Reunification for children in out-of-home care - Part 5: Evidence-based programs that promote successful reunifications   *November 2018*

FAST FACTS

Factors associated with child maltreatment, children's entry into care and reunification failure are **complex** and **inter-related**.

Factors include:
- Family violence
- Parental drug and alcohol problems
- Parental mental health problems
- Parental isolation
- Family poverty
- Insecure housing

The research suggests that effective services:
- Are comprehensive, intensive and tailored to family needs.[1] [2]
- Provide support before and after reunification[3] [4] [5]
- Involve cross agency collaboration and address housing needs as a priority.[6]

Experimental program outcomes
Comprehensive and intensive services[7]
% subject to re-referral by 24 months
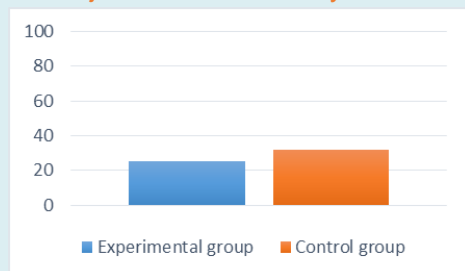
There is growing evidence that reunifying children with their birth families is often unsuccessful.[5] [13] UK figures suggest that around 30 percent of reunified children will return to care within five years.[14] Insights from evaluations of successful reunification programs are needed to develop effective reunification practices, however with the exception of the evaluation of the Newpin program in NSW, [12] [15] [16] little Australian research has investigated programs which have had a positive impact on post reunification outcomes such as preventing future maltreatment or future re-entry into care. This paper will review evidence from some well evaluated US programs. It will also summarise key findings from an evaluation of Newpin.

Context: maltreatment causes are complex
There are many factors that contribute to children's vulnerability to maltreatment, entry to care and poor reunification outcomes. Often a combination of inter-related factors are involved which can include family violence, drug and alcohol problems, mental health problems, parental isolation and insecure housing. Poverty and social disadvantage underlie many of these issues.[17] A key challenge for child protection workers is that most Australian child protection departments do not have the resources to adequately address systemic issues such as poverty or lack of housing. Failing to address factors that contribute to families coming into contact with the child protection system, and which continue to impact on their ability to safely care for their children, however, can often contribute to reunification failures.[18] [19]

Limitations of current reunification practices
Research has identified that most existing child welfare models for reunification services are insufficient to assist families to achieve safe and successful reunifications, particularly when they are experiencing challenges such as lack of housing and substance abuse.[19] [20] In 2009, Jill Berrick, Professor at the University of Berkeley wrote:
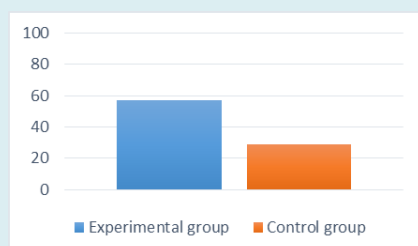
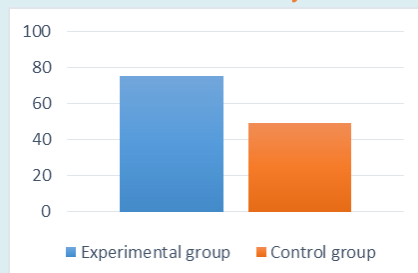*Current reunification services are often so modest that they are unlikely to have significant effects…*
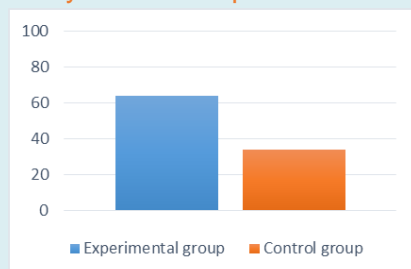
Reunification

