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**Identifying, Interviewing,
and Intervening: Fathers
and the Illinois Child
Welfare System**

**Cheryl Smithgall
Jan DeCoursey
Elissa Gitlow
Duck-Hye Yang
Elizabeth Jarpe-Ratner
Jiffy Lansing
Robert Goerge**

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Chapin Hall
at the University of Chicago
1313 East 60th Street
Chicago, IL 60637

773-753-5900 (phone)
773-753-5940 (fax)

www.chapinhall.org

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Executive Summary

In recognition of the need for comprehensive family assessments, and in response to the concerns raised by the Child and Family Services Review (CFSR), the Illinois Department of Children and Family Services (DCFS) developed the Integrated Assessment (IA) program. The IA program partners child welfare caseworkers with licensed clinicians, or “screeners” to provide better information about the functioning of children entering foster care and about child and family strengths, support systems, and service needs. Consistent with other DCFS efforts to engage biological parents and specifically fathers, IA screeners and caseworkers were strongly encouraged to include fathers—resident or nonresident—in the IA process.

In this study, we examine the extent to which fathers—stepfathers, putative fathers, legal fathers, adoptive fathers, or biological fathers—were interviewed as a part of the IA process and the factors associated with fathers being interviewed. Drawing on a subsample of reports in which fathers were interviewed, we provide rich descriptions of the complex circumstances and family roles of fathers, and we examine the extent to which case service plans reflect the assessment recommendations and fathers’ circumstances. To further inform the quantitative findings, we draw on semi-structured interviews with caseworkers, in which they discuss their experiences in engaging or working with fathers. Finally, we examine how parents’ participation in the IA interviews is associated with higher rates of reunification.

Findings from this study point to the following implications for ongoing efforts by the child welfare system to engage fathers and effectively deliver or arrange services that address fathers’ needs and improve child and family well-being:

- It is clear that a differentiated approach to engaging fathers is needed, as well as an array of services that best meets their particular circumstances.
- Efforts to draw on *potential resource/positively involved* fathers’ extended resource networks and to support their ongoing involvement in their children’s lives may have significant payoff.
- Although many of the *negatively involved* resident fathers had some assets, such as their role in securing stable housing for the family, many of them did not understand or acknowledge the

impact of their behaviors on their child or the rest of the family. These fathers may be more difficult to engage in services and reunification efforts. When considering how to engage fathers who are seen as a negative influence in the family and on reunification efforts, caseworkers must be attuned to and equipped to address the dynamics of the entire family and the potential resistance they may encounter.

- Perhaps reflecting fathers' contribution to the overall resources available for children, children were significantly more likely to be reunified when both parents were interviewed as part of the IA than when only one or neither parent was interviewed.
- The importance of engaging fathers early in the assessment process cannot be understated; however, sustaining the engagement of fathers through services and interventions warrants further attention.

Identifying and Interviewing Fathers as Part of the IA Process

Of over 9,000 IA cases completed between 2005 and 2008, the largest proportion included interviews with both the mother and father; in relatively few cases, a father was interviewed without a mother being interviewed. Combining those two groups, a father was interviewed in 45 percent of the cases, with the trend over time revealing increases from 40.5 percent in 2005 to 55.4 percent in 2008. This trend was driven for the most part by increases in the percentage of cases in which both parents were interviewed.

Clearly, whether a father has been identified on a given case will impact the extent to which the interview can be completed, and in slightly more than one-third of all IA cases, the father of the child was not identified at the time the IA screener was involved. Where a parent was identified, there was significant variation across regions in the extent to which fathers and mothers are interviewed, with percentages ranging from 58 to 80 percent for fathers and 69 to 93 percent for mothers. Age, race, type of placement, prior placements, and geographic region were all significantly associated with whether one, both, or neither parent was interviewed.

