Child Welfare-School Interactions

Thesis

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By

Megan Elaine Lehnert, B.A.

Graduate Program in Social Work

The Ohio State University

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Thesis Committee:

Dawn Anderson-Butcher, Advisor

Scottye Cash
Abstract

Children who are victims of abuse and neglect attend schools nationwide. The child welfare system is charged with keeping children safe and protecting their overall well-being. While the system at large offers multiple services for children and families, including prevention, child protective services, family preservation services, foster care, and adoption, children in the child welfare system are known to struggle academically. Considering the ways in which the child welfare and school systems interact to address the needs of these children, as well as their families, is important. This study had two main research questions: (1) What are the ways in which child welfare workers interact with schools? Specifically, what are the different ways in which they interact with schools based on their child welfare role?, and (2) What are the factors that are related to the ways in which child welfare workers interact with schools? The child welfare worker factors that were studied include: caseload size, number of schools served, region of practice, educational area of study, level of burnout, and years or practice.

This study utilized a survey research design to collect data from a sample of 233 child welfare workers. Data analyses were conducted first using descriptive technique to learn more about child welfare-school interactions and the different ways workers
interact with schools based on their child welfare role. One-way Analyses of Variance and independent samples t-test were also used to compare differences between groups across the Interactions with Schools Inventory. Overall, results found that interactions with schools were related to child welfare worker characteristics, specifically around caseload size, number of schools served, region of practice, and years of practice. There are implications around policy, administration, education and training for those working with child welfare and schools.
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Vita

January 11, 1986………………………………….Born – Columbus, Ohio

2007………………………………………………B.A. Psychology, Miami University

2008………………………………………………Social Work Intern,

Ohio Youth Advocate Program

2008-2009………………………………………..School Social Work Intern,

Dublin City Schools

2007-present……………………………………...Graduate Research Assistant,

College of Social Work,

The Ohio State University

Field of Study

Major Field: Social Work
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Chapter 1: Introduction

Children who are victims of abuse attend schools nationwide. The prevalence of child abuse and neglect (CAN) is staggering. The Administration for Children and Families (ACF) (2008) data provide a broad picture of the system as a whole: statistics indicate that from October 2005 through September 2006, 905,000 children were found to be victims of abuse or neglect, with the maltreatment rate 12.1 per 1,000 children. During this same time period, ACF reports that over three million CAN referrals were made to Child Protective Services (CPS), involving over six million children in the United States. Sixty percent of these referrals warranted investigations, with 30% of investigated cases resulting in at least one child being identified as a victim of abuse or neglect. The most common forms of maltreatment are neglect (over 64%) and physical abuse (16%).

All children, including those who are victims of CAN, spend over 1200 hours a year in school (National Center for Education Statistics [NCES], 2004). As NCES reports, more than 60 million children were enrolled in public or private elementary and secondary schools as of 2007 (NCES, 2008), and it is safe to say that, based on ACF data, nearly a million of these children were victims of CAN (ACF, 2008). Given these facts, it is not surprising that educators in schools are more likely to report CAN to the child
welfare authorities than any other subset of mandated reporters (ACF, 2006). Although the child welfare and school systems have a history of miscommunication (Altshuler, 2003), it is clear that the two systems must communicate with one another to seriously address the needs of children and families today. This need for communication is supported through these staggering statistics of CAN and the mere fact that children spend much of their time in school. It is unrealistic to expect either of these professional groups to address the issues of CAN alone, and it is vital to address CAN in all facets of children’s lives. Children are legally required to attend school. Considering schools—where millions of children are every day—as a place for the child welfare system to work with and offer services to children and families makes sense. This study aims to examine child welfare worker perceptions about collaboration between the two systems, by describing the different ways that child welfare workers interact with schools, and by examining several key factors that may be related to these interactions. This study will learn more about these interactions from the perspective of the child welfare system’s involvement with schools.

The Child Welfare System

The child welfare system at large encompasses services that are designed to keep children safe and promote their well-being, in addition to supporting families. Since the mid to late 19th century, there has been a broad system in place to address the needs of orphaned children, which initially included institutionalizing them, and using them for child labor (Lindsey, 2004). During the early 1900s, basic family preservation services
were conceptualized and some legislation was enacted that aimed to address the needs of families (e.g. from the Social Security Act). However, the more modern child welfare system as it is known today—e.g. foster care—began during the mid 20th century (Lindsey, 2004).

Also during the latter half of the 20th century, numerous legislative acts related to the implementation of child welfare services were implemented (Lindsey, 2004). Youth who are placed in out-of-home care are considered “wards of the state” or “wards of the court,” which means that they are under the legal custody of the child welfare agency (Badeau & Gesiriech, 2008). It is the responsibility of the child welfare agency and child welfare workers within to not only protect the child, but also meet the child’s social, emotional, and educational needs. Understanding the role of the child welfare worker within the system is important.

*Child Welfare Workers*

Child welfare workers are the individuals who carry out the services offered by the child welfare system across different areas of practice. The role of the worker is to identify the needs and supports necessary to help the family to keep or return children to their homes (Lindsey, 2004). The overall hope is that the worker is able to identify what services are ultimately needed for the family to meet their needs.

Research has studied characteristics of workers that may influence their child welfare practice. For instance, there are recommendations on ideal caseload sizes of workers (Tittle, 2002); different knowledge on behalf of workers trained in social work
versus other disciplines (Tracy & Pine, 2000); differences in child welfare practice in rural regions (Templeman & Mitchell, 2002); burnout factors leading to job stress (Maslach, 2003); and differences in amount of child welfare experience (Littell & Tajima, 2000). It is important to recognize these different factors that may impact workers, as they are the individuals who directly offer services to children and families. An overview of the five main areas of child welfare services offered by these workers is next.

*Child Welfare Services*

As the child welfare system encompasses many different components, it is important to recognize the main areas of child welfare practice that will be considered throughout this study, which include: prevention, child protective services (CPS), family preservation services (FPS), foster care, and adoption.

Prevention activities include home visits, school- and home-based services, and domestic violence programs (Peddle, Wang, Diaz, & Reid, 2002), and can be offered at different levels throughout the community (e.g. toward the general public or toward families who have been targeted as “at risk” for experiencing CAN). The next area of practice, CPS, includes the activities of intake and investigation of CAN reports. Within this facet of the system, states have the discretion to name individuals who are specific mandated reporters. However, under the Child Abuse Prevention and Treatment Act (CAPTA), every state is required to report cases of CAN to the states’ child protective agency (Crosson-Tower, 2007), i.e. CPS. Similar to prevention activities, FPS aim to
support families so children can remain in their homes, and to prevent unnecessary out-of-home placements for children (Littell, 2001). Finally, foster care and adoption services are activities that involve children being removed from their homes and placed with a foster or adoptive family, or in a residential facility. All of these services will be discussed more in depth throughout the review of literature, but it is key to recognize the diverse array of services offered by the child welfare system at large, as well as the possible ways each of these service areas interact with schools. There are a multitude of reasons for examining these relationships. First, understanding the role of schools is key.

Schools

A central part to any community is the school systems. Schools already are and should continue to be included in the protection of children. Nationwide, as of Fall 2007, over 60 million youth were enrolled in public and private elementary and secondary schools (NCES, 2008). Many reports of CAN involve children who are not yet school-aged, but 57% of youth in foster care are school-aged—at least five years old (ACF, 2008). The mean age of kids in foster care as of September 2006 was 9.8 years old (ACF, 2008), which would place them most likely at the third or fourth grade level in school. ACF also reports that in 2006, the largest percentage of CAN reports by professionals came from teachers. There is research that has studied educational outcomes associated with these youth who are victims of CAN.
Child Welfare and Education

Historically, children with a history of abuse or neglect do not achieve very well academically (Finkelstein et al., 2002; Wulczyn, Smithgall, & Chen, 2009). Seeing that nearly 60 million children are enrolled in schools (NCES, 2008), and six million children are involved with cases of alleged abuse or neglect (ACF, 2008), there is noticeable overlap between youth who are in schools and youth who are victims of CAN.

The prevalence of educational deficits of children involved with foster care is recognized nationwide. Children in foster care face educational challenges that other children do not face on a day-to-day basis. Additional challenges child welfare-involved youth may face include:

- Overall challenges in well-being, including cognitive, social, and behavioral delays (Wulczyn et al., 2009);
- Achieving below their peers (Finkelstein, Wamsley, & Miranda, 2002);
- Experiencing multiple school placements (Casey Family Programs, 2007);
- Having poor school attendance, behavioral problems, and limited access to college opportunities (ACF, 2005; Vera Institute of Justice, n.d.); and
• Experiencing higher rates of placement in special education classes, and are less likely to perform at grade level or attend college (Vera Institute of Justice, n.d.)

All of these challenges are contributing factors that ultimately impact the educational attainments of these youth.

There are often multiple co-occurring problems and needs that these children and families have. Many youth in the child welfare system also are known to be involved in the justice system due to past delinquency and/or crime (Crosson-Tower, 2007), live in poverty and/or homelessness (Sedlak & Broadhurst, 1996), cope with mental health issues (Austin, 2004), deal with substance abuse issues of youth and/or parents/guardians (CWLA, 2001), or witness or experience domestic violence (Bass, Shields, & Behrman, 2004). Clearly, these are all factors that may impact the educational outcomes of youth (Downs et al., 2009), and are important to consider when coordinating services and supporting children’s overall safety and healthy development.

Children who are coping with these problems often exemplify related social and emotional and behavioral problems at schools. It is logical to consider ways with which the child welfare and school systems could feasibly work together to address the multitude of needs these children have.

*Child Welfare Services and Schools*

Schools are important to consider in relation to the five different areas of child welfare practice—prevention, CPS, FPS, foster care, and adoption. Each of these five
areas explicitly relates to involvement with schools in an array of ways. For instance, an area where schools interface with the child welfare system under the prevention category includes the possible offering of abuse prevention classes in schools (Downs et al., 2009). Related to the child welfare service of CPS, teachers are mandated reporters of CAN, and accounted for the largest subset of mandated reporters who reported CAN in 2006 (ACF, 2006). Teacher and schools are often provided information by local CPS agencies around the procedure for reporting suspected abuse/neglect (Conrad, personal communication, October 21, 2008). Under the umbrella of FPS, a school may act as a central location for family support services (Asawa, Hansen, & Flood, 2008). That is, schools are locations in communities that families and children are familiar with, and it is possible for outside community agencies (e.g. child welfare) to come into schools and offer resources for families. Finally, related to foster care and adoption services, schools (and child welfare workers) must have knowledge around the educational history of youth who may have experienced multiple foster care and school placements (Casey Family Programs, 2007), and/or work with adoptive parents around any special needs of their adopted children (Child Welfare Information Gateway, 2006). Child welfare worker interactions with schools may be depend on their child welfare role—e.g. a CPS worker interacts differently with a school than a foster care worker. There also are many ways for the child welfare and school systems to interact at large, and Social Systems Theory is one such way to further explicate possible relationships between the two systems.
Theoretical Perspective

A consideration of Social Systems Theory is helpful to address why the child welfare system would want to interact with schools. As Dale, Smith, Norlin, and Chess (2006) explicate, Social Systems Theory supports the idea that there is an “existence of general patterns of behavior exhibited by all social systems at all levels, from the individual to the community” (p. 48). The general idea of this theory is that behaviors that are present in one environment are present in multiple environments. This idea of “person in the environment” relates to the general concept of providing an array of supports (in this case, offered by the child welfare system as well as the school system) to children—to assist them in obtaining a safe and healthy living environment.

Working with schools is an aspect of working in child welfare that many recognize as important, but the primary purpose of the child welfare system is to keep children safe. The two systems of child welfare and schools often intermingle implicitly due to the fact that all children, those in the system and those not in the system, attend school. However, considering explicitly how these two systems can work together to achieve positive outcomes for children is important. Schools have resources that are helpful in addressing the needs of children and their families, especially around the safety and development of children. Understanding more about the current state of knowledge around child welfare-school interactions is important.
Although there are reasons why child welfare workers would want to connect with schools, little research has specifically studied the interface between child welfare services and schools. There have been studies and reports completed around the educational attainments of child welfare-involved children in schools (e.g. Casey Family Programs, 2007; Finkelstein, Wamsley, & Miranda, 2002; Vera Institute of Justice, n.d.), and the relationships between the child welfare system and schools themselves (e.g. Altshuler, 2003; Finkelstein et al., 2002; Stone, D’Andrade, & Austin, 2007). No research has specifically addressed how the two systems could interact to provide beneficial services to children and families. While it is known that there are some explicit interactions between the two systems taking place (e.g. across the five levels of services—prevention services being offered in schools, CPS offering information to schools, FPS support services located at schools, knowledge of a foster care youth’s educational history, support of adopted children), little is known about day-to-day interactions that child welfare workers have with schools throughout their practice.

The interface between child welfare and school systems is important to the success of children and families, but little is known around how the two systems interact. This study responds to this need by examining the interactions child welfare workers have with schools, and how these interactions are related to various worker characteristics that are thought to influence practice. The characteristics include the constructs of child welfare role, caseload size, number of schools served, region of
practice, area of study, level of burnout, and years of practice. Each of these has been documented in the literature as important variables that impact the quality of child welfare practice (Littell & Tajima, 2000; Maslach, 2003; Templeman & Mitchell, 2002; Tittle, 2002; Tracy & Pine, 2000). No studies, however, have examined how these characteristics relate to worker interactions with schools.

Purpose of the Current Study

In order to explore child welfare workers’ interactions with schools and these various characteristics that potentially influence them, this study utilized a survey format to reach a broad sample of child welfare workers across several states. An online survey that took 15 to 20 minutes to complete was developed, and a snowball sampling technique was utilized to recruit workers. The study was broken into two parts. First, it looked at a general description of ways in which child welfare workers interact with schools. The first research question that was answered is as follows.

**Question 1**: What are the ways in which child welfare workers interact with schools, and do these interactions differ by their role in child welfare?

The second piece of this study examined what factors influence the ways child welfare workers interact with schools. Several key factors that may impact these interactions include: caseload size, number of schools served, region of practice, area of study, level of burnout, and years of practice. The questions around child welfare workers characteristics that are answered by this study are as follows:
Question 2: What are the factors that are related to the ways in which child welfare workers interact with schools?

**Hypothesis 1:** Child welfare workers with high caseloads will interact significantly less with schools than those with low caseloads.

**Hypothesis 1a:** Child welfare workers with high number of schools served will interact significantly less with schools than those with low number of schools served.

**Hypothesis 2:** Child welfare workers in rural agency settings will interact significantly less with schools than child welfare workers working in urban, suburban, or more than one region.

**Hypothesis 3:** Child welfare workers with a social work education will interact significantly more with schools than those with a different educational area of study.

**Hypothesis 4:** Child welfare workers with high burnout will interact significantly less with schools than those with low to moderate burnout.

**Hypothesis 5:** Child welfare workers with more years of practice will interact more with schools than those with fewer years of practice.
Definition of Terms

Terms utilized in the research questions with special meaning for this study include the following:

**Child welfare worker:** The individual(s) responsible for a child and/or family in the child welfare system. In the context of this study, the term “child welfare worker” encompasses those who work in all areas of child welfare practice—prevention, CPS, FPS, foster care, and adoption.

**Interactions with schools:** A general perspective of the current state of child welfare and school interactions considered across all areas of child welfare practice.

**Meeting participation interactions:** The extent to which child welfare workers interact with schools through participating in meetings at schools, and with multiple agencies/representatives.

**School staff communication interactions:** Examines who child welfare workers are talking to in schools.

**Service coordination with school staff interactions:** The extent to which child welfare workers work with school personnel to link families/youth with needed physical and mental health services.

**Working with families for school involvement interactions:** The extent to which child welfare workers work with families so that they are more confident in their abilities to communicate with school personnel.
Child welfare role: The roles of child welfare workers differ across five areas of child welfare practice: prevention, CPS, FPS, foster care, and adoption. For the purposes of this study this variable was condensed into three categories: CPS, Multiple Roles in Child Welfare (e.g. work in foster care and adoption; work in prevention and FPS), or Other Roles (which means workers hold a single, specialized role in either prevention, FPS, foster care, or adoption).

Caseload size: The number of children and/or families an individual child welfare worker works with, on average, in a one-month time period. This variable was broken into four groups including: 0-13 clients, 14-20 clients, 21-30, or more than 30 clients.

School size served: The number schools that a child welfare worker has clients in at any given time. This variable was broken into two groups: 1-9 schools and 10 or more schools.

Region of practice served: The primary area where child welfare workers practice. The region of practice served may fall into one of four categories:

  Rural: Area of child welfare practice that encompasses large areas of land, often classified as farming or small-town communities. Child welfare workers working in rural areas must travel further distances to reach their clients and access resources.

  Urban: Area of child welfare practice that is within the limits of a city.

  Suburban: Areas not classified as urban or rural; geographic areas of practice located between cities and rural areas.
**More than one region:** Areas of child welfare practice that encompass more than one of the identified areas.

**Area of study:** The primary major in which child welfare workers have a degree. For the purposes of this study, this is defined as social work or other area.

**Burnout:** For the purposes of this study, “a prolonged response to chronic emotional and interpersonal stressors on the job and defined…by three dimensions of exhaustion, cynicism, and a sense of inefficacy” (Maslach, 2003, p. 189). Burnout will be considered as it is measured by emotional exhaustion. Workers were categorized into low to moderate and high levels of burnout.

**Years of practice:** This is the number of years child welfare workers have been working in child welfare, in total. Workers were categorized into four categories: 0-4 years, 5-8 years, 9-16 years, and 17 or more years.
Chapter 2: Review of Literature

The occurrence of CAN in our country is an area of concern for many, especially for those who work with children and families on a day-to-day basis. While the child welfare system is charged with keeping children safe, it is a system that faces challenges in implementing services. These challenges stem from multiple factors, including the fact that child welfare-involved families are frequently involved with other systems and face additional life challenges, many of which only add to the stress around keeping their children safe. One particular way that the child welfare system can feasibly address this issue is through collaborating and coordinating with other systems and social services agencies. A better understanding of child welfare services, in general, helps to further make this case. The following section provides a brief history of child welfare, an overview of workers in the system, and finally a discussion of child welfare services.

The Child Welfare System

The child welfare system is “a group of services designed to promote the well-being of children by ensuring safety, achieving permanency, and strengthening families to successfully care for their children” (Child Welfare Information Gateway, 2008). These services are often instituted under the authority of individual states and counties, but funding and legislation primarily stem from the federal level (Child Welfare
Information Gateway, 2008). There are important historical and legislative perspectives that relate to the delivery of child welfare services today, and these are described next.

Child Welfare History and Legislation

The beginning of the child welfare system as it is known today can be traced back to the mid-19th century. Until this time, orphaned children were placed in institutions; however, during the mid- to late-1800s, a shift was made and orphaned children were sent to live with farming families. In essence, these children were sent to live in “foster care,” but in many cases, were utilized as slaves (Lindsey, 2004). By the beginning of the 20th century, it was not only orphaned children who were sent to live with other families, but also children whose mothers could not properly care for them due to challenging life circumstances (e.g. poverty). The “system” at this time did not aim to assist the mothers/families of these children, but to ensure that children were placed in a better living environment (Lindsey, 2004).

In 1912, the federal Children’s Bureau was founded as an entity to begin investigating and reporting on the welfare of children in the United States (Lindsey, 2004, p.19). Initially the Bureau addressed causes of infant mortality, and later addressed the issues of child labor. The Bureau also implemented the first “family preservation” movement, with the underlying idea that children cannot be saved without first saving the family. This also resulted in the first so-called income assistance program—Mother’s Pensions. Additional income protection programs were implemented during the Great Depression: the Social Security Act, which set forth Aid to Families with Dependent
Children (AFDC), and Title IV specific to foster care funding (Lindsey, 2004). Today, the Children’s Bureau, which is a subset of the Administration for Children and Families (ACF) under the U.S. Department of Health and Human Services (USDHSS), still tracks state-by-state child welfare data and information (ACF, 2008).

