

# PRACTICE NOTES

For North Carolina's Child Welfare Workers

From the NC Division of Social Services and the Family and Children's Resource Program

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This publication for child welfare professionals is produced by the North Carolina Division of Social Services and the Family and Children's Resource Program, part of the Jordan Institute for Families within the School of Social Work at the University of North Carolina at Chapel Hill.

*In summarizing research, we try to give you new ideas for refining your practice. However, this publication is not intended to replace child welfare training, regular supervision, or peer consultation—only to enhance them.*

**Let us hear from you!**

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## Preventing Child Maltreatment

Have you heard about the Adverse Childhood Experiences (or ACEs) study? The study looked at three categories of negative childhood experience:

- **Abuse.** This category included emotional, physical, and sexual abuse;
- **Neglect.** This category included physical and emotional neglect; and
- **Family dysfunction.** This category included growing up in a household where there was substance abuse, mental illness, violent treatment of a mother or stepmother, parental separation/divorce, or where a member of the household went to prison.

In the study over 17,000 people receiving physical exams completed confidential surveys about their childhood experiences and current health status and behaviors. This information was combined with their physical exam results to form the study's findings. Study participants were given a score between 0 and 10 based on how many of ACEs they said they experienced.

**Findings**

This study made it clear that what happens when we are young can have a lifelong impact on our health and the quality of our lives.

The ACE study revealed dramatic links between adverse childhood experiences and risky behavior, psychological issues, serious illness, and life expectancy. Indeed, people with six or more ACEs died nearly 20 years earlier on average than those without ACEs.

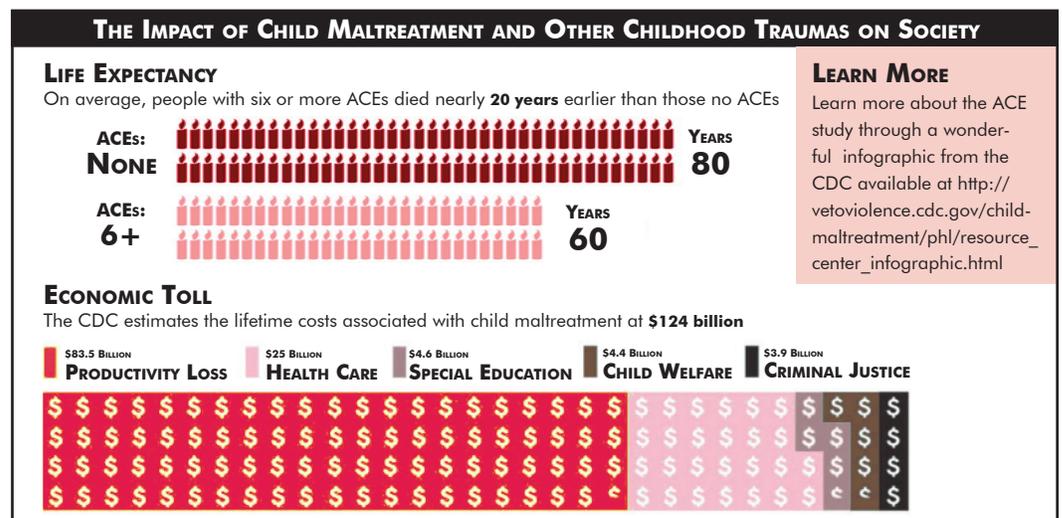
Child trauma affects all of us. Consider the financial impact on society: the CDC estimates the lifetime costs associated with child maltreatment at \$124 billion.

**Focusing on Prevention**

Past issues of this publication have talked about trauma and how important it is that our work with child welfare-involved families be trauma-informed. While this is essential, this issue of *Practice Notes* will focus on what the NC Division of Social Services is doing and what you and your agency can do to *prevent* child trauma from happening in the first place. ♦



**Abuse or neglect in childhood can have a lifelong impact on our health and the quality of our lives.**



Above figures and description of ACE study adapted from CDC, 2013

# Preventing Maltreatment and Promoting Well-Being through the Strengthening Families Protective Factors Framework

Note: the Strengthening Families approach described in this article is distinct from the evidence-based, popular curriculum called “Strengthening Families Program.” (To learn more about the curriculum, go to <http://www.strengtheningfamiliesprogram.org/>)

North Carolina has long been committed to preventing child maltreatment. The grants provided by the NC Division of Social Services through its Community-Based Programs are a prime example of this. Through its funding to local partners, every year the Division helps provide family preservation services, family support programs, family violence prevention, and other services across the state. We’re serious about prevention.

To further deepen this commitment, the Division of Social Services is now taking steps to integrate the Strengthening Families Protective Factors Framework into our state’s child welfare system.

## The Framework

The Protective Factors Framework is an approach to increasing family stability, enhancing child development, and reducing child abuse and neglect. Although it is research-based (Horton, 2003), the framework is not a narrowly defined practice or prescriptive model program. Rather, it is a comprehensive approach that focuses on building families’ protective factors. Like family-centered social work practice, the Protective Factors Framework is flexible, allowing agencies to apply it in a way that fits naturally with their work with children and families.