Circumstances and Problematic Behaviors among Fathers who were Interviewed

The information in the IA reports provides a rich description of the ecology of fathers interviewed in the IA process, covering such topics as housing, education, employment, finances, informal supports, domestic violence, substance use, and criminal behavior. A randomly selected subsample of cases was reviewed in greater detail, yielding the following findings:

- For over half of the cases, the father reported or was observed to have a stable and adequate residence. In just under one-fifth of the cases, the father was incarcerated at the time custody was taken. Cohabitation with adults other than a mother or paramour was noted for just over a third of the fathers interviewed.
- Slightly fewer than half of these fathers dropped out before completing high school, although half of them later obtained their GED. Among the half who completed high school, some did go on to attend college or trade school, but few had a postsecondary degree.
- Half of the fathers were employed at the time of the assessment. Aside from their current employment status, over a third of the fathers interviewed described a history of unstable and sporadic employment, with brief employment periods and/or repeated job loss, frequently due to periods of incarceration.
- Finances were clearly strained for the vast majority of the fathers who were not working. Most unemployed fathers relied heavily on family support for money and/or housing, rather than public benefit programs or other forms of financial assistance.
- The overwhelming majority of fathers interviewed indicated they had informal supports on which they could rely, as needed. Those supports were frequently immediate or extended family networks—sometimes their own, sometimes their spouse’s or partner’s—and the nature of the support included housing, childcare, and financial assistance as well as emotional support.
- Domestic violence was a factor contributing to the child’s removal from the home in approximately 10 percent of cases. Furthermore, the screeners noted domestic violence as a concern in more than half of the cases where fathers were interviewed.
- More than half of the fathers interviewed had a history of drug and/or alcohol abuse, and a small group of fathers acknowledged an existing problem with substance abuse. Another one-fourth of the sample denied an existing problem with illegal substances, but other information from the IA indicated that there were drug- or alcohol-related problems.
- The vast majority of the fathers who were interviewed for the IA admitted to or had documented evidence of having a criminal background. More than half of those fathers had committed violent acts, such as aggravated sexual assault, attempted murder, and weapons offenses. More than two-thirds of fathers with histories of substance abuse had experienced an arrest or conviction for a crime related to illegal drugs or alcohol abuse. More than one-third of the fathers had spent some time in prison.

Both resident and nonresident fathers were interviewed for these IA reports. While nearly all of the nonresident fathers were described as being positively involved or a potential resource for the child, the

same was not true of all resident fathers. Fathers whose involvement or interactions were negative displayed behaviors that were perceived to be harmful to the child. Many of the circumstances and behaviors described above corresponded to whether the fathers' involvement with his child was characterized as positive or negative.

Engagement, Case Planning, and Service Delivery

A prominent theme in the review of assessment reports was the screeners' notation that the father was willing to engage in services. Screeners occasionally included comments regarding their insights into or acknowledgement of the fathers' problems.

Although most caseworkers articulated an understanding of the connection between assessment activities and the development of service plans, the information covered in the assessments and the recommendations made in either the IA reports or the service plans were not perfectly aligned.

Caseworkers described working with many fathers who not only present with problematic behaviors but also face unemployment or financial strain. These findings raise questions about the logistics of arranging for participation in multiple services and consistently engaging fathers for the duration of those services. The fact that multiple services are being simultaneously recommended for an individual father also raises questions about coordination across providers and whether there is any evidence on service effectiveness to guide the order in which these services are put in place.

Positive Child Outcomes Despite Challenges Facing Fathers

Despite some fathers having problematic behaviors, a number of workers identified fathers who were active participants in services, and in such cases, the workers spoke of how involved fathers are a positive resource for the children or family. Perhaps reflecting fathers' contribution to the overall resources available for children, an analysis of the over 9,000 completed IA cases indicates that when both parents were interviewed as part of the IA, children were significantly more likely to be reunified than when only one or neither parent was interviewed.

Several caseworkers perceived a systemic bias toward reunifying the child with the mother, also noting some challenges—such as having sufficient space—that may thwart fathers even when they complete the recommended services. However, beyond noted changes in behavior or attitudes that may have contributed to the initial determination of risk, caseworkers' statements indicate that the willingness to participate in and complete services is the driving factor in assessing the prospects for reunification. This may tie in, then, to the previous finding suggesting an association between willingness to engage in the IA interview and willingness to participate in services, creating the sense that while not all fathers engage with workers and services, those that do have better prospects for reunification.

Introduction

Historically, the child welfare system has directed more of its resources to working with and providing services to mothers than to fathers (Franck, 2001; Hornsby, 2002; Sonenstein, Malm, & Billing, 2002). While the fact that mothers more often tend to be the custodial parent may influence the appropriation of resources, many studies have highlighted other circumstances or reasons which lead some caseworkers and service providers to direct available resources toward women (Franck, 2001; Greene & Anderson Moore, 2000; Malm, Murray, & Geen, 2006; O'Donnell, Johnson, Easley D'Aunno, & Thornton, 2005; O'Hagan, 1997). The attitudes and behaviors of mothers, caseworkers, and service providers may play a role in sustaining a differential focus on mothers.

