

A state-of-knowledge review:

What is the effectiveness of child welfare interventions?

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INTRODUCTION

A serious social problem today is the breadth and severity of both the short- and long-term consequences of child maltreatment. However, “all children are entitled to optimal development and protection against threats to their development as early on as possible in their life or, if need be, as early on as possible in the wake of a threat” (GRAVE-Ardec, 2002). Furthermore, interventions and policies in child welfare are increasingly expected to be evidence-based (Macdonald, 2001). We have a responsibility to examine our interventions with a critical eye from the social, financial, clinical and ethical perspectives. Evaluation plays a crucial role in such examination.

Objective

Describe the state-of-knowledge about the effectiveness of interventions aimed at protecting or improving the welfare of child victims of maltreatment. This research theme was recommended by a



Canada-wide panel of experts and by the provincial and territorial Directors of Child Welfare.

METHOD

Material analyzed

- 50 reviews of evaluation studies
- seven individual evaluation studies.

We are chiefly interested in reviews that critically analyze the effectiveness of interventions in child welfare; only the individual evaluation studies that were published subsequent to the most recent review are included.

Selection criteria

1. Publication date:
 - between 1984 and 2002.
2. Focus on abuse or neglect
 - **Inclusion:** at least one experience of sexual abuse, physical abuse, emotional maltreatment, exposure to conjugal violence and/or neglect reported, suspected or confirmed.
 - **Exclusion:** interventions intended for families “at risk” for child maltreatment, as well as child maltreatment prevention projects or projects promoting child well-being in general.
3. Nature of the interventions
 - **Inclusion:** activities aimed at protecting or improving the well-being of children who remain in their natural family settings or aimed at reuniting children placed in short-term care with their biological parents.

- **Exclusion:** Interventions with foster families, children placed in long-term care or adopted.

4. Participants

- **Inclusion:** interventions directly targeted towards children who experience abuse and neglect between the ages of birth and 17 years, for their parents (perpetrator or not) or for both.
- **Exclusion:** work that focussed on the repercussions of social policies or on the effectiveness of the child protection system (number of reports retained, of adoptions, of placements, changes in the evaluation procedures of reports, etc.).

5. Nature of the evaluation of effectiveness

- **Inclusion:** systematic and rigorous approach aimed at identifying effects attributable to the intervention implemented. The evaluation design may be quantitative, qualitative or a combination of both.
- **Exclusion:** Implementation evaluations and “impressionistic” data based on clinical opinions.

HIGHLIGHTS

1. Effectiveness remains to be demonstrated

Results

Reviews of studies of the effectiveness of child maltreatment interventions are rather rare.



Most evaluated	Least evaluated
<ul style="list-style-type: none"> Sexual abuse, especially interventions targeting child victims of sexual abuse Interventions targeting parents who physically abused their children 	<ul style="list-style-type: none"> Exposure to domestic violence interventions Psychological maltreatment interventions Neglect interventions alone, as most studies merged neglect with other types of maltreatment

The few results available generally suggest modest positive changes. However, even in the areas that have been most often and favorably evaluated, such as cognitive-behavioral intervention with parents, there is not enough information to allow definitive conclusions to be drawn about the effectiveness or ineffectiveness of child maltreatment programs.

Implications

Perform and disseminate effectiveness evaluations of child maltreatment programs.

We have to find out what works and what does not, with whom, and in what situations. In this respect, it is just as important to study and disseminate a lack of results or a negative impact as positive results.

Perform and disseminate other types of evaluations of child maltreatment programs (needs, program theory and implementation).

Implementation evaluations contribute to a better knowledge of the program activities that led to the achievement or lack of anticipated results, and thus help to improve programs. Other evaluations ensure that programs consistently meet



the needs of children and their families (needs assessment) in a theoretically and empirically credible manner (evaluation of program theory).

2. Evaluations need to be improved

Results

Research designs have limitations. Even in the case of the most evaluated interventions, such as those concerning sexually abused children and parental education programs, the vast majority of evaluative studies are based on pre-experimental designs of a pre/post-intervention type without comparison groups, which makes it impossible to be sure that the intervention is the cause of the observed changes. The small sample size does not allow for generalization and reduces the appropriateness of statistical analysis as a method of determining effectiveness. There is a notable absence of qualitative studies. There is also a dearth of research comparing the relative effectiveness of different types of intervention.