## Protective Factors

Research has found that to ensure the well-being of children and families, interventions must do two things: reduce risk factors and promote protective factors.

Risk factors are something we know a lot about. Spurred on by research findings, we have incorporated a focus on identifying and responding to social isolation, family violence, and other risk factors for child maltreatment into child welfare policy and the tools we use in child protective services.

Child welfare professionals are less accustomed to thinking about *protective factors*—conditions or attributes of individuals, families, communities, or the larger society that reduce risks, build family capacity, and foster resilience (USDHHS, 2003).

The Framework focuses on the five protective factors described in the box below. Research tells us that when these factors are well established in a family, maltreatment is less likely. Research also shows that these protective factors are “promotive,” meaning they build strengths and a family environment that foster optimal child and

**Families thrive when protective factors are robust in their lives and communities.**

youth development (CSSP, 2012a).

## A National Effort

The Protective Factors Framework is part of Strengthening Families, an approach more than 30 states are using to shift policy, funding, and training to help programs build protective factors in the children and families they serve. Many states are also using Strengthening Families to integrate prevention strategies, focus on families in the child welfare system, and engage parents and communities.

The Center for the Study of Social Policy (CSSP) coordinates *continued next page*

## The Protective Factors Framework

- 1. PARENTAL RESILIENCE.** No one can eliminate stress from parenting, but a parent’s capacity for resilience can affect how a parent deals with stress. Resilience is the ability to manage and bounce back from all types of challenges that emerge in every family’s life. It means finding ways to solve problems, building and sustaining trusting relationships including relationships with your own child, and knowing how to seek help when necessary.
- 2. SOCIAL CONNECTIONS.** Friends, family members, neighbors and community members provide emotional support, help solve problems, offer parenting advice and give concrete assistance to parents. Networks of support are essential to parents and also offer opportunities for people to “give back,” an important part of self-esteem as well as a benefit for the community. Isolated families may need extra help in reaching out to build positive relationships.
- 3. CONCRETE SUPPORT IN TIMES OF NEED.** Meeting basic economic needs like food, shelter, clothing and health care is essential for families to thrive. Likewise, when families encounter a crisis such as domestic violence, mental illness or substance abuse, adequate services and supports need to be in place to provide stability, treatment and help for family members to get through the crisis.
- 4. KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT.** Accurate information about child development and appropriate expectations for children’s behavior at every age help parents see their children and youth in a positive light and promote their healthy development. Information can come from many sources, including family members as well as parent education classes and surfing the internet. Studies show information is most effective when it comes at the precise time parents need it to understand their own children. Parents who experienced harsh discipline or other negative childhood experiences may need extra help to change the parenting patterns they learned as children.
- 5. SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN.** A child or youth’s ability to interact positively with others, self-regulate their behavior and effectively communicate their feelings has a positive impact on their relationships with their family, other adults, and peers. Challenging behaviors or delayed development create extra stress for families, so early identification and assistance for both parents and children can head off negative results and keep development on track.

Reprinted from the Center for the Study of Social Policy, 2012a

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the Strengthening Families approach nationally. CSSP is working with 12+ national partner organizations to realize a vision in which communities, families, institutions, service systems and organizations:

- Focus on building protective and promotive factors to reduce risk and create optimal outcomes for all children, youth, and families,
- Recognize and support parents as decision-makers and leaders,
- Value the culture and unique assets of each family, and
- Are mutually responsible for better outcomes for children, youth and families (CSSP, 2012b).

### North Carolina's Initiative

North Carolina is one of CSSP's national partners. Between now and June 30, 2016, CSSP will work with the NC Division of Social Services as it seeks to use the Strengthening Families approach and the Protective Factors as an overarching framework for child welfare policy and practice with other state and local agencies and community stakeholders, including parents. The goals of the Division's partnership with CSSP are to:

- 1) look for ways to integrate the protective factors across child maltreatment prevention fund sources,
- 2) analyze the Division's logic models and outcomes and develop a set of outcomes and indicators that broadly measure the impact of the Division's efforts,
- 3) increase prevention services grantees' capacity to design and deliver strategies consistent with the protective factors approach,
- 4) talk with stakeholders about developing a unified approach to multi-system prevention work in NC, and
- 5) embed protective factors as a

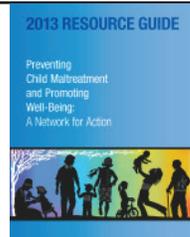
## Resources for Learning More

### ABOUT NC'S INITIATIVE

Contact Kristin O'Connor, Child Welfare Services Section, NC Division of Social Services (919/334-1148; kristin.oconnor@dhhs.nc.gov)

### ABOUT THE STRENGTHENING FAMILIES APPROACH

- Visit [www.strengtheningfamilies.net](http://www.strengtheningfamilies.net)
- Read the *Strengthening Families and Communities: 2013 Resource Guide*. Focuses on the five protective factors and provides tools and strategies to integrate the factors into existing programs and systems. <https://www.childwelfare.gov/pubs/guide2013/guide.pdf>
- Online curriculum. A series of online training courses to support implementation of the Strengthening Families Framework in multiple settings <http://ct-falliance.org/onlinetraining.htm>



part of NC's child welfare practice model, helping practitioners and other stakeholders develop an understanding of what it means to have a dual focus on optimal child development (well-being) and family strengthening (safety and permanency).

