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Court Intervention and Recurrence of Child Maltreatment

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This is to certify that the doctoral dissertation by

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Abstract

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Abstract

The problem of child maltreatment recurrence is both complex and pervasive, affecting nearly every nationality and culture worldwide. The current body of research consistently contains reports of a gap due to the lack of input from the families served that may be resolved through the application of intergroup contact theory. The purpose of this study was to determine if the presence of an attorney representing parents in child maltreatment intervention predicted lower recurrence in child maltreatment as opposed to when those attorneys are absent from the process. While much of the practice of social work is based on ecological systems theory, a microperspective view through the lens of intergroup contact theory is used in this study. A quantitative, quasi-experimental, contrasted groups design was used to analyze the relationships between the legal representation of parents in child maltreatment interventions as well as moderator effects of child maltreatment type and substance use by the caregiver on that relationship using archival records collected from 2016 to 2018 by the North Carolina Department of Health and Human Services. The results showed a significant relationship between child maltreatment recurrence and legal representation of the families receiving services such that those parents with legal representation experienced significantly less recurrence. The moderating effects of parental legal representation on child maltreatment type and substance use by the caregiver on recurrence however were not found to be significant and would benefit from more study. The social change implications of this study are such that the findings may help inform policymakers and legislators on more effective interventions for the families served.

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Chapter 1: Introduction to the Study

Introduction

Child maltreatment is a highly complex issue present in every nation of the world. The maltreatment of children is typically divided into two types: (a) abuse, which is the intentional harming of a child in either a physical, sexual, or emotional fashion, and (b) neglect, which involves the failure of adults responsible for children to provide them with necessary care (North Carolina Department of Health and Human Services [NC-DHHS], 2008). Child maltreatment was formally recognized as a problem in the United States in 1875 with the formation of the New York Society for the Prevention of Cruelty to Children (Myers, 2006). The formation of and efforts made this by this society were the basis for a system of formalized efforts in child maltreatment intervention that has evolved in the United States over the past century and a half to the system in place today.

In the United States, as well as many other countries of the world, child maltreatment and interventions for child maltreatment are defined by a combination of general federal laws supplemented by more specific state laws and typically the responsibility of government agencies or private agencies working under the supervision and direction of government agencies. Child maltreatment interventions may range from encouraging a family to voluntarily seek support from local providers to court-enforced removal of the child(ren) from the home and subsequent legal termination of the rights of the parents regarding those children. In the United States, the Federal Child Abuse Prevention and Treatment Act (CAPTA) establishes a general definition for child maltreatment as well as federal guidelines for intervention ("Definitions of Child Abuse,"

n.d.). The responsibility for enforcing these federal statutes are then given to the individual states to address as each state deems appropriate. The state-level enforcement of these laws is then expressed through various state statutes with responsibility typically spread through the respective state's agency for the provision of health and human services, law enforcement, and court and legal services. In most states, the agency responsible for health and human services is designated as the lead agency with law enforcement and court and legal services providing a supporting role for health and human services agents as needed. In the United States, nearly all states utilize state-employed social workers to investigate allegations of child maltreatment and determine the validity of reports of child maltreatment, the level of risk being experienced by the children involved, and the proposed intervention to address any risk discovered ("How the child welfare system works," 2013). Depending on the findings, interventions may involve the family working with government social workers, private contractors in social work or mental health services working under state or local government supervision, law enforcement agencies, or the court system.

In most states in the United States, investigation and intervention services are both handled by state agency employed social workers who have been trained in the policies and procedures developed in each respective state as a methodology for child maltreatment intervention. Despite the systems in place of professional standards for intervention professionals and standardized methods of intervention based upon research of best practices, the interventions utilized vary in efficacy resulting in inconsistent results with the families served (Putnam-Hornstein, Simon, Eastman, & Magruder, 2015).

These inconsistencies may be seen in the recurrence of child maltreatment in those families served. Recurrence typically results when a family has experienced an intervention for child maltreatment services and then, later, is found to need additional intervention for the problem that was previously thought resolved (Putnam-Hornstein, Simon, Eastman, & Magruder, 2015). The rates of recurrence experienced by families range from 5% to 25%, depending on the method of study employed (Casanueva et al., 2015). Those differences aside, either extreme of that range still represents a significant impact on the resources available for intervention that might be improved through the application of more effective intervention techniques. Reduction of recurrence in child maltreatment would also be of benefit to the families served as the process of child maltreatment intervention is not generally seen as a pleasant one from the perspective of the family (Pelton, 2016).

In this chapter, I provide a background for the study of child maltreatment recurrence as well as a statement of the specific problem as addressed by this work concerning the gap in the current research in this area. The research questions and hypotheses are presented here within the framework of the theoretical foundation and conceptual framework for this study. Next, I discuss the nature of the study as well as provide definitions for the technical terms used along with a discussion of assumptions, scope and delimitations, limitations, and overall significance of this work.

Background

A greater understanding of that which leads to child maltreatment recurrence has excellent potential to help inform policymakers on the development of more effective

interventions, as well as reduce the overall impact of child maltreatment on individual families and society. Past research has mostly been descriptive as an attempt to identify common demographic characteristics of those families who most often experience the problem of child maltreatment recurrence (English, Marshall, & Orme, 1999). Much of the existing body of work has been theoretically based in ecological systems theory (Bae, Solomon, Gelles, & White, 2010), with a specific focus on the structure of the family itself rather than the supportive systems within which the family exists (Jouriles et al., 2010).

The role of intervention models has been evaluated in relation to maltreatment recurrence, although the methodology of intervention by social service agencies was not found to be related to the problem of recurrence (Carnochan, Rizik-Baer, & Austin, 2013). In related research in the area of substance abuse intervention, Coll, Stewart, Morse, and Moe (2010) showed promising results in the area of recurrence reduction but was complicated by only including those families who were also referred for court intervention with related criminal charges.

Other researchers in child maltreatment recurrence have addressed issues such as structured parenting programs (Jouriles et al., 2010), child demographics and the effects of child removal from the home (Lawler, Gehrman, & Karatekin, 2016), and level of intervening agency response (Marshall, Charles, Kendrick, & Pakalniskiene, 2010). Those researchers showed mixed results as to the effect of those factors on child maltreatment recurrence, which was likely being complicated by other intervening factors, such as court intervention, that were not addressed in these studies. Lawler et al.

(2016) found, however, that families are, with very few exceptions, referred for court services in only the most significant cases that warranted removal of the child from their home. Over a third of those cases studied also involved substance abuse by the caregiver as a related factor in the need for maltreatment intervention (Lawler et al., 2016). In a related study by Murphy, Harper, Griffiths, and Joffrion (2017), the use of Family Treatment Drug Courts (FTDC) was found to be highly effective in reducing maltreatment recurrence as opposed to those families who did not receive FTDC intervention.

While these studies all suggest that the methodology of intervention, type of intervention, and use of the court system may be related to rates of recurrence in child maltreatment, they are all limited in that they do not address a more generalized understanding of child maltreatment outside of the specific categories studied. There is also an inherent bias in the existing research, based on ecological systems theory, that assumes social work principles involving a joining between the family and intervening social worker applies (Green et al., 2016). While this theory of social work intervention is applicable for voluntary clients, it has not been shown if it is equally applicable in the area of involuntary client intervention. Whereas ecological systems theory in social work intervention assumes a cooperative relationship between the social worker and family members, intergroup contact theory (Pettigrew & Tropp, 2008) assumes more of a negotiation between members who may be cooperative or hostile towards one another. Therefore, intergroup contact theory may be more applicable to the families served by social service agencies as a consequence of child maltreatment. The lack of existing

research addressing this issue represents a significant gap in the current body of work on child maltreatment recurrence.

Problem Statement

The problem of child maltreatment recurrence is complex and widespread, impacting communities throughout the world and having a direct impact on the physical and psychological health of children, their families, their education, and their lives in general. There are also indirect impacts on society, such as the costs related to maltreatment recurrence and intervention with the families. Child maltreatment recurrence can also lead to increased personnel costs for intervention professionals, as the same families often experience repeated interventions. Additionally, there are increased overall healthcare costs, which can include increased medical and psychological services of those children who experience repeated incidents of child maltreatment (Olson, Campbell, Cook, & Keenan, 2018; Vachon, Krueger, Rogosch, & Cicchetti, 2015).

Child maltreatment intervention in the United States is an issue of such significance and importance that there are numerous agencies at the federal, state, and local levels that have either complete or partial responsibility for addressing child maltreatment in some capacity. The economic impact of nonfatal child maltreatment for a single victim was calculated to be $210,012 (in 2010 dollars) including expenses such as medical, child welfare, criminal justice, and special education, just to name a few, and the national cost to the country overall culminates to an estimated cost of $585 billion annually (Fang, Brown, Florence, & Mercy, 2012).

The current body of research maintains a focus on the characteristics of children and families involved as well as various intervention approaches within the context of professional, voluntary social work practice based on ecological systems theory (Bronfenbrenner, 1977). The actual practice of social work within the context of an involuntary imposition of services as necessitated through government social service intervention, with the added elements of ingroups and outgroups, complicates the application of ecological systems theory. To address this complication, intergroup contact theory (Pettigrew & Tropp, 2008) may offer a more accurate portrayal of the relationship between the family members and others involved from a micro-system perspective than the macro-system perspective offered through ecological systems theory. When viewing the problem through intergroup contact theory, the most effective outcomes occur when the parties are of equal status, have common goals, have intergroup cooperation, and the support of legal authority (Pettigrew & Tropp, 2008). The relationship between family members and government social workers can be hampered by the generally negative view reported being held by families of the social workers with which they work in child maltreatment interventions (Zugazaga, Surette, Mendez, & Otto, 2006). To address this, one would need to identify an agent within the context of child maltreatment intervention that might be viewed by the family as an advocate. It would also need meet the criteria for positive outcomes, as described in the work of Pettigrew and Tropp (2017) on intergroup contact theory. One potential agent in child maltreatment intervention, when court services are involved, would be the court-appointed or privately hired defense attorney who represents the parents of the maltreated child. Such attorneys are often

viewed much more positively and as an advocate by parents involved in the child welfare system than is the social services worker (Newman, 1990).

Child maltreatment recurrence has addressed the effectiveness of court services in relation to child removal and criminal charges related to substance use. However, research on the application of intergroup contact theory to the issue of recurrence of child maltreatment is absent in the current literature. Similarly, legal representation of families as related to recurrence of child maltreatment is also absent in the current literature. Additionally, although the type of child maltreatment (Lawler et al., 2016) and substance use by caregivers (Murphy, Harper, Griffiths, & Joffrion, 2017) have been examined as factors in child maltreatment recurrence, their study in the context of legal representation as part of court intervention regarding child maltreatment has not been addressed.

Purpose of the Study

`The purpose of this study is to quantitatively evaluate if there is any relationship between the use of a family attorney in child maltreatment intervention and the rate of child maltreatment recurrence. Further, the possible moderating effect of substance usage by the caregiver and child maltreatment type will also be examined in relation to child maltreatment recurrence rates to evaluate any relationships that may be present.

Research Questions and Hypotheses

The following research questions and hypotheses will be addressed in this study.

Research Question 1

Is there a difference between rates of recurrence in child maltreatment for families who have legal representation (family attorney) and those who do not?

$H_0$1: There is no difference in rates of recurrence in child maltreatment between families who have legal representation and those who do not.

$H_1$1: There is a difference in rates of recurrence in child maltreatment between families who have legal representation and those who do not.

Research Question 2

Does child maltreatment type moderate the relationship between legal representation and rate of recurrence in child maltreatment?

$H_0$2: Child maltreatment type does not moderate the relationship between legal representation and rate of recurrence.

$H_1$2: Child maltreatment type does moderate the relationship between legal representation and rate of recurrence.

Research Question 3

Does substance use by the caregiver moderate the relationship between legal representation and recurrence of child maltreatment?

$H_0$3: Substance use by the caregiver does not moderate the relationship between legal representation and recurrence of child maltreatment.

$H_1$3: Substance use by the caregiver does moderate the relationship between legal representation and recurrence of child maltreatment.