Offering further evidence against the theory that men are often absent from high-risk families, Bellamy's (2009) recent work with a nationally representative dataset indicates that the majority of families involved with child welfare have male relative involvement in their lives, and that these adult males are important targets for services. That being said, evidence continues to point to a need for child welfare workers to improve their efforts to engage fathers. Findings from the Illinois 2003 Child and Family Services Review (CFSR) cited the lack of contact with and engagement of fathers as a key concern. Specifically, reviewers noted insufficient face-to-face contact between caseworkers and fathers and a lack of involvement of fathers in case planning and service assessments.

In recognition of the need for comprehensive family assessments, and in response to the concerns raised by the Child and Family Services Review (CFSR), the Illinois Department of Children and Family Services (DCFS) developed the Integrated Assessment (IA) program. The IA program partners child welfare caseworkers with licensed clinicians to provide better information about the functioning of children entering foster care and about child and family strengths, support systems, and service needs. The information-gathering activities and the collaborative process between the caseworker and IA screener are intended to produce better-quality child and family assessments, which in turn facilitate the development of better service plans and engagement in appropriate interventions. Alongside other DCFS efforts to engage biological parents and specifically fathers, IA screeners and caseworkers were strongly encouraged to include fathers—resident or nonresident—in the IA process.

In this study, we examine the extent to which fathers were interviewed as a part of the IA process and the factors associated with fathers being interviewed. The interviews with fathers and other family members, along with other case documents and assessments, provide the basis for comprehensive reports that caseworkers and IA screeners produce collaboratively. Through a systematic review of a random sample of these reports, we are able to provide rich descriptions of the complex circumstances and family roles of fathers. We also examine the extent to which case service plans reflect the assessment recommendations and fathers' circumstances. To further inform the quantitative findings, we draw on semi-structured interviews with caseworkers, in which they discuss their experiences in engaging or working with fathers. Finally, we examine how parents' participation in the IA interviews is associated with higher rates of reunification. In the conclusions, we discuss the implications of this work for ongoing efforts to engage fathers and to effectively target services to fathers.

Methods

This study utilizes a mixed-methods approach, drawing on several administrative databases maintained by the Illinois Department of Children and Family Services as well as in-depth, semi-structured interviews with a random sample of caseworkers and qualitative coding of a sample of IA reports extracted from one of the administrative databases. The databases and sampling procedures are described in greater detail in this section. Approvals for conducting this research were obtained from both the University of Chicago Institutional Review Board and the DCFS Institutional Review Board.

Statewide Administrative Data Systems

In conducting this study, Chapin Hall staff worked with staff from the DCFS Office of Information Technology Services to extract and analyze relevant data from several statewide databases maintained by DCFS.

When the IA program was launched, DCFS constructed an administrative database for the purposes of tracking the assignment of cases, the completion and timing of interviews, and other benchmark steps in the IA process. These data are entered and maintained by the intake coordinators and used to monitor workloads and indicators of program functioning. This evaluation drew on data from over 9,000 IA cases completed between 2005 and March of 2009 to assess the inclusion of fathers in the initial interview process, and to identify a sample of cases for more detailed record review.¹

Chapin Hall also worked with DCFS to extract data from the Child and Youth Centered Information System (CYCIS), which contains case opening, child demographics, and placement records. The evaluation team linked these records to information in the IA database mentioned above.

DCFS also facilitated access to records in the Illinois Statewide Automated Child Welfare Information System (SACWIS). SACWIS is a case management computer application that contains information

¹ Cases are tracked at the child level. The roughly 9,000 IA cases represent approximately 6,000 families.

from the initial phone call of suspected abuse or neglect and throughout the life of a case, including copies of the final IA reports and case service plans.

Random Sample of IA Reports in Which Fathers Were Interviewed

Information about fathers who participate in the Integrated Assessment was gathered through a review of a randomly selected subsample of 49 Integrated Assessment reports for cases where temporary custody was awarded between July 2007 and October 2008 and a father was identified and interviewed.² The total sample included interviews with 53 fathers (i.e., a few cases included interviews with more than one father). Approximately one-fifth of the cases had multiple fathers listed on the case and referenced in the IA report, but the caseworker and screener only interviewed one father as part of the IA.

