

chronic
neglect

An Evaluation of the Family Asset Builder:

A Child Protective Services Intervention
for Addressing Chronic Neglect

Phase II Evaluation

JANUARY 2012



Acknowledgments

We would like to thank Debra Gilmore, previously Child Protection Reform Manager at the American Humane Association, for her contributions to the development of the Family Asset Builder model. We are grateful to Dan Koziolk from Carver County and Brenda Mahoney from Stearns County for their contributions in planning this study and in advising on the preparation of this report. We would also like to thank the Family Asset Builder staff and supervisors for sharing their insights about the intervention model for the purposes of the evaluation. Special thanks to Peter Pecora, Managing Director of Research Services, and Pamela Maxwell, Constituency Research Advisory Team member, for their feedback on the report. Our thanks also goes to Susan Ault at Casey Family Programs for her ongoing leadership and support. Finally, we would like to acknowledge both counties' willingness, foresight, and leadership in taking on this innovative pilot project.

Authors:

Tyler Corwin and Erin Maher¹

Maggie Skrypek²

Caren Kaplan³

¹ Casey Family Programs, 2001 8th Avenue, Suite 2700, Seattle, WA 98121. Phone: 206.378.3307; email: tcorwin@casey.org, emaher@casey.org.

² Wilder Research, 451 Lexington Parkway North, Saint Paul, MN 55104. Phone: 651-280-2700; email: maggie.skrypek@wilder.org.

³ American Humane Association, 1700 Kalorama Road, NW #312, Washington, DC 20009. Email: caren@ckinnovations.org.

Executive Summary

Neglect is the most common form of maltreatment; in 2010, over 78% of maltreated children experienced neglect.¹ Chronic neglect is defined as a parent or caregiver's "ongoing, serious pattern of deprivation of a child's basic physical, developmental, and/or emotional needs" necessary for healthy growth and development.² It is characterized by recurrence and duration. Neglected children are at greater risk of forming maladaptive relationships (both with their peers and families later in life), performing poorly academically, having cognitive developmental delays, and being diagnosed with mental health disorders.³

In 2009, Casey Family Programs (Casey) and the American Humane Association (AHA) began a collaboration to design and implement a new response to cases of chronic neglect in the child welfare system. The new intervention model, developed by AHA, called the *Family Asset Builder*, was implemented in two Minnesota counties, Stearns County and Carver County, in February 2011. Casey collaborated with Wilder Research to conduct a process evaluation of this new intervention. The report summarizes results from the evaluation that examined the successes and challenges with the first nine months of the intervention from the perspective of the staff involved.

The Family Asset Builder (FAB) model is a staffing and structural intervention and systems approach for child welfare agencies to work with families experiencing chronic neglect. Common themes from focus groups with caseworkers and supervisors in the two Minnesota counties, data on neglect cases in Carver County, AHA's professional expertise in this area, and a review of the relevant literature informed the development of the FAB intervention. Families are deemed eligible for the FAB intervention if the following criteria are met: the current screened in (i.e., substantiated) report is for neglect, the family has at least two prior maltreatment reports (whether screened in or not) within the previous three years, at least one child in the household is under age 5, and at least one prior report resulted in a substantiated maltreatment or services-needed finding. The FAB model uses a strengths-based, solution-focused approach with dedicated chronic neglect workers (each carrying 6-8 families on their caseload) contacting an entire family at least once per week and contacting the primary caregiver at least twice per week (preferably face-to-face) over 18 months.

The Evaluation

The evaluation of the FAB implementation involves three phases, which will span several years. The first phase of the evaluation focused on the training in the intervention model. The second phase and current evaluation consisted of in-depth interviews with FAB workers, supervisors, and managers; descriptions of the characteristics of families provided by the FAB workers; and an analysis of the notes from seven monthly consultation calls. The final phase of the evaluation will obtain feedback from parents involved in the intervention on their experiences.

Key Findings

The results of this evaluation highlighted the successes and challenges associated with the first-time application of the FAB model. As such, it provides timely information for improving the model moving forward. Consultation calls revealed slow referral rates to the program and raised questions about expanding eligibility. Interviews revealed that while staff had a good understanding of the intervention, many of the required components of the FAB model were already standard practice at the two counties, raising the question about the difference between the FAB model and "business as usual." Similarly, staff expressed the need for more concrete tools, specific strategies, and training opportunities to enhance the model and their work with families. The interviews and consultation calls revealed, however, that the frequency of contact with the family that the model required was unique and, while challenging to adhere to, resulted in an ability to establish better

working relationships with families and to focus more productively on manageable goals. During interviews, staff noted that some of the tenets of the FAB model spilled over throughout the entire agency, including awareness of chronic neglect and the value of increased frequency of contacts with families. From the perspective of the supervisors, the FAB intervention fostered enthusiasm and consideration of agency-wide changes. FAB workers expressed a sense of pride and felt energized by participation in the pilot project; they also felt support and encouragement from their fellow workers. Additionally, FAB workers felt they were having a positive impact on families and that the families appreciated concrete support, manageable goals, and patience and persistence from the workers.

Considerations and Recommendations

The evaluation findings from the first nine months of implementing the FAB intervention point to some model development and implementation improvements that should be considered. In light of worker capacity and case flow for this intervention, the screening criteria (e.g., that the current report to child protective services must be for neglect) could be reconsidered to be more inclusive while still maintaining a focus on the target population. For new caseworkers delivering the FAB intervention, assigning cases slowly could be considered as workers get comfortable and familiar with the dedicated focus and requirements of the FAB intervention. Additionally, concrete tools for working with families experiencing chronic neglect, as well as ongoing training and coaching, could be supplements to the casework practice. Community partners could be engaged in the intervention approach around chronic neglect with the hopes of better supporting and engaging families comprehensively. Using evaluation efforts to document the aspects of the FAB intervention that distinguish it from business as usual could increase buy-in and enhance the intervention approach. As resources allow, FAB workers could work in teams on cases to share the intensity of the work and brainstorm solutions to challenging situations (e.g., working with families that are resistant to the intervention). Lastly, if maintaining small caseloads becomes infeasible, alternative strategies to addressing chronic neglect could be considered that preserve the essence of the FAB model.

Next Steps

Tracking the longer-term outcomes for the children and the families in the FAB pilot project will contribute to a better understanding of the intervention's effectiveness at reducing the number of re-reports of child maltreatment and out-of-home placements for the families. With these longer-term outcomes, the ultimate goal of the Family Asset Builder intervention may be demonstrated: breaking the cycle of chronic neglect among these families. The next phase of the evaluation will be to solicit feedback from the parents involved with this intervention and to synthesize the multi-year evaluation efforts into a set of concrete recommendations for the intervention moving forward with the goal of sharing the model with the field. Future research will need to assess the long-term sustainability of this model and resource requirements in relation to observed benefits.

¹ See U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2011). *Child maltreatment 2010*. Available from <http://www.acf.hhs.gov/programs/cb/pubs/cm10/cm10.pdf>

² See Kaplan, C., Schene, P., DePanfilis, D., & Gilmore, D. (2009). Introduction: Shining light on chronic neglect. *Protecting Children*, 24(1), pg. 1.

³ For a review, see Tyler, S., Allison, K., & Winsler, A. (2006). Child neglect: Developmental consequences, intervention, and policy implications. *Child & Youth Care Forum*, 35(1), 1-20.