Theoretical Framework

Much of the practice of social work is based upon the macro-perspective of ecological systems theory, as proposed by Bronfenbrenner (1977). Ecological systems theory is concerned with the relationships within the personal ecology of individuals and

families and their connections within a greater social context. This theory has served as

the foundation for research and application of interventions in child maltreatment over

the past 40 years (Bae et al., 2010; Carnochan et al., 2013; Green et al., 2016; Laslett,

Room, Dietze, & Ferris, 2012; Rivera & Sullivan, 2015; Solomon, Asberg, Peer, &

Prince 2016). Through the application of ecological systems theory, the social worker

attempts to intervene in the problem of child maltreatment by becoming a part of the

family ecology in an attempt to change the parent's behaviors and through that, reduce

the risk of maltreatment of the children (Turnell & Edwards, 1999). As a result, the social

worker assumes a superior role over the parent, under the social worker's authority as a

government agent enforcing the involuntary intervention with the family through the

authority they hold by federal, state, and local statutes. Ideally, the social worker is a

temporary intervention agent within the family rather than a permanent member. As such,

the relationship of the social worker to the family might be better expressed as an agent

of negotiation for compliance with the law rather than a lasting member of the family's

social-ecological system. By viewing this relationship as negotiation, the micro-

perspective may be more appropriate than the macro-perspective of ecological systems

theory.

The micro-perspective view of intergroup systems theory, as proposed by Gordon

Allport in 1954, addresses the negotiation perspective of the relationship between the

family members and the social worker more accurately. Intergroup contact theory

recommends that successful negotiation requires the four criteria of equal status of

members, intergroup cooperation, shared goals, and support of authority (Pettigrew &

Tropp, 2008). While the current system of intervention is grounded in ecological systems theory, intergroup contact theory suggests that negotiation between family members and social worker would not be successful if the respective parties do not meet the four criteria above for a successful negotiation. The application of these theoretical perspectives is discussed in more detail in Chapter 2.

Qualitative research on the perceptions of family members of social workers in child maltreatment interventions suggests that social workers are typically viewed as intrusive and of higher power than the family members, with authority to enforce their recommendations regardless of agreement from the family members (Zugazaga, Surette, Mendez, & Otto, 2006). Alternatively, in those matters that are brought before the court system and in which parents are assigned legal representation in the form of a court-appointed attorney, the assigned attorney is typically seen by the parents and other family members as an advocate for the family (Newman, 1990). The parental perception of advocacy provided by the appointment of an attorney to the family should constructively allow intergroup contact theory to become applicable to all cases that are brought to the court system by social services. Legal representation of the accused (parent) is a requirement of the application of the sixth amendment to the U.S. Constitution regarding the right to legal representation (U.S. Const. amend. VI) as used in the research questions and hypotheses analyzed in this study.

Nature of the Study

I employed a quantitative approach to analyze archival data on child maltreatment interventions held by the North Carolina Department of Health and Human Services. The

data are anonymized so that no personally identifiable information is included with the individual families being differentiated by a case number arbitrarily assigned to them at the time of referral for intervention services. The use of archival data also provided for the protection of the families studied as they are considered an especially vulnerable population.

The dependent variable in this study is the rate of recurrence of child maltreatment referrals over the 24 months between January 2016 to December 2018. The independent variable is the presence or absence of independent legal representation for the family, as indicated by the matter being referred to the court system or not referred. The relationship between substance use by the caregiver and recurrence, as well as maltreatment type and recurrence, were also examined as moderating variables to the relationship between recurrence and legal representation. The relationships between substance use by the caregiver and recurrence and maltreatment type and recurrence have been well established. Therefore, the possible moderating effects of those variables with the relationship between legal representation and recurrence potentially provide useful references for internal validity.

Definitions

Abuse: The intentional harming of a child in either a physical, sexual, or emotional fashion by a parent or caregiver (NC-DHHS, 2008).

Adjudication: Filing of a petition with an appropriate court of law for the determination of abuse or neglect of a child (NC-DHHS, 2008).

Child maltreatment: The abuse or neglect of a child (NC-DHHS, 2008).

Neglect: The failure of adults responsible for children to provide them with the necessary care (NC-DHHS, 2008).

Social worker: An individual working for the North Carolina Department of Health and Human Services through a county Department of Social Services and responsible for the investigation, evaluation, or intervention with families referred for allegations of child abuse or neglect (NC-DHHS, 2008).

Substance use: The compulsive use of alcohol or other drugs (prescribed or not prescribed) by a child's parent or caregiver that is not temporary in nature and which is viewed in the professional opinion of the social worker to be a contributory factor to an incident of child maltreatment (NC-DHHS, 2008).

Assumptions

The archival data used for this study were initially collected from an aggregate database and recorded by child welfare social workers employed at various Department of Social Services (DSS) offices in the state of North Carolina. I assume that those workers have all completed the state-mandated training that is required before they assumed their duties, which include demonstrating competency in understanding and application of North Carolina state policy in child welfare, including data reporting procedures. I also assume that the workers are competently and accurately recording the data. This assumption is mitigated by the large number of social workers employed in the one hundred individual counties throughout North Carolina.

Additionally, I assume that the attorneys assigned to the parents in adjudicated child maltreatment cases competently represent the families they are assigned as required

by North Carolina state law and as monitored by the North Carolina Bar Association. This assumption is necessary for the application of role aspects of intergroup contact theory and is reasonable considering the strict oversight of those attorneys by the laws regulating their licensure to represent others in a court of law.

Scope and Delimitations

I chose to study the artifacts of intergroup contact theory through the interpretation of existing data rather than collecting information directly from the families served due to the vulnerable nature of the population being studied. Not only does that vulnerable nature put them at risk if directly contacted, but there is also a strong potential for inaccurate feedback from those studied should they interpret their answers to have the potential to be used against them in some way.

I chose the independent variable of legal representation for Research Question 1 based on existing research of child maltreatment that indicated a higher level of trust held by family members for their attorneys than for their social workers (Zugazaga, Surette, Mendez, & Otto, 2006). I also selected legal representation as the independent variable in relation to the moderating variables of substance use by the caregiver and maltreatment type. This was based upon these two factors being repeatedly associated with rates of child maltreatment recurrence and thereby potentially allowing for cross-comparison with the independent variable in this study as a further measure of validity.

While child maltreatment intervention is regulated on a federal level in the United States, the application of those general regulations varies significantly from one state to another. Due to that variation, there will also be related variations in the generalizability

of the information found in this study based upon the similarity of laws, policies, and

procedures of other states to those of the state of North Carolina.

Limitations

The primary limitation of this study is one of internal validity due to the relative

scarcity of child welfare cases in North Carolina that are referred for court intervention.

The decision of whether to refer a child welfare matter for court intervention is made by

the staff (social work, supervisory, and legal) of the county DSS on a case by case basis.

Cases may be referred for court intervention for a variety of reasons, including removal

of the children from the home due to the persistent failure of the parents in the family to

cooperate with the DSS social worker.

Another limitation of this study is the potential bias I may hold due to a 27-year

career in the field of child maltreatment as a social worker, child therapist, and child

guardian-ad-litem in Georgia, Florida, and North Carolina. To address this potential bias,

I have been careful to avoid personalizing the experiences of families to my own

experiences with families either personally or anecdotally through my perceptions.

A further limitation in this study involves differences in the practice of child

maltreatment intervention as naturally occur with different social workers, different

counties, and different judicial districts. In order to address this limitation, I used archival

data from throughout the state of North Carolina so that the universality of the data

mitigated any potential external validity.

Significance

This study has great potential in helping to inform the strategies of intervention in child maltreatment. Such potential affects the parents and children served through limiting the prospective number of interventions they may have to experience. There is also benefit to social workers, who, while working in a high-stress environment with a high burn out rate, will likely experience greater satisfaction in their work with a lower rate of recurrent clients than they would with a higher rate of recurrence in their clientele. There is also a potential benefit to society as the ever-increasing need for resources to address the problem of child maltreatment is made worse by higher rates of child maltreatment recurrence with an associated increase in cost to taxpayers. A lower rate of recurrence would logically result in lower overall costs passed on to taxpayers as well as more effective use of the existing resources for first-time clients.

While some researchers in child maltreatment recurrence have found correlations between reduced rates of recurrence and specific interventions implemented through the course of those studies, more universal adoption of those strategies is made difficult due to the additional expense incurred as a result of implementing new programming in an already underfunded system. One advantage of this study is that because of court action the independent variable of legal representation is already a part of the existing system. Therefore, it would not require the implementation of new services, but rather the reapportionment and possible restructuring of existing services with related changes in the application of existing policies and statutes.

The problem of child maltreatment is relatively universal, existing in all developed countries and assumed in many undeveloped countries despite there being no laws to define or regulate such maltreatment. Subsequently, the potential for social change resulting from any findings that might be used to inform current practices and policies to be more productive is indeed significant.

Summary

Intervention in child maltreatment is a highly complex issue with many factors involved that are interrelated in many ways that are understood and, in other ways, are unknown. The current policies and practices of child maltreatment intervention in the United States are the product of nearly a century and a half of refinement, research, trial, and error, resulting in the system we use today with its related strengths and weaknesses. Within that context, the scope of the problem of child maltreatment, in general, defies attempts at a comprehensive study. However, the study of specific aspects of this problem, such as the specific aspect of recurrence is much more amenable to understanding. Within that context, the study of legal representation as an aspect of child maltreatment recurrence is specific enough to be defined within the context of the multitude of factors involved in child maltreatment as well as being theoretically significant enough to potentially result in considerable implications for informing the current practice of child maltreatment intervention. The ripple effects of potential decreases in child maltreatment recurrence also have potential effects on the economy as related to the application of tax dollars, the overall stability of the families served, and child welfare, including physical health, psychological health, and education.

Chapter 2 includes a comprehensive review of the existing literature on recurrence in child maltreatment intervention as well as the relationship to legal representation and child maltreatment intervention. I also address current research in the areas of substance use by caregivers and child maltreatment type as related to child maltreatment recurrence.

Chapter 2: Literature Review

Introduction

This chapter includes a review of the current literature addressing the issues of recurrence in social services intervention in child welfare and the legal representation of caregivers, types of maltreatment, and substance use by caregivers. Researchers have shown that the problem of recurrence in child maltreatment is both significant and widespread in that it affects various aspects of child safety and health and is an issue that is experienced worldwide. The problem of recurrent child maltreatment impacts children, their families, the professionals working with the families, and both public and private funding resources designated to support children and families (Carnochan, Rizik-Baer, & Austin, 2013). The problem of recurrence in child maltreatment ranges, depending on the dataset, from 11% to 42% of the total number of cases in the United States annually (Zhang, Fuller, & Nieto, 2013). Recurrence in child maltreatment has been defined in a variety of different ways by different researchers, and there is no standard tool or measure for understanding recurrence throughout the various agencies in the United States and abroad tasked with the intervention (Horikawa, Suguimoto, Musumari, Techasrivichien, & Ono-Kihara, 2016). Further, the various methodologies used in the both defining and studying child maltreatment tends to interfere with practical application in studies being applied to practice or policy (Jonson-Reid et al., 2019). In the most general terms, recurrence in child maltreatment is best described as a report made to the appropriate authorities, usually public social services, subsequent to a previous report of

maltreatment that has been considered resolved and closed by the relevant agency (Putnam-Hornstein, Simon, Eastman, & Magruder, 2015).

While there has been a great deal of study on child maltreatment in general and, more specifically its recurrence, there are few studies that address court intervention in child maltreatment (Gifford, Eldred, Sloan, & Evans, 2016; Lawler, Gehrman, & Karatekin, 2016; Lens, 2016). There are no known studies within the current research that have specifically examined the relationship between court intervention and recurrence in child maltreatment, and current researchers acknowledge that research in this area is both deficient and needed (Lawler et al., 2016). My review of the current literature thoroughly documents the relevance of this problem as related to issues ranging from the relationship between chronic maltreatment and cognitive, social, and emotional development of children (Constantino et al., 2016). The rapid increase in the number of child maltreatment cases being handled by social service agencies can also be readily seen. The most dramatic change can be seen in Japan with an 8,077% increase in referrals for child maltreatment from 1990 to 2014 (Horikawa et al., 2016).