The beginning of the more modern system of child welfare—as it is viewed today in the 21st century—started during the 1950s, when legislation was first passed in most states that gave public child welfare agencies responsibilities related to child welfare services (Lindsey, 2004). At this time, the so-called “Residual Model” was the main impetus behind services provided to children. This model was grounded in the concept that families in the child welfare system faced personal problems that had to be addressed; however, at this point in time, the child(ren) were removed from their homes and no services were offered to the families. It was hoped and assumed that families would address their problems, and children could remain in foster care until that time. This Residual Model also allowed for a targeting of services to the neediest individuals, and did not spread out services to all families who could “maybe” benefit from them (Lindsey, 2004).

By the 1960s, interest arose as to why children were placed in out-of-home care—in the beginning, it was due to being orphaned, but more children were now being removed from parents/families who were living (Lindsey, 2004). Not surprisingly, initial studies found that most children were being removed from their homes due to neglect (Maas & Engler, as cited in Lindsey et al., 2004). It was also found that many of
these children were placed in foster care and left for long periods of time, mostly due to the fact their parents/families were just “expected” to get better without any assistance. In 1962, Kempe reported on “battered child syndrome,” and studies were conducted around the psychological needs of children in the system, which also called attention to the needs of abused/neglected children (Lindsey, 2004).

In addition to research around the needs of children in the child welfare system, major legislation has been implemented in the latter half of the 20th century that relates to services received by children and families. In 1974, The Child Abuse Prevention and Treatment Act (CAPTA) was passed, which set forth mandated reporting requirements to states. This means that certain subsets of professionals (e.g. teachers, doctors, etc.) were required to report suspected abuse and neglect. Reports of CAN increased with the passage of this Act, but there was no noticeable decline in the report of fatalities due to abuse or neglect (Lindsey, 2004).

Many children were placed in out-of-home care and left there indefinitely. The Adoption Assistance and Child Welfare Act of 1980 provided an increase in federal funding to support permanency planning for youth in the system. One main purpose of this Act was to emphasize family reunification as an outcome for youth who were placed in out-of-home care. When family reunification was not an option for youth in the system, the preference for permanency outcomes ranged from adoption, guardianship, and long-term foster care (Barth & Berry, 1987).
Other outcome planning under The Adoption Assistance and Child Welfare Act could range from support and assistance for families of origin to have children returned home, to the Termination of Parental Rights (TPR) which allows children to be adopted. The overarching goal was to have permanency in children’s lives and reduce their time in foster care, regardless as to how this was obtained (e.g. returned home or adopted). This initial goal was obtained, however, in the latter part of the 1980s, funding for these activities decreased and the number of youth in foster care again increased (Lindsey, 2004).

In 1993, The Family Preservation and Family Support Services Program was passed, which also placed emphasis on family preservation services for families/children at highest risk of experiencing abuse (Crosson-Tower, 2007). Children were considered to be placed at greater risk for abuse under this programming, as children were to be left in their homes and support for at risk families was to be offered in the home. Ultimately this programming did not reduce the number of youth in foster care. Before legislation was enacted to adjust the programming related to reducing the number of youth in foster care, The Multiethnic Placement Act of 1994 was implemented. This Act was created to prevent any discrimination when placing children in foster and/or adoptive homes. With this act, there should not be any “waiting” for a family of matching race to the child to foster or adopt that child.

In order to address the challenges surrounding the programming set forth in 1993, the Adoption and Safe Families Act of 1997 (ASFA) was passed. This Act supports
services for youth to spend limited time in foster care by planning for permanent outcomes, which includes returning home, but with a large emphasis on adopting children from foster care. This is somewhat opposite of the 1993 legislation that aimed to keep children with their families as long as possible—i.e. preserve the family (Lindsey, 2004). After 15 months in foster care, if youth are not returned home, TPR activities are required to begin under ASFA.

The most recent piece of federal legislation that is directly related to child welfare and schools/education is the Fostering Connections to Success and Increasing Adoptions Act of 2008. This law generally supports foster youth by offering additional financial support for kinship caregivers, youth who age out of the system (until they reach 21 years old), health care needs of foster youth, and state adoption incentives. Sibling placement in foster care is an enhanced priority, and the promotion of educational stability for youth in foster care is emphasized.

In the end, this brief overview of history and legislation related to child welfare services is important. It provides an overview of the system as a whole, and lays the foundation for the discussion of the child welfare system today. The next section will address the movement throughout the child welfare system as a whole.

Movement throughout the Child Welfare System

Overall, there are many levels of involvement youth and families may have with the child welfare system. Most families and children initially become involved with the child welfare system due to reported cases of CAN, which includes neglect, physical and
sexual abuse (ACF, 2008). Reports are made to and investigated by local CPS agencies, who then decide whether or not a report is substantiated (Badeau & Gesiriech, 2008). When children are removed from their families, there are several different options for them in the child welfare system, including: prevention, CPS, FPS, foster care, and adoption.

Prevention and FPS activities both provide services to families who need assistance in the protection and care of their children. CPS investigate reports of CAN and make the ultimate decision as to whether or not children can safely be left in their homes. If it is deemed that the children are unsafe, foster care is an option for alternative care. Finally, adoption or another permanent planning option is considered for children who leave foster care and will not be returned to their families (i.e., parental rights have been terminated).

This movement through the child welfare system is depicted in the following diagram (Figure 1), which is based on a similar figure by Badeau and Gesiriech (2008). This figure depicts the journey a family/child may take through the system and indicates which area of child welfare practice each action falls under. First, prior to the reporting of CAN, prevention services are ample for communities and families, which aim to support families and reduce the likelihood that incidences of abuse/neglect occur. CPS is the next area of practice, which includes the reporting/investigation of CAN. FPS may then be offered to families as an alternative to out-of-home placement. The court ultimately decides if out-of-home placement is necessary, and if it is deemed necessary,
foster care services are offered. After a year in foster care, the court decides whether or not it is safe for the child(ren) to return home. If not, TPR commences. Adoption/other permanent placement options are then finalized.
Figure 1. Flow Chart of a Family and Children Involvement with the Child Welfare System
Throughout this movement in the system, child welfare workers are involved with children and families across these different areas of practice (e.g. prevention, CPS, FPS, foster care, adoption). A brief description of child welfare workers and characteristics surrounding their child welfare practice are described next.

*Child Welfare Workers*

The general processes and plans surrounding children and families involved with the child welfare system are often considered “casework,” and involve assessing a family’s situation and formulating a plan to address their needs (Lindsey, 2004). This process is generally carried out by the “caseworker,” or child welfare worker. The role of the worker is to identify the needs and supports necessary to help the family to keep or return children to their homes. The overall hope is that the worker is able to identify what services (e.g. financial, housing, etc.) are ultimately needed for the family to meet their needs.

Child welfare experiences a great challenge with regards to the recruitment and retention of child welfare workers, which ultimately jeopardizes the safety and security of children (Annie E. Casey Foundation, 2003; United States General Accounting Office [USGAO], 2003). While low salaries are a large factor contributing to turnover rates of workers, additional factors include: large caseloads, little support/supervision, and lack of education/training (Annie E. Casey Foundation, 2003; Blome & Steib, 2007; USGAO, 2003). All of these challenges impact the services delivered to children and families because, for example, overworked child welfare workers may not have sufficient
amounts of time available to address all safety concerns or conduct home visits due to their large caseload (USGAO, 2003). Many workers choose to leave child welfare agencies due to feeling overworked and under prepared (Blome & Steib, 2007).

There is additional literature around child welfare worker factors that potentially pertain to their work in the child welfare system. Areas of interest related to this are caseload size, region of practice, educational area of study, level of burnout, and years of practice. Each of these factors is discussed below.

**Caseload.** First is caseload size. In general, there is debate around what an “ideal” caseload number is in the child welfare system. Tittle (2002) completed a review of literature around what is the ideal caseload size in child welfare, and what is involved in determining the ideal size? Tittle reports that caseloads of no more than 15 are most desirable in child welfare, workers report that high caseloads lead to their feelings of burnout and eventual leaving of their jobs, it is important to consider what is going on with each particular case (that is, even small caseloads may require much effort on behalf of the worker if the case is complex), and although there have been attempts to create formulas for assigning cases to workers, there in no consensus around this process. Tittle explicates that many child welfare workers have more than 15 cases, and it is relatively unknown how this impacts the individual children within these cases.

Caseload has also been evaluated in relation to retention of child welfare workers, with mixed results indicating that in some instances, caseload factors do influence retention, whereas in others, it does not (Jacquet, Clark, Morazes, & Withers, 2007;
Weaver, Chang, Clark, & Rhee, 2007). High turnover rates of child welfare workers is a challenge the system faces, and it is important to consider worker caseload factors in relation to this challenge.

*Region of Practice.* Next, the consideration of region of practice is important. Templman and Mitchell (2002) explain that in many cases, rural areas are utilizing an approach to child welfare practice that has been developed for more urban or suburban areas. For example, many rural areas do not have a large-scale public transportation system, and resources are more spread out than they are in cities. Depending on the size and location where services are offered, child welfare workers may specialize in one area of practice (e.g. CPS, or foster care), while in other agencies, workers will follow one family/child across the continuum of services. For instance, in rural areas, resources are often much more limited than in urban areas, and workers must be able to perform multiple duties around child welfare related activities (Mack & Boehm, 2001). Rural areas often have fewer workers who have to work across a large land area (i.e. requiring more travel time), and thus have less time and resources to specialize in any one area of service. The assumption when workers are not specialized in one area of practice is that workers offer multiple services to the same family, and follow that family throughout the child welfare process (Lawson, personal communication, January 21, 2009).

*Educational Area of Study.* The educational background of child welfare workers in the system is a popular area of research (Dyer, 1977; Robin & Hollister, 2002; Tracy & Pine, 2000). Child welfare is a prominent area in social work practice, but it varies as to
how it is taught and learned in schools of social work nationwide; however, a social work education is considered the best preparation for working in child welfare (Tracy & Pine, 2000).

To explain, a Bachelor’s in Social Work (BSW) is the first level of social work education, with a Master’s in Social Work (MSW) the more advanced level. From a 2004 survey of 10,000 licensed social workers (not child welfare specific), a social work degree (BSW or MSW) was the most common degree for workers entering the field (University at Albany, 2006); however, 8.0% of the workforce entering the field did not have a social work degree. This leads to the question of: how, if at all, do practicing social workers differ based on their educational area of study?

An early study by Dyer (1977) looked at social workers with BSW degrees and social workers whose only social work training stemmed from the agency in which they worked to see how each group valued different norms—professional norms, agency norms, and client norms. Professional norms are considered those that are systematically taught to workers who receive their BSW degree, and include such ideas as learning theoretical bases for assumptions, professional standards, belief in professional training, and so forth. Agency norms are established by the agency and must be followed by those who work there, and client norms are considered to be individualized to each client and depend on the needs of that client. The results of the study indicate that BSW workers were more professionally-oriented, had aspirations to further their education in the field.
of social work, and considered social work a long-term career (all in comparison to agency-trained workers). It was also found that both groups strongly believed in agency norms.

Also, some research addresses the effectiveness and experiences of MSW workers. Title IV-E of the Social Security Act allocates funds that are available for social work education opportunities specifically related to child welfare, including funds for students pursuing their MSW degree to work in child welfare (Robin & Hollister, 2002). While IV-E dollars are available to BSW and MSW level students, the study by Robin and Hollister specifically looked at the experiences of MSW workers who received IV-E funds while obtaining their education. The authors found that these workers made leadership contributions in the area of child welfare, including through program development, policy advocacy, administration, research, ethical practice, training, and planning.

*Level of Burnout.* Finally, Feelings of job stress and being burnt out are an area around child welfare workers that is often considered. Burnout is defined as “a prolonged response to chronic emotional and interpersonal stressors on the job and defined…by three dimensions of exhaustion, cynicism, and a sense of inefficacy” (Maslach, 2003, p. 189). Burnout is considered to be a factor related to individual workers, and to organizations as a whole, and has been studied for over 30 years in
relation to social service professions (Daley, 1979). When workers experience strong feelings of burnout, they are likely to also experience job stress, detachment, and even choose to leave their jobs (Maslach, 2003).

Most research related to burnout stems from Maslach, and the Maslach Burnout Inventory (MBI), which measures the three dimensions of exhaustion, cynicism, and sense of inefficacy (Maslach, 2003). Interestingly, of the three dimensions, emotional exhaustion is the only one that has been found to predict worker turnover and/or intention to leave their jobs (Strolin, McCarthy, & Caringi, 2007), and is the essence of work burnout (Koeske & Koeske, 1989).

*Years of Practice.* Child welfare workers’ years of practice (or experience) have been studied as they may impact client outcomes (Littell & Girvin, 2006). Studies have indicated mixed effects of experience in child welfare, but in some instances, workers with experience in child welfare were more likely to engage certain subsets of clients (Littell & Tajima, 2000). Wasmund and Tate (1988) also found that workers’ experience was somewhat related to their performance (e.g. most experienced workers performed the best), but they also explain that this would be expected, as those workers who were not successful would likely have left the field.

Child welfare workers are the individuals who carry out the work of the child welfare system. As previously mentioned, the child welfare system can be considered in five different areas of practice—prevention, CPS, FPS, foster care, and adoption. The
next section provides information around each of these services, and the child welfare workers’ role within them.

*Child Welfare Services*

Movement throughout the child welfare system was explained across the five areas of child welfare practice. A more in depth discussion of each of these services is warranted to gain a more complete picture of the system at large. The historical perspective for each of these five areas of services can be traced back to the initial work of the Children’s Bureau (with the first underpinnings of FPS), and also through the Residual Model of services (Lindsey, 2004). The Residual Model proposed by Kadushin initially had three tiers of services for families: supportive, supplementary, and substitute (Lindsey, 2004). The supportive tier was aimed to provide general prevention and in-home services for families (i.e. FPS) to help parents carry out their duties. Supplementary services included the provision of income assistance to families to support them. The substitute level of services was considered as general foster care and adoption services. While this three-tiered model was recognized, the residual approach to services originally limited child welfare services to the substitute, or foster care, level of services (only targeted services—foster care—were offered for the families with the most needs) (Lindsey, 2004).

The current picture of child welfare is different than this model from the 1960s. There are entire organizations that are dedicated to the prevention of CAN (e.g. Prevent Child Abuse America [PCAA]), and models of FPS that have been researched as to their
effectiveness (Berry, 2005). CPS have since been influenced by CAPTA, and foster care and adoption services have expanded due to related legislation. The following sections address each of these services more specifically.

_prevention._ It is important to consider the multiple child welfare services offered to families and communities that are considered preventative. For the purposes of this discussion, the term “services” encompasses only child welfare-funded community and familial services. These services are mainly available to generally support families, promote healthy development, reduce risk for children, and help families maintain connections within the community. Prevention services are often broken into three categories: primary, secondary, and tertiary (Friends, n.d.). Primary prevention is targeted toward the whole community, and is what most consider when thinking “prevention”—these activities aim to teach and inform families before any allegations of child abuse or neglect ever occur. Open parent/guardian education classes, family support groups (Friends, n.d.), and life skills training for youth (PCAA, 2008) are examples of primary prevention services. Sexual abuse prevention programs, teenage pregnancy prevention programs, and sex education programs are also general prevention activities offered to youth (Downs et al., 2009). Secondary prevention services are for families who may be more at-risk for child abuse/neglect, such as substance-abusing parents/guardians, teenage parents/guardians, or low-income families. Activities for this group might include home visits or parenting classes for at-risk parents/guardians. The highest level of prevention, tertiary prevention services, is for families who have been
reported (regardless as to whether or not the case was substantiated or unsubstantiated) as
abusing/neglecting their children. These families need specific interventions; as most
likely, these families that fall into the tertiary category qualify for services from other
child welfare programs (Friends, n.d.).

*Worker role in prevention.* A child welfare worker’s role within prevention
services is also important. Prevention services include linking families to needed
supports, educating children and families, and child welfare workers acting as a support
system for families (Downs et al., 2009). A child welfare worker’s role in the context of
prevention services for all intents and purposes is the same as a child welfare worker’s
role in family support services and will be discussed more in depth in relation to these
services for families.

*Intake and investigation.* Child Protective Services (CPS) encompass the
reporting and investigation of CAN. It is important to consider the process through
which CPS are specifically implemented throughout these two areas of child protection.
As already discussed, some professionals are mandated to report cases of child
abuse/neglect. Since the 1960s, there has been a large increase in reports of child abuse
and neglect, with fewer than 10,000 reports filed in 1967, and over 3 million reports filed
in the mid 1990s (Waldfogel, 1998). This increase in reports indicates that many
mandated reporters are fulfilling their obligation to report CAN. States have the
discretion to name individuals who are specific mandated reporters, however; under
CAPTA every state is required to report cases of child abuse and neglect to the states’
child protective agency. A mandated reporter is a person, in their professional capacity, who is obligated to report suspicions of abuse or neglect. Some states specifically name professionals, such as social workers, physicians, dentists, teachers, who are mandated reporters, whereas other states require any individual with suspicions to report.

**Worker role in intake and investigation.** When a case of child abuse or neglect is reported to a child welfare agency, that agency must gather information on the case in a timely manner, through making contact with the child, parents/guardians, and other individuals who may be able to provide pertinent information on the case to decide if a case is substantiated or unfounded (Downs et al., 2009; Badeau & Gesiriech, 2008). Within the reporting and investigation component of child welfare services, CPS workers are responsible for “the timely gathering of information, through contact with the child, the parents, and individuals who can provide collaborating information” (Downs et al., 2009, p. 223). These staff must be trained in investigation, and know how to be objective, thorough, unobtrusive, and sensitive toward the family, all while keeping the child’s safety and well-being as their number one priority.

**Family preservation and family reunification services.** Family preservation services (FPS) and reunification services involve the processes of working together with families so children can ultimately remain in or return to their homes. However, to begin, general familial support services that are not necessarily child welfare-based will be considered as they relate to the protection of children.
As Tracy (2000) explains, family support services are differentiated from FPS due to the fact that FPS are reserved for the most at-risk families, whereas general family support services (e.g. employment resources, housing information, etc.) may be resources that are available for families not necessarily involved with child welfare. The idea of FPS originated to prevent unnecessary out-of-home placements for children (Littell, 2001). The goal of FPS is to address the needs of the family and learn more overall about the context and environment where CAN is taking place (Cash & Berry, 2003). With FPS, child welfare agencies attempt to improve family conditions, regardless as to whether or not a child is removed from that family. Examples of services that might be provided through FPS include linkage to community resources, assistance in finding stable housing or employment, or counseling services (Berry, 2005).

Family reunification is the typically the desired outcome during permanency planning for children placed in out-of-home care (Barth & Berry, 1987). The family reunification process includes an agreement between parents/guardians and the child welfare agency that states what the family needs to accomplish in order for children to be returned home (Downs et al., 2009). The goals of this plan are typically based on the allegations related to why the children were initially removed from their home—e.g. due to neglect. The agency and family work together to accomplish the steps related to reunification. For instance, the agency may be responsible to link the family with needed services (parenting classes, job resources), and the family may be responsible for attending parent education classes, find stable housing, and so forth.
Worker role in family support, preservation, and reunification. Child welfare worker roles in family support services, FPS, and family reunification services are broad. To begin, when considering family support services, it is important to recognize that these services are not necessarily a part of the child welfare system. For example, these services might include programs offered by hospitals, day care centers, churches, or universities (Downs et al., 2009). The role of child welfare workers within these services is not well-defined. In many cases, though, workers may assist in therapeutic services to families and children through group work with children, family therapy, or individual casework with parents. Workers’ roles in this area also pertain to the concept of concurrent planning, which means that they can be working toward reunifying the family, in addition to working toward other permanent placement options for youth (e.g. adoption).

