating the screening as a overall positive experience (Child Welfare Education and Research Programs, 2011, Report No. 6). Anecdotal reports from the interviewers in the field indicate that the screening improves caregivers’ sense of pride by showing them all the different activities their children can do. This current research note strengthens the findings of Research Note 6 (Child Welfare Education and Research Programs, 2011, Report No. 6) that caregivers are having positive experiences with both the child

welfare agency in general and their individual caseworkers.

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