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## Family Preservation Research: Where We've Been, Where We Should Be Going

## Jane Yoo and William Meezan

Although the literature has provided many critiques of research done on family preservation programs, these critiques have usually been limited to the studies' assumptions, approach, or methodology. Because of the nature of these critiques, suggestions for future research in this field of practice have been scattered throughout the literature and have not benefitted from a wider historical perspective.

This paper examines the historical evolution of family preservation studies in child welfare and suggests future directions for research in the field. Among the suggestions the authors posit are (1) research questions should be framed by what we know about improvements in the lives of families and children served by family preservation programs; (2) future explorations should include areas that have received relatively little attention in current research, including the impact of organizational conditions on service fidelity and worker performance; (3) newer treatment models, particularly those that provide both intensive services during a crisis period and less intensive services for maintenance, should be tested; (4) data collection points in longitudinal studies should be guided by theory, and measures should change over time to reflect the theoretically expected changes in families; (5) complex measures of placement prevention and other measures that capture changes in family functioning, child well-being, and child safety, should be utilized to obtain a full picture of program effects; and (6) multiple informants should be used to provide data about program effectiveness. In addition, the authors will argue that the field should carefully consider the amount of change that should be expected from the service models delivered.

## Introduction

Efforts to address the objectives of the Adoption Assistance and Child Welfare Act of 1980 (PL 96-272) and the Family Preservation and Support Services program of 1993 (PL 103-66) have been apparent in the undertakings of practitioners to preserve families and in the efforts of researchers to study the effectiveness of family preservation programs. Research efforts in the child welfare field have demonstrated both contradictory and equivocal findings (Blythe, Salley, & Jayaratne, 1994; Fraser, Nelson, & Rivard, 1997). Because of

Family Preservation Journal (Volume 5, Issue 2, 2001) Published by DigitalCommons@TherFexas Medical Center, 2000 Mexico State University these results, and newer policy mandates that focus attention toward child safety and adoption (Adoption and Safe Families Act of 1997, PL 105-898), research into family preservation programs has slowed considerably. Yet, since family preservation continues to be a goal of the child welfare system as evidenced by the Promoting Safe and Stable Families Program (also mandated under PL 105-89), research efforts to improve our understanding of these programs and their effectiveness continue to be important.

While others have offered directions for future research, these suggestions have seldom been grounded in a perspective that considers the broader historical development of the field. This paper attempts to contribute to shaping the research agenda of the field by suggesting future research directions from a perspective that extends beyond the analysis of the limitations of existing studies. It examines the historical evolution of family preservation studies in the child welfare field, focusing on the research questions that have been addressed, the treatment models that have been studied, the methodologies that have been employed, and the findings that have emerged from past efforts. Its purpose is to suggest what might be explored in the future to further work in this critical area of child welfare practice.

## **Research Questions**

## Where We've Been

Previous research has explored two important and related questions. On the descriptive level, studies have explored the conditions that prevent or lead to permanency placement. in particular, returning home and adoption (e.g., Barth, 1997; Barth & Berry 1987; Barth. Courtney, Berrick, & Albert 1994; Courtney, 1994; Davis, Landsverk, Newton & Granger, 1996; Emlen, Lahti, Downs, McKay, & Downs, 1977; Fanshel & Shinn, 1978; Festinger, 1996; Jones, Neuman, & Shyne, 1976; Landsverk, Davis, Granger, Newton & Johnson. 1996; Maas & Engler, 1959; Meezan & Shireman, 1985; Rzpnicki, 1987; Shyne & Schroeder, 1978). On the experimental level, studies have tested the effectiveness of interventions that have been designed to keep children at home (AuClaire & Schwartz, 1986; Feldman, 1990; Fraser, Pecora, & Haapala, 1991; Jones et al., 1976; McCroskey & Meezan, 1997; Stein et al., 1978; Schuerman, Rzepnicki, & Littell, 1994; Yuan, McDonald, Wheeler, Struckman-Johnson, & Rivest, 1990); to return children home in a more timely fashion (Jones, Neuman & Shyne, 1976; Stein, Gambrill & Wiltse, 1978; Maluccio, Fein, & Davis, 1994; Nugent, Carpenter, & Parks, 1993; Walton et al., 1993); and to enhance decision making in child protective services (Stein & Rzepnicki, 1983; Walton, 1997). Furthermore, research themes that were recognized in the 1970s have influenced recent studies, including the use of child and parent characteristics and service variables as mediators of outcomes (AuClaire & Schwartz, 1986; Feldman, 1990; Fraser et al., 1991; Leeds, 1984; Landsman,