Over the next three years our state's Strengthening Families efforts will include (CSSP, 2012c):

**POLICY/SYSTEMS CHANGE.** Making protective factors part of NC's approach to child welfare services will help us unify and build on what we're doing across the child welfare continuum—from primary prevention through adoption services. In the long run, this will help us prevent child abuse and neglect before they occur and promote the well-being of children served by the child welfare system.

Although policy and systems change will begin with the Division's Child Welfare Services Section, the work will involve collaboration with many other state and local agencies and community stakeholders.

**PARENT PARTNERSHIP.** The Division will be looking for opportunities where parent leaders can take on leadership roles and provide direction to help us strengthen child welfare services, practices, and policies to improve outcomes for children and families.

**EVALUATION.** As part of its overall commitment to continuous quality improvement, the Division will develop a plan for assessing the success and impact of its efforts to integrate the Strengthening Families approach throughout North Carolina.

### Stay Tuned

North Carolina's Strengthening Families initiative is already underway. Over time the strategic efforts that have begun in the Division of Social Services will radiate to other departmental and community programs, bringing benefits to professionals and families across the state. ♦

### HOW WILL THIS AFFECT ME?

You may be wondering: *How will this initiative affect my work with families?*

According to people who know, Strengthening Families has a positive impact on child welfare work. During the Division's March 2013 MRS call, staff from NC county DSS agencies who are already using the approach reported that rather than asking you to do something new, Strengthening Families helps you do a better job of what you are already doing—partnering with families to make them safer, stronger, and healthier.

By explicitly identifying the building of social connections, parental resilience, etc. as goals for our interactions with families, the Strengthening Families framework can help us make our efforts to support families more intentional and effective.

# North Carolina's Community Response Program

## Piloting a Prevention-Focused "Third Track" for MRS

North Carolina is exploring ways to make its child protective services programs more effective and prevention focused. We are building on our successful alternative response system for Child Protective Services, which in our state is called Multiple Response System (MRS).

MRS began in 2001, when the NC Division of Social Services developed and piloted an approach that gave county DSS agencies the flexibility to respond to CPS reports either with the traditional investigative assessment or the "family assessment." In a family assessment the agency's approach to the family is less adversarial. Rather than focus on investigating and assigning blame for a specific instance of maltreatment, the agency assesses the family as a whole and offers to support them and build on their strengths.

Duke University's Center for Child and Family Policy rigorously evaluated MRS. Findings showed a positive effect on child safety, prompting the legislature to twice approve expansion of the initiative. By 2006, all 100 North Carolina counties had begun implementing MRS (Lawrence & Snyder, 2009). Duke's evaluation showed that children were as safe or safer than they were with just the traditional CPS approach. In addition, counties implementing MRS had a "higher proportion of on-time case decisions as compared to the control counties" (Lawrence & Snyder, 2009).

### Strengthening "Alternative Response"

A number of states are trying a new prevention approach with families who are experiencing difficulties and have come to the attention of a child welfare agency, but whose situations don't warrant formal involvement with child protective services. For many of these families, an additional level of support early on can prevent an escalation of dif-

**Community Response fills a gap in the continuum of prevention programming by reaching out to families who need help but don't require Child Protective Services.**

iculties and decrease the likelihood of future CPS involvement.

Under the new approach, a state expands its differential or multiple response system to include a "Community Response" track in addition to the family assessment and investigative assessment tracks. The Community Response path . . . assumes there will be no further involvement

of (child welfare services) in the case unless the circumstances prove to be different than what was known at intake, or there is a change in circumstance. This path is selected when child maltreatment is not a concern, the child is deemed to be safe, and there are either no or low risks of harm to the child. However, it is clear the family is experiencing problems or stressors, which could be addressed by community services (Child Welfare Services Stakeholders Group, 2003).

The Community Response path typically includes a family's voluntary participation and partnership with the organization, case management services that address family-identified needs, and use of evidence-based programs and a strong network of community resources.

### North Carolina's Pilot Program

Seeing the success that other states have had with Community Response, North Carolina has begun to pilot this approach. Over a three-year period that will run from July 1, 2012 to June 30, 2015, the Community Response is being piloted with four agencies: Buncombe County DSS, Catawba County DSS, Easter Seals UCP, and Orange County Partnership for Young Children.

The Community Response programs in these pilot sites are intended to fill a gap in the continuum of child maltreatment prevention programming by reaching out to families who have been reported to CPS, but whose cases have been:

- Screened out at CPS intake, OR
- Unsubstantiated, OR
- Closed with a CPS decision of "services recommended," OR
- Closed with a CPS decision of "no services needed."