Out-of-home placement. In order to gain a better understanding of foster care in the 21st Century, it is important to consider the different categories of foster care, and the positive and negative aspects related to each. For the purposes of this section, the foster care placement options to be discussed are: kinship care, non-relative foster care, therapeutic or treatment foster care, and residential group care. Youth who “age out” of foster care will also be discussed.

Kinship care. To begin this discussion, kinship care will be considered. Kinship care is defined as “care provided by relatives to children in the custody of the state” (Keller, Wetherbee, Le Prohn, Payne, Sim, & Lamont, 2001, p.916). The concept of
kinship care is not particularly new, especially in other cultures, such as in Latino and African-American communities. Since the 1990s, placement of children in kinship care settings has increased more than any other type of out-of-home care. Kinship foster caregivers may or may not be licensed, depending on if they are formal foster care providers within the child welfare system (as is the case in the context of this discussion) or children are in their care through an informal family arrangement without child welfare/court involvement (Downs et al., 2009).

Non-relative foster home care. Non-relative foster care is for those children placed in a non-relative foster home to provide them with temporary care. Foster parents must have completed some training in order to become licensed foster parents by their state (Downs et al., 2009, p. 298). Children placed in foster family homes are encompassed by the foster family, and essentially become a part of the family. There are opposing issues related to becoming a foster parent—the desire to help a child in need, versus having to follow somewhat strict licensing and professional relationships with children. A professional relationship in this context, for example, could mean being respectful of a foster youth’s culture if it differs from the foster family’s culture. That is, an American family may have a native Mexican youth placed in their home, and it is important for that youth to feel welcomed and comfortable within the home, while being allowed to follow whatever customs he or she may practice. Foster parents must also support the family reunification process of youth in their care—e.g. promote visits with families of origin/parents while youth are in out-of-home care.
Therapeutic foster care. Therapeutic (or treatment foster care (TFC) is a somewhat new service that has more recently become a popular option for youth when placed in out-of-home care. The services provided to youth in TFC are more intensive than in a traditional foster care home environment, and TFC somewhat combines traditional foster family care and residential treatment. Foster families who provide TFC services to youth in their care receive training on behavioral management techniques and theories. Treatment foster care is an option for youth who may have significant developmental, medical, emotional, or behavioral disturbances (Hussey & Guo, 2005), and is the “in-between” placement for those children who do not necessarily need residential group care, but need more than the traditional foster family placement.

Residential group care. A residential group home is “a homelike setting in which a number of unrelated children live for varying time periods. Group homes may have one set of house parents or may have a rotating staff and some therapeutic or treatment group homes have specially-trained staff to assist children with emotional and behavioral difficulties” (Adopting, n.d., n.p.). A residential treatment center is an out-of-home placement “where the child receives help with many areas of his or her life that have gone awry, particularly psychological and/or behavioral problems” (Adamec & Pierce, 2000, n.p.). Residential treatment is considered to be more intensive than a group home, and children are usually placed in residential treatment facilities when they experience trouble in nearly all aspects of their lives—e.g. family, school, peers, etc. (Adamec &
As the Child Welfare League of America (n.d.) postulates, residential group care:

Residential group care encompasses a broad array of services for children with pronounced special needs. Residential services are highly flexible and provide for varying lengths of stay, based on the client's needs. Length of stay may range from a short respite due to tense family situations, to long-term therapy for problems such as drug or alcohol addiction. Although long-term stays in family-like community-based group homes best serve some children's individual needs, residential group care is usually a temporary placement. Many children in residential care have emotional or physical conditions that require intensive, on-site therapy; others receive services from day treatment programs in their communities. Residential care programs are highly flexible and are designed to meet each child's individual needs. (n.p.)

The services offered by residential facilities range from counseling and mental health services, to educational and general health care. As the CWLA (2005) explicates, residential group care offers services to families and children through community links, and onsite services (i.e. the youth stays in the facility for a period of time).

Worker role in out-of-home services. No matter where a child is placed when removed from his or her home, it is vital for the foster care worker to work
collaboratively as a team with foster parents, the child, courts, schools, parents/guardians, and therapists (Temple-Plotz, Stricklett, Baker, & Sterba, 2002). Workers in all areas of foster care must build positive relationships and work collaboratively with the children’s foster parents/caregivers. The specific, collaborative role of child welfare workers with foster parents/caregivers includes working with them to decide what parenting tasks are to be completed by the foster parent/caregiver versus what are to be completed by the child welfare worker, discussing the role of birth parents and relatives throughout the process, and making sure that the foster youth’s physical, emotional, and educational needs are constantly being met (Downs et al., 2009). In non-relative foster care, foster parents are licensed professionals caring for children, and they require ongoing worker/agency support.

Child welfare worker roles in TFC settings align with the responsibilities of those in other foster placement settings, with the additional component of working with foster parents/families who are trained to work with youth who are not at the level of needing residential care, but are also not best served by a traditional foster care setting (Hussey & Guo, 2005). Foster caregivers in TFC settings are trained on behavioral management theories/techniques, and child welfare workers, again, must work together with these caregivers to ultimately serve the child. Child welfare workers in TFC have a smaller number of caseloads than workers in other settings because of the higher level of treatment needed for these youth and foster families, and all involved with youth in TFC are considered a part of a “treatment team” (Jivanjee, 1999).
In residential group care staff members are present on a 24-hour basis (Downs et al., 2009). That is, youth in this setting are in a controlled, therapeutic living environment, and these staff offer an array of services in this environment, and work together with all members of the group care team. The role of these staff in youths’ lives is similar to that of a child welfare worker in other out-of-home placements. Residential staff members are with these youth daily and work with them toward their goals, as child welfare workers do with youth in other foster care settings. Aging-out of any foster care setting requires workers to work with these youth to develop individualized independent living plans, and, more specifically, work with youth who to gain services in order to further their education.

_A adoption._ Adoption, as defined by Downs et al. (2009), is “a social and a legal process in which the parent-child relationship is established between persons not related by birth” (p. 390). More recently, the federal government has started collecting information related to foster care and adoption with the Adoption and Foster Care Analysis Reporting System (AFCARS). AFCARS is administered by the Children’s Bureau (ACF, 2008), and it reports such statistics as the length of stay in foster care and length of wait for adoptions. There is no national collection of information, however, on adoptions by stepparents, relatives, private adoptions, or any other adoptions that take place without child welfare involvement.

The Adoption and Safe Families Act (ASFA) also has changed the processes of adoption within child welfare. The impetus behind ASFA arose because it was believed
that too many children remained in foster care while efforts were being made to reunify children with their families (Lindsey, 2004; USGAO, 2002). A provision of ASFA is the ability of child welfare agencies to bypass efforts to reunify families in instances of extreme circumstances. The overarching purpose of ASFA is to promote safety, permanency, and well-being of children, and it offers incentive payments for states based on the number of youth who are adopted from the foster care system (Murray, 2000).

Atkinson and Gonet (2007) studied the needs and concerns of adoptive families in Virginia. They found that families needed continued support even after adoptions were finalized, regardless of how the adoption originated. Adoptive families noted the most struggles with behavior problems with their children, and general school issues and the need for assistance in navigating the education system when problems arose. Child Welfare Information Gateway (2006) discusses post-adoption issues families are likely to encounter, such as loss and grief on behalf of the child(ren), trust and attachment issues, school problems (e.g. an adopted child may have problems completing a “family tree” assignment that seems very basic to non-adopted children), identity formation, medical concerns, or birth relative contact. Milestones such as birthdays or holidays may also cause times of stress and anxiety for adopted children.

Services classified as post-adoption are diverse, although there are typical genres of services frequently offered (Child Welfare Information Gateway, 2006). Adoptive parent support groups, mental health counseling, conferences, books and other periodicals, recreational opportunities (e.g. camps for families and children), and respite
care are all common post-adoption services. (Respite care is basically child care for children who require more skilled care than a babysitter is able to provide). Adoption influences families/children throughout their entire lives, and it is important for them to utilize these resources in order to preserve their own families.

**Independent living services.** If the court chooses to leave a child in foster care (as opposed to adoption/legal guardianship), that child will not have one permanent home, and will remain in the foster care system until they “age out” at age 18 (or 21 in some states). As noted in the Social Security Act, the youth who remain in foster care receive independent living services to assist them in career exploration, vocational training, learning daily living skills, budgeting skills, living a healthy lifestyle, gaining employment, and/or entering a postsecondary institution.

The aging-out issue of foster youth is an important process and related to educational experiences as well. “Aging-out” of foster care essentially means that the foster youth becomes an adult, i.e. turns 18 (Crosson-Tower, 2007). (Note, the age of 18 is not exclusive—if the youth has a physical or mental disability, or is seeking education, they may remain in foster care for extended periods). Related to aging-out of care is the Foster Care Independence Act/John H. Chafee Foster Care Independence Program of 1999 (FCIA/Chafee). The specific objective under this program is to “provide resources to states to make available vouchers for postsecondary training and education, to youths who have aged out of foster care or…have been adopted…after age 16” (Catalogue of Federal Domestic Assistance [CFDA], 2008). The program aims to assist children who
remain in foster care until they are 18 by providing support (for example) in obtaining a high school diploma, career exploration, vocational training, learning daily living skills, budgeting skills, living a healthy lifestyle, gaining employment, and/or entering a postsecondary institution.

Worker role in adoption, post-adoption, and independent living services. In relation to adoption and post-adoption services, child welfare workers may work with birth parents to help them learn about adoption as an option, counsel them around the adoption process, and provide information about contact with their child/adoptive family post-adoption (Downs et al., 2009). Workers may assess the child’s needs in order to find an appropriate adoptive family, and help children through the adoption transition, specifically with older children (Downs et al.).

Within adoption services, child welfare workers help recruit adoptive families, work with the adoptive family to teach them about the child’s past before adoption takes place, and address any concerns the adoptive family may have. In essence, child welfare workers and adoptive families work together to make sure the adoption is the best fit for the child and family. It is specifically the child welfare worker’s duty to inform the adoptive family of the child’s history, address how that history may influence future experiences, and work with the adoptive family to plan for any challenges they may face with the child (Lakin, as cited in Downs et al., 2009).

As the child welfare system encompasses a wide range of services ranging from prevention to adoption, there are many instances where the system and child welfare
workers within it could come into contact with school staff around the needs of a particular child. These instances and interactions also may differ depending upon the role of the child welfare worker—e.g. a worker in CPS versus a worker in foster care.

Understanding the role of the school in a child’s life is important, in addition to understanding people within the school who help to promote children’s overall well-being. First, it is important to recognize the educational outcomes associated with youth in the child welfare system.

The Child in School

Clearly, children who are victims of abuse and neglect are also attending schools. This section will explain related outcomes of child welfare youth in schools, the role of the school, important people within schools who may be supportive of the child welfare system, and the overall role of schools in the community/ways in which schools could collaborate with the child welfare system.

*Education of Children in the Child Welfare System*

Children involved with the child welfare system experience additional educational challenges that their peers do not. In general, child welfare-involved youth often experience cognitive, social, and behavioral delays (Wulczyn et al., 2009). These deficits may have multiple etiologies, but they likely impact the academic achievements of these youth. Often it is believed that the challenges faced by child welfare youth are due to the lack of learning at a young age (i.e., neglect) and their emotional instability from a history of CAN (Finkelstein et al., 2002).
Nationally, data have been collected on the overall well-being of youth in the system, including information on school-related outcomes and behaviors. The National Survey of Child and Adolescent Well-Being (NSCAW), collected by ACF, has data from families/youth who became initially involved with the system between October 1999 through December 2000. Over 6,000 children were included in the initial data collection, from 92 child welfare agencies across the United States (ACF, 2009). Overall findings from the NCSAW indicate that youth in the system need additional educational services to keep on track, face challenges (e.g. depression, delinquency) their peers do not, school behavior problems, and below average academic achievement (ACF, 2005).

Data have been collected on different age groups of youth (e.g. pre-school ages, elementary, adolescence, and young adulthood), around school/educational outcomes. Findings from the study indicate that children who entered the system in infancy were within typical ranges of academic achievement 5 to 6 years later, but usually at the lower end of these ranges (ACF, 2009). These children were also placed in special education at higher rates than their peers. Elementary-aged youth were found to have similar rates of delinquency to older youth (i.e. higher). Older children in the study reported having more school problems; however, over 75% of youths over the age of 10 years old indicated that they would graduate high school and have a good job. At the beginning of young adulthood (ages 18-21) youth who had been involved with the system scored below average on academic achievement tests in comparison to their peers. Nearly 60% of these young adults did report, however, that they received help with education
services, and over 90% indicated that they received education, job, financial, housing, or
daily-living assistance from parents and family members, as well as teachers/schools.

There is additional research around the educational attainments of youth in the
child welfare system. Other research has found (similar to the NSCAW findings) that
youth in the child welfare system achieve below their peers academically (Finkelstein et
al., 2002), and there are many contributing factors related to this low achievement.
Children involved with the system, specifically those in foster care, often experience
multiple school placements (Casey Family Programs, 2007). Youth who are removed
from their families and placed in out-of-home care may have to change schools. If youth
are moved from foster home to foster home, they also likely changes schools. Smith,
Johnson, Pears, Fisher, and DeGarmo (2007) present that many youth in their study
moved foster homes frequently—with an average of more than six different foster
placements, with some as many as 18 different placements. This high frequency of
placements is not uncommon. Many youth view at least one special teacher as a role
model, and as such, that teacher may be one of the few stable adults in the youth’s life.
With frequent school changes, foster youth do not have the opportunity for such
relationships to be built.

Child welfare youth often experience higher rates of placement in special
education classes, poor school attendance, are less likely to perform at grade level, and
are more likely to dropout of school (ACF, 2005; Finkelstein et al., 2002; Vera Institute
of Justice, n.d.). Youth with behavioral problems are often placed in special education
classes as a way to address the behaviors, even though there is controversy over the appropriateness of these placements (Wulczyn et al., 2009). For instance, Wulczyn et al. found that almost half of sixth through eighth grade students in Chicago Public Schools who were in out-of-home placements were in special education classes. They also found that students in out-of-home care were more likely to have an emotional or behavioral disorder diagnosis. As Wulczyn et al. (2009) postulate, placing youth who are in out-of-home care in special education classes is not likely to solve their behavior problems.

Finkelstein et al. (2002) studied “What Keeps Children in Foster Care from Succeeding in School?” In contrast to these factors (e.g. poor attendance, change in schools, etc.) many consider to be the most challenging barriers for youth, Finkelstein et al. found others. From interviews with adolescent foster youth, the researchers found that many indicated distracting events, such as thinking of “home” or having to meet a parent in court, as reasons for poor school performance. These youth also identified traumatic events, such as being removed from their parents, as factors influencing their school performance. They also noted their lack of completing homework, studying, and behavior problems as contributing factors to their poor academic performance.

Child welfare involved-youth also have limited access to college opportunities (Vera Institute of Justice, n.d.), which may ultimately limit the career/future goals of these youth. While these challenges are also present in the lives of non-child welfare-involved youth, those in the child welfare system may not have the familial or adult support to address these barriers. The next section will briefly explain the magnitude of
the school system, and individuals within schools who may act as intermediaries and supporters of child welfare-involved youth, as well as the child welfare system at large.

School System

As of Fall 2007, 62.7 million youth were enrolled in public and private elementary and secondary schools (NCES, 2008). The fastest public school growth (for the time period 1985-2007) was seen in the elementary grades, with enrollment increasing by 28%. However, between 2000 and 2007, the largest enrollment growth was seen in public school secondary grades, with an increase of 11% to only 3% in the elementary grades. An increase in enrollment in both elementary and secondary levels is expected to continue through the year 2016, with new records expected to be set every year during this time.

Players in the school. There are adults within the school setting who are involved with youth and also support the efforts of the child welfare system. First, teachers, and educational professionals in general (e.g. principals, school counselors, etc.) comprise the largest group of mandated reporters that report CAN (ACF, 2006). Related to educating these youth specifically, Finkelstein et al. (2002) reported that in reality, there are a number of adults responsible for the education of foster children. In many cases, however, the responsibilities of these adults (e.g. child welfare workers, teachers, school counselors) are unclear. A child welfare worker’s involvement with their clients’ education is very often limited to talking with school professionals around behavioral problems of youth (Finkelstein et al., 2002). Finkelstein et al. specifically asked foster
care youth what adults in their lives they approach with school questions or concerns such as homework problems. The majority did not know how to ask for such help because they had never received it in the past; however, it was found that there were trusted adults within the school that some youth would ask for assistance.

Teachers are also individuals in schools who are involved with youth—perhaps the most involved as they see their students daily, for a total of over 1000 hours a year (NCES, 2008). Teachers hold a critical role in the lives of their students. They may be able to readily recognize problems or changes in their students’ behaviors, and ultimately offer suggestions or referrals for services (e.g. child welfare) (Anderson-Butcher, 2006). Without question, teachers are players in schools who must be aware of the non-academic needs of students, as well as effective strategies to address these needs (Weston, Anderson-Butcher, & Burke, 2008).

Another specific player within some schools is the school social worker. The role of the school social worker can be seen as the “liaison” who is able to communicate and possibly facilitate changes to take place between schools and child welfare agencies (VanBergeijk & Sarmiento, 2005). However, not all schools have school social workers. Even if a school social worker is at a particular school, their role is not always clearly defined, and most likely is variable across local communities (Allen-Meares, 1994; Kelly, 2008). Constable (2006) presents the following role that school social workers play:

School social workers work with young people and their school and family environments, assisting them to accomplish tasks associated with their
learning, growth, and development, and thus to come to a fuller realization of their intrinsic dignity, capability, and potential. The school social work role can be flexibly developed from this purpose and these values (p. 5).

As Kordesh & Constable (2006) propose, the school social worker may be the person who is leading the efforts of wraparound/service coordination services for youth.

There are other student support personnel in schools who assist youth. This includes school counselors, who are “vital members of the education team. They help all students in the areas of academic achievement, personal/social development and career development” (American School Counselor Association [ASCA], 2009, n.p.). School counselors’ roles may vary somewhat depending on the level of school they work in/age group they work with (e.g. an elementary vs. a high school), but overall they are important players in schools who not only work with students around academic concerns, but other personal and social issues as well. Intervention specialists, teaching assistants, after-school staff members, and others, also assist in the overall education and development of youth. It is important to consider the roles of all of these individuals in the school who can contribute to the education and well-being of child welfare-involved youth. It is also necessary to consider the school and its role within the community.

Location and Role of School in the Community

As there are individuals within schools who are critical in the lives of child welfare youth, the entire school itself is also an important resource to consider as it
houses many potential opportunities for programs and supports. Schools are central to a community and often viewed as communal hubs (Taylor & Adelman, 2000), which ultimately suggests that they can be a location to offer family support programs (e.g. financial or housing assistance), after-school programs, prevention activities/classes, mental health services, and so forth. All of these services overall support children and their families, and could be targeted to specifically reach those involved with the child welfare system.

An example of schools acting as a host location for community resources stems from the concept of community schools, also known as full-service schools (Diehl & Frey, 2008; Dryfoos, 1996). As Dryfoos (2005) explains:

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Community schools are those that have been intentionally transformed into neighborhood hubs and that are open all the time to children and their families. In these buildings, a range of support services is provided by community agencies to help overcome the many barriers that schools face in producing successful students…they are operated through partnership agreements between public schools and community agencies (p.7).
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Dryfoos goes on to explicate an example of such a community school in the state of New Jersey, which offers families access to computers, food, medical professionals, social workers, and general support from other families in the community. Schools such as this one have taken steps toward addressing students’ non-academic barriers to learning by
acting as the communal hub for services across an array of areas. However, Dryfoos explains that community schools should not just be considered the program and services within the school itself, but an overall strategy for student success.