Family Preservation Journal (Volume 5, Issue 2, 2001) http://digitalcommons.library.tmc.edu/jfs/Y9J5/issa/5vation Institute, New Mexico State University 1985; Lewis, Walton, & Fraser, 1995; Meezan & McCroskey, 1996; McCroskey & Meezan, 1997). And outcome measures beyond placement status, such as change in child and family functioning that were seen as adjunctive in early studies (e.g., Jones, et al., 1976; Feldman, 1990) have resurfaced as critical in recent years (McCroskey & Meezan, 1997; Wells & Whittington, 1993).

## Where We Should Be Going

Given recent demands for accountability, it is not surprising that many contemporary studies have focused on testing the effectiveness of family preservation services in their various forms. However, the wealth of knowledge gained from descriptive studies should inform the evaluation questions asked. While the question of whether or not an intervention is effective might be seen as the overarching research question, factors associated with various types of change (both status and functional) should be explored in future studies. Thus, evaluation questions can be framed by the factors that we know influence entry into and exit from the foster care system.

Framing questions using these descriptive variables as mediators and moderators allow us to determine more than whether a program "works;" it allows us to understand for whom the program works under what conditions. Among the factors that might be controlled to better understand this efficacy of a program include child characteristics (e.g., demographics, psychosocial characteristics, clinical status, trauma history, placement history), family characteristics (e.g., demographics, functioning, mental health status, cooccurring problems); family interactions during visits (e.g., affection displayed, appropriateness), and foster family characteristics (e.g., demographics, family size, family functioning, motivation, role perception, role satisfaction, presence of other children) if the program is attempting to reunify families (James & Meezan, under review).

Some studies have understood the importance of such factors in better explaining program outcomes (e.g., McCroskey & Meezan, 1997). Others have explored limited moderators of service outcomes. For example, studies have examined the differences in service outcomes between neglect and physical abuse cases (e.g., Berry, 1993; Bath & Haapala, 1993). Yet more research of this type, using a greater number of difficult-to-capture variables, is needed to further our understanding of program outcomes. Particularly important are the impacts of the co-occurance of child maltreatment with substance abuse, domestic violence, poverty, and mental illness on program outcomes.

In addition to looking at these individual and interpersonal mediating and moderating variables, program outcomes should be explored in relation to the ways in which the service is actually provided. One might explore (1) the impact of the service system (e.g., county departments) on direct service providers and client outcomes; (2) the impact of organizational factors (culture and climate of an agency) on service fidelity, worker

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performance, and client outcomes; and (3) and the interpersonal relationship between lineworker and service recipient in influencing client outcomes (Drisko, 1998; Jones, et al., 1976; McCroskey & Meezan, 1997).

In looking at the impact of programs on different clients under different circumstances, it is crucial to present a theoretical rationale for examining these potential relationships. At minimum, it is imperative that we discuss the underlying assumptions about the relationships to be tested. Findings from "fishing expeditions" rather than justifiable analyses can lead to wild, uncalled for, and sometimes biased and prejudicial interpretations. For instance, the common practice of post-hoc analyses that relate client race to client outcomes should be theoretical justified before being pursued.

A rationale should also be provided for the common practice of comparing the "experimental" family preservation service to "regular" services. Such comparisons may be unjustified unless the researcher can answer questions, such as, What are the fundamental differences between the interventions? In what ways are the theoretical bases for the two services different? How do the services differ when they are actually provided in the field? Without such explanations, one does not know whether one is comparing two truly different services, the same service provided with different intensities, or something else.

The comparison between experimental services and any other condition also necessitates the assessment of treatment fidelity, an issue that has been acknowledged more often after the completion of the study (e.g., McCroskey & Meezan, 1997; Schuerman, et al., 1994) than during the design of the study (e.g., Blythe & Jayaratne, 1999). As an important counterpart to outcome evaluations, process evaluations should be integrated into the overall research plan (Scheirer, 1994), especially in studies that have multiple sites or newly added programs (Rossi, 1992; Bath & Haapala, 1994).