In North Carolina Community Response services are always voluntary and offered at no charge to families.

Our state's Community Response Program is overseen by the NC Division of Social Services and funded by approximately \$1.15 million from the NC Children's Trust Fund.

### Program Goals

North Carolina's Community Response Program aims to support cross-agency collaborative, commu- *continued next page*

FUNDED AGENCY	COUNTY SERVED	EVIDENCE-BASED PRACTICE MODEL(S)
Buncombe County DSS	Buncombe	Nurturing Parenting; Circle of Parents
Catawba County DSS	Catawba	Early Head Start; Parents as Teachers
Easter Seals UCP	Craven	Circle of Parents
Orange County Partnership for Young Children	Orange	Early Head Start; Child-Parent Psychotherapy; Parent-Child Interaction Therapy; Strengthening Families; The Incredible Years

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nity-based initiatives to provide outreach, support, and services to individuals and families identified as being at risk of compromised health and safety to eliminate or reduce those risks by promoting protective factors that strengthen and support families. The program's pilot agencies are required to:

1. Target families with children ages birth to five.
2. Demonstrate collaborative relationships with community partners in the delivery of services and community child maltreatment prevention strategies.
3. Provide services based on the Principles of Family Support Practice.
4. Demonstrate a commitment to meaningful parent and family engagement.
5. Ensure families have access to supports and services to meet their basic needs, including economic support, benefits access, employment coaching, and financial literacy programming.
6. Provide and/or make referrals to a service or program that demonstrates an acceptable level of evidence-based or evidence-informed practice.

### Different Roads to the Same Goal

Each agency participating in North Carolina's pilot of Community Response has tailored the initiative to meet the needs of families it serves and to take advantage of unique community partnerships. That fact was brought out on a recent statewide MRS/System of Care teleconference. The three pilot sites participating in the call shared highlights of their work, which included the following:

**Different Ways of Operating.** Community Response protocols differ in the pilot sites: some agencies include screen-outs from CPS intake in determining which families to contact, while others do not.

One agency uses assessment tools, such as a parent resiliency scale and child development questionnaire. Some agencies have program staff based at the social services agency, while others are based in the community.

**Different Evidence-Based Programs.** As shown in the table on the preceding page, the selected evidence-based practice models used by North Carolina's Community Response pilot sites vary.

**Diverse Challenges.** Occasionally, families have experienced confusion about the roles of different agencies working with them, because of prior contact or current services with other organizations. Another challenge for one



**Integrating prevention into CPS intake is good for families and for workers.**

site was getting the referral process institutionalized— staff turnover throughout the agency necessitated that worker training/retraining be ongoing. One organization had difficulty getting a parenting group formalized. In another, criteria for participation in a play-and-learn group inadvertently screened some parents out.

Making the initiatives successful requires continual review of data, valuing and prioritizing opportunities for open communication between collaborating partners, being open to feedback from families, and creativity in overcoming challenges.

**Notable Strengths.** Program participation is voluntary and acceptance rates are higher than expected. At two of the sites, at least 50% of

families contacted by staff have accepted the services. Program staff work with parents around the family's schedule, and have the flexibility to meet outside of typical workday hours.

### Outcomes

This program is in its early stages. With two more years left in the grant it's too soon for the sites to draw conclusions about outcomes. When asked about families' response to the initiative, program sites repeated what they had heard from families: that the partnership and support has prevented evictions, helped parents gain stable employment, and helped them respond better to their children's needs.

As we seek to learn what works in prevention we can look to these sites and to others across the nation, such as California and Wisconsin, which have piloted a Community Response track for a number of years.

Integrating prevention into CPS intake services is good for families and for workers. Families find in the agency a partner committed to helping them overcome struggles and ensuring the safety and well-being of their children. Workers benefit, too, from having options to help families who they know have difficulties. The Community Response may also save money in the long run, if the modest dollars spent on prevention services reduce the need for costly foster care later on.

Striving for better outcomes for families makes prevention a priority. ♦

# Preventing Child Maltreatment through Parenting Programs

Parent education programs are one of the most commonly used interventions in child welfare to prevent and or reduce recurrence of child maltreatment. In fact, an estimated 800,000 U.S. families participate in voluntary or court-mandated parenting programs each year (Barth, 2005). Given the widespread use of this approach it makes sense for us to ask: does it work? Is there evidence that parenting programs are an effective prevention strategy?

## What the Research Says

Many analyses of a wide variety of parenting programs have come to the broad conclusion that parenting programs **do** make a difference in both parent and child behavior. However, the evidence about parenting programs' ability to prevent future maltreatment is less clear (Lundahl et al., 2006; Johnson et al., 2008).

We also know that many variables affect a program's effectiveness. Consider, for example, the characteristics of the parents involved. Not all parent programs were designed or evaluated based on a child welfare population, and therefore may not have the same effectiveness when applied in a child welfare setting (Barth, 2005).

