



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

Research Notes



University of Pittsburgh, School of Social Work,
Child Welfare Education and Research Programs



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DEPARTMENT OF PUBLIC WELFARE

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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 Child Welfare Services (CWS) 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 children with concerns and refer them to early intervention for further evaluation.



Congratulations to
Huntingdon, Butler, &
Luzerne counties for
successfully completing
their caregiver interview
quotas!

Views from the Road: Interviewer Experiences

Seven of our interviewers were asked to respond to questions regarding their experiences in the field. Their responses are below.

How did this opportunity bring you back to your direct service days?

Chuck: "It provided a "Reality" experience; reading and doing are two very different things."

A long line of anecdotal information tells us that caregiver social support is an important component for successful parenting. In fact, when looking at the recurrence of child maltreatment, DePanfilis and Zuravin (1999) found that deficits in social support had a strong relationship with time to recurrence of maltreatment, which echoes an earlier literature review conducted by DePanfilis (1996) examining evidence that social isolation presents an increased risk of child neglect in families. More recent studies show the positive influence of social support on parenting behaviors (Ceballos & McLoyd, 2002; Green et al., 2007). Ortega (2002) posits that the size of social networks is inconsequential; instead, it is the caregivers' perceived satisfaction with existing networks that determine the quality of parenting. Informal support (places of belonging), friends, and family who convey acceptance and empathy for caregivers can significantly impact caregivers' lives (Manji et al., 2005). With an increased awareness of child risk and safety, protective factors such as social support and positive family functioning are accessible and cost-efficient means of family support. Social service organizations can provide valuable programs to at-risk families. Caregivers value the help they receive from social service organizations (Manji et al., 2005) and just attending some sort of service has been shown to reduce the recurrence of child maltreatment (DePanfilis & Zuravin, 2002). The CWS agency can play a critical role in referring caregivers to available community services. However, with the increased demands on child welfare caseworkers and decreased funding for social services, this aspect of social work may become more difficult to accomplish.

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

Renee: "I recalled what it was like to knock on someone's door and to be uncertain of what was behind it; going into someone's home and taking in your surroundings, and needing to assess your own safety needs while there."

How were you able to have a different kind of experience with child welfare clients?

Wendy: "It was so nice to be able to join with families and not have to think about how I was going to try to change them. I got to be present with them and listen deeply without having an agenda."

What have you learned from this work?

Mary Beth: "The parents of these young children want the same thing I want for my child—to be happy, healthy, and to have a good life. But achieving this goal is much harder for them due to the fact that poverty makes everything so much harder."

Chuck: "It struck me how isolated these families are; the system does a very poor job connecting caregivers to the larger community thus providing them with nurturance and support."

Kathy: "I learned that all our efforts, statewide, of moving toward a stronger, strengths-based method of working with families, are working. With a few exceptions, most of the families felt that their caseworkers cared for them and were committed to their family being successful."

What has been the most satisfying element of this work?

Oswald: "The most satisfying element had to be the apparent perception of several caregivers that I, in the role of an interviewer, was someone to whom they could express their hopes and fears."

Renee: "Meeting people and hearing some of the struggles and how a few have successfully overcome or are managing the struggles in their lives. I interviewed a few parents who were dealing with life threatening illness, and they had the most amazing positive attitudes and hope for the future."

What were you most impressed about as a result of learning more about the caregivers and their lives?

collected in 29 counties. The data represents 301 caregivers across the state of Pennsylvania.

Measures:

The Protective Factors Survey is a 20-item measure created by the FRIENDS Network in collaboration with the University of Kansas Institute for Education Research and Public Service to provide feedback to child protective service agencies for improvement and evaluation purposes (FRIENDS National Resource Center for Community Based Child Abuse Prevention, 2008). Caregivers rated each item on a scale from 1 (none/strongly disagree) to 7 (always/strongly agree). The survey has five subscales: family functioning/resiliency, social emotional support, concrete support, nurturing and attachment, and knowledge of parenting/child development. Scores for the family function/resiliency, social support, concrete support, and nurturing and attachment subscales were derived by calculating the means of the items. Since the last subscale comprises five unique items, means and medians were calculated.

Results:

In general, caregivers felt that they had strong emotional bonds with their children, as evidenced by the high rating on the Nurturing and Attachment subscale. However, their feelings toward their family’s (defined as caregiver and children; caregiver and partner; caregiver and relatives for this study) ability to cope in times of stress was on the lower end of the scale with a rating of “about half the time.” Caregivers felt comfortable in their knowledge of how to obtain services for basic needs (higher rating on concrete support subscale), but rated their availability of social support a little lower on the scale.

Table 1: Results of the Protective Factors Survey Subscales

	Mean	Median
Family Functioning/Resiliency	4.97	5.2
Nurturing and Attachment	6.61	6.75
Social Support	5.77	6.33
Concrete Support	5.81	6.33

Kathy: “The families had overwhelming positive attitudes of their lives despite the dire circumstances in which they were living, and they still had hopes and dreams for their children.”

Mary Beth: “How resourceful families are and can be and how hard they worked to try and maintain a home for themselves and for their families.”

Any lessons learned?

Wendy: “Always take a snack with you and use the restroom when one is available, because you never know when you are going to be stuck in the middle of nowhere!”

Oswald: “I was reminded of the importance of being flexible.”

Kathy: “GPS is not always accurate; always have more than one method of locating a family. Have a good, working cell phone, and be comfortable in different surroundings. In the rural areas, call and verify directions with the family.”

Coordinating a State-Wide Research Project: Tips from the Project Coordinator

- Persistence is important with contacting caregivers. Despite the outcomes of the initial call, always be willing to call back at a later time.
- Alternate forms of communication, such as text messaging and social networking sites, are a wonderful resource to utilize.
- Maintain strong working relationships with your contacts within the child welfare agencies, as they can provide you with insights on the caregivers and give you tips on how best to contact them.
- When scheduling interviews, ask the caregivers for landmarks that make their house noticeable. It will greatly help the interviewers find the residence without incident.
- Calling caregivers the day before a scheduled interview has enabled us to maintain a high completion rate.

The ratings for the five individual items that comprise the Child Development/Knowledge of Parenting subscale were all rated highly. The means and medians can be found in Table 2.

Table 2: Results of the Individual Items of Child Development/Knowledge of Parenting Subscale

	Mean	Median
Adequate Knowledge of How to Parent	5.71	6.0
Knowledge of How to Help Children Learn	6.36	7.0
Child's Misbehavior is Unintentional	5.84	7.0
Parental Praise for Child's Good Behavior	6.65	7.0
Parental Control when Disciplining Child	6.66	7.0

Summary:

The results from the Protective Factors Scale, along with anecdotal information provided by the research interviewers, show that the caregivers in this study have a small amount of social support. Since caregivers reported feelings of isolation to the research interviewers, the study team has been providing caregivers with brochures for Families & Communities United, which brings families and agency representatives together to discuss how to best serve families in various systems across Pennsylvania. More information can be obtained by visiting the group's website at <http://www.fcu.pitt.edu/>. With the research suggesting that social support is an important protective factor against child maltreatment, development of social networks and increasing caregivers' satisfaction with their social contacts may be a viable resource in reducing maltreatment and recurrences.

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