FAST FACTS

Comprehensive and intensive services[8]
% children reunified by 12 months

Support before and after reunification[1]
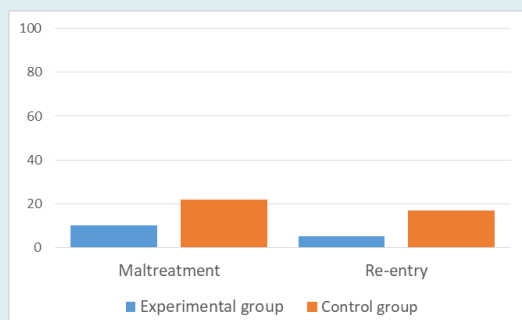% children reunified by 12 months

% families no longer needing services at 6 year follow-up

Cross agency collaboration with a focus on housing[9]
% families experiencing poor post reunification outcomes at 18 months

Generic, didactic parenting training is not likely to have much effect on parents' daily interactions with their children. Two-hour weekly visitations arranged in the local mall will scarcely help parents practice new parenting skills that are responsive to children's needs. And a list of phone numbers that identifies local drug treatment centres can hardly be called a service at all.

US research findings on effective programs

A small number of, predominantly US, articles have described evaluation outcomes from programs that have had a positive impact on post-reunification outcomes including reduced rates of post-reunification maltreatment and re-entry into care. The research suggests that effective services:

1. Are comprehensive, intensive and tailored to family needs
2. Provide support before and after reunification
3. Involve cross agency collaboration and address housing needs as a priority

1. Comprehensive, intensive and tailored

There is evidence that comprehensive support services which are tailored to the needs of families may be the most effective at producing long term safe reunification outcomes for children.[1] One example of an effective program is the Casey Family Services Family Reunification Program.[7] The program targeted families experiencing a first time removal. Services were intensive, home-based and tailored to each family's needs. Each family worked with a team of support workers and caseloads were low. Services provided included regular parent-child visits including participation in activities aimed at improving parent-child relationships. Individual, couple and family therapy were provided where relevant. Outcomes for program children (n=254) were compared with those of children from a comparison group who received 'business-as-usual' reunification services (n=223). Reunification rates between the two groups were roughly similar however at the 24 month follow up, program families experienced significantly fewer re-referrals to authorities than comparison families (25% vs. 32%).

A second example is the Intensive Reunification Program which was a US-based pilot study.[8] A group of 15 families undertook an intervention and were compared with 16 matched families who received conventional foster care services. The experimental service involved biological parents and their children participating in activities for 4 hours a week for 36 weeks. Activities included meal preparation and eating together, joint parent-child

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AUSTRALIAN EXAMPLE: NEWPIN EVALUATION

Commencing in 2013, Newpin became Australia's first Social Benefit Bond (SBB). [10] [11] [12] Newpin is a collaboration between NSW Family and Community Services (FACS) and UnitingCare which runs the Newpin program. SBBs pay returns to private investors based on outcomes. In the case of Newpin, success is based on the proportion of children attending a Newpin Centre who are reunified with their family, and who do not re-enter care within 12 months.

Newpin provides a range of services and supports to families seeking to have their children returned from care. Services include parent education, group therapy for parents and child development activities. Families attend a Newpin Centre for a minimum of two days per week for around 9 months prior to reunification and then a further 9 months post reunification.

A recent evaluation of the Newpin program reported that 259 children who were living in care have participated the program.[10] Of this group, 121 children had been returned to their families. Rates of post-reunification maltreatment are not reported. The evaluation reports that 11% of the reunified children had re-entered care but notes that "*the number of reversals is still very low at this stage as many of the restorations have occurred recently… More time is needed to track and monitor reversals over a longer period to test the validity of these patterns*".

activities such as family games and parent training using evidence-based parent-training programs. An additional component of the program was weekly hour and a half visits in the birth home between the child and the biological parents. By the 12 month follow up, 57 percent of children in the experimental group were reunified with their families, compared with 29 percent of children in the control group. Five comparison children had re-entered care versus none of the intervention children.