Current research in this area has been mostly descriptive in nature giving measures of recurrence as related to different aspects of the families and children involved such as fundamental child or family demographics including number of children, age of children, or age of parents (Horikawa et al., 2016; Hornor & Fischer, 2016). Researchers studying recurrent reports of child maltreatment in Canada found that over one-third of the cases evaluated due to recurrence of child maltreatment had a previous report in which they were found not to be in need of services (Cheung, Taillieu,

Tonmyr, Sareen, & Afifi, 2020). This post hoc evaluation of risk factors, as related to recurrence in child maltreatment has been researched through a wide range of potential factors with mixed success. Chiang, Johnson-Reid, and Drake (2020) found a correlation between the poor physical health of caregivers and recurrence in child maltreatment, but only in those cases in which no services were initially offered. In a similar vein, there was some relationship found between child maltreatment recurrence and children with chronic health conditions, but only with very specific types of maltreatment being related to specific health conditions (Helton & House, 2019). Other researchers, not specifically looking at the risk factors associated with recurrence, but rather comparing those factors associated with initial reports, substantiation, and eventual recurrence of child maltreatment showed an atypical finding of no relationship between the factors that predict child maltreatment being predictive of child maltreatment recurrence (Jenkins, Tilbury, Hayes, & Mazerolle, 2019).

Specific interventions designed to address overall risk measures and related recurrence have also been studied (Constantino et al., 2016; Rostad, Rogers, & Chaffin, 2017), but there are no current studies that address intervention with existing resources already available in every community such as the court system. This lack of relevant research is addressed by reviewing research on court services provided to families with concurrent issues that involve court intervention, such as substance abuse, though the court services provided are not directly related to the problem of child maltreatment.

In this chapter, I provide a comprehensive review of the existing body of work as related to the specific aspects of child maltreatment recurrence, and the role of the court,

maltreatment type, and substance use by the caregiver as related to child maltreatment recurrence. I also review literature related to the theoretical foundation and conceptual framework of this study.

Literature Search Strategy

To obtain the relevant current research for this literature review, I searched several article databases available through the Walden University Library, including PsycINFO, SocINDEX, EBSCOhost, SAGE, and Thoreau. I conducted searches using the terms *child welfare, child abuse, child maltreatment, recidivism, recurrence, reoccurrence, substance abuse, court, legal, therapeutic jurisprudence,* and *intergroup contact theory*. These terms were grouped in various ways using the Boolean operators AND and OR and applied both between the discreet search fields of each database and in concert within those search fields with the guidance of the Walden University Library staff. Searches were limited to those works published between 2013 to 2020. Searches were also conducted to locate the seminal works of the major theorists whose work applies to the current practice of child welfare social work, including Urie Bronfenbrenner and Gordon Allport. I was able to discover additional research through a review of the references cited within the relevant articles found through those initial searches. I discontinued my article search when the rate of repetition of duplicate findings indicated that all relevant information had been discovered.

I also searched government and nonprofit databases, including the United States Department of Health and Human Services, the North Carolina Department of Health and

Human Services, the Annie E. Casey Foundation, and the Child Welfare League of America for related policies and statistics used in this dissertation.

Theoretical Foundation

Intergroup Contact Theory

Intergroup contact theory, as initially proposed by Gordon Allport in 1954, posits that equal status, intergroup cooperation, shared goals, and the support of authority are necessary for a positive outcome in negotiation between groups (Pettigrew & Tropp, 2008). Intergroup contact theory is typically used as a model for reducing prejudice between groups, mainly about safe avenues of interaction between group participants (Baltes, Hernandez, & Collins, 2015). When applied to established attitudes and expectations as well as behaviors between group members, Brannon, Taylor, Higginbotham, and Henderson (2017) advised that, through the application of intergroup contact theory, characteristics such as attitudes, expectations, and behaviors between group members are more malleable. Their work examined the utilization of intergroup contact theory within the sociocultural context, including how power relations between groups can form the manner in which groups relate to one another (Brannon et al., 2017). Brannon et al.'s (2017) work is especially relevant within the context of this study as it illustrates how intergroup contact theory can be used to help mitigate problems that occur between groups, mainly when one group has been subject to a history of negative stereotypes. The families who received interventions for child maltreatment were often negatively stereotyped, regardless of any other attitudes held about them as related to more common sociocultural demographics such as socioeconomic status, race, or

ethnicity. Through the superimposition of principles of cultural psychology and intergroup contact theory, Brannon et al. showed the effectiveness of intergroup contact theory in the reduction of social disparities, which then aids in attaining more positive outcomes between those from different sociocultural groups.

Ecological Systems Theory

Much of the current practices, policies, and research on child welfare intervention tends to be based on concepts derived from Urie Bronfenbrenner's ecological systems theory (Rivera & Sullivan, 2015). Bronfenbrenner's (1977) theory proposed ever-expanding spheres of involvement from the level of the individual expanding outward. Those levels start with the individual and then progress through the microsystem of immediate family members and friends, the mesosystem of friends and family one contacts on an occasional basis, and the exosystem that would include social services and legal services (Bronfenbrenner, 1977). According to Bronfenbrenner, as levels of trust and intimacy decrease, the further each level is situated from the individual. In the practice of child welfare intervention, the social worker is seen as a member of that ecological system with social work practice being predicated on capitalizing on that membership to effect change from within the family system (Rivera & Sullivan, 2015).

Current Application

Current use of ecological systems theory in child maltreatment recurrence research has primarily been based on attempts to better understand the demographic characteristics common to those families who experience recurrent incidents of child maltreatment (Jedwab, Harrington, & Dubowitz, 2017; Jenkins, Tilbury, Mazerolle, &

Hayes, 2017; Pittenger, Pogue, & Hansen, 2018) as an attempt to better identify those

prone to experience recurrence. Jedwab et al. (2017) utilized ecological systems theory as

a way of analyzing different levels of people and agencies that come into contact with

children in an attempt to identify patterns and thereby possible predictors of maltreatment

recurrence. Through their study of 378 children reported for child protective services

intervention throughout the United States over 18 years, 81% were found to have

recurrent referrals for child maltreatment intervention (Jedwab et al., 2017).

Unsurprisingly, patterns were found between child maltreatment recurrence and child

age, child race, and symptoms of depression in parents (Jedwab et al., 2017). The

characteristic of this study as a longitudinal analysis, following children from an early

age to 18-years, helped strengthen the significance of these findings. However, the

discrepancies between different agencies throughout the United States regarding data

input was a definite challenge in interpretation (Jedwab et al., 2017).

In examining the issue of child maltreatment recurrence more globally, an

Australian study of 9,608 children referred for child maltreatment intervention over one

year in Queensland also focused on the demographic characteristics of the ecological

system surrounding the children (Jenkins et al., 2017). Jenkins et al. (2017), in addressing

the problem they had identified as a lack of coherent theory as to why recurrence in child

maltreatment happens, attempted to reconceptualize child maltreatment recurrence as an

emergent property of an existing system within the context of the child's ecological

system (Jenkins et al., 2017). While they were able to confirm many of the same

demographic findings regarding maltreatment recurrence as related to parental mental

illness, parental history of maltreatment as a child, and domestic violence within the home, the predictors were shown to be more likely to predict referral for intervention for child maltreatment rather than confirmation that recurrent maltreatment had occurred (Jenkins et al., 2017). This study again shows an inherent problem in the utilization of ecological systems theory that, while being good at illustrating the likelihood of recurrent referral for child maltreatment intervention based on personal or social demographics held by children, does little to give any indication of how such recurrence could be reduced. When the dynamic of the ecological system is shifted from the general concept of child maltreatment to a more specific study of child sexual abuse the sociodemographic factors correlated with recurrence were spread throughout different levels of the ecological system and generally more predictive than preventative in nature (Jenkins et al., 2017). An example of this can also be found in Pittenger et al.'s (2018) longitudinal study on predicting sexual abuse revictimization. The findings of this longitudinal study of 1,915 child victims of sexual abuse with an overall recurrence rate of 11.1% were quite promising in regard to showing the correlations between sociodemographic characteristics such as age, mental health problems of parents, and income levels of parents (Jenkins et al., 2017). However, there is little that can be done to change many of these characteristics as a method of improving the effectiveness of existing interventions. The use of demographic factors related to ecological systems theory tends to be less than useful in predicting maltreatment recurrence (Holbrook & Hudziak, 2020).

Efforts to improve the application of child maltreatment intervention through the application of ecological systems theory has found application in the use of evidence-based intervention in general (Green et al., 2016) and family-centered practices more specifically (Berger & Font, 2015) as well as those factors mainly related to substance abuse by the caregiver (Rivera & Sullivan, 2015). In a more specific application of the principles of ecological systems theory, Green et al. (2016) assessed the role of those agencies and individuals collaborating with families as an evidence-based intervention approach to reducing child maltreatment recurrence. Through their mixed-method study, they were able to quantitatively measure the results from 53 care providers across two U.S. states as well as qualitatively assess the perceptions of 182 program participants across 21 focus groups. While both the quantitative and qualitative measures in this study indicated positive results as related to the role of collaborative, evidence-based models of intervention (Green et al., 2016), it should also be noted that the implementation of such models over time is dependent upon both funding for programming outside the norm for child maltreatment intervention services as well as the availability of partner agencies for such collaborations. Such agencies may be found in larger metropolitan areas; however, they are often absent in smaller, rural communities. Similarly, Berger and Font (2015) found, through their more global review of family-centered programs, a decided lack of effectiveness in the current interventions of family preservation on child maltreatment recurrence. Their review of programmatic information specific to child maltreatment intervention further found few family preservation and family reunification programs in

the area of child maltreatment intervention are ever evaluated for effectiveness after they are implemented (Berger & Font, 2015).

Rivera and Sullivan (2015) examined the problem of recurrence in child maltreatment as related to the specific factor of substance abuse in a quasi-experimental fashion through the provision of housing-based supports to families as a way of enhancing the ecological system at an exosystem level of the family's ecological system. Their study of 250 children, divided into treatment and comparison groups showed a significant difference in recurrence rates, with the treatment group showing less than half the rate of recurrence as the comparison group (Rivera & Sullivan, 2015). Despite the successes shown by this research, there are still the inherent problems of sustainability and generalizability due to the program's expense as well as the program's specificity for substance abuse related child maltreatment rather than child maltreatment in general. I was unable to find any use of intergroup contact theory as applied to child maltreatment recurrence or child maltreatment in general. Current research using intergroup contact theory as a foundation tended to be in areas of general cultural awareness (Baltes, Hernandez, & Collins, 2015; Thuesen, 2017), reduction of inequality (Brannon et al., 2017; Croucher, 2016), and the methods of application in social science in general (Pettigrew & Hewstone, 2017).

I was able to find one study that applied the same principles of trust in the relationship between family members, social works, and court staff (Pott, 2017), though this work references no specific theoretical foundation. The field of social psychology generally addresses matters at the meso-level of understanding, between the micro-level

of cognitive psychology and the macro-level of other social sciences such as sociology

and social work (Pettigrew, 2018). This understanding can also help bridge some of the

basic concepts in ecological systems theory of family members operating within an

ecology composed of macro, meso, and micro levels of interaction (Bronfenbrenner,

1977) with concepts examined in research on child maltreatment intervention such as

authoritarianism and social dominance orientation (Pettigrew, 2018). The use of

intergroup contact theory allows us to address problems between groups on the level of

interactions between individuals through the examination of mediator and moderator

effects (Pettigrew, 2018).

   Intergroup contact theory has also been employed as a way of better

understanding the associations between collective victimhood beliefs within ingroups as

an attributor to conflict with outgroups (Bagci, Piyale, Karakose, & Sen, 2018). In this

context, there can be seen many similarities in how family members (ingroup) and social

workers (outgroup) often relate to one another. Intergroup contact theory is also seen in

research as a way of finding strategies to increase levels of trust between ingroup and

outgroup members in conflict with one another (Freitag & Kijewski, 2017). Capella,

Hughes, and McCormick (2017) applied intergroup contact theory to the study of the use

of teachers as authority figures in the classroom on interracial relationships with

significant findings in support of the theory. In similar work conducted in the

Netherlands, the perceptions of mistrust between different racial groups also showed

significant moderating effects of authoritarianism (Van Assche, Roets, Dhont, & Van

Hiel, 2016). Similarly, the application of intergroup contact theory to the problem of

hostile relationships between expatriates and host-country nationals, Wang and Varma

(2018) were able to develop a process model to both reduce stereotype beliefs and

anxiety between the two groups and increase the ability of expatriates to adjust to their

new culture.