Finally, the current tendency is to combine, in the same sample and same analyses, participants coping with different types of maltreatment and those considered to be at risk, or participants with a variety of characteristics (for example, poverty, substance abuse, protection and resilience factors, chronic maltreatment). Analyses grouping together such widely diverse participants obscure possible differential effects related to the participant's individual situation.

Implications

Improve the evaluation methodology.

The credibility of evaluation results depends chiefly on the way the researchers deal with methodological challenges. Researchers appreciate the methodological difficulties but they are not easy to overcome (Belsky, 1993). The quality and relevance of the protocol and indicators chosen are crucial. Particular attention should be paid to putting together more homogenous samples or comparative analyses, depending on the types of participants.



3. Interventions require systematization

Results

The information about program outcomes that impact evaluation provides is incomplete and ambiguous without knowledge of the program activities that produced those outcomes. When no impact is found, this result occurred because of

- **implementation failure:** the intended services were not provided, hence the expected benefits could not have occurred; or
- **theory failure:** the program was implemented as intended but failed to produce the expected effects (Rossi, Freeman, and Lipsey, 1999).

Examples

1. The mitigated impact of **social support services** could be explained by the fact that, despite both its empirical and intuitive basis, translating research on social isolation into support interventions is more complex than it might appear (Stern & Smith, 1995, 2002).

- Not all social networks are synonymous with support.
- Contacts with helping agencies can be aversive.
- Clinicians should expect individual

and cultural variations in what caregivers consider support.

2. A flaw in the design of **family preservation programs** could partly explain their lack of effectiveness in preventing placement in foster care. The practical difficulty of identifying children at “imminent risk” of placement meant that programs could not consistently target families with children truly at risk of placement (Rossi, Freeman, & Lipsey, 1999).

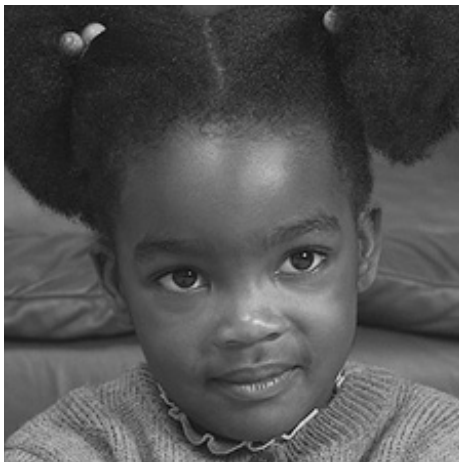
Implications

Systematize development of child maltreatment programs.

Programs and services are more effective if they are based on the principles of

1. responsiveness	2. credibility
<ul style="list-style-type: none"> • Responsiveness means that a program meets a real need and that solutions take into account existing resources (Paquette & Chagnon, 2001). • There is frequently a lack of fit between the needs of maltreated children and the services offered to them, especially in the areas of mental health and education (Kinard, 2002). 	<ul style="list-style-type: none"> • A program’s credibility is its plausibility, both in terms of knowledge and from the point of view of those concerned. It refers to the logic quality of the underlying model, especially with regard to the empirical and clinical knowledge available (Paquette and Chagnon, 2001).

By supplying information that can be used to determine whether programs and services are both responsive and credible, an assessment of needs and an evaluation of the underlying theory can become valuable tools in a program-development strategy. When programs are developed rigorously and systematically, informed



choices can be based on the empirical and clinical knowledge available, rather than driven by urgency or strict management requirements.

Use evaluation results in making decisions about programs

All types of evaluations (needs, program theory, implementation and process, impact, effectiveness) can support caseworkers, managers, and decision makers in deciding the future of a program. Evaluations may be especially useful in helping determine whether a program will be maintained, expanded, modified or abandoned, whether a pilot project should be extended to other sites, or which of several options should be chosen to respond to a problem (Weiss, 1998). Development of an “evaluation culture” in clinical settings is key to determining the effectiveness of child maltreatment programs and services.

4. Better collaboration among players required

Results

Effectiveness indicators essentially concern what Belsky (1993) terms the “developmental context” of parent and child characteristics and processes and parenting and the “immediate interactional context” of parent-child interactional processes.