Finally, effectiveness studies should include measures of efficiency through some form of benefit-cost analysis. Ideally, they should define "benefit" and "cost" broadly, by considering micro (e.g., client self-esteem), meso (e.g., housing stability for client families), and macro (e.g., community safety) measures that are identified by multiple stakeholders, including clients, agency line workers, administrators, and policy makers. Understandably, efficiency studies are rare in family preservation research, in part due to the complexities involved in the implementation of such studies (Pecora, Fraser, Nelson, McCroskey, & Meezan, 1995). Regardless, it is an important research question—one that has the potential to contribute considerably to our overall understanding as to whether we should invest in these services.

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## **Treatment Models**

## Where We've Been

The New York State Demonstration Project (Jones et al., 1976) and the Alameda Project (Stein et al., 1978) brought shape to "intensive services" (see Pecora, et al., 1995). Although these projects did not define intensive services within a specific service model, they did identify key components that foreshadowed more recent family preservation service models. For example, children and families were served directly with "hard" and "soft" services, and "intensive" caseworkers handled fewer cases than "regular" caseworkers.

By the 1980s, intensive services transitioned into a specific practice model by adopting Homebuilders (Kinney, Madsen, Fleming, & Haapala, 1977; Whittaker, Kinney, Tracy, & Booth, 1991). The widespread acceptance of this practice model is evident in studies by Leeds (1984), Landsman (1985), AuClaire and Schwartz (1986), Yuan, et al. (1990), Feldman (1990), Fraser, et al. (1991), and Schuerman, et al. (1994). However, although Homebuilders has been the most studied model of family preservation services, its reliance on crisis theory has been controversial and questioned (Grigsby, 1993), and studies of its efficacy have had very mixed and disappointing results (Schuerman, et al., 1994; Yuan, et al., 1990. It was not until McCroskey and Meezan's (1997) study that the trend of evaluating very short-term, intensive services was interrupted. Their intervention model involved longer-term services (three months versus the typical four weeks offered through Homebuilders) and less intense contact—a model more in line with the family-based service model than with intensive family preservation services (Pecora, Whittaker & Maluccio, 1992).

## Where We Should Be Going

Given the controversies surrounding Homebuilders (e.g., Adams, 1994), and the results of the outcome studies based on it, it is easy to suggest that the past be buried and that the model be abandoned. The better suggestion, however, is to determine the service components of the model that might contribute to successful outcomes, and compare them to other practice models that utilize these service components but differ in other ways from the original Homebuilders approach. In other words, if the various interventions tested in family preservation services can be "unbundled," it would be possible to reconfigure them by taking potentially important components from various models and then test for service effectiveness. For example, it may be that combinations of "hard" and "soft" services and intensive contacts are important to program success, but that families need services that are more long-term and that taper off over time. Many of the problems presented by child welfare clients are chronic (crisis theory would probably not be appropriate to guide an

Family Preservation Journal (Volume 5, Issue 2, 2001) Published by DigitalCommons@IPPfFexas Miedical Center, 2000 Mexico State University intervention in such situations) and require longer-term treatments and multiple services (e.g., housing assistance, drug abuse treatment, etc.). Given this situation, we should develop and study treatment models that reflect the nature of the challenges experienced by the target population.

The field of child welfare can learn important lessons from other fields dealing with equally difficult yet different populations, and models created in other systems may be applicable to the child welfare population. For example, lessons learned about service imperatives from the field of juvenile justice (e.g., Henggeler, Melton, & Smith, 1992) might have significant implications for the design of services in the child welfare arena. We should examine the similarities and differences in the theory and treatment models from these other fields of practice, modify these models to the needs of the child welfare population, and test them to see if they are effective family preservation interventions.

## **Study Methods**

#### Where We've Been

## Design

Out of 13 "family preservation" studies reviewed for this paper,<sup>1</sup> nine used what would be considered rigorous designs. Among these nine studies, two used quasi-experimental designs (AuClaire & Schwartz, 1986; Stein, et al., 1978), one used a case overflow design (Fraser, et al., 1991), and the remaining six (Feldman, 1990; Jones, et al., 1976; Jones, 1985; McCroskey & Meezan, 1997; Schuerman, et al., 1994; and Yuan, et al., 1990) used treatment partitioning designs. Given the population of concern, it is not surprising that none of the studies had an untreated control group.