As Dryfoos (2005) posits, a community school in one location will be different than a community school in a different location, as the resources offered will depend on the needs and wants of the community. The community school model could easily include the child welfare system, from the inclusion of prevention services being offered, to the school acting as a location for families/children to meet with their child welfare worker. Dryfoos (1996) also states that in many instances, full-service schools already offer such services as social skills, general family welfare resources, housing aids, employment resources, legal aid, counseling, child care, parent education classes, and case management services.

As the data on child welfare youth educational outcomes and areas for collaboration by school staff and communities indicate, it is now important to consider the ways in which child welfare and schools can interact to address these needs. The child welfare system at large is comprised of five different genres of services—prevention, CPS, FPS, foster care, and adoption—and schools are entities that have the capacity to provide services to community members. Considering the ways in which these child welfare services could be offered in schools in addition to the ways in which workers across the five genres interact with schools is important, as the two systems are clearly intertwined with each other.
Child Welfare Services and Schools

Recent research has begun to address the current relationships between the child welfare system and schools, but none directly looks at the possible relationship between child welfare services and schools, as there is a challenge to find productive ways for the two systems to collaborate (Downs et al., 2009). This section presents several areas where, based on this information of child welfare services, the child welfare system might feasibly interface with schools. Little is known on how the different areas of child welfare services are offered in schools. Before this consideration of collaborations between child welfare and schools, it is key to understand driving principles underlying the need for such interactions. This is presented through a discussion of Social Systems Theory next.

Social Systems Theory

The foundation of Social Systems Theory is based in the idea that the behavior of individuals does not take place outside of his or her environment (Dale et al., 2006). This idea of “person in the environment” relates to the general concept of providing an array of supports (in this case, offered by the child welfare system) to children—to assist them in obtaining a safe and healthy living environment.

For example, if a child is continually experiencing behavior problems in the classroom, it is not a fair assessment to solely consider that this child is misbehaving because he or she is a poor student, unable to learn, or obnoxious, but one must take into account the child’s life, as a whole. This particular child may have just changed foster
homes for the fifth time, live in an impoverished neighborhood, have no familial support in the area, and/or be struggling with mental health issues. All of these additional factors must be considered wholly with the fact that this child is acting up in the classroom.

A social system itself is “any entity comprised of individuals who have functionally interdependent relationships with one another” (Dale et al., 2006, p. 5). Clearly, the child welfare system is a large social system, as are schools. Both are mutually dependent on one another. The outcomes of the child welfare system—protecting children and promoting their overall well-being—are dependent on schools; the outcomes of schools—educating children—are dependent on the child welfare system. Each system is accountable for the outcomes of the other. If children are not being protected and served by the child welfare system, they will be unable to achieve well academically (let alone focus in the classroom). To illustrate, if a youth is being abused nightly by his parent, how is he or she supposed to focus each day in school? On the other end of the spectrum, if a youth in the child welfare system is not being offered supports (e.g., from a teacher, mental health services, etc.) in school, that youth may not fair well overall academically.

Social Systems Theory posits that each individual system has boundaries that are in place to regulate interactions with other systems (Dale et al., 2006). For instance, there is no denying that the child welfare and school systems interact with one another, as all children attend school. However, it is not reasonable to suggest child welfare alone should be responsible for educating children in their care, nor should schools be solely
responsible for educating maltreated children. It is important to consider collaborations between the two systems to offer the best services to children and families in the child welfare system.

Another component of Social Systems Theory is proposed output. Proposed output is considered a “hierarchy of outcomes” (Dale et al., 2006), comprised of purpose, goals, objectives, and activities. These goals and objectives are meant to guide a social system’s activities. In the current context, a goal may be for a child welfare-involved child to graduate high school, which could be considered a proposed output. There are many activities (or under the umbrella of Social Systems Theory, “conversion operations”) that must take place by the child welfare system and the school in order for this child to graduate high school, and for this goal to become an actual output/outcome rather than just a proposed output (Dale et al., 2006). These activities include the need for guidance, support, and assistance from the child welfare worker(s) and school(s), especially around school transitions and any academic/behavioral struggles. Feedback tells the system whether or not the output proposed (e.g. the goal of high school graduation) matches with the actual output obtained (obtaining a high school diploma) (Dale et al., 2006). In general, feedback is an evaluation of the system, and informs the system as to how it functions.

If we consider the example of a child welfare youth graduating from high school, then both the child welfare system and schools are being evaluated as to whether or not they are successful. Data are collected around the academic successes of youth in the
child welfare system (e.g. NSCAW) and schools are held accountable for their graduation rates. So if the two systems can somehow enhance their interactions with one another around this goal of helping a youth to graduate, both of their evaluations/outcomes can improve.

There is some research that has addressed relationships between the child welfare and school systems. The next section will provide context around the current state of knowledge on interactions between child welfare and school systems.

**Current Knowledge of Child Welfare-School Interactions**

Although many have advocated for these interactions (Gilligan, 1998), little research to date has actually explored these issues. However, there are a few studies that have. Altshuler (2003) conducted focus groups of child welfare workers, educators, and students who lived in foster care to learn more around possible collaborations between the two systems. She found that there is a lack of trust between the child welfare and school systems, being in foster care places a stigma on students, and there is a lack of communication between schools and child welfare workers that causes frustration on behalf of both parties. From this study, suggestions for improving the educational outcomes of youth in care include: having an educational plan for all youth who are placed in out-of-home care; creating cross-discipline trainings for educators and child welfare workers alike, and making an effort to keep youth who change foster care placements in the same school.
A study by Stone et al. (2007) examined perspectives of child welfare workers, educators, and foster parents related to the interactions of the child welfare and school systems. Similar to the findings by Altshuler (2003), Stone et al. found that there was concern over labeling children as being in foster care, and a consensus over the lack of communication/collaboration between the two systems. Stone et al. also found that child welfare and education stakeholders agreed that the mobility of foster care youth is of concern, there is a need for educational advocacy on the behalf of foster children, and that schools do not always have adequate resources to address the needs of all children. It was also found that there are differences in perceptions between educators and child welfare workers. For example, child welfare workers believed that schools were to blame for lack of services for their foster children, and school personnel believed that child welfare workers were to blame for such delays (e.g. child welfare workers never returned their telephone calls).

Finkelstein et al.’s (2002) study around why foster youth do not succeed in school also offers some insight into the collaborations between schools. In addition to interviewing foster youth, this study examined the perceptions adults (foster parents, school staff, and child welfare workers) have around the school experiences of these youth. Specifically related to the interactions between child welfare and schools, they found that for the most part, child welfare worker involvement was limited to dealing with behavioral problems of youth. Specific to workers in this study from New York City, they were required to visit the school at least twice a year on behalf of the foster
children on their caseload. Even with this requirement, however, the workers in this study overall were not clear on what their responsibilities were in relation to their clients’ education. Workers also reported that they offered support to foster parents around the school registration process for youth, but only directly interacted with schools to check on the problems/behaviors of their clients. This study also found similar results around the frustrations and lack of communication between the two systems because of differing perceptions.

Differing perceptions on behalf of the child welfare and school systems is important to note. For instance, a high risk abuse case to a teacher may be a low risk case to a child welfare worker (Briar-Lawson et al., 1997). Levin (1983) investigated teachers’ perceptions of child abuse and neglect among students in their schools, and found that teachers believed it was important to report abuse and neglect, but many never did. So when a teacher does report a suspected case of abuse and a child welfare worker does not immediately come to their aid, the teacher may form a negative perception of the child welfare system as a whole. Specifically within the child welfare system, as Goerge, Van Voorhis, Grant, Casey, and Robinson (1992) postulate, education is viewed as a second priority in relation to a child’s safety and well-being.

While this research presents perceptions of child welfare workers and school staff as they relate to communication and collaboration between the two, no studies have
addressed the explicit interactions with schools across all areas of child welfare practice. The following section will connect the child welfare-school systems, and provide an overview of the child welfare worker’s role in each.

*Child Welfare and the School Systems*

Based on the knowledge of child welfare services and the practices within, Table 1 suggests ways with which these services could be offered in schools. Please note, there may also be additional possibilities. It is known, though, that schools are central to any community and children attend schools. The collaboration between child welfare and schools could positively impact the lives of children and families who deal with both systems on a day-to-day basis.

**Table 1. Child Welfare-School Interactions**

<table>
<thead>
<tr>
<th>Child Welfare Service</th>
<th>School</th>
</tr>
</thead>
</table>
| Prevention            | • Abuse prevention programs  
                        | • Parenting classes  
                        | • Life skills trainings  
                        | • Trainings for mandated reporters on child abuse/neglect  
                        | • Linkages for families with physical/mental health services |

Continued
Table 1: Continued

<table>
<thead>
<tr>
<th>Child Welfare Service</th>
<th>School</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPS</td>
<td>• Mandated reporting responsibilities</td>
</tr>
<tr>
<td></td>
<td>• Information for investigations</td>
</tr>
<tr>
<td></td>
<td>• Meetings with youth at schools</td>
</tr>
<tr>
<td>FPS</td>
<td>• Family resource centers</td>
</tr>
<tr>
<td></td>
<td>• Parenting classes</td>
</tr>
<tr>
<td></td>
<td>• Location for visits with families</td>
</tr>
<tr>
<td></td>
<td>• Linkages for families to communicate with school staff</td>
</tr>
<tr>
<td>Foster Care</td>
<td>• Knowledge around educational history</td>
</tr>
<tr>
<td></td>
<td>• Extra supports for foster youth</td>
</tr>
<tr>
<td></td>
<td>• Assistance with school transitions</td>
</tr>
<tr>
<td></td>
<td>• Communication with foster parents</td>
</tr>
<tr>
<td></td>
<td>• Aging-out assistance</td>
</tr>
<tr>
<td></td>
<td>• Educational teams to meet needs of youth</td>
</tr>
<tr>
<td></td>
<td>• Communication with school personnel</td>
</tr>
</tbody>
</table>

Continued
As indicated, there are instances where, logically, the child welfare system and schools could work together to work toward positive outcomes for families and children. The following sections explain the ways in which child welfare workers across the five areas of child welfare practice can feasibly interact with schools.

**Prevention services and the school.** Within the school setting, there are multiple ways in which such preventative services could be offered across all levels of prevention. A child welfare worker’s role when offering prevention services in schools may include prevention programs (e.g. abuse prevention programs, stranger danger, etc.), parenting classes, life skills training, and CAN trainings for mandated reporters (e.g. teachers).
Again, any sort of prevention or general parenting/life skills training classes may be geared to students and families, and mandated reporter training in schools is a practice that, in some instances, is already occurring (Conrad, personal communication, October, 2008).

*Intake and investigation services and the school.* When considering the role of the child welfare worker in schools related to their responsibilities within CPS, the connections are the essence of how child welfare interacts with schools at this level of services. Within CPS, schools are “mandated reporters” due to the fact that school personnel (e.g. teachers) are mandated reporters of CAN. Child welfare workers may receive a report of CAN at the school itself, and/or conduct interviews related to a CAN allegation at a school.¹ The often challenging decision that workers must face as to whether or not a child is safe to return home may be assisted through interviews with school staff who know the child well, and may also be able to provide pertinent case information directly to the CPS worker.

*FPS, reunification services, and the school.* The interface between FPS/family reunification and schools is less salient than the school’s interface with CPS, and thus, the child welfare worker’s role in the school here is somewhat more abstract. For instance, it is possible for schools to serve as a location for a family resource center, parenting classes, and a location for parent/guardian visits with children placed in out-of-home

¹ Please note, there are some limitations around interviewing/contacting children at school. Under CAPTA, child welfare workers, in general, are allowed to contact children at school if they believe that the child is in immediate danger upon leaving school at the end of the day
care. First, as Asawa et al. (2008) posit, schools may act as the hub for family resource centers. Such centers offer a common location for families to receive multiple services, ranging from mental health linkage to information on housing. Parenting classes for parents of all ages (adolescents and adults alike) could be arranged so that they are offered in the school building during and after school hours. Finally, visitations for children in out-of-home care and their parents/guardians are an important part to the reunification process, and schools could serve as a location during out-of-school time where workers could arrange family visitations. In addition to the child welfare worker’s role in “typical” FPS, workers could also feasibly organize and administer these opportunities for child welfare services to be co-located in schools. Thus, a continuous location for services could be offered, and likely in a place (i.e. school building) with which many families in the community are familiar.

*Out-of-home placement, adoption, and the school.* The relationships between these foster care settings/workers and schools are closely aligned with the relationships between adoption and schools, and will be considered together. As the spectrum of foster care and adoption services is broad, so is the connection among these services, schools, and the child welfare worker’s role within. In general, the worker role within these services can be summed up as having ongoing communication with schools. That is, in order to appropriately educate children, the school must have knowledge around the pupil’s educational history (from the worker, but also from foster and adoptive parents), be able to offer support for foster youth who have attended multiple schools, have
knowledge around adoption/adopted students and support families of adoption, and work as part of a collaborative team with others who are a part of the students’ educational life. All of these are aspects which stem from ongoing communication with others, specifically child welfare workers.

All of these tasks revolve not only around the school having communication with others, but also with child welfare workers communicating with schools. Finally, as with other genres of services, parent/child support groups (specifically for adoptive families) may be offered in the school, with child welfare workers possibly acting as group leader.

*Independent living services and the school.* Schools and child welfare workers need to be aware of aging-out assistance for foster care youth who graduate high school and wish to continue their education or receive work training. Under FCIA/Chafee, child welfare workers specifically need to assist foster youth in learning more about furthering their education/entering the workforce. The workers’ role here is to generally support these youth who “age-out” of the system by providing them the resources to become successful citizens.

There are multiple ways for child welfare and schools to interface with one another. Child welfare workers are the professionals who carry out the mission and overall work of the child welfare system, thus it is key to learn more about the ways in which they specifically interact with schools. These interactions may not only be related
to the roles of workers in the system across the five areas of practice, but also their caseload size, number of schools served, region of practice, educational area of study, level of burnout, and years of practice.

Purpose of the Study

The overall purpose of this study is to describe the ways in which child welfare workers interact with schools, particularly to see if these interactions differ by child welfare role, and the factors that are related to these interactions. Little, if any, research to date has considered what child welfare worker characteristics are related to the likelihood that workers will interact with the school to offer child welfare services. Based on what is known around worker characteristics and how they may influence the services they provide, the purpose of this study will be to see the frequency with which child welfare workers provide services in schools, and what worker characteristics are related this frequency. First, caseload size of workers will be considered as it is related to the likelihood child welfare workers interact with schools. It will also be considered how many schools one worker interacts with in their job, and how this may affect their involvement with those schools. It is hypothesized that the greater the number of cases and schools a worker has, the less likely he or she is to interact with schools. As research suggests, caseload size often influences worker feelings of burnout and it is unknown how large caseloads directly impacts children (Tittle, 2002).

Next, it is hypothesized that workers in rural areas are less likely to interact with schools than workers in urban, suburban, or more than one region, due to shear area size
of the region with which rural workers must cover, ultimately limiting their ability to spend much time in one place (Mack & Boehm, 2001). The next hypothesis is that workers whose primary area of study is social work will interact more with schools than those whose primary educational area of study was of another discipline, based on the fact that social work education is believed to be the best preparation for working in child welfare (Tracy & Pine, 2002). Finally, it is hypothesized that workers with higher levels of burnout are less likely to interact with schools due to their feelings of emotional exhaustion (Maslach, 2003; Strolin et al., 2007).

Research Questions

As mentioned, there are two primary purposes of the study. First, it aims to describe ways in which child welfare workers interact with schools in their practice, and to see if there are any differences in these interactions by child welfare role. The specific research question is:

**Question 1:** What are the ways in which child welfare workers interact with schools, and do these interactions differ by their role in child welfare?

Second, this study looks at various factors, including caseload size, number of schools served, region of practice, area of study, level of burnout, and years of practice, which might potentially be related to these interactions. The specific question and related hypotheses are:

**Question 2:** What are the factors that are related to the ways in which child welfare workers interact with schools?
**Hypothesis 1:** Child welfare workers with high caseloads will interact significantly less with schools than those with low caseloads.

**Hypothesis 1a:** Child welfare workers with high number of schools served will interact significantly less with schools than those with low number of schools served.

**Hypothesis 2:** Child welfare workers in rural agency settings will interact significantly less with schools than child welfare workers working in urban, suburban, or more than one region.

**Hypothesis 3:** Child welfare workers with a social work education will interact significantly more with schools than those with a different educational area of study.

**Hypothesis 4:** Child welfare workers with high burnout will interact significantly less with schools than those with low to moderate burnout.

**Hypothesis 5:** Child welfare workers with more years of practice will interact more with schools than those with fewer years of practice.
Chapter 3: Methods

The purpose of the study is to gain a better understanding of the ways in which child welfare workers interact with school systems and if these interactions differ by role. It also examines key factors, such as Child Welfare Role, Caseload Size, Number of Schools Served, Region, Educational Area of Study, Level of Burnout, and Years of Practice that potentially are related to these interactions. Child welfare workers completed the Interactions with Schools Inventory, a tool created to examine the multitude of ways in which child welfare workers might interact with schools across the five service areas (prevention, FPS, CPS, adoption, and foster care). They also provided information on the number of children on their caseloads, the number of schools have clients in, and their Educational Area of Study. Last, they completed the MBI Emotional Exhaustion Subscale. In the end, differences among child welfare workers interactions with schools were explored in relation to these various characteristics.

Procedure

The Ohio State University Institutional Review Board (IRB) approved the procedures for this study. First, child welfare leaders within five different states were contacted by the researchers to examine willingness and interest in supporting recruitment efforts. Once initial approval was received, formal procedures for gaining
approval to conduct research in each state were then followed. Statewide agency leaders in four states were the points of contact that provided initial information to the researchers around obtaining permission to distribute the survey statewide. In one state, the director of a statewide organization was the point of contact for survey distribution.

In two of the five states, the respective IRBs approved the study procedures. The recruitment script and survey link were then distributed by the leaders of each states’ IRB to child welfare workers throughout their respective states. Workers were recruited through a snowball sampling technique. Private and public child welfare agencies were included in the survey distribution, and the workers within these agencies comprise the sample for this study. In one state, where a county-run child welfare system was in place, the director of a statewide organization was contacted and agreed to distribute the survey. There was no formal IRB.

Child welfare workers on four states’ agency distribution lists initially received the recruitment script (complete letter in Appendix A) via e-mail. In the state where the director of the statewide organization was the point of contact, the researchers sent the recruitment script to the director, who then distributed it to all members of the statewide organization through a weekly newsletter. The recruitment script described the purpose, approximate length of the survey, and a weblink to complete the survey online. The recruitment e-mail also informed participants that their participation was completely voluntary, and that they would remain anonymous throughout the course of the study. After clicking on the survey weblink, participants were directed to the online survey on
SurveyMonkey, which is an online survey tool. The first page of the survey was the consent of information form, and at the bottom of this page, potential participants indicated whether or not they agreed to participate in the study. Those who did not agree to participate were directed to a page that ended their participation in the study. Those who agreed to participate were directed to the first page of the survey. In its entirety, the survey took approximately 15 to 20 minutes to complete.