Much of the current research in child maltreatment intervention continues to

identify a gap in research in the lack of input from the families served (Green et al., 2016;

Rivera & Sullivan, 2015; Solomon et al., 2016), and the application of intergroup contact

theory in the context of ecological systems theory could be the bridge for that input.

<div align="center">**Conceptual Framework**</div>

There are several concepts involved in this work, which, along with their

multiplicity of definition and use, make their contextual descriptions all the more critical

for this research to have any real meaning. The concepts of child maltreatment,

maltreatment type, child welfare intervention, legal representation, and substance abuse

can become confusing in the existing literature as each is defined within the context of

the culture and geopolitical region in which these concepts are studied.

The concepts of child maltreatment and type of child maltreatment, in the most

general understanding, are issues that are seen in almost all cultures throughout the

world, with research being conducted in many different countries from many different

cultural perspectives. The concept of child maltreatment, and the related concept of

maltreatment type, can be seen as defined throughout the United States as any acts, taken

or deferred by a parent or caretaker, resulting in death, physical or emotional injury or

harm, sexual abuse, or exploitation of a person under eighteen years of age or any such

that causes a situation seen as "imminent risk of serious harm" ("Definitions of Child Abuse," n.d., para. 1). This definition can be further complicated as each state, territory, or Native American tribe in the United States defines maltreatment in subtly different ways based upon that more significant broad federal definition. As the relevant work in this field transcends U.S. boundaries, variations in concept must also consider the recent work completed in localities with even more significant differences from Australia (Jenkins et al., 2017) to Singapore (Chng, Li, Chu, Ong, & Lim, 2018; Li, Chu, Ng, & Leong, 2014). Within this context, the concept of child maltreatment can often vary based upon the intent of the perpetrator, which can include only intentional acts as defined in some areas such as Singapore (Chng et al., 2018) or both intentional and non-intentional acts as maltreatment is defined in the U.S. state of North Carolina (Juvenile Code, 1979).

Similarly, definitions of maltreatment type also vary, particularly in the differences between abuse and neglect. By some definitions, any physical injury experienced by a child due to the action or inaction of a caregiver would be defined as abuse (Lawler et al., 2016). By other definitions, as with the definition of child maltreatment in general, only intentional acts can be defined as abuse, while all non-intentional acts are considered neglect, regardless of whether or not the child is physically injured (Juvenile Code, 1979). While such differences in definition are subtle and might even be insignificant within the scope of this study, a determination of that potential significance might only be indeed determined through a meta-analysis of those studies from the perspective of definition and as such, should be acknowledged as a conceptual aspect of this literature review.

As with the concept of child maltreatment, the idea of child maltreatment intervention has similar variances in definition and use. Within most of the United States, child maltreatment intervention is seen as the involuntary, or semi-voluntary imposition of legally based and governmentally sponsored intervention through a social service organization operated through the applicable government entity (Lawler et al., 2016; Piper, 2017; Putnam-Hornstein et al., 2015; Zhang et al., 2013). There are, however, some exceptions, particularly outside of the United States, where services are delivered by private corporations or non-profit volunteer entities, though even in these exceptions, that work is performed at the direction and under the supervision of a related governmental agency (Carnochan et al., 2013; Green et al., 2016; Horikawa et al., 2016; Murphy, Harper, Griffiths, & Joffrion, 2017).

The concepts of substance abuse and legal representation were mostly consistent in definition throughout the current body of work related to child maltreatment and recurrence. This might be due to those concepts being limited in geographical scope over the period ranging from 2013 to 2018 to studies performed within the United States, with no relevant studies of maltreatment as related to substance abuse being found outside of the United States. In the existing body of work, studies of the involvement regarding legal representation of families were defined as those families whose work with a given social service agency for child maltreatment intervention were overseen by the appropriate judicial authority and with either privately hired or publicly appointed attorneys representing the rights and wishes of the parents or caregivers (Gifford et al., 2016; Lawler et al., 2016; Lens, 2016; Lens, Katz, & Suarez, 2016; Murphy et al., 2017;

Pott, 2017; Putnam-Hornstein et al., 2015). This limitation of cases to the United States is likely based on the constitutional protections of due process provided under U.S. law, making it inherently unlikely that the concept of legal representation would be seen in studies of data from other countries or regions.

Much in the way of legal representation, the concept of substance abuse as related to child maltreatment was mostly limited to those studies based in the United States This may also be a cultural artifact related to the cultural nature of substance abuse being viewed as a problem or even a diagnosable psychological condition (American Psychiatric Association [APA], 2013). Within the context of those studies that addressed substance use or substance abuse, the applicability was only applied as such substance use/abuse was a contributing factor to the problem of child maltreatment (Gifford et al., 2016; Hornor & Fischer, 2016; Lens, 2016; Murphy et al., 2017; Solomon et al., 2016; Zhang et al., 2013). One thought-provoking aberration in this use of substance abuse/use as a factor in child maltreatment was conducted in Singapore in which substance use/abuse was seen as an act of criminality and included with other factors such as caregiver arrest and incarceration under the variable "high criminality" (Chng et al., 2018, p. 1).

The numerous variances in the definition of the various concepts of this study in related works show the need for caution in the application of current research to this study. The concepts, factors, variables, and findings from their analyses are most relevant within the context in which they were studied and will necessarily be presented here within such a context.

Key Variables or Concepts

Recurrence

To further expand upon the matters covered in the previous section on the conceptual framework, here I will examine those conceptual concepts and other variables in more detail within the context of recent work within the field of child maltreatment intervention. The subtlest variable to define in relation to the existing body of work has been that of recurrence.

Recurrence, as defined in this study, has been termed by other researchers using a variety of similar words, including those that focus on the caregiver or offender and the child or victim. When focused on the caregiver or the offender, terms such as recidivism (Constantino et al., 2016; Lawler et al., 2016; Rivera & Sullivan, 2015; Solomon et al., 2016) and reoffending (McCarthy, Milner, Coley, Ormsby, & Oliver, 2018) are often used. However, when focusing on the child, the term revictimization is much more common (Hornor & Fischer, 2016; Pittenger et al., 2018). The majority of existing work tends to use terms with a more comprehensive or family focus such as re-entry (Li et al., 2014), re-reports or re-notifications (Bae & Kindler, 2017; Cheng & Lo, 2015; Fuller & Zhang, 2017; Jedwab et al., 2017; Putnam-Hornstein et al., 2015) and the more common recurrence or reoccurrence (Carnochan et al., 2013; Halverson, Russell, & Kerwin, 2018; Helie, Laurier, Pineau-Villeneuve, & Royer, 2013; Horikawa et al., 2016; Jenkins et al., 2017; Kennedy, Kim, Tripodi, Brown, & Gowdy, 2016; Rostad et al., 2017; Zhang et al., 2013).

To further complicate this terminology, there is the problem of no consistent operational definition for the terms mentioned above between the different works. In order to better understand how recurrence is measured in different ways, it is essential to know how the process of child maltreatment intervention flows from a report to an investigation to a substantiation and services provided (Jenkins et al., 2017). While the general term of recurrence lacks consistent definition throughout the body of work, there are terms within the field of child maltreatment intervention that are used consistently. A report refers to the reporting of an allegation of child maltreatment to the appropriate agency, regardless of the validity of that report as defined by the agency in receipt of it and regardless of whether that agency acts upon that report or not (Centers for Disease Control and Prevention, 2014). Investigation refers to the process that occurs when the report is considered valid and warrants the allegations in the report that need to be assessed or investigated (Centers for Disease Control and Prevention, 2014). While there are different policies and laws depending on locality, all investigated reports represent some form of secondary validation. Finally, the term substantiated is used to indicate reports that are investigated and in which the family is found to be in need of services, either voluntarily or involuntarily delivered (Centers for Disease Control and Prevention, 2014). This represents the highest level of validation in which a need was found that required outside intervention.

Within the context of the current body of work in this area, some have defined recurrence as repeated reports on the same family regardless of whether they warranted investigation (Bae & Kindler, 2017; Carnochan et al., 2013; Fuller & Zhang, 2017;

Lawler et al., 2016; Rostad et al., 2017; Solomon et al., 2016; Zhang et al., 2013). This

tends to be the easiest method for assessing recurrence as such anonymous, statistical

data is typically easier to access as a public record in many governmental systems and

does not require as much data cleansing or elimination. Recurrence has also been defined

as those reports that have been found to warrant investigation but with no consideration

for the outcome of the said investigation (Horikawa et al., 2016; Jenkins et al., 2017). The

most used definition of recurrence currently, however, is that in which families are found

to repeatedly need intervention for child safety (Cheng & Lo, 2015; Constantino et al.,

2016; Halverson et al., 2018; Helie et al., 2013; Jedwab et al., 2017; Jenkins et al., 2017;

Kennedy et al., 2016; Li et al., 2014; McCarthy et al., 2018; Pittenger et al., 2018;

Putnam-Hornstein et al., 2015; Russell, Kerwin, & Halverson, 2018). The use of this

definition is most consistent with addressing the problems experienced by families due to

the interruption of the family by imposed outside services and the issues of resource

expenditure and worker frustration due to repeated interventions with the same families

(Rivera & Sullivan, 2015). For this study, recurrence is defined by the number of times a

single family is found to be in need of child protective services intervention over a two-

year period.

Legal Representation

While the issue of child maltreatment transcends legal boundaries, the idea of

legal representation is an artifact of the laws of a given country or region, and as such,

much harder to standardize across national borders. In the context of this study, legal

representation is embodied in the sixth amendment to the U.S. Constitution, guaranteeing

the right to legal representation for defense in prosecution (U.S. Const. amend. VI). While I was able to find no study that directly measured the relationship between legal representation and recurrence in child welfare services, I was able to find current research on other aspects of court involvement and recurrence.

The underlying need to address the power structure between families and social services has been acknowledged as a contributing factor in the breakdown of communication between the family members, and the social service workers tasked to ensure child safety (Pecora et al., 2014; Rostad et al., 2017). The role of the court, when involved in child welfare, has been to determine the best intervention for the safety of involved children through a mediatory process between the attorneys of family members and social workers (Lawler et al., 2016). In the determination of child maltreatment through social services in many states, including the state referenced for this study, families are assigned to one of two tracks, investigative or assessment, which then determines the potential for legal representation for the family from the beginning (Lawler et al., 2016; Rostad et al., 2017). In North Carolina, those families assigned to an investigative track may or may not eventually be addressed in court with legal representation, and those assigned to an assessment track will not be addressed in court as all services they receive are considered voluntary and not enforced (NC-DHHS, 2008). The problem found in this concept involves the inherent coercion present based upon the authority and power held by social workers over families giving rise to serious questions about validity of the family's voluntary participation in service delivery (Font, 2016; Pecora et al., 2014; Pelton, 2016; Rostad et al., 2017).

Research of the use of the court system in child welfare services has been limited to examinations of the relationships between the judges and social workers (Lens et al., 2016), out of home child placements (Helie et al., 2013), and court actions related to, but not directly involving social services intervention such as drug courts and courts for other criminal issues (Gifford et al., 2016). While the use of the court system as an environment to facilitate the equality of participants as suggested by intergroup contact theory is absent in the current literature, the use of the court as an enforcement agent for parental psychiatric treatment has been measured, with mixed results (Constantino et al., 2016). Alternately, there were some promising findings in the engagement of families and perception of the court's role by defendants as constructive rather than punitive using a system of therapeutic jurisprudence (Lens, 2016). Therapeutic jurisprudence is a process of conducting court in such a way that those being judged experience less of a punitive model of criminal justice, engaging, instead, in a constructive dialogue with the judge who encourages change rather than punishing past behaviors (Lens, 2016). These conclusions by Lens are based on the qualitative, ethnographic study conducted with 94 families in the New York family court system from 2012 through 2013 by Lens et al. (2016) in which they observed court hearings in order to analyze the themes present with the different parties involved. Of particular significance to this study was the finding of increased compliance from family members as related to their perceptions of fairness in how they were treated (Lens et al., 2016).