The long-term effects of the experimental services were tested in several of the studies reviewed (Fraser, et al., 1991; Jones, 1985; Landsman 1985; Leeds, 1984; McCroskey & Meezan, 1997; Schuerman, et al., 1994). With the exception of Jones' (1985) study, which assessed outcomes five years after the beginning of the project, the longitudinal component of these studies followed subjects from between three to 12 months after the completion of treatment.

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<sup>&</sup>lt;sup>1</sup> Maas & Engler (1959); Jones, et al. (1976); Emlen, et al. (1977); Stein, et al. (1978); Leeds (1984); Landsman (1985); Jones (1985); AuClaire & Schwartz (1986); Yuan, et al. (1990); Feldman (1990); Fraser, et al. (1991); Schuerman, et al. (1994); and McCroskey & Meezan (1997).

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## Sampling

Not surprisingly, non-probability samples have been the norm in studies of the effectiveness of family preservation services. Fortunately, multiple studies conducted across the nation, and studies that have used multiple sites (Fraser, et al., 1991; Jones, et al., 1976: Scheurman, et al., 1994), have allowed us to get a picture of the types and characteristics of services that have been fit under this rubric, the typical populations served, and the problems these populations present. Nonetheless, there has been minimal attempt to replicate studies in a single site in order to enhance generalizability. Where there have been efforts to replicate through studying multiple agency sites within the same study, differences between sites (including the degree to which agencies adheres to the philosophy of family preservation, variation in service models, eligibility criteria, populations served, etc.) have impeded our ability to generalize findings across programs and service recipients with any confidence (Schuerman, et al., 1994; Yuan, et al., 1990).

The targeting of services to their intended population has been another major challenge in family preservation research (Tracy, 1991), and this issue has stirred much discussion about our ability to interpret study findings (Blythe, Salley, & Jayaratne, 1994; Rossi, 1992). The importance of this issue lies in the fact that there must be congruence between the objectives of the intervention and the population at which it is targeted. For example, in AuClaire & Schwartz's (1986), Feldman's (1990) and Schuerman, et al.'s (1994) studies, it was made explicit that the primary objective of the intervention was to prevent out-ofhome placement; without intervention, placement would occur. In McCroskey & Meezan's (1997) study, the primary objective of the intervention was to improve family functioning, not prevent placement. Therefore, services were targeted to an "at-risk" population who might have benefited from the intervention. In other studies, the target population was not well defined, yet the service objective was clearly specified as placement prevention. And, even in the studies where there was agreement between objectives and target population. there has been an inability to either effectively target or to know the degree to which targeting has been successful, leading to people receiving services that might not be appropriate given the program's objectives.

## Measures

How the objective of family preservation services are conceptualized also has a critical role in the selection of outcome measures—an area that, like targeting, has received much attention in family preservation research. With the exception of McCroskey and Meezan (1997), all the experimental studies reviewed identified the prevention of out-of-home placement as the primary service objective. And the dichotomous variable of placement/no 32 •Jane Yoo and William Meezan

placement has been a primary outcome measure despite the controversy over its rudimentary nature and its inability to capture the nuances of placement (e.g., Pecora et al., 1995).

However, even in studies that had placement prevention as its primary objectives, it was not the only outcome measured. All these studies, including those that did not use experimental designs, included some measures of child and parent functioning in order to assess the impact of services on the psychological, social, and financial well-being of the families.

#### Analysis

The common use of descriptive statistics in family preservation research has been appropriate to describe the characteristics of the client families, the proportion of out-of-home placements, the mean scores on measures of functioning, etc. The use of inferential statistics has also been appropriate to test the differences between the experimental and comparison groups on continuous, demographic variables, placement outcomes, functioning levels, etc. However, most studies in family preservation, particularly early ones, have limited their use of inferential statistics to bivariate analyses. Although sophisticated for their time (e.g., Emlen, et al., 1977; Jones, et al., 1976), these studies did not answer more complex questions that have recently been addressed by Schuerman, et al.'s (1994) use of event history analysis and Fraser, et al. (1991) and McCroskey & Meezan's (1997) use of multiple regression.