Another important variable is the length and type of the program's intervention. Some have an individualized, in-home component; others are group-based. Some have long-term follow up; others are time-limited (MacLeod & Nelson, 1999).

## Traits of Effective Parenting Programs

Given the wide array of parenting programs to choose from, how can agencies determine whether the parenting programs in their community are worthy of referral? One way is to look for one or more of the following characteristics, which are commonly found in effective programs.

**Proactive.** Interventions designed to be implemented before problems have occurred have been shown to be more effective over time than those implemented after problems have been identified (Honig & Morin, 2001; Bresten & Eyberg 1998, cited in Barth & Kreel, 2012).

**Addressing Multiple Parenting Domains.** Programs that address more than one domain of effective parenting have a greater impact. Examples of domains of effective parenting include: cognitive processing skills, impulse control, social skills, and stress management. Few parenting programs target multiple parenting domains; the majority focus on only one (Johnson et al., 2008).

**In-Home Component with In-the-Moment Feedback.** Parenting programs delivered in the home as part of a more comprehensive home visiting program have the best out-

## GOOD INSTRUCTORS ARE ESSENTIAL

*"Thirty to eighty percent of families most at risk for child maltreatment actually complete prevention programs. . . . Even effective programs have limited impact if they are unable to reach, engage, and retain prospective participants."*

—Source: Centers for Disease Control, 2004

The success of a parenting program depends a great deal on its ability to engage and retain parents. This is a point Dr. Karen DeBord, an Associate Professor at NC State University who has written extensively about parenting education emphasized in a 2004 interview with the NC Division of Social Services publication *Training Matters*.

"When parents come to that first mandated class they are often so angry," DeBord said. "They are dealing not only with the humiliation and stigma of being made to come to a class on parenting, but sometimes with the pain of having lost their child." These feelings often cloud parents' abilities to learn. To save face, often all they will want to do is go through the motions, get their certificate, and get out.

To get past this obstacle, agencies should look for an instructor who can recognize what parents are feeling, engage them, and build their trust.

DeBord also said that one of the best ways to overcome parents' resistance is to begin each course by asking parents what they want to learn about. Even if you have a curriculum you want to offer, it is best to begin by soliciting input from the parents. "The expert model," DeBord said, "creates barriers."

comes (Johnson et al., 2008). In addition, there is evidence that coaching "in the moment"—that is, providing direct support and feedback to a parent with their child—supports more rapid gains in new parenting skills (Shanley, 2010).

**Individual and Group Delivery.** Attitudes and beliefs about parenting are important but difficult to change. However, a combination of group and individual delivery of parenting programs seems to have a stronger impact on attitudes and beliefs than any single delivery method. The individual component allows parents to explore their own beliefs, and the group component helps to challenge parents through peer relationships (Lundhal et al., 2006).

**Empowerment-Focused.** Comparisons of proactive and reactive parenting programs found that proactive programs use a more strengths-based approach, encouraging participant involvement in shaping goals and solving problems. Evidence suggests that programs using this approach have a larger impact on outcomes than more prescriptive models (MacLeod & Nelson, 1999).

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## What You Can Do

What can child welfare workers do to ensure parenting programs are effective?

- **Assess Before You Refer.** Agencies should make sure that the parenting programs they refer to have the traits that effective programs commonly possess. Your assessment should cover program objectives, content, teaching methods, and plan for implementation and evaluation (Johnson et al., 2008).
- **Fill in the Gaps.** Ensure parenting domains not addressed by the program are addressed in other ways. For example, stress management is a domain of effective parenting. Helping the parent reduce stress through financial assistance and referrals to community resources can support better outcomes in parent training (MacLeod & Nelson, 1999).
- **Support Transfer of Learning.** When families participate in parenting programs, spend time in their home and give feedback “in the moment” to support use of new skills (Shanley, 2010).
- **Coach Families.** By using a coaching approach with families you will empower them to find their own solutions and encourage them to try new strategies. Coaching has been shown to be effective in supporting individuals in gaining new skills (Wales, 2003). ♦

## Reflection on the Limits of Parenting Education

As we consider which parenting programs to use, it can be helpful to reflect on the following passage from Carter (1997), which reminds us that to make a real difference, parenting education must be part of a multi-level, systemic effort to improve outcomes for vulnerable children and their families.

**Parenting programs can boost a child's chances in life, but they can't assure success.**

Discussions of parenting and family support tend to lead observers to assume that if we can somehow “deal with these parents,” the long and troubling list of societal problems will disappear as a consequence. Parenting education will not solve the ravages of poverty, racism, or a demeaning welfare system.

And one must be cautious about the complexity of causes that underlie issues like violence, substance abuse, and delinquency. At best, parenting education may offer a struggling parent the support needed to feel more capable and confident, which in turn can strengthen the ability to offer the gifts of love, health, and heritage to a child. This is the process through which that child can have a chance for success in life, but it does not assure it.

Parenting education cannot change the world in which that child grows up; it can only strengthen his or her ability to survive and succeed in it.