The IA database was used to draw the sample and then IA reports and service plans were pulled from SACWIS. The IA report is structured so that separate sections are dedicated to each parent and child in the family. The domains of information included in each of these sections are as follows:

Parent Domains (reported separately for mothers and fathers):

- Screener impressions of participant physical, intellectual, and emotional well-being
- Parent Personal History
- Education and Cognitive Functioning
- Criminal Behavior and Background
- Work History
- Social/Romantic Relationships
- Current Living Situation
- Substance Use
- Interests, Hobbies, and Talents
- Support Systems
- Parenting Abilities
- Medical/Developmental Condition
- Mental/Emotional Health

² Although the original sample drawn included 50 cases, a review of the case records revealed that for one case the father was not interviewed as part of the Integrated Assessment.

Child Domains:

- Developmental and Grade Level
- Medical/Developmental Condition
- Mental/Emotional Health
- Child's Interaction with Caretaker/Paramour
- Child's Fear of Caretaker
- Behavioral Problems that Child May Be Exhibiting
- Child's Support System
- Child's Adjustment to Placement

Family Functioning Domains:

- History of Abuse/Neglect or Other History of Child Welfare Services in the Family
- Family's Financial Stability
- Environmental Conditions of the Home
- Community/Neighborhood Environment
- Domestic Violence
- Special Treatment Approaches Related to Racial, Ethnic, or Cultural Considerations
- Family Strengths/Resources

In the process of coding IA reports, analysts captured any information about fathers that was presented in any domain of the report. (For a copy of the complete report template, see Smithgall et al., 2009, Appendix A). Incorporating all participant perspectives, including the screener's, supports a more nuanced analysis of father involvement. For the IA reports, qualitative analysis was conducted using grounded theory with the assistance of the qualitative software package, Atlas.TI.

Analyses also included a comparison of the extent to which recommendations made in the integrated assessment (IA) were incorporated into the service plan (SP) for these randomly selected cases. All recommendations and service plan items were excerpted from the IA and SP documents and categorized by recommendation type, such as substance abuse evaluation, individual therapy, job training, parenting classes, etc. Each recommendation type was then compared to determine whether the IA recommendation matched the SP, whether the recommendation was included in the IA but missing from the SP, or whether it was not included in the IA but added to the SP.

Caseworker Interview Sample

The IA database was used to identify all caseworkers who had conducted assessments in collaboration with an IA screener for at least two families in a 6-month period during 2008. From this set of 130 workers, approximately 35 were randomly sampled and stratified by region so as to ensure statewide representation. Between March and July of 2009, in-depth, semi-structured interviews were completed with 22 caseworkers. The primary reason for not completing all 35 interviews was an inability to establish contact within the study timeframe, a process that was impeded by state budget crises resulting in reportedly higher workloads and temporary program disruptions in July, 2009. With respect to demographic characteristics, no significant differences were found between those who did and did not participate in the interviews.

The final group of interview participants, which included bilingual caseworkers, represented all regions of the state and both public and private child welfare agencies (see Table 1). By virtue of the selection criteria, even those workers with less than a year of experience had completed assessments with IA screeners for at least two families, and some had completed as many as five in just that year. Several more experienced workers completed as many as 30-50 assessments over time and worked with several different IA screeners.

Table 1. Characteristics of Interviewed Caseworkers

| Region | <i>N</i> | % |
|--|----------|----------|
| Central | 7 | 31.8 |
| Cook | 6 | 27.3 |
| Northern | 5 | 22.7 |
| Southern | 4 | 18.2 |
| Agency | | |
| DCFS | 13 | 59.1 |
| POS (private) | 9 | 40.9 |
| Length of time with agency | | |
| 0–1 year | 6 | 27.3 |
| 1–4 years | 7 | 31.8 |
| 4+ years | 9 | 40.9 |
| Education | | |
| Bachelor’s degree | 10 | 45.5 |
| Currently enrolled in Master’s program | 4 | 18.2 |
| Master’s degree | 8 | 36.4 |

The primary focus of the semi-structured interviews with caseworkers was to gather information about their experiences and perceptions of the integrated assessment process. Because one intent of this evaluation was to assess the engagement and inclusion of fathers, the interviewers specifically asked caseworkers to speak about their experiences working with fathers and to explain if and how fathers were involved in completing the integrated assessments and any recommended services. All completed interviews were recorded, transcribed, coded, and analyzed using Atlas.TI software.