Child-level

Effectiveness indicators correspond largely to child-level vulnerabilities and modifiable protective/promoting factors. They address most of the child’s developmental needs, including education, emotional development, family relationships, behavioural development and social relationships.

Parental-level

Interventions are limited to psychosocial areas directly related to parenting capacity, to the detriment of other areas of adult life.

Addressed	Not addressed
<ul style="list-style-type: none"> • Affective bonds • Communication • Conflict resolution • Basic care • Ensuring safety • Guidance/boundaries • Stability 	<ul style="list-style-type: none"> • Personal space • Opportunities for personal growth • Job satisfaction • Support from spouse/extended family • Recreation



Family-Level

At the family-level, indicators are largely related to the family functioning. Questions of spousal violence, parental history of maltreatment and limited parental education are not addressed in the evaluation and likely were not addressed in the interventions either.

Addressed	Not addressed
<ul style="list-style-type: none"> • Family cohesion • Family climate • Communication • Organization of family life 	<ul style="list-style-type: none"> • Spousal violence • Parental history of maltreatment • Limited parental education

Community-level

Finally, aside from social support and use of community resources, the interventions reviewed do not evaluate any protection or vulnerability factors at the community or societal level.

Addressed	Not addressed
<ul style="list-style-type: none"> • Social support • Use of community resources 	<ul style="list-style-type: none"> • <i>Repercussions</i> of community and social vulnerabilities associated with child maltreatment, such as <ul style="list-style-type: none"> • Poverty • Housing • Community violence • Unemployment

Child maltreatment has many causes. The needs of children and families grappling with the problem are many and do not all fall within the purview of the child protection system, whose terms of reference and responsibilities are defined by law. How can we be sure that other aspects of at-risk functioning and other needs of children and their families are met? How can we provide continuity, once a protection case file is closed or unsubstantiated?



Implications

Increase cooperation in order to better meet the needs of children and families coping with maltreatment.

Effective partnerships between health care, social services and related fields, especially education, employability or low-income housing, would allow responsibility for the safety and welfare of children and their families to be shared (White et al., 2002). The consistency, continuity and effectiveness of responses to the pressing needs of families trying to deal with child maltreatment depends on it.

5. Encourage collaboration between researchers, practitioners and policy makers

As noted by Kinard (2002, p. 642), a number of studies have concluded that “better communication between researchers and practitioners is crucial to make empirical findings useful for practice.” Researchers may be the specialists in the assessment process, but practitioners could help with regard to the content assessed (Paquette & Chagnon, 2001). Those responsible for evaluating social programs must deal with the tension between the demands of scientific rigour on the one hand and usefulness and applicability to practice on the other (Rossi, Freeman, & Lipsey, 1999). The involvement of all in joint

processes will guarantee better programs, for example, by increasing the usefulness and credibility of evaluation processes or fostering the development of more clinically and empirically consistent programs.

CONCLUSION

This information sheet presents highlights of a critical analysis of reviews of studies published since 1984 concerning effectiveness of selected child maltreatment interventions. The quality and quantity of available data vary according to the type of abuse, the targeted of the intervention and the intervention strategy retained. Methodological challenges limit the scope of conclusions that can be drawn. In general, we can say that child protection interventions are promising but that results are too fragmented to enable us to formulate any definitive judgment. A number of avenues for practitioners, researchers and decision-makers were recommended.

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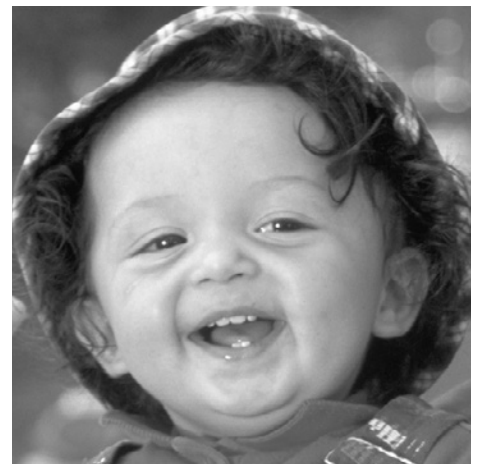
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