Sample

A total of 352 participants accessed the survey online. Of these participants, 60 who accessed the survey did not complete any of the questions and thus were immediately eliminated from the study. An additional 59 participants were eliminated because they did not complete at least one of the subscales within the survey. After removing these 119 participants from the study, 233 were left to utilize in the final data analyses.²

The final sample consisted of 191 females (82.0%), 36 males (15.5%). Six participants (2.6%) did not indicate their gender.³ The average age of participants was 37.13 years old (SD = 10.56) with the range of participants’ ages from 20 years old to 62 years old. Related to race/ethnicity, 87.9% of participants were Caucasian/White, 8.9% Black/African American, 1.3% Asian, 0.9% Hispanic, and 0.9% two or more races. With

² An initial analysis was conducted to see if there were differences among the five states completing the survey. No significant differences were found on the Interactions with Schools Inventory.
³ An independent samples t-test was conducted to see if there were any differences between gender and the Interactions with Schools Inventory. No significant differences were found.
regard to education and licensure, 50.2% of participants studied social work as a primary major in school, and 82.4% of participants had a social work-related license. Finally, the roles of participants were varied, with 43.3% holding a role only in CPS, 28.6% holding multiple roles in child welfare (e.g. work in foster care and adoption, work in foster care, prevention, and FPS, etc.), and 28.2% of participants holding a role in foster care, adoption, preservation, or prevention services. See Table 2 for complete demographics.

Table 2. Participant Characteristics

<table>
<thead>
<tr>
<th>Demographic Variables (n=233)</th>
<th>Percent</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>15.5</td>
<td>36</td>
</tr>
<tr>
<td>Female</td>
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<td>191</td>
</tr>
<tr>
<td>Not Indicated</td>
<td>2.6</td>
<td>6</td>
</tr>
<tr>
<td>Ethnicity</td>
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<td></td>
</tr>
<tr>
<td>Caucasian/White</td>
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<td>197</td>
</tr>
<tr>
<td>Black/African American</td>
<td>8.9</td>
<td>20</td>
</tr>
<tr>
<td>Asian</td>
<td>1.3</td>
<td>7</td>
</tr>
<tr>
<td>Hispanic</td>
<td>0.9</td>
<td>2</td>
</tr>
<tr>
<td>Two or more races</td>
<td>0.9</td>
<td>2</td>
</tr>
<tr>
<td>Licensure</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Continued
Table 2: Continued

<table>
<thead>
<tr>
<th>States</th>
<th>Social Work-Related License</th>
<th>No license</th>
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</thead>
<tbody>
<tr>
<td>Utah</td>
<td>43.1</td>
<td>72</td>
</tr>
<tr>
<td>Ohio</td>
<td>33.5</td>
<td>56</td>
</tr>
<tr>
<td>Maryland</td>
<td>16.8</td>
<td>28</td>
</tr>
<tr>
<td>New York</td>
<td>4.2</td>
<td>7</td>
</tr>
<tr>
<td>Florida</td>
<td>2.4</td>
<td>4</td>
</tr>
</tbody>
</table>

Measures

Based on information from the literature on child welfare services, an Inventory was designed that asks the frequency of school interactions related to each of the five child welfare practice areas. Two additional areas of questioning were included in the survey. First, the MBI Emotional Exhaustion Subscale was utilized to ascertain the Levels of Burnout experienced by child welfare workers. Second, multiple items around particular worker characteristics of interest were utilized. A question was also developed that asked participants to explicitly indicate the number of schools in which they have clients. Caseload Size, Educational Area of Study, and Years of Practice were measured similarly to a Workforce Retention Study survey conducted in the state of New York.
(McCarthy, personal communication, February 8, 2009). More specific information around each component of the survey is described below. A complete survey can be found in Appendix C.

Independent Variables

Child welfare role. The roles of child welfare workers differ across five areas of child welfare practice: prevention, CPS, FPS, foster care, and adoption. The Role question from the Social Work Education Consortium Workforce Retention Study (McCarthy, personal communication, February 8, 2009) asked participants to “Please identify the child welfare unit/units that you currently work in by marking the appropriate boxes.” Participants had the opportunity to mark all that applied from the following choices: Child Protective Services (CPS) (e.g. intake & assessment, investigation), Foster Care, Prevention, Adoption/Permanency Planning, or Family Preservation. For the purposes of this study, the variable grouped into three categories: CPS, Multiple Roles in Child Welfare (e.g. work in foster care and adoption; work in prevention and FPS), or Other Roles (which means workers hold a single, specialized role in either prevention, FPS, foster care, or adoption). A complete list of respondents by Child Welfare Role categories is in Table 3.

Caseload size. The Caseload Size question from the Social Work Education Consortium Workforce Retention Study was used to measure caseload size (McCarthy, personal communication, February 8, 2009). Participants were asked to indicate the average number of children on their caseload in a one-month time period. The caseload
variable was then broken into four categories before the final analysis: 0-13 Clients, 14-20 Clients, 21-30 Clients, and More Than 30 Clients. These categories were determined by running frequencies of Caseload Sizes the participants indicated in their responses. The cumulative percentages of responses were then utilized to break the categories apart by quartiles. That is, for example, the first category is for 0-13 clients on one’s caseload because approximately 25% of respondents indicated that their caseload numbers fall in this range. The category of 14-20 clients was created because 25% of respondents indicated that their caseload numbers fall in this range, and so forth. A complete list of respondents by Caseload Size categories is in Table 3.

Number of schools served. An item was created for use in this study to measure the number of schools child welfare workers have clients in. This question asked participants to: “Please estimate the number of different school buildings in which you have clients currently enrolled.” Participants responded to this question by utilizing a drop down menu of choices, with the option of choosing from 1 to 20+ schools, don’t know, or N/A to current job. The Number of Schools Served variable also was broken into categories based on the process of utilizing the cumulative percentages of responses. The categories that emerged for this variable were: 1-6 Schools, 7-9 Schools, 10-14 Schools, 15 or More Schools, Don’t Know, and N/A to Current Job. However, for the final analyses, two groups were utilized—1-9 Schools and 10 or More Schools. These two groups were formed after a preliminary analysis indicated a significant difference between workers with 1-6 Schools and 10-14 Schools on their interactions with schools.
The researchers believed that, logically, it was important to create the 1-9 Schools and More Than 10 groups, as only a “High” and “Low” group were needed for analyses. For the purpose of the analysis, the “Don’t Know” and “N/A to Current Job” options were not utilized as categorical groups. A complete list of respondents by Number of Schools Served categories is in Table 3.

*Region of practice.* Participants indicated their primary Region of Practice by choosing from a multiple choice question: Urban, Suburban, and/or Rural. Participants also had the option of indicating an “Other” Region, but all participants utilized this option to indicate that they worked in more than one Region of practice (i.e., a combination of Urban, Suburban, and/or Rural—no other different regions were indicated). These four categories were utilized as categories for the analysis. A complete list of respondents by Region of Practice categories is in Table 3.

*Educational area of study.* Educational Area of Study was measured using the Education item from the Social Work Education Consortium Workforce Retention Study (McCarthy, personal communication, February 8, 2009). Participants were asked to indicate their primary major in school through a multiple choice question (1 = Social Work, 2 = Counseling, 3 = Education, 4 = Sociology, 5 = Psychology, 6 = Criminal Justice, 7 = Business, 8 = Public Administration, 9 = Other Social Science, 10 = A Natural Science, 11 = Nursing, 12 = Computer Science, 13 = Other, Please Specify).
Two groups emerged: Social work and Other, where “other” indicates that the
participant’s primary major was not in the field of social work. A complete list of
respondents by Educational Area of Study categories is in Table 3.

*Level of burnout.* Items from the MBI Emotional Exhaustion Subscale were
utilized to assess level of Burnout among workers. The MBI is comprised of 25 items
total, with three different levels of Burnout measured—emotional exhaustion,
depersonalization, and personal accomplishment (Maslach & Jackson, 1981). The items
assess the frequency and intensity of feelings of Burnout, and the MBI as a whole has
strong psychometric properties (Maslach & Jackson). There are a total of nine items
from the MBI measuring emotional exhaustion (e.g. “I feel used up at the end of the
workday,” “I feel frustrated by my job,” etc.) that were utilized in this study, and this
subscale was found to be reliable based on this sample ($\alpha = 0.94$). From these nine items,
a total emotional exhaustion score was computed for each participant, ranging from 0-54.
Based on the MBI scoring procedures (Maslach & Jackson, 1981), a score from 0-16 is
low emotional exhaustion, 17-26 moderate emotional exhaustion, and a score above 27
indicating high emotional exhaustion. For the purposes of this analysis, participants were
considered in two groups—Low to Moderate Burnout Group, and High Burnout Group.
A complete list of respondents by Level of Burnout categories is in Table 3.

*Years of practice.* Years of Practice was measured using a question on work
experience from the Social Work Education Consortium Workforce Retention Study
(McCarthy, personal communication, February 8, 2009). Participants were asked to
indicate “In about what month and year did you start your first child welfare job?” They answered by selecting from a drop-down menu of choices ranging from 01 = January to 12 = December, and a menu ranging from the years 1955 to 2009. For the purposes of analyses only years were utilized, and before the final analyses were completed, this variable was broken into four categories: 0-4 Years, 5-8 Years, 9-16 Years, and 17 or More Years. These categories were determined by running frequencies of Years of Practice the participants indicated in their responses. The cumulative percentages of responses were then utilized to break categories apart by quartiles (i.e., each category includes approximately 25% of the sample). A complete list of respondents by Years of Practice categories is in Table 3.

Table 3. Respondents by Categories

<table>
<thead>
<tr>
<th>Category (n = 233)</th>
<th>Percent</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Role</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CPS</td>
<td>43.3</td>
<td>100</td>
</tr>
<tr>
<td>Multiple Roles in Child Welfare</td>
<td>28.6</td>
<td>66</td>
</tr>
<tr>
<td>Other Role</td>
<td>28.2</td>
<td>65</td>
</tr>
<tr>
<td><strong>Caseload Size</strong></td>
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<td></td>
</tr>
<tr>
<td>0-13 Clients</td>
<td>31.6</td>
<td>55</td>
</tr>
<tr>
<td>14-20 Clients</td>
<td>26.4</td>
<td>46</td>
</tr>
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</table>

Continued
Table 3: Continued

<table>
<thead>
<tr>
<th>Category (n = 233)</th>
<th>Percent</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>21-30 Clients</td>
<td>25.3</td>
<td>44</td>
</tr>
<tr>
<td>More Than 30 Clients</td>
<td>16.7</td>
<td>29</td>
</tr>
<tr>
<td>Number of Schools Served</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1-9 Schools</td>
<td>49.5</td>
<td>104</td>
</tr>
<tr>
<td>10 or More Schools</td>
<td>50.5</td>
<td>106</td>
</tr>
<tr>
<td>Region of Practice</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>27.8</td>
<td>62</td>
</tr>
<tr>
<td>Suburban</td>
<td>16.1</td>
<td>36</td>
</tr>
<tr>
<td>Rural</td>
<td>26.0</td>
<td>58</td>
</tr>
<tr>
<td>More Than One Region</td>
<td>30.0</td>
<td>67</td>
</tr>
<tr>
<td>Educational Area of Study</td>
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<td></td>
</tr>
<tr>
<td>Social Work</td>
<td>50.2</td>
<td>116</td>
</tr>
<tr>
<td>Other</td>
<td>49.8</td>
<td>115</td>
</tr>
<tr>
<td>Level of Burnout</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low to Moderate</td>
<td>42.9</td>
<td>100</td>
</tr>
<tr>
<td>High</td>
<td>57.1</td>
<td>133</td>
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<tr>
<td>Years of Practice</td>
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<td></td>
</tr>
<tr>
<td>0-4 Years</td>
<td>28.0</td>
<td>65</td>
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Continued
Table 3: Continued

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<thead>
<tr>
<th>Category (n = 233)</th>
<th>Percent</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>5-8 Years</td>
<td>23.7</td>
<td>55</td>
</tr>
<tr>
<td>9-16 Years</td>
<td>22.4</td>
<td>52</td>
</tr>
<tr>
<td>17 or More Years</td>
<td>25.9</td>
<td>60</td>
</tr>
</tbody>
</table>

**Dependent Variable**

*Interactions with Schools Inventory.* The Interactions with School Inventory was created for use in this study. The Inventory was designed to gain a general perspective of the current state of child welfare workers’ interactions with schools. The Inventory includes a list of services, practices, or programs that child welfare workers might potentially be involved in when they work with schools.

Initially, items for the Inventory were based on research across the five areas of child welfare practice, and originally consisted of 70 items. The Inventory was then piloted with four child welfare experts across the country and narrowed down to 37 items. The final 37 items were used as the Interactions with Schools Inventory in the final survey. Once data were collected, an Exploratory Factor Analysis (EFA) was conducted to examine the factor structure within the scale. The EFA utilized principal axis factoring and varimax rotation techniques to analyze the Inventory, and four distinct subscales emerged from within the 37-item Inventory. The four subscales are comprised
of 21 total items, and each item was measured using a five-point Likert scale (1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Frequently, 5 = A lot). The response options of “don’t know” and “not applicable to current job” were available for participants to chose.

Important to note, for the purpose of analysis, a standardized subscale score was created for each of the four subscales, based on Mathiesen, Cash, and Hudson (2002). This technique was utilized to create comparable scores across all subscales, and thus resulted in participant scores ranging from 0-100 on each subscale score. The four subscales were Meeting Participation, School Staff Communication, Service Coordination with School Staff, and Working with Families for School Involvement. Each is described next.

Meeting Participation Subscale. This subscale measures the extent to which child welfare workers interact with schools through participating in meetings at schools and in meetings with multiple agencies/representatives. It is comprised of eight items ($\alpha = 0.92$). Example items include: centered around the principle of child welfare workers participating in meetings or events. Example items include, “Participate in service coordination and wraparound team meetings” and “Participate in meetings on school transitions (e.g. when youth change schools).” Each item was measured using a five-point Likert scale (1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Frequently, 5 = A lot).

\[^4\text{ If a participant indicated that an item within a particular subscale was “not applicable to current job,” a subscale score was not computed. Analyses were conducted using the mean imputation of scores instead of including “not applicable to current job” as a missing value, but no significant differences were found. As such, “not applicable to current job” was left as a missing value for the purpose of final analyses.}\]
School Staff Communication Subscale. The next subscale examined child welfare workers’ communication levels with various school staff. It is comprised of six items (α = 0.89). Example items include: “Talk with teachers about youth;” “Talk with school social workers about youth;” and “Talk with principals about youth.” Each item was measured using a five-point Likert scale (1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Frequently, 5 = A lot).

Service Coordination with School Staff. This subscale examined the extent to which child welfare workers work with school personnel to link families/youth with needed physical and mental health services. Four items comprised this subscale (α = 0.89), such as, “Work directly with school personnel to help families link with mental health services to address needs of youth” and “Work directly with school personnel to help families link with physical health services to address needs of families.” Each item was measured using a five-point Likert scale (1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Frequently, 5 = A lot).

Working with Families for School Involvement. The final factor that emerged from the Inventory includes items that measure the extent to which child welfare workers work with families to communicate with school personnel. Three items make up the Working with Families for School Involvement Subscale (α = 0.87). Items include: “Work with families to help them communicate with teachers,” “Work with families to
help them communicate with principals,” and “Work with families to help them communicate with support staff (e.g. counselors, school social workers, etc.)” Each item was measured using a five-point Likert scale (1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Frequently, 5 = A lot).

Data Analyses

Descriptive statistics were used to examine responses on the Interactions with Schools Inventory. General information, such as which interactions were most frequently reported, those that were reported as rarely/never taking place, and differences in interactions by child welfare role, was considered. Relationships were examined among the various Interactions with Schools Inventory Subscales using Pearson’s correlational analyses. To learn if child welfare role is related to interactions with schools, a one-way analysis of variance (ANOVA) was conducted.

An ANOVA was also conducted to test three of the hypotheses. These hypotheses posit that there are differences among groups in Caseload Size, Region of Practice, and Years of Practice as they impact worker interactions with schools. Differences in Caseload Size groups (i.e., 0-13 Clients; 14-20 Clients; 21-30 Clients; and More Than 30 Clients), Region groups (i.e., Urban; Suburban; Rural; More Than One Region) and Years of Practice groups (i.e.; 0-4 Years, 5-8 Years, 9-16 Years, or More than 17 Years) on the four subscales measuring interactions with schools were measured using ANOVA. For each of the ANOVA analyses, the Tukey HSD post hoc analysis was utilized. The Tukey HSD analysis is used to “compare each group with every other
group” (Keppel & Wickens, 2004, p. 120), and indicates where there are significant differences between groups. This is a particularly useful post hoc analysis to conduct after the ANOVA, which compares multiple groups at once, because it notes specifically where the differences lie. The Tukey HSD is an appropriate post hoc test to utilize when there are multiple groups, in comparison to utilizing other post hoc methods (Keppel & Wickens, 2004).

The final three hypotheses, which posit that there are a differences between groups of child welfare worker’s based on their Number of Schools Served (i.e., 1-9 Schools or 10 or More Schools), Educational Area of Study (i.e.; Social work or Other), and Level of Burnout (i.e.; Low to Moderate or High) on the four subscales measuring interactions with schools, were analyzed through independent samples t-tests.

**Missing Data**

Before the final analyses were conducted, the researchers computed any missing values by utilizing mean imputation. With this imputation method, the sample mean of each item was computed and input as the response for each missing value within that item. This imputation method underestimates standard error (Tabacknick & Fidell, 2007) but the means of each item were calculated with and without imputed values, and no significant differences were found.
Chapter 4: Results

The purpose of this study was to learn more about the ways in which child welfare workers interact with schools. This section describes the ways in which child welfare workers in this sample interact with schools across the four interaction subscales: Meeting Participation, School Staff Communication, Service Coordination with School Staff, and Working with Families for School Involvement. It also explores various factors related to these interactions, including Caseload Size, Number of Schools Served, Region of Practice, Educational Area of Study, Level of Burnout, and Years of Practice.