While the concept of encouraging change through courtroom involvement proposed by Lens (2016) was most promising in those matters in which therapeutic

judgment techniques were employed, the problem remained that the use of such

techniques is dependent upon the skills or desires of the judges employing them, making

such techniques difficult and likely inconsistent to be employed on a widescale basis.

Also, while therapeutic judgment has been shown to be a useful technique in drug courts,

it has not been used or measured in child welfare court hearings (Lens, 2016).

Current research directly addressing power differentials, a significant issue from

an intergroup contact theory standpoint (Pettigrew & Tropp, 2008), between government

social service workers and family members was only found in the work of Pott (2017),

based in Flint, Michigan. Pott (2017) found that private social workers, when contracted

with by the courts rather than a government social services agency and under the

supervision of the family's defense attorney were more successful in reducing the risk

level in the home within a thirty-day period than traditional government-employed social

workers. Pott's (2017) qualitative analysis of the work of five family attorneys with two

assigned social workers in a within-subject experiment provided promising feedback in

the areas of the balance of power, resolution of conflicts, and efficient use of resources

for families seen in court for child maltreatment issues. While this work does not address

recurrence specifically, the findings do suggest a higher level of progress with the

families, which is assumed to be related to higher levels of trust or lower levels of threat

perceived by the family members.

Maltreatment Type

While different legal systems or cultural groups perceive child maltreatment in

different ways, the specific definitions of child maltreatment can be universally broken

down into the categories of physical abuse, sexual abuse or exploitation, and neglect

("Definitions of Child Abuse," n.d.). Within this framework, there are still subtle

differences in how maltreatment types are defined within the current body of work and as

related to the customs and laws of the area where such research is conducted. One

example of this would be the definition of abuse which may be defined as the intentional

injury of a child by a caregiver as in the U.S. state of North Carolina (Juvenile Code,

1979) or as any injury to a child perpetrated by a caregiver regardless of intent (Horikawa

et al., 2016).

     The topic of child maltreatment type as a factor in recurrence has often been

studied, though more as a way of focusing preventative programs from the standpoint of

direct intervention at the time of service delivery. One common factor in current research

has been establishing a more generalizable definition of maltreatment types for research

purposes rather than following the legal definitions of a given region (Horikawa et al.,

2016). Regardless of the subtler points of legal definitions, the more general definitions

describe neglect as a failure to meet the needs of a child, abuse as the causing of injury,

and sexual abuse/exploitation as acts involving sexual activity and a child ("Definitions

of Child Abuse," n.d.). While somewhat simplistic from a legal perspective, these

definitions have been most amenable to study, particularly when data is drawn from

different geographical or geopolitical areas (Kennedy et al., 2016).

     In looking at the role of maltreatment type in recurrence, it is also important to

note that the type of maltreatment is not distributed equally throughout the population

and that neglect, as a maltreatment type from the most recent confirmed U.S. data,

represents 79.5% of all child maltreatment substantiated (U.S. Department of Health &

Human Services [DHHS], 2015). When the distribution of maltreatment type is

controlled for and compared, however, we find that child neglect generally has higher

levels of recurrence ranging from 74.2% (Eastman, Mitchell, & Putnam-Hornstein, 2016)

to 78.3% (Pecora et al., 2014) in the United States. This rate was inconsistent, however,

with similar information reported from work done in Australia where the rate of neglect

recurrence was measured at 40.4%, and the highest rate of recurrence was observed in

physical abuse at 44.3% (Jenkins et al., 2017). Despite the findings in Australia, most

research data have been in agreement that both reports in general and recurrent reports of

child maltreatment are highest for neglect and lowest for sexual abuse (Bae & Kindler,

2017). While there are no direct studies of the relationship between court intervention and

child maltreatment, it is somewhat suggestive that research on the criminal prosecution of

child maltreatment shows us that sexual abuse is much more likely to be brought to court

for prosecution than neglect (Cross & Whitcomb, 2017).

When applied to child maltreatment recurrence, the factor of child maltreatment

type is typically addressed from the perspective of either identifying risk factors of

families associated with recurrence (Eastman et al., 2016; Jenkins et al., 2017; Pecora et

al., 2014; Pittenger et al., 2018; Solomon et al., 2016) as a descriptor rather than an

avenue for operational intervention. Within this context, maltreatment type may also be

seen as a covariate control of other related factors (Zhang et al., 2013), or from the

standpoint of how the need for intervention is determined (Cheng & Lo, 2015). The use

of identified risk factors most closely relates to the concept of differential response, in

which different types of allegations result in different responses ranged on a hierarchical system of ranked risk or severity (Bae & Kindler, 2017; Piper, 2017). When utilized in this fashion, there is a recognition that different types of maltreatment often result, either by design or perception, in differentiated responses, with the implication that only those cases perceived as most serious will result in an intervention involving the court system and with those perceived as less severe being handled more informally. This process of differentiation has even found some formalization in the practice of child welfare social work as an application of cumulative risk hypothesis, however, while serving as a good predictor of recurrence, there has been little utility found for it in a preventative or intervention-based aspect (Solomon et al., 2016).

As a covariate in relation to a more central question of child maltreatment recurrence, such as the question regarding legal representation in this study, the concept of maltreatment type is a necessary consideration when considering the current practices of differential response as based on the cumulative risk hypothesis (Piper, 2017). With the documented trends in legal prosecution and the hierarchical nature of how current child welfare social work practice encourages differentiation based on maltreatment type, not controlling for factors such a maltreatment type could lead to data interpretation errors. In some instances, there are findings of more than one type of maltreatment in a given instance of CPS intervention. In these cases, the data entry process for social workers in North Carolina requires the worker to rank the type of maltreatment justifying the intervention. The highest-ranked maltreatment type for each intervention instance was used for this study.

Substance use/abuse

Examinations of substance use or abuse, including alcohol, prescription medications, and illicit drugs, are often tracked by social service agencies as they are related as contributing factors to child maltreatment ("Centers for Disease Control and Prevention," 2014). From that perspective, there are many fascinating relationships found, both from the perspective of substance use as a predictor of child maltreatment or child maltreatment recurrence (Chng et al., 2018; Horikawa et al., 2016; Lawler et al., 2016; McCarthy et al., 2018) and as the basis of an intervention focus on child maltreatment (Murphy et al., 2017; Rivera & Sullivan, 2015).

As a predictor of both maltreatment and maltreatment recurrence, the factor of substance abuse is often complicated, as a variable of study, by the many confounding co-factors that often accompany it in social work practice such as related criminality (Horikawa et al., 2016) and psychotherapeutic interventions (Rivera & Sullivan, 2015). In this respect, data correlations related to substance use/abuse are often difficult to interpret as the co-factors are outside of the control of the researcher, and in many cases, the client subject to intervention services.

When used as a factor in intervention, the most typical intervention model is the third-party psychotherapeutic treatment of the affected parent (Murphy et al., 2017; Rivera & Sullivan, 2015). While the use of such services has been associated with the shortened time of social service intervention with the families involved (Murphy et al., 2017), there have been no specific studies of substance use/abuse as related to recurrence in child maltreatment. Recent studies have also been limited in generalizability as well

due to the cost of adding an additional service to the existing interventions in child welfare despite their apparent success in both reducing the longevity of child welfare interventions and the overall rate of recurrence (Rivera & Sullivan, 2015).

Despite these limitations, the use of substance use / abuse as a contributing factor in child maltreatment recurrence still serves well as a controlling factor to better define the overall validity of relationship between recurrence and court involvement due to the prevalence of court involvement in substance use / abuse cases in general (Horikawa et al., 2016; McCarthy et al., 2018). The utilization of this factor as a controlling variable better defines the effect of court involvement overall with the potential contributions of substance use/abuse eliminated.

This relationship between substance use/abuse and court involvement is also seen with the factor of maltreatment type, particularly regarding neglect. A strong positive correlation between child neglect and substance use/abuse has been observed in several studies (Bae & Kindler, 2017; Cheng & Lo, 2015; Eastman et al., 2016; Horikawa et al., 2016). As with the factor of court involvement, this consistent relationship necessitates the use of substance use as a controlling variable to refine the relationship between maltreatment type and recurrence better.

Summary and Conclusions

The study of recurrence in child maltreatment has been conducted from a variety of perspectives and with many different potential factors considered (Carnochan et al., 2013; Casanueva et al., 2015). Of the many factors related to child maltreatment recurrence, two concepts that are repeatedly seen are the levels of cooperation with

service delivery (Green et al., 2016; Jenkins et al., 2017; Pecora et al., 2014; Rostad et al., 2017) and a related perception of trust of the social worker by the parent or caregiver (Font, 2016; Fuller & Zhang, 2017; Lens et al., 2016; Pelton, 2016; Pott, 2017). Additionally, the relationship between child maltreatment type and recurrence has been well established (Bae & Kindler, 2017; Eastman et al., 2016; Jenkins et al., 2017; Pecora et al., 2014; Pittenger et al., 2018; Solomon et al., 2016), though the practical utilization of this information as a tool to improve child maltreatment intervention practice has been more difficult to operationalize. Similarly, the relationship between recurrence and substance use or abuse is equally well established (Chng et al., 2018; Horikawa et al., 2016; Lawler et al., 2016; McCarthy et al., 2018). Unlike maltreatment type, the application of this relationship in child maltreatment intervention is more practicable (Murphy et al., 2017; Rivera & Sullivan, 2015), though problematic and sometimes not possible due to the need for additional programs needed in an already overstressed system.

While the study of the direct relationship between legal representation and recurrence in child maltreatment is absent from the current literature, the relationship between court services, social work services, and the need for a perception of fair treatment has been shown (Lens et al., 2016). Additionally, the effectiveness of a party considered by parents or caregivers as more neutral and supportive than government-employed social workers has been shown to be more effective in-service delivery with a population of families involved with court intervention for child maltreatment (Pott, 2017). This research shows the opportunity for further study of the relationship between

child maltreatment recurrence and legal representation, as well as this relationship

compared to the existing, established relationships in maltreatment type and caregiver

substance use/abuse. In Chapter 3, I will discuss the use and rationale of the quantitative

design in this study, the use of archival data, and the covariates as mediator variables, as

well as threats to the validity.

Chapter 3: Research Method

Introduction

The purpose of this quantitative study is to determine the extent to which the use of family attorneys in child maltreatment intervention predicts the rate of recurrence in child maltreatment as opposed to when family attorneys are absent. Additionally, the interaction effect of maltreatment type and substance use by the caregiver were analyzed as moderating factors in the relationship between family (parental) representation by an attorney and recurrence of child maltreatment.

In this chapter, I address the research design used, methodology, validity, and ethics related to this study. The methodology section of this chapter addresses the population studied, sampling procedures, the utilization of archival data, and the instrumentalization and operationalization of the constructs examined. I conclude with a summary and a transition to the results of the data analysis.

Research Design and Rationale

This study is a quasi-experimental, contrasted groups design composed of two different groups of families referred for child welfare intervention, specifically those with parents who have legal representation and those who do not (Campbell & Stanley, 1963). The dependent variable for this study is the number of times a family is referred for investigation for child maltreatment, as defined by the North Carolina Department of Health and Human Services. Hereafter, this variable will be referred to, as it is in most of the existing literature, as recurrence. Recurrence has been defined in many ways through

various studies, depending on where in the process of child maltreatment referral services the data are examined.

