Completed Williams Family Risk Assessment Summary

RISK/SEVERITY ASSESSMENT FORM

D. Note specific evidence supporting all High Risk and Moderate Risk conclusions and justify all "Unable to Assess" ratings. You must provide conclusions regarding Overall Severity/Risk based on the interaction of all factors. Attach extra pages if needed.

The Williams children (Susan, age 7), (James, age 6), and (David, age 2) are living in a family environment that poses an **overall severity of moderate risk**. Although the current injuries sustained by James are minor in nature, there is a history of James being physically disciplined and of the mother (Mary Williams) using an implement (a belt) in the disciplining process. In addition, there appears to be a history of the two oldest children caring for themselves with regard to school attendance and preparing for school in the morning. The two oldest children (Susan and James) appear to have experienced emotional harm as a result of past and current discipline methods used in the home. This is evidenced in the behaviors exhibited by Susan and James as they attempt to interact with other children in an aggressive fashion. The "X" rating for David regarding emotional harm does not appear to impact the severity rating, as no evidence exists to indicate that David has been abused or neglected to the point that he experienced any emotional harm. In addition, David's young age prevents a thorough assessment of this factor at this time.

The Williams family's **overall risk is in the moderate range**. There is a prior history that indicates that the mother (Mary) is capable of disciplining her children (specifically Susan and James) to the point of serious injury – per a recently-indicated report of abuse involving her son, James and past-indicated report of Mary abusing her daughter, Susan. Although Susan reports that her mother has not hit Susan since the last incident; the children frequently care for themselves and are often hungry, as evidenced by statements made by the children and personnel at the school the children attend (*i.e.*, their teachers and school nurse). This history when combined with the young ages of the children makes them vulnerable to further abuse/neglect and supports the high rating in the Vulnerability factor.

Mary Williams (Biological Mother - BM) appears to be the sole caretaker of the children even though Frank (Biological Father - BF) lives in the home. BF (per a statement BF made) subscribes to a strict stereotypical division of labor within the home – specifically believing that the mother should be the sole caretaker and the father should have no responsibility for child care. This attitude (per BM) results in BM being overwhelmed with child care responsibilities, particularly in her attempts to control James. BM also has Susan assuming some of the parenting responsibilities for David (as evidenced in statements made by Susan and as seen in the home during a recent home visit) because, as BM stated, BM feels overwhelmed. Based on recent discussions with BM, she appears to have a limited knowledge of disciplining measures and relies on the use of a belt to control James.

Completed Williams Family Risk Assessment Summary, (cont'd)

Although there is no evidence that suggests that BF has been abusive to his children, BF stated that he believes in the use of physical discipline. BF's overall parenting ability could not be assessed due to his reluctance to meet with the assigned worker. BF's reluctance also resulted in the inability to rate his current functioning or his history of abuse/neglect as a parent or a child. BF's relationship with the children may be more like that of an absent parent in many respects. BF drinks alcohol on a daily basis; however, there is no evidence that suggests BF's drinking raises the risk to the children at this point.

BM was, at first, deceptive in her responses regarding ever hitting James; however, BM readily admitted to having hit James once confronted with statements made by James and Susan. BM allowed access to her home and children. In addition, BM participated in the interview process. Although the BF did not interact, he also did not prohibit intervention with the family. BM has not readily recognized concerns within the family; however, BM acknowledged that her method of disciplining her children needs to change. This acknowledgement is supported by the fact that BM stopped using physical discipline with Susan after the last agency involvement.

The relationship between the BM and BF is of concern because (as offered by James and Susan) BF and BM routinely fight and yell at one another. In addition, James and Susan offered that they have seen BF physically push BM "on several occasions". There is no evidence that the interaction between the two has progressed to anything more violent. The absence of supports for the family shows how isolated this family appears to be. Susan and James do attend school, which facilitates their day-to-day care to be monitored. Susan, James, and David have had attendance and tardiness issues. Specifically, all three children have been absent 10-days to-date.

There are stressors within the family – particularly financial. The family of five lives in a two-bedroom apartment; however, there does not appear to be any health hazards or other concerns that would pose a risk to the children. The family (per BM) has moved frequently.

The children appear to be safe in the home at this time, based on BM's history of being able to stop using physical discipline during agency involvement and the fact that the none of the children express fear of BM or BF.

The biggest concern within the family appears to be BM's current state of being overwhelmed with child care and her past reliance on physical discipline when stressed. The children's aggressive behaviors (particularly James' fighting behavior at school, which appears to mirror the interaction of the adults in the home) needs to be addressed. Addressing James' aggressive behaviors would help to reduce the BM's need to rely on physically disciplining the children (specifically Susan and James at this point) when they misbehave, while attempting to teach BM more effective disciplining methods. The biggest obstacle to reducing the verbal and physical abuse between the BF and BM is the BF's unwillingness to be involved with the agency.

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Another concern within the home is BM assuming complete responsibility for
child care. There may be no way to change the BF's strict belief regarding roles within
the family; however, the agency could reduce BM's responsibilities for caring for the
children by providing day care for David and other supportive services for the older
children. Perhaps, after building a stronger relationship with BM, and hopefully with BF,
additional family supports may be identified.