## Evidence-Based Parenting Programs

The California Evidence-Based Clearinghouse for Child Welfare (2012) rated these parent training programs as “well-supported by evidence”:

- **The Incredible Years.** A series of three separate curricula for parents, teachers, and children, ICY is designed to promote emotional and social competence and to prevent, reduce, and treat behavior and emotional problems in young children. [www.incredibleyears.com/](http://www.incredibleyears.com/)
- **Parent Child Interaction Therapy.** For families with young children experiencing behavioral and emotional problems. Therapists coach parents during interactions with the child to strengthen the parent-child bond; decrease harsh/ineffective discipline; improve child social skills/cooperation; and reduce negative/maladaptive child behaviors. <http://www.pcit.org/>
- **Triple P Parenting.** Rated as “well-supported by evidence” but currently under review; it will be re-rated soon. [www.triplep.net/](http://www.triplep.net/)

The following programs received CEBC's more modest rating of “supported by evidence”:

- **123 Magic: Effective Discipline for Children 2-12.** Can be used with average or special needs children. Divides parenting responsibilities into three tasks: controlling negative behavior, encouraging good behavior, and strengthening the child-parent relationship. [www.123magic.com/](http://www.123magic.com/)
- **SafeCare.** In-home parenting program that provides direct skill training to parents in child behavior management and planned activities training, home safety training, and child health care skills to prevent child maltreatment. <http://publichealth.gsu.edu/968.html>

## Parenting Programs Supported by Prevent Child Abuse-NC

- **Incredible Years** (Pre-School BASIC Parent Program and School-Age BASIC program)
- **Strengthening Families Program** (*curriculum*). An evidence-based life skills training program for families with children aged 6 to 11. Improves parenting skills, enhances family relationships, and increases children's social and life skills. 14 weekly, two-hour sessions. Each session includes three groups: a parents' group, a children's group, and a family group.
- **Circle of Parents.** Offers anyone in a parenting role a chance to participate in weekly group meetings with other parents to exchange ideas, share information, develop and practice new parenting skills, learn about community resources, and give and receive support. Groups are parent-led with the support of a trained group facilitator and are conducted in a confidential, non-judgmental manner (CBEC, 2012).

To learn more about these courses or how PCA-NC supports them, visit [www.preventchildabusenc.org](http://www.preventchildabusenc.org).

# Preventing Maltreatment in Foster Care

When the state takes one of the most intrusive steps it can take and removes children from their parents, at the very least we must keep the children safe. That’s why we set the bar so high for foster parents and kin caregivers. As a foster care alum put it, “Foster parents need to be a cut above.”

Most are. Yet despite our best efforts, maltreatment in foster care does occur. Though it is rare, we all find this kind of maltreatment particularly offensive and outrageous, since safety is the reason kids are in foster care in the first place.

## North Carolina’s Performance

Reducing the incidence of child abuse and neglect in foster care is a high priority for North Carolina. While data indicates that the vast majority of children in foster care are safe in their placements, we can do better.

**MALTREATMENT IN FOSTER CARE IN NC, 2008-11**

	2008	2009	2010	2011
<b>Children in Foster Care</b>	15,661	14,615	13,858	13,537
<b>% NOT Maltreated While in Care</b>	99.34%	99.5%	99.65%	99.53%
<b>% Maltreated While in Care</b>	0.66% n=103	0.50% n=73	0.35% n=49	0.47% n=64

Source: USDHHS, 2013

As this table illustrates, North Carolina showed a significant improvement in the rate of maltreatment in foster care between 2008 and 2010. Viewed from a national perspective, our performance in this area was about average (USDHHS, 2011). However, we did see a concerning uptick in 2011. Though the rise was slight, any movement in the wrong direction is cause for concern.

So what can we do to re-focus our efforts to reduce—and prevent—maltreatment of children in foster care?

## Screening Before Licensing

Prevention guidelines issued by the Child Welfare League of America (2003) lists “careful selection, preparation and training of foster parents” as a top priority. It is critical to realistically and candidly explore with all prospective foster parents the challenges of fostering, their motivations for fostering, their personal and family histories, and their capacity to meet the needs of children in foster care.

In North Carolina we use a mutual selection process where both the child-placing agency and the prospective family seek to learn enough to make a sound judgment about the family’s suitability for licensing.

Assessing applicants isn’t always easy. For some social workers, it can be difficult to assess whether an identified need is something to work on over time with a family, or whether it’s a reason not to license them. For others, it is hard to know the words to use to turn down an applicant, especially in an era when people are quick to litigate or broadcast hard feelings over social media.

To address these challenges, child-placing agencies are encouraged to have more than one staff person meet with

each applicant, and to conduct team staffings of all licensing applications. Both practices help ensure a fair, well-rounded assessment and a thoughtful screening decision in keeping with the agency’s values and resources. The team approach also promotes early and consistent discussion of what the agency needs to do to support, train, and develop each foster family, laying the groundwork for comprehensive professional development plans.