There are typically three steps in referring a family for child maltreatment assessment: the initial referral, screening for services, and assessment findings. At the initial referral stage, a referral for suspected child maltreatment is made by some external or internal source to the DSS (NC-DHHS, 2008). The appropriate staff members then apply the standards of state law and policy to the information collected to discover if the information given about the children involved meets the criteria for assessment by the Child Protective Services Unit of the relevant DSS. This process is internally referred to as screening and can result in a matter being accepted for assessment or investigation (screened in) or rejected with no further action being taken (screened out) (NC-DHHS, 2008). The third step in defining child welfare referrals involves the findings stage, which only applies to those referrals accepted for assessment/investigation and in which a determination is made that services are needed, services are recommended, or services are not recommended (NC-DHHS, 2008). A finding of services needed indicates an involuntary intervention with the family, while a finding of services recommended would indicate referral for voluntary service with the family. A finding of services not recommended indicates the closing of the matter with no other action taken. These steps in referring a family for child maltreatment assessment are essential to understanding the design and rationale of this study as each of the three steps has been defined as a referral in various studies of child welfare referrals conducted in the past. For this study, I am using the term referral to indicate a matter that has been reported to the DSS and screened

in (or referred for further investigation or assessment). This definition is in keeping with the overall goal of this research in addressing the problems of multiple referrals stressing the resources of the relevant agency. A referral that is screened out does not utilize agency resources at nearly the same measure as one that is referred for assessment or investigation. Similarly, from the standpoint of the initial stages of intervention, a completed assessment takes a reasonably consistent investment in time (30 to 45 days per agency policy) regardless of the findings of the assessment. By using this definition, a more homogeneous data set will be analyzed regarding time invested with the family for each referral as opposed to using an aspect of the findings stage such as foster care intervention or in-home family services intervention, which could result in an intervention ranging from a few months to several years.

In this study, the variable of recurrence in the archival data set is a ratio variable measured as the total number of occurrences a family has less the first occurrence, which can be expressed as X-1 with X representing the number of times the family is referred for services within the time frame examined. A 24-month time frame was utilized for this study as existing studies, as well as data from the National Child Abuse and Neglect Data System show that 22% to 50% of families will experience a recurrence within that time (Zhang, Fuller, & Nieto, 2013).

The independent variable in this study is then the presence or absence of legal representation for the parents as a part of the intervention for child maltreatment they experienced. This variable is an ordinal variable and may be expressed as either a yes or no within the context of the initial referral for services (indicated as X above). Such legal

representation is appointed to the parents by the court and is offered at no cost to the

parents. While it is possible for parents to hire a private attorney rather than having one

appointed, it is exceedingly rare that this happens.

The contributory factors of substance use as well as maltreatment type were also

examined in this study as separate moderating factors in the relationship between the

independent and dependent variables.

This design allows for the overall sample of families to be representative of many

different potential states of intervention within the 24-month sampling period. In this

design, some families may have received their first intervention within the sampling

period, while others may have received previous interventions predating the time frame

sampled. The design is constrained in time and resources in that the subjects of study

(archival records of families referred for child maltreatment intervention by social

services) is a fluid population extending before and beyond the time frame of this study

resulting in the cross-sectional nature of this design.

Methodology

Population

The target population for this study is families referred for child maltreatment

intervention by the North Carolina DSS. The unit of study in this research is the family

unit, rather than the individual children, to allow for changes in the family structure.

Thereby, the birth of new children or maturity of children into adults will not have a

significant effect on the population. The North Carolina Department of Health and

Human Services requires a case number to be assigned to each family that serves as a

way of not only tracking interactions with families over time but also as a method of anonymizing the families' identities in this study.

While there is a system in place that allowed for the analysis of the family as a whole, existing published data on child maltreatment is reported by the number of children rather than the number of families, making it difficult to estimate how many families might be in the total population prior to analyzing the archival data retrieved from NC-DHHS. However, the reported data for July 2017 to June 2018 for the state of North Carolina indicated that 118,149 children were investigated for child abuse and neglect (University of North Carolina, 2018). While the total number of families served is not reported, by applying the published U.S. Census data from the 2000 census showing an average of 1.75 children per family with children in the state of North Carolina (U.S. Bureau of the Census, 2004), it is reasonable to estimate that 67,513 families are receiving services statewide.

Sampling and Sampling Procedures

The sample was drawn from an archival database of all social services cases active in North Carolina from 2016 to 2018. Each family unit served was identified by a case number assigned automatically through the state computer database system. I used a G*Power analysis to compute the required sample size based on a medium effect size of 0.25, a power of 0.95, and $\alpha = 0.05$, which resulted in a total sample size of 400 (Faul, Erdfelder, Buchner, & Lang, 2009). There were 3,916 cases of child maltreatment provided in the data from July 2016 to December 2016. Of those, every ninth unique case was chosen for a total of 400 cases from an overall list sorted by county then case number

identifier. This sampling strategy allowed for equal distribution of geographical differences as well as population size differences within the state. As variables such as geographic location and population size can influence the factors being studied, it is essential to take measures to eliminate the impact of those variables by selecting a sample in such a way that those factors are less likely to be of influence. The systematic sampling method is also appropriate due to the large size of the population being sampled (Frankfort-Nachmias & Nachmias, 2008).

Archival Data

I used archival data obtained from the North Carolina Department of Health and Human Services (NCDHHS) Central Registry that was collected and entered into that computer database by child protective services workers from all 100 county DSS agencies throughout the state. The data obtained from NCDHHS contained no personally identifying information and was limited to case numbers (unique to each family served) and the dates that child maltreatment intervention services were received between 2016 and 2018 along with data on whether or not court action was filed in the case, type of maltreatment confirmed, and substance use by the caregiver.

Access to this data was provided by the NCDHHS Child Welfare Unit and was made available to me after the Walden University Institutional Review Board (IRB) approval was granted, and the prospective research was determined by the Director of the Division of Social Services to have potential for expanding knowledge and improving DSS practices, and a Data Use Agreement was executed (Title 10A - Health and Human Services, 1976/1990).

Instrumentation and Operationalization of Constructs

  Operationalization. The independent variable in this study is the legal

representation of the parents/caregivers, and the dependent variable is child protective

services intervention. The variables of maltreatment type and caregiver substance use are

moderator variables in this study.

  Legal representation of families (independent variable) is a categorical variable

with a value of either yes or no, representing that the parent or caregiver either had

outside professional legal representation by way of a hired or appointed attorney as a part

of their child protective services (CPS) intervention or they did not. This variable is

collected in the course of CPS intervention through the indicator that, in a given case,

court action was taken or not. In those cases, in which court action is filed, the parent has

legal representation as required by the sixth amendment to the U.S. Constitution (U.S.

Const. amend. VI). Those in which court action is not filed are not eligible for outside

legal representation. While it is allowable for a parent to hire their own attorney privately,

it is exceedingly rare that they are either able to or choose to do so due to the expense,

and typically, the parent's/caregiver's attorney is appointed by the court. It is also good to

note there that the Department of Social Services will always have legal representation in

these matters, and in some cases, the child will also have their own legal representation

appointed, but the child's representation is at the discretion of the court.

  Rate of recurrence of child protective services intervention (dependent variable) is

a discrete variable and is a measure of the number of times the family, identified by

unique case number, is found to be in need of CPS intervention services during the two-year time frame specified for this study.

Maltreatment type (moderator variable) is a categorical variable which, for this study, is based on the definitions used by the North Carolina DSS under the broad categories of either abuse or neglect. In this definition, abuse includes physical abuse, emotional abuse, sexual abuse, delinquent acts involving moral turpitude, and human trafficking, both for sexual purposes and labor purposes (NC-DHHS, 2008). Neglect would then include improper supervision, care, or discipline, injurious environment, abandonment, or improper medical care (NC-DHHS, 2008). The primary distinction between abuse and neglect in these definitions is that abuse involves intentional acts by the caregiver, and neglect is seen as unintentional. For this study, the overall categories of abuse and neglect are sufficient to determine the effects of these variables as moderators, as previous research studies have established the effects of these variables, as defined in relation to maltreatment recurrence. In some instances, there are findings of more than one type of maltreatment in a given instance of CPS intervention. In these cases, the data entry process for social workers requires the worker to rank the type of maltreatment justifying the intervention. The highest-ranked maltreatment type for each intervention instance was used for this study.

Caregiver substance use (moderator) is a discrete variable with a value of either yes or no, representing that either substance use by the caregiver was a factor in the CPS intervention, or it was not. While NCDHHS collects data on various types of substance use, the presence or absence of substance use has been established as a significant factor

in child maltreatment recurrence in other studies and was used similarly as a moderator in this study, requiring only the presence or absence of substance use be identified.

All data analyzed for this study were collected at the end of the evaluation/investigation period when the decision was made to either close the case or open it for further services and needed intervention. At this time, the CPS social worker completed NCDHHS form DSS-5104, where the information pertinent for this study was collected and subsequently entered into a state database.

Data analysis plan. The archival data on the variables described in the previous section were requested from the North Carolina Department of Health and Human Services to include the case number, date of case decision, a petition filed with the juvenile court, services provided, contributory factors, the type found, and maltreatment type found. The combination of case number and date of case decision information was sorted to separate different families and multiple incidents of CPS referral within families. This data is collected on each child in the home, so multiple entries of the same case number with the same date were viewed as one incident for the family unit. The petition filed data indicates whether court action was taken, and therefore, whether the parents had legal representation. The contributory factors data contains information on substance abuse as a contributory factor. The data collected in the areas of services provided, the type found, and maltreatment type found are then processed to confirm court action as well as identify the maltreatment type experienced in the individual case.

Once the data were sorted and organized, they were then imported into the IBM Statistical Package for Social Science (SPSS) version 24 for statistical analysis. The

dependent and independent variables were analyzed through a one-way analysis of variance (ANOVA) to check for any relationships between those variables. The moderating variables were subjected to multiple regression analyses to check for moderating effects of substance use and maltreatment type on the dependent variable. The data analysis was conducted to answer the following research questions:

Research Question1: Is there a difference between rates of recurrence in child maltreatment for families who have legal representation (family attorney) in court and those who do not?

$H_0$1: There is no difference in recurrence in child maltreatment between families who have legal representation and those who do not.

$H_1$1: There is a difference in recurrence in child maltreatment between families who have legal representation and those who do not.

Research Question 2: Does child maltreatment type moderate the relationship between legal representation and rate of recurrence in child maltreatment?

$H_0$2: Child maltreatment type does not moderate the relationship between legal representation and rate of recurrence.

$H_1$2: Child maltreatment does moderate the relationship between legal representation and rate of recurrence.

Research Question 3: Does substance use by the caregiver moderate the relationship between legal representation t and recurrence of child maltreatment?

$H_0$3: Substance use by the caregiver does not moderate the relationship between legal representation and recurrence of child maltreatment.

$H_1$3: Substance use by the caregiver does moderate the relationship between legal representation and recurrence of child maltreatment.

Threats to Validity

The most significant threats to validity in the archival data analyzed involve potential issues of data entry error at the time the information was collected and variances in the local county or legal jurisdictions. In response, cases were sampled from throughout the state of North Carolina increasing the likelihood that all 100 counties are represented in the data, though with larger population areas having a higher chance of representation than lower population areas due to the higher total number of cases from those counties due to their higher population numbers. This threat was mitigated through the training received in data collection by the county social workers being standardized throughout the state as well as the training sessions conducted by one central agency. The use of statewide data also helps prevent the threat to validity imposed by counties that include court intervention at either a lesser or higher rate than most counties in the state.

Ethical Procedures

Approval from the Walden University IRB (# 10-29-19-0543427) was obtained before collecting archival data from the North Carolina Division of Health and Human Services. Permission for the use of the data was obtained from the North Carolina Director of the DSS under North Carolina statute 10A NCAC § 70A.0102 through the mechanism of a Data Use Agreement. The families were identified by a case number assigned by the state with no personally identifiable information provided in the archival data used in this research. I am the only person who has access to the data collected for

this study. All data is electronically stored on an encrypted USB drive and backed up to a second, encrypted USB drive. Data will be destroyed after three years as specified by the NC-DHHS Data Use Agreement.

Summary

In this chapter, I thoroughly explained the research design, methodology, data, and analysis. Threats to validity and ethical procedures were also covered. I included specific, detailed information on how the data were defined and operationalized for this study as well as how and where the archival data were obtained and the safeguards to be utilized to protect families' identities. I provided information on how the data were analyzed to determine the relationship between the legal representation of families and recurrence in child maltreatment as well as the moderating effects of substance use by the caregiver and maltreatment type on that relationship. In Chapter 4, I describe the findings of that data analysis as related to the research questions and related hypotheses.