## Involvement of Subjects

There has been no glaring violation of the rights of human subjects in family preservation research. Many studies have carefully considered the ethical quandary of random assignment (e.g., Fraser, et al., 1991), and have taken the proper steps to ensure human subject protection through, for example, the Institutional Review Board (e.g., McCroskey & Meezan, 1997). But these procedures have more often been implied than made explicit, and arguments surrounding informed consent (Thyer, 1993; Rzepnicki, Schuerman, & Littell, 1991) suggest that conventional procedures to protect human subjects have not been universally embraced. Furthermore, despite the underlying premise of family preservation programs to empower their clients, there has been little discussion around how to involve clients in the design and implementation of program evaluations.

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#### Where We Should Be Going

#### Design

Experimental designs are difficult to execute in the field (Pecora, et al., 1995; Rubin, 1997), are costly, and require much time and expertise. They also raise and thus are difficult to "sell" politically, given the need for random assignment. Yet the utility of experimental designs in answering outcome questions renders them necessary to building knowledge in this field. Nevertheless, new approaches to evaluations should be integrated into future studies to enhance these experimental designs by addressing their inherent challenges. For instance, the involvement of agencies and clients in the design and implementation of the study should be considered in order to empower these groups to make appropriate decisions (Fetterman, 1996), protect human subjects, and promote the gathering of reliable and valid data (Patton, 1997; Worthen, Sanders, & Fitzpatrick, 1997).

There are also convincing quasi-experiments that should be considered as viable alternatives to randomized experiments in order to answer evaluation questions. For example, Marcantonio and Cook (1994) suggest several interrupted times series designs that not only address the difficulty of random assignment, but establish longitudinal placement patterns and changes in individual and family functioning. Depending on the specific design, interrupted time series may be as arduous or even more difficult to execute than randomized experiments; however, they may be more palatable politically designs using random assignment.

While attempts thus far to collect data longitudinally have been admirable, the common application of conventional but arbitrary data collection points (e.g., 3, 6, and 12 months post-treatment) suggests the absence of a firm program theory (Chen, 1990; Weiss, 1999; Rossi, Freeman, & Lipsey, 1999). The articulation of program theory and the use of logic models (Davis & Savas, 1996; Savas, 1996) should help the field determine appropriate follow-up periods. Without the use of these tools, there will continue to be a lack of consensus regarding what changes can be expected from the services within specific time frames.

If services are intended to change families we should measure these outcomes over a longer period of time, and the specific outcome measures used should change over time to reflect theoretically expected changes. If the services are intended to reduce placement, than realistic expectations about how long placement can be avoided must be established based on something other than an arbitrary decision.

Furthermore, mixed methods should be used to address the multiple dimensions of a program evaluation. As accomplished by several studies (e.g., Fraser et al., 1991; Drisko, 1998), qualitative and quantitative methods can be combined in order to better explain the meaning of evaluation results to stakeholders. The qualitative component could consist of

in-depth, open-ended interviews with clients to elicit their perceptions of service quality. Or it could involve interviews with line workers to elicit their perceptions of what intervention components best address the needs of their clients.

Studies that use qualitative methods to supplement a primarily quantitative study should not neglect to report qualitative findings. At minimum, a summary of the qualitative studies should be provided. And one should remember that qualitative work, in and of itself, can address important questions regarding the perceptions of the effectiveness of service and the reasons people believe that the intervention works. Such studies would clearly enrich the literature and our understanding of this service.

## Sampling

While appropriate targeting has been discussed as an issue in regards to placement risk, it is also a salient component of the discussion of the population for whom family preservation services work best. Because targeting means establishing a set of eligibility criteria, it helps facilitate a good fit between the types of services being provided and the presenting problems and strengths of the client families. Targeting, therefore, should be carefully planned, backed by theory and empirical evidence, to guide eligibility criteria that reflect the full range of families that are appropriate for these services.

