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Child Abuse & Neglect



Research article

Parenting and proximity to social services: Lessons from Los Angeles County in the community context of child neglect[☆]

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ABSTRACT

Using a sample of 438 parents in Los Angeles County, CA, this study examines the role of proximity to social services in child neglect. In an extension of social disorganization theory, it seeks to understand the potential sources of support in neighborhoods for families. It uses ordinary least squares regression to examine driving distance from parents' residences to four types of services (child care, domestic violence, mental health/substance abuse, and poverty). The results show an association between proximity to mental health and substance abuse services and parents' self-reported neglectful behaviors. Additionally, higher levels of socioeconomic disadvantage (poverty, unemployment, and low education), having older children, respondents being male, and respondents being older parents are associated with higher levels of child neglect, while being white is associated with lower levels. Overall, the findings suggest a potentially protective role of geographic access to mental health and substance abuse services in child maltreatment. Additional research on the pathways through which proximity to services influences child neglect is needed.

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Introduction

The neighborhoods in which we live may have profound influences on our health, well-being, and ability to function in many realms, including our ability to parent (Coulton, Crampton, Irwin, Spilsbury, & Korbin, 2007; Diez-Roux & Mair, 2010; Freisthler, Merritt, & La Scala, 2006; Maguire-Jack, 2014a). According to social disorganization theory (Shaw & McKay, 1942), neighborhoods that are characterized by layers of disadvantage related to poverty, unemployment, crime, and population turnover can affect the residents in a myriad of ways that are harmful, including increasing risk of child maltreatment. Social disorganization theory contends that neighborhoods are “disorganized” when they lack a structure to help maintain social controls that allow their residents to realize shared values (Sampson & Groves, 1989). Put differently, when neighborhood residents hold common goals for their community, such as a safe and healthy environment for children, they are more likely to work together to achieve these goals. When residents cannot agree on shared principles and community expectations, however, deviant behaviors have room to flourish because community members cannot effectively organize against them.

The current study focuses on the potentially protective role that geographic access to social services play in child maltreatment. Extensions of social disorganization theory suggest that the local availability of institutional resources, like social

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services, both reflect and contribute to neighborhood (dis)organization (Sampson, 2001). It is posited that local institutions help community members establish agreement around common values and goals, and participation in these institutions can also give residents the confidence and tools to act, not only on their personal goals for themselves and their families, but also on their shared vision for their community. For this reason, Sampson and Groves (1989) identify limited participation in local organizations as one of three primary pathways by which neighborhood social disorganization affects residents' outcomes.

Literature Review

Child maltreatment researchers have applied social disorganization theory to understand community variation in child abuse and neglect. These researchers suggest that disorganized neighborhoods put parents at additional risk for maltreatment because of the multiple stressors they provide, the lack of shared social norms among residents regarding child rearing, and an absence of supportive services for parents (Ben-Arieh, 2010; Coulton, Korbin, & Su, 1999; Ernst, 2001; Freisthler, 2004; Freisthler, Gruenewald, Remer, Lery, & Needell, 2007; Freisthler, Gruenewald, Ring, & LaScala, 2008; Garbarino & Kostelny, 1992; Klein, 2011; Korbin, Coulton, Chard, Platt-Houston, & Su, 1998). This literature has found important associations between child maltreatment and certain neighborhood-level characteristics, most notably concentrated socioeconomic disadvantage, residential instability, racial/ethnic heterogeneity, and “child care burden” or the lack of informal resources for child supervision (Coulton et al., 2007; Freisthler et al., 2006).

The majority of this research on the neighborhood context of child maltreatment has focused on understanding what about the structure of communities puts families at risk for child maltreatment. Less is known about neighborhood features that support families and protect against maltreatment. However, in congruence with the theory put forth by Sampson and Groves (1989) that participation in local organizations contributes to neighborhood organization and positive outcomes for residents, Kim and Maguire-Jack (2015) found that participation in community organizations like Parent Teacher Associations was associated with lower levels of verbal abuse of children. Additionally, an emerging literature suggests that the accessibility of certain types of services may help prevent child abuse and neglect (Coulton et al., 1999; Dorch et al., 2010; Freisthler, 2013; Klein, 2011; Maguire-Jack, 2014b; Morton, 2013; Searly & Lauderdale, 1983).

Geographic Access to Services and Child Maltreatment

Several studies explore the relationship between child maltreatment and the collective or aggregate availability of social services. Freisthler (2013) examined community-level (as defined by zip code) rates of child welfare system involvement and their relationship with the presence of services for needs related to substance abuse, adoption, mental health, domestic violence, independent living, pregnant and parenting teens, housing, and children with special needs. Using a cross-sectional design and spatial regression, the author found that, when considered collectively, the density of these services (i.e. the number of services per square mile within zip codes) was associated with lower rates of child maltreatment referrals (Freisthler, 2013). The density of these services in surrounding areas (i.e. adjacent zip codes) was also associated with lower rates of both child maltreatment referrals and foster care entries (Freisthler, 2013).

Maguire-Jack's (2014b) multi-level study of a low-income sample of parents in Wisconsin found that those who lived in counties that spent more money on child abuse prevention services, such as home visiting, substance abuse treatment, parenting education and mental health services; were less likely to be investigated for maltreatment by child welfare authorities. This protective relationship persisted even after the author controlled for a range of potentially confounding family- and county-level characteristics.

Coulton and colleagues (1999) observed a modest bivariate correlation ($R = -.10$) between the local availability of thirteen types of “neighborhood facilities” (including social services like day care centers and medical clinics, but also some commercial businesses like banks and grocery stores) and rates of reported child maltreatment. Neighborhoods (i.e. census block groups) with more of these facilities had lower rates of reported child maltreatment. However, when the authors used multi-level modeling and parents' self-reported risk for child abuse and for neglect as measured by the Child Abuse Potential Inventory (CAPI; Milner, 1986, 1994) as dependent variables instead of neighborhood maltreatment rates, the availability of these services/facilities was not associated with child maltreatment (Coulton et al., 1999).

Conversely, Ben-Arieh's (2010) cross-sectional analysis of community-level characteristics found that the number of full time social workers per 1,000 child habitants was associated with higher levels of child maltreatment. Towns and cities with more social workers relative to the size of the child population had higher rates of child maltreatment investigations. This study does not specify or distinguish between the different types of social work that these professionals were engaged in, however.

Taken together, these findings suggest that the aggregate availability of social service resources within communities may play a protective role in helping reduce child maltreatment risk, although the evidence is not definitive. Several additional studies have explored the isolated effects of geographic access to particular types of services on child maltreatment.

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