## Reducing Risk Factors

The NC Division of Social Services has stepped up efforts to ensure agencies adequately screen potential resource families. In communications with all county DSS and private child-placing agencies, Division staff have shared recent data on maltreatment in foster care and revocations of foster home licenses to emphasize the importance of careful selection of resource parents.

According to the Division, most recent revocations of foster parent licenses have been related to substantiations for neglect—specifically, for the use of corporal punishment (FCRP, 2011). Factors precipitating the use of corporal punishment in these instances included “stress due to loss of employment” and family history—the foster parents grew up in households where corporal punishment was the primary means of punishment (FCRP, 2011).

Based on their review of the literature, Holder and colleagues (2003) suggest that the “nature and characteristics of a maltreating kinship or foster parent may not be pre-existing traits but may evolve or be stimulated into action as a result of the substitute care provider’s experience.” It may be that a variety of factors are at play, such as inadequate preparation for the extent and types of child behaviors. A shortage of foster parents may also lead agencies to ask families to care for more children than they can handle (Grayson, 1988).

Workers and supervisors need to know on a continuous basis how families are faring. Ample support is essential.

## Strengthening Protective Factors

We can prevent maltreatment in foster care not only by reducing risk factors, but by strengthening protective factors that keep children safe. As the table on the next page illustrates, the Strengthening Families Protective Factors framework (CSSP, n.d.) is a lens that can help understand and support resource families. Whenever we can help a family in any of these areas, we increase the overall well-being of the family and the chances the child will have a better placement experience.

## Summary

Providing foster care can be tough. It’s not for everyone, and it takes both the agency and the family working in partnership to make the placement successful. Those who welcome the opportunity need support. It’s up to social workers to open the door for families to celebrate the strengths of the placement, to share their concerns, and to know they are not alone in the hardships they face. ♦

# Supporting Resource Families Using the Strengthening Families Approach

Protective Factors*	Ways to Help Resource Families
<p><b>PARENTAL RESILIENCE</b></p> <p>Resilience is the process of managing stress and functioning well even when faced with challenges, adversity and trauma. By managing stressors, parents feel better and can provide more nurturing attention to their child, which enables their child to form a secure emotional attachment.</p>	<ul style="list-style-type: none"> <li>• Make yourself accessible to families. Listen to and encourage them.</li> <li>• Ensure families have adequate access to respite (formal or informal)</li> <li>• Help families assess their mental health. Ensure that they can access counseling or other mental health services to cope with stress and changes in their lives when they have a need.</li> <li>• Acknowledge the challenges families face. Address their concerns that sharing information about their difficulties will jeopardize their standing with the child-placing agency.</li> </ul>
<p><b>SOCIAL CONNECTIONS</b></p> <p>Friends, family members, neighbors, and community members provide emotional support, help solve problems, offer parenting advice and give concrete assistance to parents. Parents need people who care about them and their children, who are good listeners, who they can turn to for well-informed advice, and who they can call on for help in solving problems.</p>	<ul style="list-style-type: none"> <li>• Encourage families to connect with neighbors, family, and community members for emotional support, concrete assistance, and parenting advice.</li> <li>• Share information about the North Carolina Foster and Adoptive Parent Association (<a href="http://ncfapa.org/">http://ncfapa.org/</a>), which offers peer support.</li> <li>• Connect resource parents to mentors.</li> </ul>
<p><b>CONCRETE SUPPORT IN TIMES OF NEED</b></p> <p>All parents need help sometimes—help with the day-to-day care of children, help figuring out how to soothe a colicky baby, help getting to the emergency room when an accident happens, help in managing their tempers when they’re fatigued or upset. When parents are faced with very trying conditions such as losing a job, home foreclosure, or the effects of trauma, they need access to concrete support and services that address their needs and help reduce the stress caused by very difficult challenges and adversity.</p>	<ul style="list-style-type: none"> <li>• Help families find or apply for additional resources when dealing with financial setbacks or unemployment in current placements.</li> <li>• Make in-home crisis services available to resource parents struggling to care for a child with a high level of need.</li> <li>• Know the community and make appropriate referrals.</li> </ul>
<p><b>KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT</b></p> <p>Accurate information about child development and appropriate expectations for children’s behavior at every age help parents see their children in a positive light and promote their healthy development. Parents who experienced harsh discipline or other negative childhood experiences may need extra help to change the parenting patterns they learned as children.</p>	<ul style="list-style-type: none"> <li>• Help parents assess their parenting abilities through a tool such as the Adult Adolescent Parenting Inventory (AAPI).</li> <li>• Educate resource parents about the effects of trauma on children through workshops and encouraging them to read articles on the topic such as this one in <i>Fostering Perspectives</i> (<a href="http://www.fostering-perspectives.org/fpv16n1/primer.htm">http://www.fostering-perspectives.org/fpv16n1/primer.htm</a>).</li> <li>• Attend <i>Trauma-Informed Behavior Management</i> (available through <a href="http://www.ncswLearn.org">www.ncswLearn.org</a>), which will prepare you to teach parents about the experiences and needs of children in care and ways to parent effectively.</li> <li>• Promote joint training of workers and resource families; learning together can help them develop strong partnerships.</li> </ul>
<p><b>SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN</b></p> <p>A child or youth’s ability to interact positively with others, regulate their own behavior, and effectively communicate their feelings has a positive impact on their relationships with their family, other adults, and peers. Challenging behaviors or delayed development create extra stress for families, so early identification and assistance for both parents and children can head off negative results and keep development on track.</p>	<ul style="list-style-type: none"> <li>• Be sure children receive comprehensive assessments and appropriate treatment so they build social skills appropriate for behavioral, developmental, or mental health issues that they face.</li> <li>• Use home visits as an opportunity to coach parents to help children learn life skills (communication, conflict resolution, empathy) and build relationships with others.</li> <li>• Work with resource parents to involve children in school or community activities that help them develop positive relationships.</li> <li>• Coach parents on addressing behavior issues appropriately and in ways that will strengthen the parent-child relationship over time.</li> </ul>