Descriptive Statistics

The first research question explored the picture of child welfare workers’ interactions with schools in general, as well as the ways in which interactions are related to child welfare role. First, Table 4 presents the descriptive statistics for each specific Interactions with Schools Subscale, as well as the results for each individual item within each subscale. Overall, the mean scores across all items were 2.99 (on a 1 = “Never” to 5 = “A lot” scale), with items ranging in scores from 2.11 to 3.52. As can be seen in Table 4, the most common interactions reported by these child welfare workers include: participating in service coordination and wraparound team meetings ($M = 3.52$, $SD = 0.99$), participating in Individualized Education Program (IEP) meetings ($M = 3.26$, $SD = 0.99$), participating...
1.12), talking with teachers about youth ($M = 3.31, SD = 0.87$), and talking with school counselors about youth ($M = 3.49, SD = 0.89$). All of these scores fall within or near the “Sometimes” response category.
Table 4. Descriptive Statistics for Interactions with Schools

<table>
<thead>
<tr>
<th>Variable</th>
<th>M(SD)</th>
<th>Md</th>
<th>Mo</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation Subscale</td>
<td>32.90(13.95)</td>
<td>33.33</td>
<td>33.33</td>
<td>0-100</td>
</tr>
<tr>
<td>Participate in…</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-service coordination and wraparound team meetings</td>
<td>3.52(0.99)</td>
<td>4.00</td>
<td>4.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-meetings with school staff to coordinate care to meet youths’ overall needs</td>
<td>3.18(0.97)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-meetings when child has academic difficulty</td>
<td>3.00(1.12)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-Individualized Education Program (IEP) meetings</td>
<td>3.26(1.12)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-community events at school</td>
<td>2.11(0.93)</td>
<td>2.00</td>
<td>2.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-meetings on school transitions (e.g. when youth change schools)</td>
<td>2.75(1.17)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
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</table>
Table 4: Continued

<table>
<thead>
<tr>
<th>Variable</th>
<th>M(SD)</th>
<th>Md</th>
<th>Mo</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>-meetings with families at school</td>
<td>2.77(0.94)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-meetings with representatives from multiple agencies</td>
<td>3.08(1.06)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td><strong>School Staff Communication Subscale</strong></td>
<td>37.26(12.62)</td>
<td>33.33</td>
<td>33.33</td>
<td>0-100</td>
</tr>
<tr>
<td>Talk with…</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-teachers about youth</td>
<td>3.31(0.87)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-school social workers about youth</td>
<td>3.29(1.04)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-school nurse about youth</td>
<td>2.86(1.10)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-school counselors about youth</td>
<td>3.49(0.88)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-principals about youth</td>
<td>3.18(0.88)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
</tbody>
</table>
Table 4: Continued

<table>
<thead>
<tr>
<th>Variable</th>
<th>M(SD)</th>
<th>Md</th>
<th>Mo</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>-special education teachers about youth</td>
<td>3.32(0.89)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td><strong>Service Coordination with School Staff Subscale</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work directly with school personnel to help families link</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>with…</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-mental health services to address needs of youth</td>
<td>2.88(0.99)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-mental health services to address needs of families</td>
<td>2.65(1.12)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-physical health services to address needs of youth</td>
<td>2.65(1.03)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-physical health services to address needs of families</td>
<td>2.28(1.00)</td>
<td>2.00</td>
<td>2.00</td>
<td>1-5</td>
</tr>
<tr>
<td><strong>Working with Families for School Involvement Subscale</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work with families to help them communicate with…</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>34.54(11.70)</td>
<td>33.33</td>
<td>33.33</td>
<td>0-100</td>
</tr>
</tbody>
</table>
Table 4: Continued

<table>
<thead>
<tr>
<th>Variable</th>
<th>M(SD)</th>
<th>Md</th>
<th>Mo</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>-teachers</td>
<td>3.11(0.77)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-principals</td>
<td>2.85(0.83)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
<tr>
<td>-support staff (e.g. counselors, school social workers, etc.)</td>
<td>3.24(0.78)</td>
<td>3.00</td>
<td>3.00</td>
<td>1-5</td>
</tr>
</tbody>
</table>
The least common interactions reported by the workers were working directly with school personnel to help families link with services to address: the physical health needs of youth \( (M = 2.65, SD = 1.03) \), the mental health needs of families \( (M = 2.65, SD = 1.12) \), or physical health needs of families \( (M = 2.28, SD = 1.00) \). The lowest mean of all items was related to whether workers reported attending community events at schools \( (M = 2.11, SD = 0.93) \).

When examining the four subscales, the overall mean across all four was 32.91, with subscale scores ranging from 26.93 to 37.26 (the overall range of subscale scores was from 0-100). School Staff Communication Subscale scores were the most common interactions reported by the sample. These data are presented in Table 4.

Relationships among items and subscales were examined through correlational analyses. Almost all Inventory items had significant, positive relationships with each other \( (p < .05) \). The items “Talk with school nurse about youth,” and “Talk with principals about youth” within the School Staff Communication Subscale, however, were not significantly correlated with at least one of the other Inventory items. The item “Work directly with school personnel to help families link with physical health services to address needs of families” of the Service Coordination with School Staff Subscale was not significantly correlated with all items. In comparison, all other items within the Inventory were significantly correlated to one another except for on these three items. “Talk with school nurse about youth” did not significantly correlate with six of the eight
Meeting Participation Subscale items, or two of the three items in the Working with Families for School Involvement Subscale. Table 5 presents the correlations among the four subscales.

*Child welfare role.* The next piece of this question aimed to examine the ways in which child welfare workers interact with schools based on their child welfare role/area of child welfare practice (prevention, CPS, FPS, foster care, and adoption). The results of the ANOVA indicated that CPS workers ($M = 25.57$, $SD = 12.40$) interact significantly less on the Meeting Participation Subscale ($F(2) = 22.57$, $p = .00$) with schools than workers in multiple child welfare roles ($M = 38.68$, $SD = 13.10$) and workers in prevention, FPS, foster care, or adoption ($M = 36.93$, $SD = 12.50$). Table 6 presents complete results of this analysis, and Table 7 reports the means and standard deviations of Role categories across the four subscales, in addition to results of the post hoc analysis.
Table 5. Correlations of Interactions with Schools Subscales.

<table>
<thead>
<tr>
<th></th>
<th>Meeting Participation</th>
<th>School Staff Communication</th>
<th>Coordination with School Staff</th>
<th>Working with Families for School Involvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>0.37**</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service Coordination with School</td>
<td>0.43**</td>
<td>0.40**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Working with Families for School</td>
<td>0.48**</td>
<td>0.27**</td>
<td>0.27**</td>
<td></td>
</tr>
</tbody>
</table>

** p < .01, *p < .05
Table 6. Between Subjects Effects of Role

<table>
<thead>
<tr>
<th>Subscale</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td>7216.58</td>
<td>2</td>
<td>3608.29</td>
<td>22.57</td>
<td>.00</td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>612.31</td>
<td>2</td>
<td>306.15</td>
<td>1.92</td>
<td>.15</td>
</tr>
<tr>
<td>Service Coordination with School</td>
<td>298.04</td>
<td>2</td>
<td>149.02</td>
<td>0.65</td>
<td>.52</td>
</tr>
<tr>
<td>Working with Families for School</td>
<td>621.55</td>
<td>2</td>
<td>310.78</td>
<td>2.29</td>
<td>.10</td>
</tr>
</tbody>
</table>
Table 7. Means and Standard Deviations Across Role Categories

<table>
<thead>
<tr>
<th>Subscale</th>
<th>CPS</th>
<th>Multiple Roles</th>
<th>Other Roles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td>25.57(12.40)ab</td>
<td>38.68(13.10)a</td>
<td>36.93(12.50)b</td>
</tr>
<tr>
<td></td>
<td>(n = 80)</td>
<td>(n = 59)</td>
<td>(n = 58)</td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>39.00(12.82)</td>
<td>36.91(11.87)</td>
<td>35.01(13.00)</td>
</tr>
<tr>
<td></td>
<td>(n = 98)</td>
<td>(n = 62)</td>
<td>(n = 61)</td>
</tr>
<tr>
<td>Service Coordination with School Staff</td>
<td>25.76(14.58)</td>
<td>28.56(14.49)</td>
<td>27.05(16.52)</td>
</tr>
<tr>
<td></td>
<td>(n = 96)</td>
<td>(n = 62)</td>
<td>(n = 61)</td>
</tr>
<tr>
<td>Working with Families for School Involvement</td>
<td>32.62(10.54)</td>
<td>36.11(12.91)</td>
<td>35.84(11.97)</td>
</tr>
<tr>
<td></td>
<td>(n = 97)</td>
<td>(n = 64)</td>
<td>(n = 62)</td>
</tr>
</tbody>
</table>

Note. Letters indicate significant differences between groups ($p < .05$).
**Bivariate Statistics**

The second purpose of this study was to look at various factors that might be related to the interactions child welfare workers have with schools. This section presents the results of the analyses conducted for each of the five hypotheses of this study. It specifically examines Caseload Size, Number of Schools Served, Region of Practice, Educational Area of Study, Level of Burnout, and Years of Practice as they impact worker interactions with schools.

*Caseload size and interactions with schools.* The first research question examined whether child welfare workers with high caseloads interact significantly less with schools than those with low caseloads. The independent variables were the four different categories of Caseload Size (0-13 Clients, 14-20 Clients, 21-30 Clients, and More Than 30 Clients), and the dependent variables were the Meeting Participation, School Staff Communication, Service Coordination with School Staff, and Working with Families for School Involvement Subscales of the Interactions with Schools Inventory. A one-way ANOVA indicated that there was a significant difference between groups on the Meeting Participation Subscale ($F(3) = 4.39, p = .005$). Table 8 shows complete results of the ANOVA between Caseload Size and Interactions with Schools Subscales. A follow-up Tukey HSD post hoc test was conducted to examine specific group differences between groups. Results found that the More Than 30 Clients group reported significantly lower Meeting Participation interactions than both the 0-13 Clients and 14-
Table 8. Between Subjects Effects of Caseload Size

<table>
<thead>
<tr>
<th>Subscale</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td>2565.87</td>
<td>3</td>
<td>855.29</td>
<td>4.39</td>
<td>.00</td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>747.17</td>
<td>3</td>
<td>249.06</td>
<td>1.63</td>
<td>.19</td>
</tr>
<tr>
<td>Service Coordination with School Staff</td>
<td>565.63</td>
<td>3</td>
<td>188.54</td>
<td>.86</td>
<td>.47</td>
</tr>
<tr>
<td>Working with Families for School Involvement</td>
<td>75.78</td>
<td>3</td>
<td>25.26</td>
<td>.18</td>
<td>.91</td>
</tr>
</tbody>
</table>

20 Clients groups. Table 9 reports the means and standard deviations of Caseload categories across the four different subscales, as well as the results of the follow-up analyses.
Table 9. Means and Standard Deviations Across Caseload Categories

<table>
<thead>
<tr>
<th>Subscale</th>
<th>0-13 Clients</th>
<th>14-20 Clients</th>
<th>21-30 Clients</th>
<th>More Than 30 Clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td>36.07(13.55)a</td>
<td>38.09(12.77)b</td>
<td>32.55(14.75)</td>
<td>26.16(15.00)ab</td>
</tr>
<tr>
<td></td>
<td>(n = 48)</td>
<td>(n = 37)</td>
<td>(n = 39)</td>
<td>(n = 27)</td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>35.05(13.04)</td>
<td>35.87(12.05)</td>
<td>36.94(10.70)</td>
<td>41.21(13.70)</td>
</tr>
<tr>
<td></td>
<td>(n = 54)</td>
<td>(n = 44)</td>
<td>(n = 40)</td>
<td>(n = 28)</td>
</tr>
<tr>
<td>Service Coordination with School Staff</td>
<td>27.83(15.80)</td>
<td>25.20(13.78)</td>
<td>25.45(14.90)</td>
<td>22.41(14.50)</td>
</tr>
<tr>
<td></td>
<td>(n = 53)</td>
<td>(n = 42)</td>
<td>(n = 41)</td>
<td>(n = 29)</td>
</tr>
<tr>
<td>Working with Families for School Involvement</td>
<td>35.95(11.71)</td>
<td>34.75(10.78)</td>
<td>34.37(12.84)</td>
<td>34.48(11.82)</td>
</tr>
<tr>
<td></td>
<td>(n = 53)</td>
<td>(n = 43)</td>
<td>(n = 43)</td>
<td>(n = 29)</td>
</tr>
</tbody>
</table>

Note. Letters indicate significant differences between groups ($p < .05$).
Number of schools served and interactions with schools. The second hypothesis of this study postulated that child welfare workers with high number of schools served will interact significantly less with schools than those with low number of schools served. The independent variables were the two different categories comprised of number of schools (1-9 Schools Group, 10 or More Schools Group), and the dependent variables, Meeting Participation, School Staff Communication, Service Coordination with School Staff, and Working with Families for School Involvement Subscales. An independent samples t-test indicated that there was a significant difference between Number of Schools Served Groups and interactions on the Meeting Participation Subscale ($t = 0.52$, $p = .03$). Table 10 shows complete results of the t-test. Those with 1-9 Schools interacted more with schools than those with 10 or More Schools. A near significant difference was found between Number of Schools Served groups and interactions on the Working with Families for School Involvement Subscale ($t = 1.01$, $p = .06$). Table 11 reports the means and standard deviations of Number of Schools Served groups across the four different subscales.
Table 10. Between Subjects Effects of Number of Schools Served

<table>
<thead>
<tr>
<th>Subscale</th>
<th>t</th>
<th>df</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td>0.52</td>
<td>179</td>
<td>4.8</td>
<td>.03</td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>-1.67</td>
<td>200</td>
<td>1.46</td>
<td>.23</td>
</tr>
<tr>
<td>Service Coordination with School Staff</td>
<td>1.42</td>
<td>197</td>
<td>0.77</td>
<td>.38</td>
</tr>
<tr>
<td>Working with Families for School Involvement</td>
<td>1.01</td>
<td>201</td>
<td>3.68</td>
<td>.06</td>
</tr>
</tbody>
</table>

Table 11. Means and Standard Deviations Across Number of Schools Served

<table>
<thead>
<tr>
<th>Subscale</th>
<th>Number of Schools Served Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1-9 Schools</td>
</tr>
<tr>
<td>Meeting Participation</td>
<td>33.59(13.02)a</td>
</tr>
<tr>
<td></td>
<td>(n = 93)</td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>35.96(12.12)</td>
</tr>
<tr>
<td></td>
<td>(n = 98)</td>
</tr>
<tr>
<td>Service Coordination with School Staff</td>
<td>28.70(15.97)</td>
</tr>
<tr>
<td></td>
<td>(n = 99)</td>
</tr>
<tr>
<td>Working with Families for School Involvement</td>
<td>35.64(12.82)</td>
</tr>
<tr>
<td></td>
<td>(n = 101)</td>
</tr>
</tbody>
</table>

Note. Letters indicate significant differences between groups ($p < .05$).
Region of practice and interactions with schools. The next research question examined whether child welfare workers in rural agency settings interact less with schools than child welfare workers in urban and suburban settings. The independent variables were four different categories comprised of region of practice (Urban, Suburban, Rural, and More Than One Region). The dependent variables were the Meeting Participation, School Staff Communication, Service Coordination with School Staff, and Working with Families for School Involvement Subscales. A one-way ANOVA found significant differences between regions on the Service Coordination with School Staff Subscale ($F(3) = 3.74, p = .05$). See Table 12 for complete results of the ANOVA between Region of Practice and Interactions with Schools Subscales. A follow up Tukey HSD post hoc analysis indicated that the rural group reported significantly higher Service Coordination with School Staff interactions than the more than one region group. Table 13 reports the means and standard deviations of Region categories across the four different subscales, as well as results of the follow up analyses.
Table 12. Between Subjects Effects of Region

<table>
<thead>
<tr>
<th>Subscale</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td>1180.47</td>
<td>3</td>
<td>393.49</td>
<td>2.03</td>
<td>.11</td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>769.36</td>
<td>3</td>
<td>256.46</td>
<td>1.69</td>
<td>.17</td>
</tr>
<tr>
<td>Service Coordination with School Staff</td>
<td>2359.16</td>
<td>3</td>
<td>786.39</td>
<td>3.74</td>
<td>.01</td>
</tr>
<tr>
<td>Working with Families for School Involvement</td>
<td>1001.73</td>
<td>3</td>
<td>333.91</td>
<td>2.45</td>
<td>.07</td>
</tr>
</tbody>
</table>
Table 13. Means and Standard Deviations Across Region Categories

<table>
<thead>
<tr>
<th>Subscale</th>
<th>Urban</th>
<th>Suburban</th>
<th>Rural</th>
<th>More Than One Region</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td>33.75(13.89)</td>
<td>33.11(11.09)</td>
<td>36.11(13.83)</td>
<td>29.50(15.35)</td>
</tr>
<tr>
<td>(n = 53)</td>
<td>(n = 32)</td>
<td>(n = 48)</td>
<td>(n = 56)</td>
<td></td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>36.88(10.62)</td>
<td>33.59(10.45)</td>
<td>39.63(13.94)</td>
<td>36.90(13.15)</td>
</tr>
<tr>
<td>(n = 59)</td>
<td>(n = 34)</td>
<td>(n = 54)</td>
<td>(n = 66)</td>
<td></td>
</tr>
<tr>
<td>Service Coordination with School Staff</td>
<td>27.39(15.70)</td>
<td>26.01(13.74)</td>
<td>31.89(14.39)a</td>
<td>23.01 (13.78)a</td>
</tr>
<tr>
<td>(n = 60)</td>
<td>(n = 33)</td>
<td>(n = 65)</td>
<td>(n = 63)</td>
<td></td>
</tr>
<tr>
<td>Working with Families for School</td>
<td>34.46(13.36)</td>
<td>32.68(9.15)</td>
<td>37.72(12.89)</td>
<td>32.34(9.95)</td>
</tr>
<tr>
<td>Involvement</td>
<td>(n = 59)</td>
<td>(n = 34)</td>
<td>(n = 57)</td>
<td>(n = 64)</td>
</tr>
</tbody>
</table>

Note. Letters indicate significant differences between groups ($p < .05$).
An additional comparison was made with Region of Practice. A cross-tabulation was completed to see how many cases (i.e. Caseload Size variable) workers in the different Regions of Practice have. Workers in Rural and Suburban areas had the fewest cases, and workers in More Than One Region had the most cases. See Table 14 for complete cross-tabulation.

Table 14. Cross-Tabulation of Region of Practice and Caseload Size

<table>
<thead>
<tr>
<th>Region categories</th>
<th>Urban</th>
<th>Suburban</th>
<th>Rural</th>
<th>More Than One Region</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-13 Clients</td>
<td>12</td>
<td>12</td>
<td>21</td>
<td>9</td>
<td>54</td>
</tr>
<tr>
<td>14-20 Clients</td>
<td>13</td>
<td>4</td>
<td>11</td>
<td>16</td>
<td>44</td>
</tr>
<tr>
<td>21-30 Clients</td>
<td>13</td>
<td>6</td>
<td>8</td>
<td>16</td>
<td>43</td>
</tr>
<tr>
<td>More Than 30 Clients</td>
<td>10</td>
<td>3</td>
<td>3</td>
<td>11</td>
<td>27</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>48</strong></td>
<td><strong>25</strong></td>
<td><strong>43</strong></td>
<td><strong>52</strong></td>
<td><strong>168</strong></td>
</tr>
</tbody>
</table>
Educational area of study and interactions with schools. The fourth research question examined whether child welfare workers with a social work education interact significantly more with schools than those with a different Educational Area of Study. The independent variables were the two different categories of education: Social Work and Other. The dependent variables were the Meeting Participation, School Staff Communication, Service Coordination with School Staff, and Family Working with Families for School Involvement Subscales of the Interactions with Schools Inventory. The independent samples t-test indicated that there was no significant difference between the two groups. Table 15 reports complete results of the t-test between Educational Area of Study and Interactions with Schools Subscales. Table 16 reports the means and standard deviations of Educational Area of Study groups across the four different subscales.

### Table 15. Between Subjects Effects of Educational Area of Study

<table>
<thead>
<tr>
<th>Subscale</th>
<th>t</th>
<th>df</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td>3.17</td>
<td>196</td>
<td>0.11</td>
<td>0.74</td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>-0.64</td>
<td>219</td>
<td>0.41</td>
<td>0.53</td>
</tr>
<tr>
<td>Service Coordination with School Staff</td>
<td>0.89</td>
<td>218</td>
<td>0.04</td>
<td>0.85</td>
</tr>
<tr>
<td>Working with Families for School Involvement</td>
<td>0.72</td>
<td>220</td>
<td>0.07</td>
<td>0.79</td>
</tr>
</tbody>
</table>
Table 16. Means and Standard Deviations Between Education Categories

<table>
<thead>
<tr>
<th>Subscale</th>
<th>Social Work</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td>36.00(13.96)</td>
<td>29.85(13.32)</td>
</tr>
<tr>
<td></td>
<td>(n = 98)</td>
<td>(n = 100)</td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>36.67(13.15)</td>
<td>37.76(12.08)</td>
</tr>
<tr>
<td></td>
<td>(n = 111)</td>
<td>(n = 110)</td>
</tr>
<tr>
<td>Service Coordination with School Staff</td>
<td>27.92(14.73)</td>
<td>26.12(15.30)</td>
</tr>
<tr>
<td></td>
<td>(n = 109)</td>
<td>(n = 111)</td>
</tr>
<tr>
<td>Working with Families for School Involvement</td>
<td>34.90(11.63)</td>
<td>33.79(11.47)</td>
</tr>
<tr>
<td></td>
<td>(n = 112)</td>
<td>(n = 110)</td>
</tr>
</tbody>
</table>

Note. Letters indicate significant differences between groups \( p < .05 \).