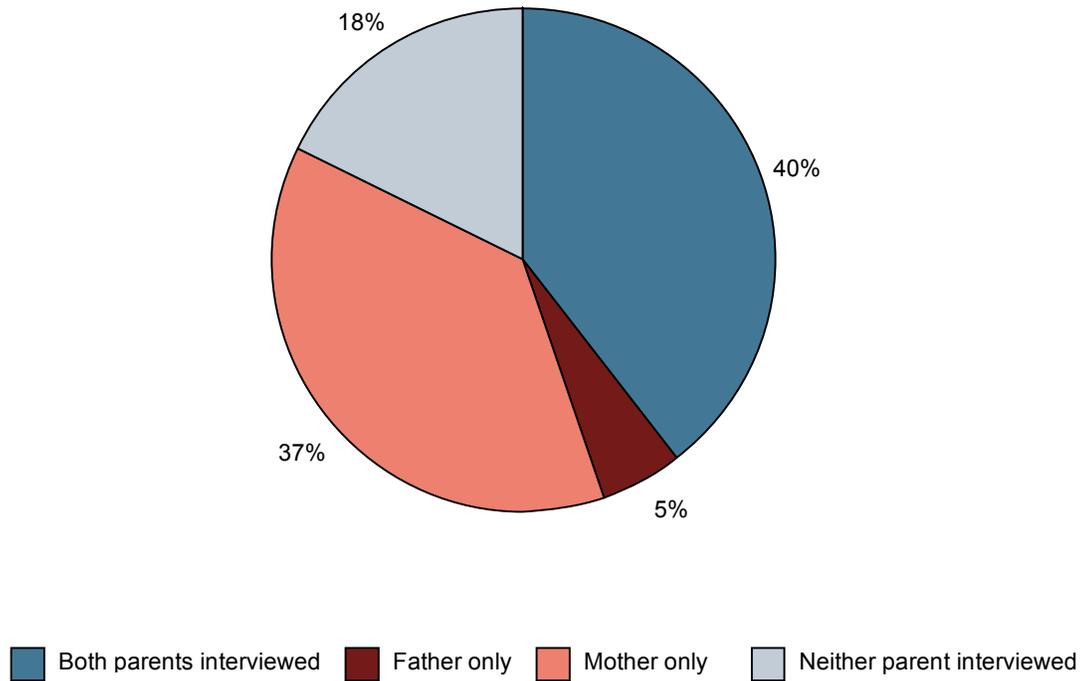
Including Fathers in the Assessment Process

The Illinois IA process streamlines the collection of important family information within 45 days after a child enters DCFS care. The process was designed to provide casework staff with front-end assistance for coordinating information gathered through health evaluations, collaborative comprehensive record review, and interviews with the child and his or her family members, guardian, and substitute caregivers.

The significance of timing in connecting with fathers is grounded in research that shows that caseworkers are more successful in engaging nonresident fathers if they are able to identify, locate, and contact the nonresident fathers within 30 days after case opening (Malm et al., 2006).

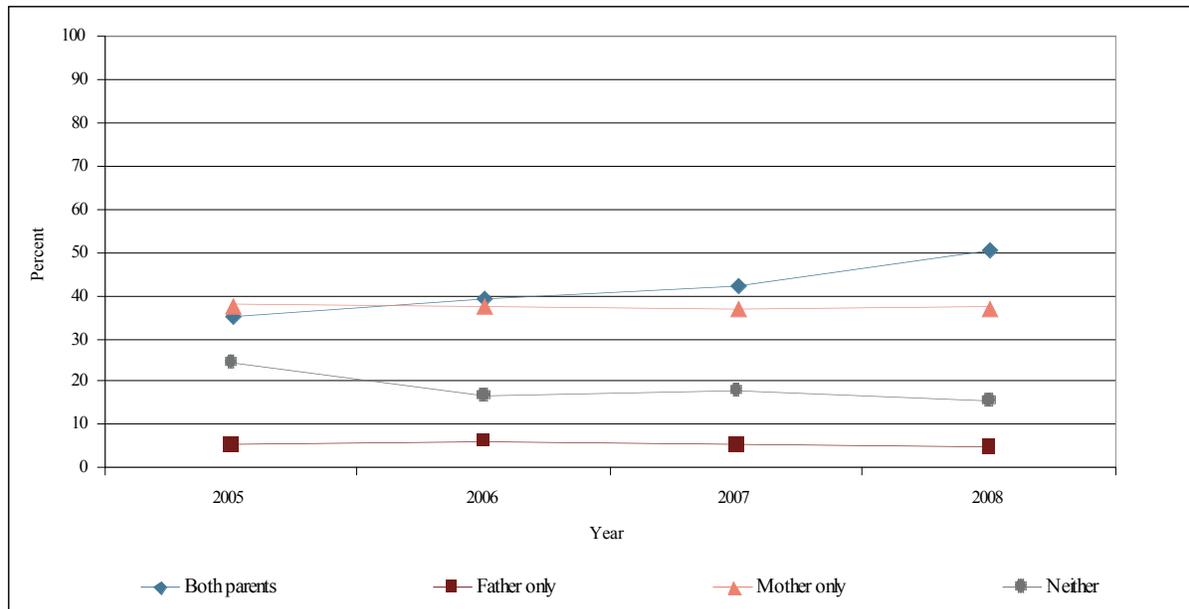
When the IA program was launched, DCFS established a database to track the process of completing the various interviews and steps of the IA process, including whether and when interviews were completed with *all* parents, biological and otherwise, resident and nonresident. We used these data to look at the proportion of cases in which parents—and specifically fathers—are interviewed as part of the IA process (see Figure 1).