Source: Center for the Study of Social Policy (n.d)

## Strong Fathers in Prevention

Knowing what we do about fathers' contributions to the parenting relationship and to children's well-being gives us great reason to find help for fathers who have a history of domestic violence. Violence puts a father at risk of separation from his children. It jeopardizes his involvement with them, and negatively affects their safety and well-being.

As a child welfare worker or agency, dealing with situations of domestic violence is difficult.

- How do we keep fathers involved, and still protect children's safety?
- How can we assess which situations carry the most risk?
- What resources are there to help these fathers start a healthier pathway in fatherhood?

A new initiative in North Carolina is helping communities find answers for these questions.

### The Strong Fathers Model

Begun in Forsyth County in 2009, Strong Fathers is a psychoeducational and skills-building group for child welfare-involved men with a history of domestic violence. Its aim is to help men relate in safe and caring ways to their children, partners, and other family members (Pennell & Rikard, 2011).

Funded by the NC Division of Social Services, the Strong Fathers program is offered through Family Services, Inc. and serves men in three North Carolina counties. The Center for Family and Community Engagement (CFFACE) at NC State University evaluates the program.

Developed by the Center for Child and Family Health and its partners, the curriculum used in the Strong Fathers model draws on other nationally recognized courses that seek to reduce child maltreatment and intimate partner violence.

The Strong Fathers groups meet once a week for 20 weeks. During these sessions participants learn about child development and parenting techniques and talk with other men about how to be good fathers and care for their families. They learn about the effects of domestic violence on families, discuss ways to work in partnership with children's mothers, and they set goals for their own growth as fathers.

### Promising Results

A 2012 program report shows that of the 35 men enrolled in the groups, 16 had completed the program, attending at least 65% of the sessions, and another 13 men partially completed the program; a few did not attend any sessions (CFFACE, 2012). In addition to the men's self-reports on parenting and progress in meeting goals, the evaluation also collects and analyzes data from facilitators, the mothers of the children, the social workers, and other community partners.

According to the preliminary findings, the men who completed the program demonstrated:

- Increased knowledge of child development;
- Reduced abusive beliefs toward their partners;
- Capacity to set and carry out goals for themselves as fathers and partners;
- Enhanced awareness of their gains and lapses as fathers;
- Ability to identify and overcome challenges in relating to their children and the children's mothers; and they
- Maintained or increased the time they spent living with their children.

None of the data sources show increased safety risks for children and their mothers (CFFACE, 2012).

These early results are promising. If longitudinal data becomes available it will be interesting to see what those data show about outcomes for children in these families.

### Tools for Workers

In addition to offering support to fathers, the Strong Fathers curriculum offers practical tools for those who work with fathers who have a history of domestic violence. These "Tips for Workers Working with Dads: Men Who Have Been Violent with Their Partners" include:

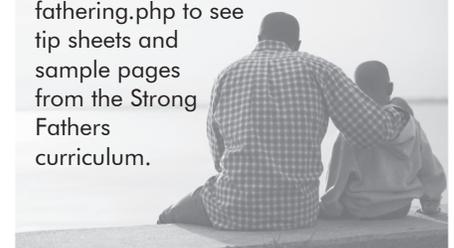
- Assessing Levels of Risk—provides checklists for workers in assessing risk and strengths
- Differential Approaches—offers guidance on engaging fathers in different ways depending on their strengths and level of violence
- Helpful Things to Say to Men Who Have Been Violent With Their Partners

A handout for use with fathers, "Supporting Your Child's Mother," explains the effects of domestic violence on children and offers ways fathers can show respect and support for mothers.

There is still a lot to learn about how best to help fathers change when domestic violence is involved, but the child welfare community and others are making strides in this area. The Strong Fathers model is one such effort that holds promise for helping fathers and their families. ♦

### See a Sample

Visit <http://cfface.chass.ncsu.edu/fathering.php> to see tip sheets and sample pages from the Strong Fathers curriculum.



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