Level of burnout and interactions with schools. The next hypothesis postulated that child welfare workers with high burnout will interact significantly less with schools than those with low to moderate burnout. The independent variables were the two different categories of burnout: Low to Moderate Burnout Group and the High Burnout Group. The dependent variables were the Meeting Participation, School Staff
Communication, Service Coordination with School Staff, and Working with Families for School Involvement Subscales of the Interactions with Schools Inventory. The independent t-test was conducted to analyze the differences between these two groups. No significant differences were found. Table 17 reports complete results of the t-test between Level of Burnout and Interactions with Schools Subscales. Table 18 presents the means and standard deviations of the Level of Burnout groups across the four different subscales.

Table 17. Between Subjects Effects of Burnout

<table>
<thead>
<tr>
<th>Subscale</th>
<th>t</th>
<th>df</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td>-0.86</td>
<td>196</td>
<td>0.03</td>
<td>0.86</td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>-0.25</td>
<td>221</td>
<td>0.16</td>
<td>0.69</td>
</tr>
<tr>
<td>Service Coordination with School Staff</td>
<td>0.36</td>
<td>219</td>
<td>3.19</td>
<td>0.08</td>
</tr>
<tr>
<td>Working with Families for School Involvement</td>
<td>0.54</td>
<td>222</td>
<td>2.28</td>
<td>0.13</td>
</tr>
</tbody>
</table>
Table 18. Means and Standard Deviations Between Burnout Categories

<table>
<thead>
<tr>
<th>Subscale</th>
<th>Low to moderate</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(n = 85)</td>
<td>(n = 113)</td>
</tr>
<tr>
<td>Meeting Participation</td>
<td>33.88(13.58)</td>
<td>32.15(14.23)</td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>37.51(12.84)</td>
<td>37.08(12.50)</td>
</tr>
<tr>
<td>Service Coordination with</td>
<td>26.51(13.56)</td>
<td>27.25(16.08)</td>
</tr>
<tr>
<td>School Staff</td>
<td>(n = 94)</td>
<td>(n = 127)</td>
</tr>
<tr>
<td>Working with Families for</td>
<td>34.05(11.12)</td>
<td>34.91(12.16)</td>
</tr>
<tr>
<td>School Involvement</td>
<td>(n = 97)</td>
<td>(n = 127)</td>
</tr>
</tbody>
</table>

Note. Letters indicate significant differences between groups (p < .05).

Years of practice and interactions with schools. The final question examined the differences between child welfare workers’ interactions with schools based on their Years of Practice. The independent variables were the four different categories of Years of Practice (0-4 Years, 5-8 Years, 9-16 Years, and 17 or More Years), and the dependent variables were the Meeting Participation, School Staff Communication, Service Coordination with School Staff, and Working with Families for School Involvement.
Subscales of the Interactions with Schools Inventory. A one-way ANOVA indicated that there was a significant difference between groups on the School Staff Communication Subscale \( (F(3) = 2.84, p = .04) \). Table 19 reports complete results of the ANOVA between Years of Practice and Interactions with Schools Subscales. A follow-up Tukey HSD post hoc test was conducted to examine specific group differences between groups. Results found that the 17 or More Years group reported significantly higher School Staff Communication interactions than the 0-4 Years group. Table 20 reports the means and standard deviations of Years of Practice categories across the four different subscales, as well as the results of the follow-up analyses.

Table 19. Between Subjects Effects of Years of Practice

<table>
<thead>
<tr>
<th>Subscale</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td>133.12</td>
<td>3</td>
<td>44.37</td>
<td>0.23</td>
<td>.88</td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>1328.12</td>
<td>3</td>
<td>442.71</td>
<td>2.84</td>
<td>.04</td>
</tr>
<tr>
<td>Service Coordination with School Staff</td>
<td>1283.18</td>
<td>3</td>
<td>427.73</td>
<td>1.91</td>
<td>.13</td>
</tr>
<tr>
<td>Working with Families for School Involvement</td>
<td>865.66</td>
<td>3</td>
<td>288.56</td>
<td>2.13</td>
<td>.10</td>
</tr>
</tbody>
</table>
Table 20. Means and Standard Deviations Years of Practice Categories

<table>
<thead>
<tr>
<th>Subscale</th>
<th>0-4 Years</th>
<th>5-8 Years</th>
<th>9-16 Years</th>
<th>17 or More Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td>32.07(12.60)</td>
<td>33.48(16.46)</td>
<td>31.81(12.91)</td>
<td>33.69(13.49)</td>
</tr>
<tr>
<td></td>
<td>(n = 56)</td>
<td>(n = 50)</td>
<td>(n = 43)</td>
<td>(n = 48)</td>
</tr>
<tr>
<td>School Staff Communication</td>
<td>33.71(12.34)a</td>
<td>38.73(11.14)</td>
<td>36.90(11.24)</td>
<td>39.96(14.63)a</td>
</tr>
<tr>
<td></td>
<td>(n = 63)</td>
<td>(n = 53)</td>
<td>(n = 49)</td>
<td>(n = 57)</td>
</tr>
<tr>
<td>Service Coordination with School Staff</td>
<td>25.00(15.11)</td>
<td>27.36(14.92)</td>
<td>24.34(12.67)</td>
<td>30.49(16.34)</td>
</tr>
<tr>
<td></td>
<td>(n = 65)</td>
<td>(n = 53)</td>
<td>(n = 44)</td>
<td>(n = 58)</td>
</tr>
<tr>
<td>Working with Families for School Involvement</td>
<td>33.33(10.76)</td>
<td>34.39(12.10)</td>
<td>32.49(10.34)</td>
<td>37.72(13.06)</td>
</tr>
<tr>
<td></td>
<td>(n = 65)</td>
<td>(n = 55)</td>
<td>(n = 46)</td>
<td>(n = 57)</td>
</tr>
</tbody>
</table>

Note. Letters indicate significant differences between groups ($p < .05$).
This chapter reported the results of this study. The following section will discuss the overall findings, describe limitations, provide implications, and examine future areas of research around child welfare-school interactions. Final conclusions are then drawn.
Chapter 5: Discussion

The purpose of this study was (1) to examine ways in which child welfare workers interact with schools, and (2) to learn more about child welfare worker characteristics that may be related to these interactions. Results suggest overall that these workers were not particularly engaged with schools. When workers were interacting with schools, their most frequent activities involved participating in meetings and talking with teachers and school counselors about youth. Workers interacted least in activities involving direct relationships with school personnel designed to link families with services.

Findings also suggest that these interactions were influenced by child welfare workers’ caseload size and the number of schools attended by children on their caseload. Child welfare workers with the highest caseloads had fewer interactions compared to workers with the lowest caseloads; whereas those with a large number of schools had fewer interactions as compared to those serving a smaller number of schools. Differences were also found among workers based on type of region served. Child welfare workers working in rural areas reported more interactions with schools than those working in more than one region.
In addition to these findings, child welfare workers with high levels of burnout were no different than workers with low to moderate levels of burnout on their interactions with schools. Related to educational area of study, workers who had been trained in social work were no different in their interactions with schools than workers who had been trained in different disciplines. Each of these findings is described more fully in the following sections.

Child Welfare Worker Interactions with Schools

The workers in this study reported multiple ways in which they were engaged with schools. It was surprising to find that given the multitude of ways child welfare workers can interact across the five areas of children welfare practice—prevention, CPS, FPS, foster care, adoption—workers were not as involved as one might expect. As noted in the results, the range of scores on all interaction items was from 2.11 (Rarely) to 3.52 (between Sometimes and Frequently), but overall, these workers did not report significant interactions with schools ($M = 2.99$ across all Interactions with Schools items).

Each of the four subscale means were between 26 and 40, with a score of 50 serving as the midpoint of the scale. This would translate 50 into a label of “Sometimes,” as 3, which is the midpoint of the original 1 to 5 scale, equals “Sometimes.” As noted within the individual Interaction items discussion, the child welfare workers in this study were not very engaged with schools throughout their practice. From these results, it is evident that there are a myriad of ways to improve child welfare workers’ practices with schools, and there is room for growth.
It is important to recognize why improvements are needed. As multiple researchers suggest (Altshuler, 2003; Finkelstein et al., 2002; Stone et al., 2007), there is a need for communication and collaboration between the child welfare and educational systems to enhance the outcomes for youth. Projected outcomes that stem from collaborations include enhancements in educational and behavioral/social well-being of youth in the system. One place for this communication and collaboration between systems to start is with day-to-day interactions (i.e., from the Interactions with Schools Subscales) between systems.

Despite their lack of reported interactions, it was interesting to note that of all the multiple ways these child welfare workers could be involved, they were most likely to report interactions that included: attending wraparound/service coordination meetings, IEP meetings, and talking with teachers and school counselors about youth. While it is promising to learn that these interactions are taking place, one might wonder if some worker interaction is due to legal requirements that mandate such interactions. As these youth are “wards of the state” while in care (Badeau & Gesreich, 2008), workers must act as guardian for these youth (i.e., attend IEP or service coordination/wraparound meetings). It is known that child welfare youth often experience behavioral problems (Wulczyn et al., 2009), thus child welfare workers frequently talk with teachers and school counselors. The high frequencies of interactions with schools on these items may be a result of mandates/responsibilities around them.
Although overall child welfare workers were not interacting with schools, there were some interactions where workers indicated little to no involvement at all. These included: working directly with school personnel to help families link with services to address the mental health needs of youth, or the physical health needs of youth and/or families. These findings are not specifically surprising, as child welfare workers may not see their roles as working with school personnel to assist families/youth with physical and mental health needs. Schools are often viewed as a location for child-centered practice, and thus child welfare workers may not view the school as a location to link families with resources. Child welfare workers may likely be focused on their priority of keeping children safe and not keenly focused on supporting the family.

There were also differences found among workers based on their roles within child welfare. Workers in CPS were found to interact significantly less on the Meeting Participation Subscale than other workers. This is not particularly surprising, as CPS workers mainly interact with schools at the intake and investigation level. They may talk with school personnel around a particular case, but most likely would not be required/asked to participate in (for example) service coordination meetings for youth. The CPS worker’s job is to investigate and collect data around reports of CAN, thus not to necessarily participate in ongoing meetings with the school.

The discussion of overall interactions (and lack thereof) between child welfare workers and schools is important to consider. Factors that influence workers’ interactions with schools are discussed next.
Factors Influencing Interactions with Schools

Findings indicated that child welfare workers with high caseloads, high number of schools served, and those serving multiple regions in their practice reported fewer interactions with schools than certain counterparts. This might imply that improvements in these areas might potentially, in turn, result in enhancements in interactions with schools. Significant differences were also found among groups of workers based on caseload size and number of schools served. Workers with the fewest cases and schools had more interactions with schools. This makes sense, as one might consider that the workers with the fewest number of clients would have more time to spend interacting with schools. As Tittle (2002) presents, there is no “ideal” caseload size, however, caseloads of fewer than 15 clients are desirable in the field of child welfare. Both of these findings on caseload and number of schools served support this suggestion by Tittle, as workers with the most interactions had 0-13 clients and fewer than 10 schools served. This might suggest that to enhance child welfare interactions with schools, caseload size and number of schools served ought to be decreased.

Similar to these findings, it was also found that there is a significant difference in school interactions between workers in rural regions and those practicing in more than one region (i.e., any combination of urban, suburban, and rural regions). Those in rural areas interacted more with than those in multiple regions. In addition to having the most clients to serve, these workers also are working in multiple regions—i.e. are not just centered in one region of practice. This finding indicates that in order to have more
interactions with schools, perhaps child welfare workers’ region of practice could be condensed to serve fewer regions. These findings around region of practice and school interactions suggest that workers who have fewer (or just one) regions to serve may have more opportunities to interact with schools. If workers only have one region or community to work in, they may have time to build relationships with and get to know school staff, in comparison to workers who must travel from community to community.

The results of this research question also indicated that workers in rural regions have the fewest cases (0-13 Clients) of all the groups. Twenty-one out of 43 (49.0%) of Rural Region of Practice workers had the fewest number of clients (0-13 Clients). Eleven out of 52 (21.1%) of More Than One Region of Practice workers had the most clients (More Than 30 Clients). This could possibly explain the findings of this study around Region of Practice and Interactions with Schools, which were completely opposite of the original hypothesis (that workers in rural regions will interact less). Rural workers in this study had significantly more interaction with schools than those with multiple regions. While the hypothesis was originally based on the idea that rural workers have different practice experiences than their counterparts (Templeman & Mitchell, 2002), the fact that rural workers in this study also had the fewest cases may help to explain why they interact more with schools.

Years of practice was also found to significantly impact worker interactions with schools. Workers with the most years of practice had more communication with schools than those with the fewest years of practice. Previous findings are inconclusive as to
whether or not workers with more child welfare experience show better work-related outcomes (Littell & Tajima, 2000) in comparison to their peers. The findings of the current study, however, indicate that in relation to interaction with schools, those with the most years of experience were likely to talk with school staff more. Perhaps workers with the most experience understand the importance/value of communicating with school staff members, and these workers have had time to build relationships with school staff. Workers with the most experience may also be more confident in their abilities and able to take on more responsibilities (e.g. talk with schools) than workers new to the field. Moreover, workers who have been practicing the longest may also be more familiar with/know more school personnel from having contact with them throughout their years of work. Other related factors pertaining to interactions with schools are discussed next.

Other Related Findings

Several variables studied here were also found to not be related to school interactions. For instance, no significant differences were found between workers with a social work education and those with another educational area of study, or between workers with high burnout and low to moderate burnout. This lack of significant results is interesting to consider.

First, Tracy and Pine (2000) posit that a social work education is the best preparation for working in child welfare. However, this study found no difference between workers with a social work education or “other” backgrounds on school interactions. This could be explained by the fact that regardless of area of study, no
group of child welfare workers is explicitly trained in how to interact with schools. One recognizable difference between the two different areas of study is that social work students learn Social Systems Theory (Dale et al., 2006), whereas those from other disciplines come with multiple perspectives/backgrounds. Social Systems Theory lays the foundation as to why child welfare/schools ought to interact with one another—e.g., families have many needs and the child welfare system should not be the only system charged with meeting these needs. These findings, however, indicate that child welfare workers may not be initially turning to schools as a location for collaboration.

Finally, no significant differences were found between workers with low to moderate burnout and high burnout. This finding was surprising, as worker burnout has been indicated to impact worker turnover (Mor Barak, Nissly, & Levin, 2001), and overall feelings of job stress (Maslach, 2003). However, workers in this study with high levels of burnout did not interact less with schools than workers with low to moderate levels. This implies that there are perhaps moderating variables influencing the relationship between interactions and burnout. For instance, one possible explanation for this lack of difference could be based on the findings of Koeske and Koeske (1989), which imply that social supports by co-workers moderate the effects of one’s work load on their overall feelings of burnout. If workers in this study who indicated that they are emotionally exhausted (i.e., burnt out) also have strong social support systems, their exhaustion may not be impacting their daily work. Koeske and Koeske also found that workers who have a sense of accomplishment around their work are less likely to be
affected by their feelings of burnout. Unfortunately these variables were not measured here, but might serve as important factors to examine within future studies.

Limitations

These various findings should be interpreted with caution, as there are several limitations within this study. This study utilized techniques that limit generalizability. First, the sample utilized for this research was one of convenience, and thus is not reflective of all child welfare workers. As previously discussed, a snowball sampling technique was used to recruit child welfare workers. This implies that random sampling did not take place, and thus the generalizations of these findings are somewhat limited. As Rubin and Babbie (2008) explicate, “[s]nowball sampling is appropriate when the members of a special population are difficult to locate” (p. 343). It was found throughout this study that it was increasingly challenging to gain respondents to the survey; thus, a snowball sampling strategy was utilized. In the end, there was a relatively small sample size. The data collected in this study were cross-sectional, meaning they were collected at one point in time, which also limits generalizability.

Other limitations exist. Before the data analyses were completed, mean imputation was utilized as a technique for computing any missing data. This technique computes the sample mean of all non-missing values for a particular item, and inserts this sample mean as the value for any missing data. Mean imputation does, however, underestimate standard error (Tabacknick & Fidell, 2007), as there is no variance in the imputed values. In addition to missing data, some participants did not complete the
survey in its entirety. Fifty-nine participants started, but did not finish, the survey. The reasons as to why these subjects did not complete the survey are unknown, but possible reasons may include the structure and length of the survey itself, and the nature of some questions. The questions were organized in an order that seemed logical to the researchers, but may have not been optimally organized around ease of responding for participants. The survey was a total of 13 pages in length, which may have deterred some participants from completing all questions. Questions—e.g. around worker burnout and personal worker experiences—may have not been answered due to their personal nature. Even though participants knew that the survey was completely confidential and anonymous, some may not have been comfortable answering questions on personal experiences out of concern that they may be identified.

This study limits generalizability due to the fact that all independent variables were grouped into categories. That is, while categories were specifically created for this study, they limit the knowledge gained around workers in this study. Generalizability is also limited because while it is assumed that respondents were truthful when indicating their child welfare roles, we cannot know with certainty that respondents are who they say they are. The procedures followed by the researchers to recruit child welfare workers in each state were hoped to add to the integrity of the research, specifically around those participants who completed the survey—e.g. respondents represented themselves truthfully.
One final limitation exists due to the fact that this research only considered the views of child welfare workers. No teachers or other school staff were included in the sample. The only data analyzed in this study around child welfare-school interactions were thus from the child welfare perspective. In spite of these limitations, there are some implications around workforce development and training, and adjustments needed across systems. These implications are described in the next section.

Implications

Although exploratory in nature, these findings do point to several implications. Clearly, there is plenty of room for improvements in relation to the frequency that child welfare workers interact with schools. Increased interactions may in turn promote better outcomes for children. The first priority of child welfare workers is to keep the children on their caseload safe (Downs et al., 2009), and they may not recognize how interacting with schools will assist in accomplishing this. In fact, these interactions may not directly help to keep children safe, but it may enhance their educational outcomes and indirectly support them to remain in a safe and supportive environment. There is a need for child welfare interactions with schools to take place, and the findings of this study imply that there is much room for improvement in this area.

Practice

There are possible ways for these improvements to be made around areas of child welfare practice. The data from this study indicated that child welfare worker characteristics (caseload size, number of schools, region, years of practice) were related
to interactions with schools. The findings imply that in order to increase interactions with schools, strategies that target each of these three factors might make a difference. For instance, fewer clients and schools served, and centralized work in one region of practice may allow for an increase in interactions with schools. Making these institutional changes, however, may be daunting. Historically, it is known, that the child welfare system is generally overworked (Blome & Steib, 2007). Finding time to work across systems is often difficult.

It was also found that workers with the most years of practice in child welfare interacted with schools more than their counterparts. While the exact explanation as to why they interact more is unknown, a possible implication of these findings could be to have workers with the most experience “mentor” their younger co-workers. This is not to suggest that their needs to be a formal, “mentorship” program in place to take up more of the limited time these workers have. Perhaps if more experienced workers are generally aware of the knowledge and experience they bring to the table, they could possibly impart any work-related wisdom on new workers.

Other implications for child welfare practice stem from the ideas of Social Systems Theory. As one major tenet of the theory explains, school and child welfare outcomes are related. The outcomes of the child welfare system are dependent on schools, and the outcomes of schools are dependent on the child welfare system. If workers and schools are able to work collaboratively together, both of their outcomes may improve. The perceptions workers have of schools are generally negative, and vice
versa. However, if the two acknowledge that they often are working toward the same
goal (enhancing the well-being of youth in the child welfare system—whether it is
through safety or education) they can combine their efforts to positively impact the lives
of youth. Throughout this process, the hope would be that both systems also benefit
individually and collectively. Child welfare workers may learn ways to assist youth with
educational obstacles before they start at a new school, and schools may learn new ways
to successfully work with child welfare-involved youth.

