Juvenile delinquency in child welfare: Investigating group home effects

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Abstract

Group homes fall into the broad category of residential care, a category that also includes half-way homes, campus based homes, emergency shelters, self-contained settings, and staff secured setting. In general, residential care services represent an option of last resort. In the current study we use administrative records from a large urban county and propensity score matching to investigate the relationship between group home placements in child welfare and the risk of delinquency (n=8226). The results indicate that the relative risk of delinquency is approximately two and one half times greater for adolescents with at least one group home placement as compared with youth in foster care settings. This finding raises serious questions about the use of group homes for victims of physical abuse and neglect.

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1. Introduction

Group homes fall into the broad category of residential care, a category that also includes half-way homes, campus based homes, emergency shelters, self-contained settings, and staff secured setting (Curtis, Alexander, & Lunghofer, 2001; Child Welfare League of America, 2005). In general, residential care services represent an option of last resort. That is, child welfare systems attempt to work with children and families in the least restrictive environment. Such practices reflect the 1980 Adoption Assistance and Child Welfare Act (P.L. 96-272) which established the foundation for a continuum of care (Stuck, Small, & Ainsworth, 2000). When less restrictive environments are unavailable or insufficient with regard to meeting needs of individuals, child welfare systems move youth up the continuum of care and into more secure settings. In the current study we investigate the relationship between group home placements in child welfare and the risk of delinquency. Our review of the literature focuses on the definition of group homes, the characteristics of youth served in group homes, and the potential problems associated with group home placements.

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Group homes are utilized in a variety of social service settings including child welfare, mental health, and juvenile justice. Within the child welfare system, approximately 11% of all substitute care placements are associated with a group home (CA RADD, 2001). Group homes are smaller than other residential facilities, consisting of a medium size home capable of housing between 6 and 9 adolescents in a community based setting. Within the social service continuum of care, group homes are less restrictive than in-patient psychiatric clinics and juvenile detention centers, but more restrictive than family foster care (Handwerk, Friman, Mott, & Stairs, 1998). Group homes are considered staff secured as opposed to a locked facility. In contrast with large residential care facilities, group homes generally do not provide academic instruction and the adolescents served within these programs largely attend local public schools. In part, the relatively low number of youth served within each group home and the staff required to manage each facility causes group homes to be one of the most expensive placements options for child welfare systems. Congregate care placements cost between six and ten times as much as placement in a foster family home (Barth, 2002). In 2000 for example, 43% of all substitute care dollars in the state of California were associated with group home placements (CA RADD, 2001). As the vast majority of youth never enter a group home setting, the high costs and overall proportion of the budget allocated to group home placements is concerning for child welfare systems. The current study focuses not on the concerns related to cost, but rather concerns related to program effectiveness.

1.2. Characteristics of youth served in group homes

The placement of children in group homes, like other placement settings, is not random. That is, some children and adolescents in the child welfare system are significantly more likely to experience at least one spell of care in a group home. In part, this non random selection process makes it difficult to fully disentangle individual and group home specific effects. Adolescents placed in group home settings are older, more likely to be male, minority, experience a range of socio-emotional and behavioral problems, and are more likely to have prior involvement with the juvenile justice system as compared with adolescents living in traditional foster care or a specialized foster care home (Berrick, Courtney, & Barth, 1993; Curtis et al., 2001; Knapp, Baines, Bryson, & Lewis, 1987; Mech, Ludy-Dobson, & Hulseman, 1994). Using the Child Behavior Checklist several studies document the significantly higher rates of externalizing behaviors and conduct disorders with adolescents in group care settings (Heflinger, Simpkins, & Combs-Orme, 2000; McMillen et al., 2005). Given the prevalence of such problems, youth in group care settings are also more likely to receive psychotropic medications. In a recent study of medication for youth in care, Breland-Noble et al. (2004) report that adolescents in group home placements were significantly more likely than youth in therapeutic foster care settings to take medication and to take more medications (polypsychopharmacology). In addition to individual characteristics, the potential for delinquency in group home settings may also result from high rates of placement instability and the exposure to other high risk adolescents.

Placement instability is a common phenomenon and characteristic associated with residential placement settings (Courtney, 1998; Knapp et al., 1987). In part, such instability can be explained with how group home placements are utilized. Children and adolescents are rarely removed from the biological family home and placed directly into a congregate care setting. In general, out of home placements commence in kin or non kin foster family homes, and when such arrangements no longer work, individual youth are moved up the continuum into more secure settings. There are a variety of reasons placements “don’t work” but foster parent unwillingness is the most pervasive. In a recent and comprehensive study of placement instability, Zinn et al. (2006) reports that 76% of placement disruptions were due, at least in part, to foster parents’ inability or unwillingness to continue fostering. Among those moves attributed to foster parents, the reason most commonly cited (28%) was foster parents’ inability to tolerate children’s behavioral or emotional problems. Placement instability is problematic because it is associated with a range of negative outcomes including child behavior problems, feelings of insecurity, and overall dissatisfaction with the foster care experience (Festinger, 1983; Kurtz, Gaudin, Wodarski, & Howing, 1993; Redding, Fried & Britner, 2000). Specific to the current study, evidence indicates that frequent placement changes within the child welfare system significantly increase the risk of juvenile delinquency (Ryan and Testa, 2005).

Perhaps even more than placement instability, the negative effects of peer contagion within the group home is disconcerting for practitioners and policy makers. Such concern focuses largely on the exposure and socialization processes (e.g. social learning) that are likely to shape and support deviant attitudes and behaviors. Dishion et al. (1999) report that peer group interventions increase problem behaviors and negative life outcomes through adolescence and into early adulthood. The authors argue that detaining youth in congregate residential settings and specifically the
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