Chapter 4: Results

Introduction

The purpose of this quasi-experimental, contrasted groups design of archival data is to quantitatively evaluate the relationship between the legal representation of families by an attorney in child maltreatment intervention and the rate of child maltreatment recurrence. The factors of substance usage by the caregiver and child maltreatment type are also examined in relation to child maltreatment recurrence rates to evaluate any possible moderating effects that may be present.

In this chapter, I describe the process of data collection, report the results of the analysis of the data collected, and summarize the data analysis as related to the research questions and hypotheses posed in this study.

Data Collection

I received archival, secondary data from the NC-DSS, which is the agency statutorily responsible for collecting and maintaining data on child welfare interventions in the state of North Carolina. The process of obtaining the data used for this study took approximately 7 months, including the time spent in negotiation between requirements of the Walden University Institutional Review Board (IRB) and the requirements of the NC-DSS Data Use Agreement (DUA). The requested data was provided by NC-DSS within a month of final Walden University IRB approval (# 10-29-19-0543427). The data provided included all child protective services (CPS) interventions in the state of North Carolina from July 1, 2016, to June 30, 2018. The decision was made to use the fiscal year observed by the state of North Carolina rather than the calendar year due to an

informal practice in most county DSS offices to attempt to close out as many cases as

practicable by the end of June each year. The data included the county name, family case

number, date of investigation findings, whether or not a petition was filed in court for the

incident, whether substance use was a factor in the alleged maltreatment of the child, and

the type of maltreatment found as a result of the CPS Investigation.

Data from two of the 100 counties provided had to be excluded from the study

due to the data not having assigned case numbers because there was no way to

differentiate individual incidents for analysis. Of the 29,271 incidents provided in the

archival data, 386 did not have case numbers leaving a data set of 28,885. Of that

remaining data set, there were also data from 11 counties that had changed to a new data

collection system during the time period being studied in which data was collected in

such a way as to make the data from the new collection process in those counties

unusable. This affected 9,203 incidents leaving a usable data set of 19,682 incidents once

the unusable data was removed.

A G*Power analysis, as described in Chapter 4 of this study, indicated that a

sample size of 400 incidents would be required ($N = 400$). To achieve the initial sample

set, all incidents from July 1, 2016, to December 31, 2016, were sampled to provide the

initial group to compare with the remainder of the data set for incidents of recurrence.

This gave me a pool of 3,916 incidents for the initial sampling of 400. I conducted a

systematic random sampling of those incidents by choosing every ninth unique incident

from the pool of 3,916 incidents in 2016. I then compared this sample to the remainder of

the data set of incidents ranging from January 1, 2017, to June 30, 2016, in order to check

for instances of child maltreatment recurrence and coded each sample with either a zero, for no instances of recurrence or one, for one or more instances of recurrence. The data were further coded with a zero for those in which substance use by the caregiver was not a factor and one for those in which substance abuse was a factor in child maltreatment recurrence. I also coded for maltreatment type as abuse, neglect, or no finding of either abuse or neglect. The maltreatment type of no finding was an unexpected result as cases with no findings should be closed in order to be compliant with state policies. However, I found that it was the practice of some counties to open cases with no findings for various reasons ranging from new investigations conducted on currently active cases to the provision of preventative services, presumably with the family's voluntary consent.

I examined the sampled data set using IBM-SPSS, version 25.0. The presence or absence of incidents of recurrence was then measured in the data in relation to the factors of legal representation, substance use by the caregiver, and maltreatment type. Descriptive and regressive analyses were conducted using those factors in order to test the null and alternative hypotheses for each research question.

Results of Data Analysis

Descriptive Characteristics

The sample population for this study was composed of 400 incidents of child maltreatment intervention between July 1, 2016, and December 31, 2016. Of those, 17% ($n = 66$) experienced a recurrence within the two-year time frame being studied. Recurrence ranged between one and two incidents subsequent to the initial incident with 12% ($n = 48$) having a total of one recurrent event and 5% ($n = 18$) having two recurrent

events. 47.5% ($n = 191$) had legal representation, and 64.3% ($n = 257$) had substance use by the caregiver listed as a factor in the child maltreatment. 79% ($n = 316$) of the sample population was classified as neglect in regard to maltreatment type with 15% ($n = 60$) being classified as abuse, and 6% ($n = 24$) having no finding of either neglect or abuse.

Recurrence and Representation – Research Question 1

The first research question asked: Is there a difference between rates of recurrence in child maltreatment for families who have legal representation and those who do not? The alternative hypothesis related to the independent variable of legal representation and the dependent variable of recurrence and stated that there would be a difference in rates of recurrence between those who had legal representation and those who did not. To test this hypothesis, a one-way ANOVA was conducted on the sampled data set using IBM SPSS-25. The results of that analysis showed a significant difference between those families with legal representation and those without legal representation $F (1,398) = 5.797$, $p = 0.017$, $\eta_2 = .014$. Families with legal representation were significantly less likely to experience child maltreatment recurrence than those without legal representation. The significance score in this analysis ($p < .05$) then allows for rejection of the null hypothesis. The eta squared statistic in this analysis indicates a strong effect. An illustration of this effect may be seen in the plot of the mean of recurrence by representation shown in Figure 1.
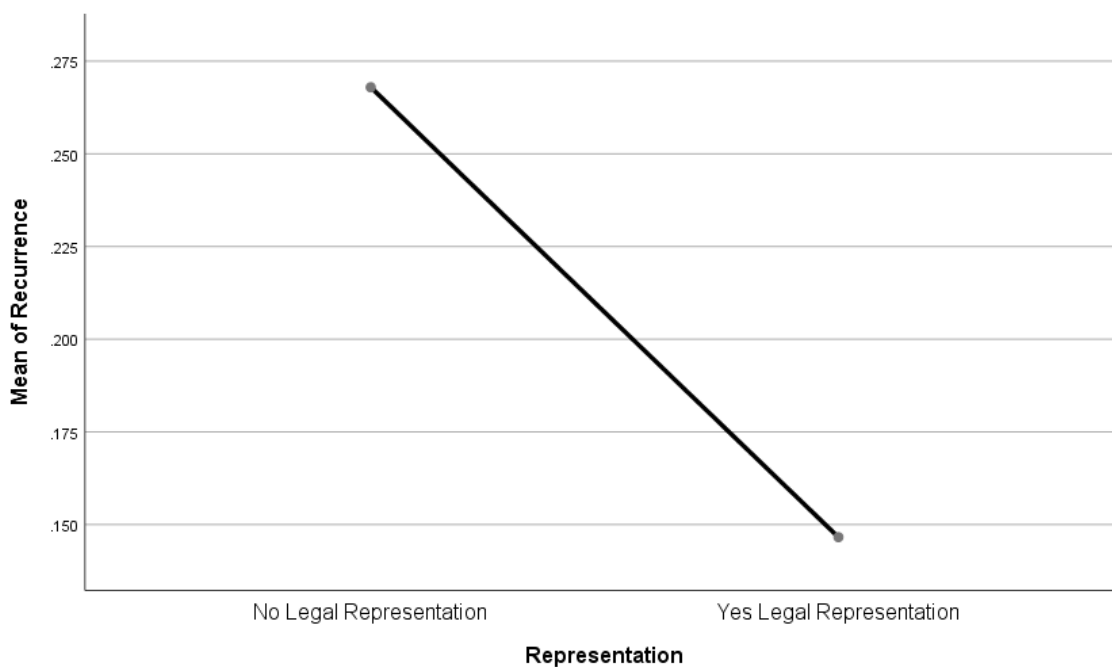
Figure 1. Plot of Mean of Recurrence by Representation.

Recurrence and Maltreatment Type

Preliminary to analyzing this data as related to Research Question 2, which addresses the factor of maltreatment type as a possible moderator in the relationship between recurrence and legal representation, here the direct relationship between recurrence and maltreatment is analyzed. The purpose of this analysis is to first establish the relationship to be moderated prior to including the moderator. In chapter 2, I discussed the strong relationship found between neglect as a type of maltreatment and recurrence, as found in the works of Eastman, Mitchell, and Putnam-Hornstein (2016) as well as that of Pecora et al. (2014). An analysis of the data for this study found a similar relationship between maltreatment type and recurrence with an overall finding of a

significant relationship, $F(2,397) = 3.050$, $p = .048$ (see Table 1). Cases classified as

neglect had a significantly higher incidence of recurrence than those classified as abuse,

as would be expected based on previous studies. An unexpected finding, however, was

related to those cases with no finding of either abuse or neglect that had an even more

dramatic increase in recurrence as compared to the neglect and abuse cases. Previous

research did not address cases with no finding of abuse or neglect. Interestingly, those

cases in which no maltreatment was found had the highest rate of recurrence with neglect

and abuse following in a predictive pattern, as discussed in Chapter 2. An illustration of

this can be seen in Figure 2.

Table 1

Recurrence and Maltreatment Type

	Sum of Squares	Df	Mean Square	F	Sig.
Between Groups	1.549	2	.775	3.050	.048
Within Groups	100.811	397	.254		
Total	102.360	399			
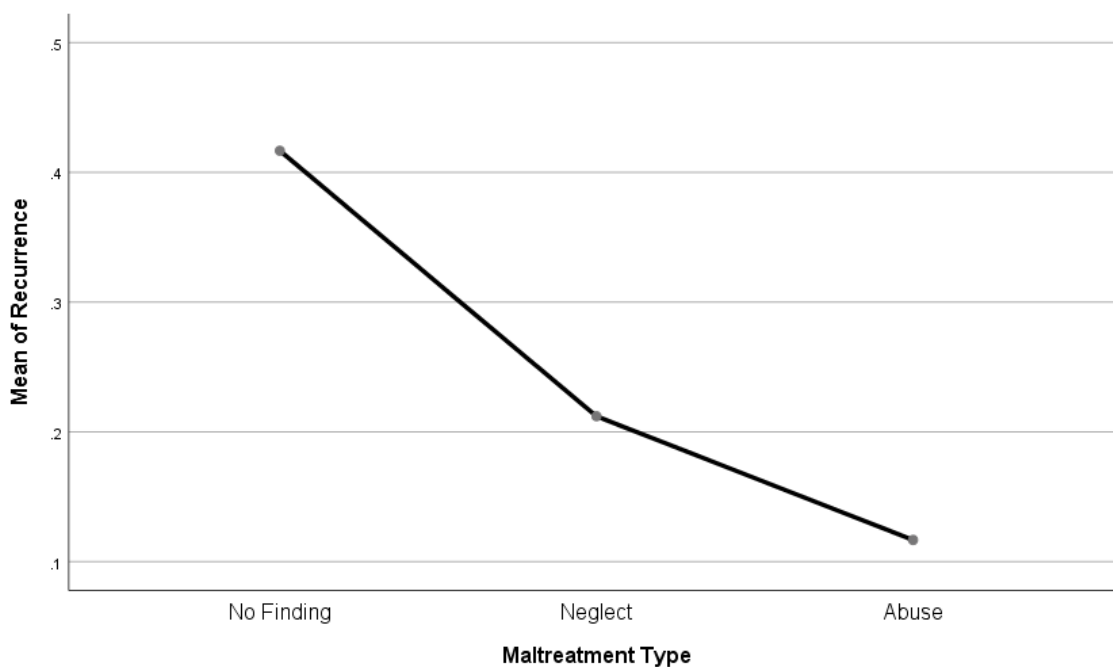
Figure 2. Plot of mean of Recurrence by Maltreatment Type.

Recurrence, Representation, and Maltreatment Type – Research Question 2

To directly address Research Question 2, which asked if child maltreatment type moderates the relationship between families who have legal representation and those that do not, the one-way ANOVA of the data indicated significant values in Levene's Test of Equality of Error Variances (see Table 3), which is interpreted as a violation of the assumption of homogeneity of variances.