2. Support before and after reunification

Several studies have noted that services provided to children in care and their families frequently deteriorate or in many cases end, once children are reunified with their families.[3] [5] The transition phase in reunification can be challenging, particularly in circumstances where formal support services cease at the time of reunification.[16] Providing support at the time of reunification, as well as for extended periods after a child has been returned to home can improve reunification outcomes.[3] [4] [5]

An example of this approach is the Utah Experimental Reunification Service.[1] [21] Children were randomly assigned to a control condition where their families were provided with routine child welfare services (n=53) or an experimental service (n=57). The experimental service involved a 90-day intensive family reunification services program. It involved (i) building collaborative relationships with parents; (ii) family members' skills development (iii) practical support around housing, employment, health and mental health care. Children in the experimental group were returned home early in the support period (average time of return was 21 days) so parents could be supported with the reunification process. At a 12-month follow-up, 75 percent of children in the experimental group were reunified with their families, compared with 49 percent of children in the control group. At a 6-year follow up, 64% of children in the experimental group no longer needed support services versus 34% of children in the control group.

3. Collaborative with a focus on housing

Given the complexity of challenges facing parents, research has suggested that effective programs may require collaborative efforts across different service sectors and service providers. A lack of appropriate, affordable and secure housing is consistently highlighted as a significant barrier to successful reunification[10] indicating that public housing needs to be part of the network of services involved.

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IMPLICATIONS FOR POLICY & PRACTICE

- Programs and practices to promote the safe reunification of children need to be informed by insights from research, in particular evaluations of reunification programs shown to reduce future maltreatment and re-entry to care.

- The research indicates that effective approaches are intensive and comprehensive, provide support before and after reunification and are tailored to address a range of challenges faced by families.

- Adequately addressing the problems that led to children entering the child protection system, is associated with increased rates of successful reunifications.[5]

- Reunification programs and practices that do not apply insights from the research are significantly less likely to promote the safe reunification of children.

- Families who are in contact with the child protection system often experience a number of inter-related challenges including inadequate housing, substance abuse problems and domestic violence. Effectively responding to these challenges may require collaborations across a range of relevant services.[16]

- Although intensive, long-term, multi-agency services demand more resources, they may be more cost effective in the long run if children are less likely to re-enter care after reunification.

Rivera and Sullivan reported on evaluation findings from a recent US pilot study. [9] These findings demonstrated the effectiveness of a family-focused, housing based, drug treatment program with wraparound services. The program was provided through a collaboration between a number of services including the courts, children protection services and substance abuse treatment services.

On entry to the program, vulnerable families entered emergency supervised housing. Parents were required to participate in a range of drug treatment and support services involving a minimum 20 hours per week participation. The child welfare department had formal custody of children but placed them with their parents and provided with a range of therapeutic child care and developmental services. As safety issues were resolved, families were moved to less intensely supervised housing and support plans. Families typically stayed in the program for 18 to 24 months with around four months spent in emergency treatment, followed by four months in transitional housing. They were supported in a transition to permanent housing for 4-12 months and then assisted in locating mainstream housing when ready.

An 18-month follow up found that compared to a comparison group of reunified children (n=54), program children (n=196) had significantly lower rates of subsequent maltreatment (22% versus 10%) and foster care re-entry (17% versus 5%).

A second study evaluated the impact of Cottage Housing Incorporated's Serna Village program.[17] This was a reunification program which provided families with housing combined with wraparound services. Program children had lower rates of re-entry to care and lower subsequent child welfare costs for government.

Concluding comments

The research suggests in many cases that 'business-as-usual' services provided to support reunification may be insufficient to address the complex and inter-related factors that contribute to families' vulnerability. Some limited US research has begun to identify program characteristics that are associated with successful reunification outcomes for children. These findings should be used to inform the development of future programs and services. Newpin includes some elements of successful programs, however more long term follow up data is needed to demonstrate the program's effectiveness in supporting safe and enduring reunifications.

RESEARCH SUMMARY

Queensland
Family & Child
Commission

Reunification

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