Furthermore, while multi-site studies (Schuerman, et al., 1994; Yuan, et al., 1990) and their large sample sizes are impressive, they present challenges to evaluators, including problems with the ability to consistently target services and maintain treatment fidelity. If multiple sites are used, local sites should be encouraged to monitor both sample selection and treatment fidelity (Bath & Haapala, 1994; Blythe & Jayaratne, 1999).

Finally, multiple small-scale studies using similar populations and program models should be promoted (Thyer, 1993). Findings from small scale studies, which are able to better control their interventions and targeting practices, tend to show better results than other studies (Bath & Haapala, 1993; Pecora, et al., 1995). Replication of such studies should be encouraged to address the external validity problems presented by the use of non-probability samples, and to enhance the possibility that consistent findings will be found across more tightly controlled studies.

## Measures

Given the controversies surrounding how placement prevention has been measured in the majority of the studies (e.g., Yuan, et al., 1990; Schuerman, et al., 1994), multiple measures of placement (Jones, 1991; Pecora, et al., 1995; Rossi, 1992) should be considered. If policy continues to demand that placement prevention be the primary objective of family

preservation, the continuation of its measurement is warranted. However, this does not mean that we cannot and should not measure other objectives such as individual and family functioning. In fact, given the limitations that placement prevention presents as an outcome, and given our current knowledge of effectiveness, we should revisit the objectives of family preservation services by eliminating, expanding or modifying performance measures.

Ideally, we need to use consistent measures across studies. But first, there must be consensus on what to measure (e.g., child and family functioning) and with what instrument(s). Clearly, this is a tall order but a salient one in advancing this field.

Moreover, we should promote the use of multiple informants in measuring client outcomes—a practice that, unfortunately, has not been common in family preservation research. As McCroskey and Meezan (1997) demonstrate, multiple informants reveal variations in perspectives that bring forth the question: Whose perspective—clients or workers—should determine program success or failure?

## Analysis

Overall, tools for analyzing data—whether they are quantitative or qualitative—should be used appropriately. While we should aim for multivariate analyses of quantitative data to capture the complexity of the problems being studied, they should be used with caution. Any violations of the tests' assumptions should be made explicit; the power of a statistical test should always be determined; and statistical significance should be distinguished from practical/clinical significance.

The use of highly complex statistical techniques is appealing, but they should be encouraged only under circumstances that warrant their application. In others words, statistical tests should be selected to answer the research question(s). For example, hierarchical linear modeling may be helpful in analyzing patterns of functioning over time; event history analysis can be used to better determine the predictors of a status change; and structural equation modeling may be useful in testing a theory about relationships between constructs that are relevant to family preservation, including client functioning, client characteristics, organizational climate, and service characteristics.

The analysis of qualitative data should also be held to the highest standards. First, the method of inquiry (e.g., grounded theory, ethnography, phenomenology) should be consistent with the aims of the study. Second, the techniques used to analyze data (e.g., content analysis, thematic analysis) should be consistent with the method of inquiry, and the techniques should be explained clearly. The use of software programs (e.g., Atlast/ti and NVivo) should also be encouraged as a way to manage qualitative data. While these programs cannot "do" the analysis for the researcher, they can facilitate the process in many

ways, including coding text or visuals, displaying data in a matrix, and creating diagrams that depict theories (Weitzman, 2000).

## Involvement of Subjects

We need to carefully consider the ethical issues surrounding research with this target population. In addition to using designs that do not require a no-treatment control group, we should move from the basic protection of subjects to involving subjects in the design and execution of research (Fetterman, 1996; Patton, 1997). While there are many challenges in involving clients in the research process, there are also many potential benefits. Service recipients can provide useful insights as to how to gather reliable and valid data, review instruments for content, appropriateness and cultural sensitivity, and help to interpret findings. They can help the researcher develop more relevant evaluation questions and more pragmatic research designs. And they can provide useful suggestions as to how to track research participants in order to have better success in the follow-up phases of longitudinal studies. They can also become full members of the evaluation team as interviewers or research assistants. (Koroloff, 2000).