Other potential benefits of the two systems working together may include the
lightening of workers’ workloads, and overall decrease in job stress. If workers have the
capacity to interact and build relationships with the schools in which they have clients,
when any sort of questions or problems arise, it may be much easier to address if the
worker/school are familiar with one another. Instead of only talking with workers when
there is a problem with a youth or at service coordination meetings, there is already a
“protocol” or system in place to address these problems. In the case of youth school
transitions, if workers already have frequent interactions with the school, they may know
who they need to contact directly/work with to expedite the process, and not create long,
drawn out procedures, only adding to their time constraints.

As Altshuler (2003) learned from her study, the child welfare and school workers
believed it could be beneficial to have an “educational plan” for youth in the child
welfare system, so there is a “standard” for these youth in schools. Not to say that all of
these youth have the same educational needs, but to recognize that there could at least be
a framework for their school involvement. This could carry over to child welfare-school interactions as well. If schools and child welfare had a framework for their interactions (e.g. steps to enrolling a student without complete educational records, who to call/what to do when a youth is having behavior problems at school, etc), it could assist in guiding their interactions and overall outcomes of the two systems. In the beginning, setting the stage with such a framework (for example) may be time consuming, but eventually could decrease workloads.

Even with these underpinnings of Social Systems Theory, systems may not in reality be set up to promote cross system interactions. For instance, the child welfare and school systems are two separate entities, and must carry out their own overall missions—one to keep children safe, one to educate. With the limitation that this study only considered child welfare worker perceptions of interactions, it is still important to recognize the specific role of the school in these interactions. Schools may be viewed as places that are not particularly welcoming to child welfare workers. As schools have their own laws and regulations (e.g. confidentiality requirements under the Family Educational Rights and Privacy Act, or FEPA) in place, perhaps child welfare workers do not feel open to communicate with schools around a particular case or youth.

A possible movement towards neighborhood-based child welfare services might be helpful, as it emphasizes the entire community’s role in child welfare (Altman, 2008), and not just one system independently (e.g. child welfare or schools) that is in charge of providing services. It also looks toward neighborhood level supports (i.e., schools) as
important systems of support for families involved in the system. Perhaps neighborhood-based systems might allow for greater collaboration across roles and could feasibly encompass child welfare-school interactions. There are additional implications around child welfare policy and administration.

**Policy & Administration**

Findings from this study also may have implications around child welfare policy and administration. As discussed, there are some interactions with schools that may be more or less mandated. If a youth has an IEP or service coordination meeting, the child welfare worker may be “required” to be present as the guardian of that youth. Specific to attending wraparound/service coordination and IEP meetings, child welfare workers may be required to participate in these meetings. When youth are involved with the juvenile justice system, for example, they are also involved with the child welfare system (Howe, Clawson, & Larivee, 2007); therefore, child welfare workers who have clients involved with the juvenile justice system would most likely attend service coordination meetings for these clients. While this study only considered child welfare worker perceptions and perspectives of interactions, there may be implications for schools around these “mandated” interactions too. Schools are legally required to provide special education/IEP assessments and meetings for youth (for example). Schools may have to work with child welfare workers to gain information on youth on their caseload.

There are also implications around child welfare administration, specifically related to supervision of frontline child welfare workers. As supervisor support has been
found to impact worker training (Sullivan, Antle, Barbee, & Egbert, 2009), there may be implications around supervisors’ support of interactions with schools. Perhaps utilizing child welfare agency administrators as a medium to support workers in communicating/interacting with schools, may lead to an increase in interactions between the two systems. There are additional implications around child welfare education and training.

**Education & Training**

As Altshuler (2003) and Stone et al. (2007) describe, communication and collaboration between child welfare workers and school staff is a challenge when offering services to youth, and the perceptions each of these systems have of one another are generally negative. This presents a challenge when one considers that the two should be working together daily. As Altshuler suggests, these overarching barriers and challenges to communication might be addressed through cross-system training and professional development opportunities.

Workers may not recognize the possible benefits that interacting with schools on a regular basis has for children in their care. Even if the benefits of interacting are recognized, child welfare workers may not be aware of ways in which they can initially connect with schools. There is no core curriculum or policy that teaches child welfare workers how to interact or the benefits of working with schools. This implies that there may be a need for preparation, knowledge, and training on the potential benefits that can be gained when the two systems work together.
The findings of this study imply that there is a need for changes in the work child welfare workers are charged with, and an increase in preparation and training of workers to learn the benefits that may be associated with interacting with schools. These factors are important, and there are others to consider. The following section addresses additional areas of research that may add to the literature around child welfare-school interactions.

Future Research

In the end, this exploratory study points to several areas where future research would be valuable and informative. First, it would be beneficial to learn more about other factors that might be related to/influence child welfare workers’ interactions with schools. For instance, it would be interesting to learn how interactions with schools change if child welfare workers are provided with preparation and training on the potential benefits of interacting with schools. Learning more about specific factors as they relate to interactions with schools is also important. This includes an examination of what factors need to be increased (e.g. social support) or decreased (e.g. region of practice) to increase interactions with schools. Factors that may be interesting to study as they impact interactions include social support and feelings of personal accomplishment (Koeske & Koeske, 1989). These factors could be studied by learning more about child welfare workers’ perceptions of them, and how/if their personal perceptions corroborate with the
perceptions of co-workers and supervisors. Specifically, for example, to see if the amount of social support workers feel they have is the same amount of social support their co-workers feel they offer them.

It is also important to learn more about the ways in which agency norms and expectations relate to individual workers’ interactions with schools. As Dyer (1977) studied, there are agency norms that impact workers beliefs, and this may also carry over to their beliefs about interacting with schools. For instance, if the agency as a whole does not encourage collaborations with schools, frontline child welfare workers may not be likely to do so. It is important to learn how agency (or supervisor) norms and expectations around interactions with schools impact frontline workers. It would also be interesting to examine differences in perceptions between agency leaders/supervisors and frontline child welfare workers around individual workers’ interactions with schools.

As discussed, there are often perceived communication and collaboration barriers to interactions taking place between child welfare workers and schools (Altshuler, 2003; Stone et al., 2007). One area for future inquiry could examine how the number of child welfare worker interactions with schools impacts these perceptions, to learn if the more a child welfare worker interacts with the school (and vice versa) the more likely each set of professionals is to create a more positive perception of the other. It would also be interesting to learn about child welfare-school interactions from the perspective of schools.
Finally, additional research could examine how these interactions impact outcomes for youth and families. Longitudinal studies could be conducted that follow youth in the child welfare system over time to see how the behaviors of child welfare workers are related to the educational outcomes for these youth. Similar research could also be conducted to see how school interactions ultimately impact outcomes for families (i.e., reunification).

Conclusion

This study addressed the ways in which child welfare workers interact with schools, and how these interactions varied by role in child welfare. It also examined the factors that are related to child welfare workers’ interactions with schools. As the data in this study indicate, there clearly is room for improvements in the interactions taking place between child welfare workers and schools. This preliminary study examined the relationships between child welfare workers and schools, and found that there are few interactions taking place between them. Many more interactions ought to be taking place between child welfare workers and schools. However, as this study implicates, child welfare workers’ caseload size, number of schools, region of practice, and years of practice must be considered as they relate to the opportunities for worker interactions with schools.

If these factors—caseload, schools, region, years of practice—are addressed, child welfare interactions with schools may improve and overall outcomes for youth in the child welfare system may improve. This is important, as many youth in the system face a
multitude of educational issues in addition to being victims of CAN. The number of youth in the child welfare system whose academic achievements are directly impacted by child welfare workers’ interactions with schools is unknown. There is undoubtedly a need, however, for an increase in interactions between child welfare and schools to meet the multitude of needs faced by youth and families in the child welfare system.
References


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Appendix A: Recruitment Script

Hello. This is ____________(Principal investigator) from the Ohio State University. I am part of a research project for a Master’s thesis that is looking at factors that might influence how child welfare workers interact with schools.

This announcement is to invite you to participate in an online survey that will explore child welfare workers’ experiences interacting with schools. We are inviting child welfare workers across different areas of practice to participate.

Your responses as child welfare workers will serve to broaden our understanding of the interactions between child welfare and schools, and to learn more about how these interactions occur. We believe that your reflections on this topic will be an important contribution to the field of child welfare.

The survey will take approximately 15-20 minutes to complete, and your participation is completely voluntary. There are no penalties for choosing not to participate. Further, you may withdraw at any time, for any reason, without penalty.

If you are interested in participating in this survey, the survey can be accessed at ___________(insert link). The deadline to complete this survey will be ___________(insert date). If you have any questions, please feel free to contact me at (614) 292-6934.

Thank you!

Megan Lehnert
Graduate Research Assistant
College of Social Work
The Ohio State University

Dawn Anderson-Butcher
Associate Professor
College of Social Work
The Ohio State University
Hello:

This is _____________ (insert name of investigator) from the Ohio State University (OSU). I am part of a research project for a Master’s thesis that is looking at factors that might influence how child welfare workers interact with schools. Specifically, we are asking you to participate in this online survey. The survey will take approximately 15-20 minutes to complete.

Please read this consent agreement carefully before you decide to participate in this study.

The purpose of this research study is to better understand the factors that may influence how child welfare caseworkers interact with schools. It is anticipated that up to 1000 child welfare caseworkers will participate in this study. If you agree to participate you will be asked to answer a number of questions on the following pages of this online survey. There are no correct or incorrect answers to any of the questions.

There are minimal risks involved with your participation. Your responses will be completely anonymous and confidential. In other words, your name and/or email address will not be able to be connected with your responses. Further, only the investigators will have direct access to the data that are collected.

There are no direct benefits to your participating in this study; however, there will be an indirect benefit gained through the opportunity to inform the child welfare system around school interactions. Additionally, your participation in this research study may also inform potential professional development in the future.

Your participation is completely voluntary. There are no penalties for choosing not to participate. Further, you may withdraw at any time, for any reason, without penalty. The information you give in this study will be anonymous and handled confidentially. Your name will not appear anywhere in the data and will not be used in any report.
Who to contact if you have questions about the study:

Megan Lehnert
1947 College Rd.
15 Stillman Hall
Columbus, OH 43210
Phone: (614) 292-6934

Dawn Anderson-Butcher
1947 College Rd.
340B Stillman Hall
Columbus, OH 43210
Phone: (614) 292-8596

Who to contact if you have questions about your rights in the study:

Office of Responsible Research Practices
300 Research Foundation Building
1960 Kenny Road
Columbus OH 43210-1063
Telephone (614) 688-0389

By clicking the “Yes, I agree to participate” button below, I am hereby granting my consent for inclusion in this survey. I am also verifying that I am at least 18 years of age or older, I have read the information above and am aware that my participation is voluntary. I may decline to answer any items, and I have been given the opportunity to ask any questions that I have about the survey.
Appendix C: Survey

Current work experience. We would like to know a little about your current work experience. Please type or mark the appropriate responses.

1. Please identify the child welfare unit/units that you currently work in by marking the appropriate boxes. (Please mark all that apply):

   Child Protective Services (CPS) (e.g. intake & assessment, investigation) O
   Foster Care O
   Prevention O
   Adoptions/ Permanency Planning O
   Family Preservation O

2. In what region do you primarily practice? (Please mark all that apply)

   □ Urban
   □ Suburban
   □ Rural
   □ Other (please specify) ____________________
3. Please indicate the number of cases in your caseload, on average, in a one-month period. Number of cases:

- Investigations per month _______
- Children _______
- Families _______
- Adoptive Parents _______
- Foster Parents _______
- Biological Parents _______
- Other _______

4. Please estimate the number of different school buildings in which you have clients currently enrolled.

   Number of schools _______

**Child Welfare-School Relationships.** We are interested in the degree to which you perceive each of the following statements to be true. Please indicate the extent to which you agree with each of the following statements.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neither Agree nor Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child welfare workers work to address conflicts with school staff directly.</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>School staff are as likely as I am to address obstacles to our successful collaboration.</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>School staff and child welfare workers talk together about professional similarities and differences including role, competencies, and stereotypes.</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>School staff and child welfare workers work to address conflicts with school staff directly.</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>
workers do not evaluate their work together.  
Child welfare workers discuss with school staff the degree to which they each should be involved with a particular case.  
School staff are interested in supporting the work of the child welfare system.  
School staff invite child welfare workers to meetings at schools.  
School staff are welcoming of child welfare workers.  
School staff are straightforward when sharing information with child welfare workers.  
School staff and child welfare workers often discuss strategies to improve their working relationships.  
Child welfare workers talk about ways to involve school staff in their work.  
Schools do not attempt to create positive relations with child welfare workers.  
Child welfare workers are optimistic about the ability of school staff to work with them to resolve problems.

Work experience.  Next, we would like to know about your work experience. Please type or mark the appropriate responses.

1. In about what month and year did you start working with this child welfare agency?

______________________ Month  _______________________ Year

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In about what month and year did you start in your current position with this agency?
_____________________Month   _______________________Year

In about what month and year did you start your first child welfare job?
_____________________Month   _______________________Year

2. Please identify the time period in which you've worked in each unit/department, using the format yyyy to indicate “from” and “to” dates.

   Child Protective Services (CPS)
   From Year_____________________________
   To Year_______________________________

   Adoptions/ Permanency Planning
   From Year_____________________________
   To Year_______________________________

   Prevention
   From Year_____________________________
   To Year_______________________________

   Foster Care
   From_______________________________
   To_______________________________

   Family Preservation
   From Year_____________________________
   To Year_______________________________
3. Please indicate the percentage of time that you devote to the following (the total should equal 100%):
   _______% Direct services for/with clients
   _______% Supervision/Consultation/Training
   _______% Management/Planning/Evaluation/Research
   _______% Community Organization/Advocacy/Education
   _______% Paperwork/Computer Work
   _______% Time in Court
   _______% Other

**Child Welfare-School Interactions.** Please indicate the extent to which child welfare workers, in general, complete the following tasks. Indicate “N/A to current job” if you are unaware of such tasks taking place in schools. Please note, “families” and “parents” refers to biological and/or foster families and parents, and “youth” refers to the kids in your caseload or that you are involved with around investigations of child abuse/neglect.

**Work directly with school personnel to help families link with:**

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental health services to address needs of youth</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Mental health services to address needs of families</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Physical health services to address needs of youth</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Physical health services to address needs of families</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
**Work with families to:**

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
</tr>
</thead>
<tbody>
<tr>
<td>Help them communicate with teachers</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Help them communicate with principals</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Help them communicate with support staff (e.g. counselors, school social workers, etc.)</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Apply for services in schools</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

**Work with schools to:**

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide training for school staff on child abuse/neglect</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Provide in-class groups for youth (e.g. on stranger danger, good touch/bad touch, etc.)</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Provide groups for parents in schools</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
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</table>

**Facilitate:**

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students’ transitions into new schools</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>The provision of school supplies for youth in schools</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Reentry of youth from partial day, day, or residential treatment programs back into school</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>
### Participate in:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service coordination and wraparound team meetings</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Meetings with school staff to coordinate care to meet youths’ overall needs</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
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<tr>
<td>Meetings when a child has academic difficulty</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Individualized Education Program (IEP) meetings</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Community events at schools</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Meetings on school transitions (e.g. when youth change schools)</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Meetings with families at schools</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Meeting individually with youth at schools</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Meeting with representatives from multiple agencies (e.g. child welfare, juvenile justice, etc.)</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
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### Provide:

<table>
<thead>
<tr>
<th>Service</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
</tr>
</thead>
<tbody>
<tr>
<td>Literature to schools around child welfare services</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
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</table>

### Talk with:

<table>
<thead>
<tr>
<th>Contact</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teachers about youth</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>School social workers about youth</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>
### School nurse about youth

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
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</table>

### School counselors about youth

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
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<tbody>
<tr>
<td></td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
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</table>

### Principals about youth

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
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<tbody>
<tr>
<td></td>
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<td>O</td>
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<td>O</td>
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<td>O</td>
</tr>
</tbody>
</table>

### Special education teachers about youth

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>O</td>
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<td>O</td>
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</table>

### Assist:

#### Youth with accessing educational/vocational services (e.g. information on funding for colleges)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
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<td>O</td>
</tr>
</tbody>
</table>

#### School personnel when investigating reports of child abuse/neglect (e.g. help school staff with call to children’s services)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

### Interview:

#### Youth at schools (e.g. to investigate reports of abuse/neglect)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

#### School staff as part of investigation

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

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**Other related activities:**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
<th>A lot</th>
<th>N/A to current job</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examine student report cards</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Go on home visits with school staff</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Work with schools to ensure youth remain in same school even if a youth is removed from his/her home or changes foster homes</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

Please write/type in the space below any other interactions you experience with schools that may not have been included in the above questions:
How many times in a month do you talk with school representatives about:

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Youth who are involved in the child welfare system</th>
<th>Youth who are NOT involved with the child welfare system</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every day</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Weekly</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>4-8 times/month</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>8-10 times/month</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>More than 10 times/month</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>N/A to current job</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Views on your job and people you work with. Because persons in a wide variety of occupations will answer this survey, it uses the term "recipients" to refer to the people for whom you provide your service, care, treatment, or instruction. When answering this survey please think of these people as recipients of the service you provide, even though you may use another term in your work.

On the following page, there are statements of job-related feelings. Please read each statement carefully and decide if you ever feel this way about your job. If you have never had this feeling, indicate a "0" (zero). If you have had this feeling, indicate how often you feel it by indicating the number (from 1 to 6) that best describes how frequently you feel that way.

1. How often:

<table>
<thead>
<tr>
<th>Statement</th>
<th>(0) Never</th>
<th>(1) A few times a year or less</th>
<th>(2) Once a month or less</th>
<th>(3) A few times a month</th>
<th>(4) Once a week</th>
<th>(5) A few times a week</th>
<th>(6) Every day</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel emotionally drained from my work.</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>I feel used up at the end of the workday</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>I feel fatigued when I get up in the morning and have to face another day on the job.</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Working with people all day is really a strain for me.</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

153
<table>
<thead>
<tr>
<th>Statement</th>
<th>(0) Never</th>
<th>(1) A few times a year or less</th>
<th>(2) Once a month or less</th>
<th>(3) A few times a month</th>
<th>(4) Once a week</th>
<th>(5) A few times a week</th>
<th>(6) Every day</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel burned out from my work.</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>I feel frustrated by my job.</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>I feel I’m working too hard on my job.</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Working with people directly puts too much stress on me.</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>I feel like I’m at the end of my rope.</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

**Next, we would like some personal information. Please type or mark the appropriate responses.**

1. What is your highest level of education? (Please mark only one)

- [ ] Bachelor's Degree
- [ ] Some graduate work (no graduate degree)
- [ ] Graduate Degree
- [ ] Doctoral Degree
- [ ] Other (please specify)

_________________________________________________________

2. What was your primary major? (Please mark as many boxes as needed)

- [ ] Social Work
- [ ] Counseling
- [ ] Education
- [ ] Sociology
- [ ] Psychology
- [ ] Criminal Justice
- [ ] Business
- [ ] Public Administration
- [ ] Other Social Science
- [ ] A Natural Science
- [ ] Nursing
□ Computer Science  
□ Other: ________________________________

3. What is your current licensure status? (Please mark all that apply)  
□ LSW  
□ LISW  
□ LISW-S  
□ Other (please specify) __________________

4. Please indicate your age:  
   Age ________

5. Gender: □ Male  □ Female

6. What is your race/ethnicity? (Please mark only one box)  
□ Black or African American  
□ Hispanic/Latino  
□ American Indian  
□ Two or more races  
□ Pacific Islander  
□ Asian  
□ Caucasian/White  
□ Other: ________________________________