Table 2

Levene's Test; Recurrence, Representation, and Maltreatment Type

		Levene Statistic	df1	df2	Sig.
Recurrence	Based on Mean	9.267	4	394	.000
	Based on Median	2.683	4	394	.031
	Based on Median and with adjusted df	2.683	4	354.898	.031
	Based on trimmed mean	7.325	4	394	.000

This finding indicates that the variances for representation, recurrence, and maltreatment type were not equal, $F (4,394) = 7.325$, $p = 0.000$. The inequality indicated can be observed in the descriptive statistics for this data (Table 4) as related to the previously unexpected variable of no findings in several cases rather than the expected finding of either neglect or abuse.

Table 3

Descriptive Statistics; Recurrence, Representation, and Maltreatment Type

Dependent Variable: Recurrence

Representation	Maltreatment Type	Mean	Std. Deviation	N
No Legal Representation	No Finding	.43	.662	23
	Neglect	.25	.542	157
	Abuse	.21	.559	29
	Total	.27	.559	209
Yes Legal Representation	No Finding	.00	.	1
	Neglect	.17	.467	159
	Abuse	.03	.180	31
	Total	.15	.435	191
Total	No Finding	.42	.654	24
	Neglect	.21	.506	316
	Abuse	.12	.415	60
	Total	.21	.506	400

The overall effect of maltreatment type as a moderator of the relationship between legal representation and recurrence was not shown to be significant in this analysis, F $(2,394) = 0.412$, $p = 0.663$. The null hypothesis is therefore confirmed for Research Question 2. Child maltreatment type is not seen in this data to moderate the relationship between legal representation and child maltreatment recurrence.

Recurrence and Substance Use

Research Question 3 describes the potential role of substance use as a moderator in the relationship between legal representation and recurrence in child maltreatment. As in the previous sections on maltreatment type, preliminary to addressing Research Question 3, I analyzed the data regarding any relationship between recurrence and substance use by the caregiver as is described in the review of literature. Strong correlations between substance use and child maltreatment recurrence, as found by Bae and Kindler (2017), Cheng and Lo (2015), Eastman et al. (2016), and Horikawa et al. (2016) are discussed in more detail in Chapter 2 of this study.

An analysis of the data collected for this study showed the relationship between substance use by the caregiver and recurrence of child maltreatment was not significant, F $(1,398) = 2.023$, $p = .156$, as the p-value is greater than .05. A complete representation of the analysis of variance can be seen in Table 2. This is particularly interesting as it is contrary to the findings reported in previous studies in which strong relationships between these factors are described.

Table 4

Recurrence and Substance Use

	Sum of Squares	Df	Mean Square	F	Sig.
Between Groups	.518	1	.518	2.023	.156
Within Groups	101.842	398	.256		
Total	102.360	399			

Recurrence, Representation, and Substance Use – Research Question 3

To address Research Question 3, which asked does substance use by the caregiver moderate the relationship between legal representation and recurrence in child maltreatment, the results of the ANOVA indicated significance in Levene's Test of Equality of Error Variances (see Table 5) similar to the findings for the relationship between recurrence, representation, and maltreatment type previously shown.

Table 5

Levene's Test; Recurrence, Representation, and Substance Use

Recurrence	Based on Mean	10.227	3	396	.000
	Based on Median	2.790	3	396	.040
	Based on Median and with adjusted df	2.790	3	357.927	.040
	Based on trimmed mean	8.532	3	396	.000

This finding indicates that the variances for representation, recurrence, and maltreatment type were not equal, $F(3,396) = 8.532$, $p = 0.000$. The distribution for these factors can also be seen in the descriptive statistics (Table 6) with the much larger

population of those for whom substance use was not a factor in maltreatment ($n = 301$) as

opposed to those cases that substance use was a factor ($n = 99$).

Table 6

Descriptive Statistics; Recurrence, Representation, and Substance Use

Representation	Substance Use	Mean	Std. Deviation	N
No Legal Representation	No Substance Use	.25	.534	163
	Yes Substance Use	.35	.640	46
	Total	.27	.559	209
Yes Legal Representation	No Substance Use	.12	.391	138
	Yes Substance Use	.21	.532	53
	Total	.15	.435	191
Total	No Substance Use	.19	.477	301
	Yes Substance Use	.27	.586	99
	Total	.21	.506	400

The overall effect of substance use as a moderator of the relationship between

legal representation and recurrence was not shown to be significant in this analysis, *F*

$(1,396) = 0.024$, $p = 0.877$. This finding confirms the null hypothesis for Research

Question 3 regarding this data, that substance use by the caregiver does not moderate the

relationship between legal representation and recurrence of child maltreatment.

Summary

The significance of the findings of the ANOVA, *F* $(1,398) = 5.797$, $p = 0.017$, η_2

$= .014$, indicate confirmation of the alternative hypothesis for Research Question 1; there

is a difference in recurrence in child maltreatment between families who have legal

representation and those who do not have legal representation. The direction of that

relationship paired with the eta squared value indicates that those with legal

representation have significantly lower rates of recurrence than those without legal representation.

The results of Levene's test for the analysis of child maltreatment type as a moderator between legal representation and recurrence in child maltreatment failed to confirm equal variances indicating a measure of bias in the results. Those results did not indicate a significant relationship between recurrence and representation with the moderator of child maltreatment type, F (2,394) = 0.412, p = 0.663. This would confirm the null hypothesis for Research Question 2, child maltreatment type does not moderate the relationship between legal representation and recurrence.

As with Research Question 2, the results of Levene's test for the analysis of substance use by the caregiver as a moderator between legal representation and recurrence in child maltreatment (Research Question 3) failed to confirm equal variances indicating a measure of bias in the results. Those results did not indicate a significant relationship between recurrence and representation with the moderator of substance use by the caregiver, F (3,396) = 8.532, p = 0.000. This would confirm the null hypothesis for Research Question 3; substance use by the caregiver does not moderate the relationship between legal representation and recurrence.

In the next chapter, I provide an interpretation of this study's findings, limitations, and implications for social change as well as recommendations for other research in child maltreatment recurrence as related to the legal representation of families.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

The purpose of this study was to quantitatively evaluate any potential relationship between a family's representation by a county attorney and the rate of child maltreatment recurrence. This was done to evaluate the applicability of intergroup contact theory (Pettigrew & Tropp, 2008) as a method of child maltreatment intervention as opposed to the traditional approach based on ecological systems theory (Bronfenbrenner, 1977). The possible interactive relationships of maltreatment type and substance use by the caregiver with attorney representation were also examined as moderators due to the large amount of research that has historically been conducted around those factors. This study was conducted to possibly provide information to better inform legislators and policymakers on strategies to better serve the families they represent.

The statistical analysis of the data in this study showed a significant relationship between legal representation and recurrence, with those families with no legal representation experiencing recurrence at nearly twice the rate of those with legal representation. Maltreatment type, as a moderator of the relationship between legal representation and recurrence, showed no significant effect despite the significant relationship found between maltreatment type and recurrence directly. Surprisingly though, substance use by the caregiver did not yield a significant effect either directly when measured analyzed with recurrence rates or as a moderator for the factors of legal representation and recurrence. This finding is contrary to what previous research would lead us to expect and as such, would justify more attention in the future.

Interpretation of the Findings

These findings serve to extend our knowledge in the area of effective interventions in child maltreatment. The existing literature shows that our approach to this problem has typically revolved around more etiological concerns by examining the characteristics of the families served, such as substance use by the caregiver and maltreatment type. This has resulted in a system of interventions designed around the demographics and characteristics of the family, as suggested by Bronfenbrenner's ecological systems theory. The research provided in this study instead takes a more prescriptive approach to intervention through the implementation of Allport's intergroup contact theory, looking more towards implementing interventions based upon effecting negotiated change in the caregiver's behaviors rather than focusing on the demographic risk factors common to child maltreatment recurrence.

The findings of this study indicate the possibility that more consistent use of legal representation for caregivers in child maltreatment cases may significantly reduce incidents of recurrence and thereby decrease the overall burden of child maltreatment intervention to families, child protective services systems, and taxpayers.

While the analysis of the interaction effects of child maltreatment type in this relationship showed no significance as a moderator between legal representation of the parents and recurrence, the unexpected discovery of the factor in maltreatment type designated as no findings is particularly impressive. Generally, a matter opened with no finding is discounted a matter so minor that services are only offered on a voluntary basis with families if desired (NC-DHHS, 2008). The data shows that this may be an area in

need of more attention as those cases are significantly more likely to need additional interventions later as opposed to those with findings of neglect or abuse. This finding is related to the analysis of maltreatment type and recurrence preliminary to the analysis of maltreatment type as a moderating variable. Interestingly, this was also a finding in the Canadian study conducted by Cheung, Taillieu, Tonmyr, Sareen, and Afifi (2019) that was illustrated in their work as particularly significant as well.

The analysis of substance use by the caregiver was less conclusive due to overall inequality in the distribution of data with roughly only one-fourth of the data set having substance use by the caregiver listed as a factor. Despite these problems with statistical analysis, this is still a useful finding as the review of the literature (Chapter 2) indicates a great deal of effort being currently expended in family drug courts and other methods of substance use intervention. This data presents the question of whether those efforts are supported by a data-driven need or a more ambiguous perception.

Limitations of the Study

One limitation of this study as related to the legal representation of families is that the decision for court intervention and subsequent legal representation is made solely by the intervening agency with little input from the family being served. As such, this factor may be subject to other variables that those examined in this study or previous, similar studies. Another limitation related to legal representation of parents involves the manner in which legal representation is provided. There was no way with the data provided to differentiate whether the legal representation given the family was privately hired by the family or appointed by the courts. The socioeconomic status of the parents would be the

deciding factor in whether or not such representation was privately hired, or court appointed, and a better understanding of the interrelationship between those factors could be quite illuminating.

Another possible limitation relates to my own experiences as a child welfare social worker in Georgia, Florida, and North Carolina for twenty-seven years. While I attempted to maintain awareness of any inherent biases I have due to this experience, it is inevitable that my own perceptions and understanding of child maltreatment intervention has been shaped by that work. It would be ideal to consider that those experiences gave me particular insights in this area, but those insights can be as limiting as they are informative.

Finally, there is the limitation presented by inconsistencies in policy interpretation, social work practice, and data entry among the 100 counties in North Carolina. This is particularly pertinent as the Department of Social Service agencies in North Carolina are regulated and administered on a local level rather than on a state level. While this gives county offices the flexibility to serve the unique needs of the population that they are assigned more responsively, it also leads to some inconsistencies in how services are interpreted and delivered throughout the state.

<div align="center">**Recommendations**</div>

The findings in this study indicate possible advantages for further study in the area of interventions with a theoretical basis grounded in involuntary services rather than the current model grounded in voluntary services. Also, more research on the power dynamic between child protective social service workers and their clients is also indicated

by the findings of lower recurrence with those families that have legal representation, which represents a significant change in the typical power dynamic between the families and social workers.

The confirmation of the alternative hypothesis for the question of legal representation being correlated recurrence rates suggests that an experimental study of this data may also be beneficial. This could be implemented through the use of pilot studies in select areas to better understand this relationship in a more controlled way as well as gaining a more definitive measure of potential benefits or hidden costs.

Implications

Contribution to reducing recurrence in child maltreatment interventions would help in reducing the stress and trauma experienced by families due to repeated interventions over time. Such reductions in recurrence also have the potential to increase job satisfaction for social workers and thereby reduce worker turnover, providing a benefit for both the workers and agencies for which they work. Finally, the reduction of recurrence in child maltreatment can also provide for reductions in the cost of child maltreatment intervention, which is funded by taxpayers throughout the country.

This study also implies that a shift in theoretical basis for intervention might be warranted, opening up the field to greater diversity in approaches than is currently being utilized in direct practice.

Conclusion

As the numbers of child maltreatment intervention cases continue to increase nationwide is coupled with the economic reality of agencies having to do more with less,

more effective strategies for intervention are not only wise but necessary. Child maltreatment and recurrence of child maltreatment are problems with ripple effects that extend well beyond the childhood of those maltreated and the families directly involved. As such, it is the duty of researchers in the social sciences to turn our attention and efforts to finding strategies to address these problems more effectively. We can reasonably presume that more practical efforts in this regard would result in positive ripple effects in society much as the problem itself result in the inverse.

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