## Conclusion

Research over the past four decades has yielded conflicting evidence about the effectiveness of family preservation programs. From more recent studies, we gather that intensive family preservation programs, overall, do not significantly prevent out-of-home placement (e.g., Yuan, et al., 1990; Feldman, 1990; Schuerman, et al., 1994). However, there are encouraging signs of small but consistent changes in the functioning of children and families (e.g., Feldman, 1990; Fraser, et al., 1991; Jones, 1985; Jones, et al., 1976; Landsman, 1985; Leeds, 1984; McCroskey & Meezan, 1997; Schuerman, et al., 1994; Stein, et al., 1978)

As confusing as the equivocal findings may be, and as disappointing as the findings are from large scale studies that have used placement prevention as their major outcome measure (Schuerman, et al., 1994; Yuan, et al., 1990), it is vital to continue our work to study this service approach in all of its variations. As McCroskey and Meezan (1998) state: "rather than conclude that a program approach that feels right to many families and professionals is not effective based on a single outcome measure, it would be preferable to systematically investigate the impact of services on multiple aspects of family and child functioning" (p. 64).

In these future efforts, it is important to recognize the changing nature of family preservation services and the clients it is serving. We should carefully examine what degree of change we expect of the client families from a treatment model (Quinn, 1993).

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Additionally, we should involve client families in establishing feasible short-term and longterm goals that they are encouraged to reach as a result of being served by a family preservation program.

Finally, family preservation research has advanced considerably as evidenced by largescale experiments (e.g., Schuerman, et al., 1994; Yuan, et al., 1990) and rigorous methodologies (e.g., Jones, 1985; McCroskey & Meezan, 1997). And there is a growing and critical body of literature that keeps researchers informed of the ways to advance research and thus build knowledge in this field (e.g., Pecora, et al., 1995; Rossi, 1992). In continuing these endeavors, it is imperative that research is widely disseminated, not only via academic journals that are accessible to scholars, but through written reports that are distributed in a timely manner to practitioners and policy makers. Without these efforts to search for effective and efficient ways to preserve families when this is possible and desirable, and continued dialogue with all stakeholders, the entire family preservation movement may be compromised or even abandoned.

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## Safety of Intensive In-Home Family Workers

## **Gwendolyn D. Perry-Burney**

Violence against social workers and other helping professionals has increased. Within this context, intensive in-home family workers were asked about their safety in working with clients. If family workers stated that that they felt only somewhat safe or not safe at all, they were asked to explain where they are likely to feel unsafe. Findings include concerns about safety. The author suggests comprehensive educational curriculum be integrated in agency training for new hires and seasoned employees; also, training should be implemented to increase worker awareness of potentially violent situations and how to de-escalate and defuse potentially violent clients.

Violence against social workers and other helping professionals is increasing (Newhill, 1996; Shachter & Seinfeld, 1994). In recent years, studies have shown that the number of social workers involved in violent altercations with clients has increased considerably (Rey, 1996; Knight, 1996; Horwitz, 1999); as the profession expands services to individuals and families (Straussner, 1990), many more social workers may find themselves in hostile situations. Violence against social workers has been reported in all of their work environments (Rey, 1996; Schultz, 1989; Star, 1984; Newhill, 1996). A survey of 175 licensed social workers and 98 agency directors in a western state showed that 25% of social workers had been assaulted by a client, nearly 50% had witnessed violence in an agency, and more than 75% were fearful of workplace violence" (Rey, 1996, p. 33). Not surprisingly, however, the settings in which violence is most apt to occur include correctional settings, mental health institutions, nursing homes, child and public welfare agencies, domestic violence situations, severe substance abuse situations, physical and mentally disabled group homes, and homeless shelters (Dillon, 1992; Ellison, 1996; Holmes, 1982; Kaplan & Wheeler, 1983; Horejsi, Garthwait, & Rolando, 1994; Newhill, 1996; Norris, 1990; Rey, 1996; Schultz, 1989; Tully, Kropf, & Price, 1993; Star, 1984; Winerip, 1999), where clients can "sometimes become so overwhelmed by fear that they lash out in panic at all who attempt to influence their choices or constrain their behavior" (Murdach, 1993, p. 307). Some evidence even suggests that the perpetrators of violent acts are becoming younger and the acculturation of violence is often passed on intergenerationally (Coudroglou, 1996; Holmes, 1982; Shachter & Seinfeld, 1994).

The increase in violence perpetrated by individuals against helping professionals, particularly social workers delivering human services, is substantiated by a large body of