Domestic violence, parental substance misuse and the decision to substantiate child maltreatment

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ABSTRACT

Families that experience domestic violence and parental substance misuse are disproportionately involved with the child welfare system. Prior research suggests that child protective services (CPS) caseworkers are more likely to substantiate maltreatment allegations when domestic violence and parental substance misuse are identified during the investigation, pointing to one possible mechanism for this disproportionate involvement. While previous studies have relied on nationally representative data sets, the current study used administrative records from a large Midwestern child welfare agency that accounts for state-level variation in child welfare policy and practice. A total of 501,060 substantiation decisions made between 2009 and 2013 were examined to assess the influence of caseworker-perceived domestic violence and parental substance misuse on the decision to substantiate reported maltreatment. Results from multilevel modeling suggest that the identification of domestic violence and parental substance misuse during an investigation significantly increased the probability that an allegation would be substantiated. The implication of these findings for child welfare practice are considered in light of the fact that many child welfare agencies do not consider exposure to domestic violence and parental substance misuse in and of themselves to constitute child maltreatment.

1. Introduction

Families that experience domestic violence and parental substance misuse are disproportionately involved with the child welfare system (Kohl, Edleson, English, & Barth, 2005; Testa & Smith, 2009). For example, Kohl et al. (2005) found that active domestic violence, as measured by the Conflict Tactics Scale 1 (Straus, 1979) physical assault subscale, was identified in 14% of all families investigated by child protective services (CPS) for maltreatment. Moreover, the rate of active domestic violence rose to 28% among families receiving in-home CPS services and was observed among 60% of families with a child placed in foster care. A similar trend has been observed by Testa and Smith (2009) with respect to parental substance misuse, defined here as the use of alcohol or drugs that impairs functioning and the ability to fulfill caregiver responsibilities. They found that parental substance misuse is generally identified in 11–14% of investigated CPS cases, and in 50–79% of cases in which a child has been removed from parental custody.

The elevated prevalence of both domestic violence and parental substance misuse in child welfare-involved families results in notable levels of co-occurrence of these behaviors. Using data from the second cohort of the National Survey of Child and Adolescent Well-Being (NSCAW-II) which surveys families receiving in-home CPS services, Ogbonnaya and Kohl (2016) estimated that 17% of caregivers actively experiencing domestic violence also had a problem with substance misuse. Conversely, Choi and Ryan (2007)
examined the service needs of families with children in foster care and found that 35% of caregivers with an identified substance use disorder also had need of domestic violence services. These patterns of co-occurrence are of particular importance for child welfare workers given reduced efficacy of substance use treatment for those experiencing domestic violence (Lipsky et al., 2010), and reduced efficacy of domestic violence interventions for those misusing substances (Dalton, 2001; Jewell & Wormith, 2010).

From a systems perspective, the high rates of domestic violence and parental substance misuse among families in the child welfare system raise questions about the mechanisms leading to this disproportionate involvement. Prior research using data from the first cohort of the National Survey of Child and Adolescent Well-Being (NSCAW-I) has identified caseworker substantiation decisions as one potential mechanism. Kohl et al. (2005) reported that 52% of investigations were substantiated when CPS workers identified active domestic violence, but that rate fell to 22% when neither active domestic violence nor a history of such violence was identified. Similarly, Berger, Slack, Waldofogel, and Bruch (2010) observed an 18 point increase in the marginal probability of substantiation when parental substance misuse was identified as a familial risk factor.

While these studies provide important evidence that caseworker-perceived domestic violence and parental substance misuse increase the likelihood of maltreatment substantiation and subsequent child welfare involvement, the findings are based on a nationally representative sample that is not sensitive to state-level differences in child welfare policy and practice. States exhibit considerable variability concerning whether and under what conditions childhood exposure to domestic violence and parental substance misuse meet the statutory definition of child maltreatment. For instance, in some states exposure to domestic violence in and of itself is considered maltreatment (i.e., the child was present in the home when violence occurred), and so the identification of domestic violence would logically lead to an increased likelihood of substantiation (See Utah Division of Child & Family Services, 2017).

In other states, however, CPS workers must demonstrate that domestic violence and/or parental substance misuse resulted in harm or the threat of harm in order for these behaviors to meet the threshold for maltreatment. For instance, the Texas Family Code (2005) states that parental substance misuse meets the official definition of child abuse only when “the current use by a person of a controlled substance... results in physical, mental, or emotional injury to a child.” Similarly, the Revised Code of Washington (2017) makes clear that “exposure to domestic violence... that is perpetrated against someone other than the child does not constitute negligent treatment or maltreatment in and of itself.” Instead, exposure must result in demonstrable harm or the threat of harm to the child. Therefore, an increased likelihood of substantiation following the identification of domestic violence and/or parental substance misuse in these states could indicate a lack of compliance with formal CPS policy unless a corresponding harm or threat of harm was also identified.

Pathways to receiving support services also vary by states, and this can have important implications for substantiation decisions (Fluke, Parry, Shapiro, Hollinshead, & Bollenbacher, 2002). While some states require that maltreatment be substantiated prior to the provision of services (i.e., a two-tiered system), other states provide alternative disposition structures that allows a family to receive services independent of whether there was sufficient evidence to meet the statutory threshold for substantiation (Drake & Jonson-Reid, 2000; English, Marshall, Coghlan, Brummel, & Orme, 2002). In systems that do require substantiation prior to the provision of services, CPS workers have an incentive to substantiate when they believe a family is in need of services, regardless of whether there is sufficient evidence to support the reported allegations. State-specific studies are therefore needed to determine whether the identification of domestic violence and parental substance misuse influences substantiation decisions under particular policy and practice configurations.

The current study examined substantiation decisions in a state-level child welfare agency that (1) only substantiates domestic violence and parental substance misuse as maltreatment when caseworkers find that these behaviors caused direct harm or the threat of harm to a child, and (2) requires substantiation prior to the provision of services. Within this policy context, the identification of domestic violence and parental substance misuse should not influence substantiation decisions in cases where neither has been shown to cause harm or the threat of harm. We therefore restricted our focus to such cases in order to evaluate whether the effects reported by Kohl et al. (2005) and Berger et al. (2010) were observed under these circumstances.

1.1. Theoretical framework

The Decision-Making Ecology developed by Baumann, Dalgleish, Fluke, and Kern (2011) serves as the theoretical framework for examining the influence of domestic violence and parental substance misuse on the decision to substantiate. Informed by multidisciplinary research into the science of human decision-making, this model conceptualizes the relationship between multiple factors that influence decisions in child welfare practice (see Fig. 1). Each of the influencing factors is considered here in relation to the current study.

1.1.1. Case factors

In the context of substantiation decisions, case factors include the alleged maltreatment type, evidence of maltreatment collected during the investigation, information acquired during the risk assessment, and the sociodemographics of those named in the reported maltreatment. As previously noted, the identification of domestic violence and parental substance misuse during an investigation risk assessment has been shown to increase the likelihood of substantiation (Berger et al., 2010; Kohl et al., 2005; Wolock, Sherman, Feldman, & Metzger, 2001). Sociodemographics can also influence the decision to substantiate. When controlling for risk assessment scores, Dettlaff et al. (2011) report that substantiation is more likely if the child is identified as a race other than Anglo American and is under one year old, and when parents are married, have multiple children, and earn over $40,500 a year.

The alleged maltreatment type is also important to consider when examining substantiation rates and the identification of other
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