Figure 1. Completion of IA interviews with Fathers, 2005–2008



As Figure 1 shows, both the mother and father are interviewed in the largest proportion of cases; in relatively few cases, a father is interviewed without a mother being interviewed. Combining those two groups, a father was interviewed in 45 percent of the IA cases over the 3-year time period. Analysis of annual rates of interview completion reveals a positive trend wherein the total percentage of cases in which a father has been interviewed has increased from 40.5 percent in 2005 to 55.4 percent in 2008, driven for the most part by increases in the percentage of cases where both parents were interviewed (see Figure 2).

Figure 2. Annual Interview Completion Rates with Biological Parents



One reason that fathers are not interviewed as part of the IA process may be that they are not identified. In slightly more than one-third of the IA cases completed between 2005 and 2008 ($N = 9,909$), the father of the child was not identified at the time the IA screener was involved. Previous research has revealed several reasons why mothers and relatives do not identify nonresident fathers, including concerns about the status of or imposition of child support payments, undocumented immigrant status, outstanding arrest warrants, and domestic violence (Curran, 2003; Sonenstein et al., 2002). Despite circumstances that might hamper efforts to identify fathers, several of the caseworkers either spoke of trainings they attended regarding identifying and locating fathers, or they described in detail the lengths they went to in seeking out and contacting fathers.

I remember... the Fatherhood Initiative and learning how to use the Putative Father Registry to make sure we were exhausting all options. We were starting to get trained on diligent search and Putative Father Registry at that time to make sure we were really looking for the father and not just asking the mother and her saying, “I don’t know,” or, “I’m not gonna tell you,” and dropping it. **[Caseworker #37]**

The maternal grandmother, she didn’t know who he was, and we asked her about if she could contact his family. We didn’t have an address or anything—if she had any contact information going back to the neighborhood, and she was able to get phone numbers and things like that, and we were able to communicate with him on that level as far as getting some information from him,

and like I say, it ended up going to court, and...at the point when I transferred the case, they were at the process of doing the paternity test. **[Caseworker #34]**

I contacted them. I found—by mom’s interview I got the information of who they were and the last known address that they had. I searched Public Aid, found both of them, sent them a letter telling them that [their child] was in foster care and I needed to meet with them to discuss the situation and gather information about them for the best interests of their child, so then they showed up.

[Caseworker #22]

Clearly, whether a parent has been identified on a given case will impact the extent to which the interview can be completed, particularly within the timeframe of the IA.³ In just under 4 percent of all IA cases, neither a mother nor a father was identified.⁴ Taking into account whether an individual in a given role has been identified, we see variation in interview completion percentages not only by role but also by region. Where a father has been identified for a family case, interview completion percentages with those fathers range from 58 to 80 percent, compared to interview completion percentages of 69 to 93 percent among mothers (see Table 2).

Table 2. Regional Variation in Interview Completion with Parents (2007–2008)

| Region | Sub-region | Mothers | | Fathers* | |
|----------|----------------|-------------------|-------------------|-------------------|-------------------|
| | | Number Identified | Percent Completed | Number Identified | Percent Completed |
| Northern | Rockford | 356 | 86.8 | 257 | 70.0 |
| | Aurora | 746 | 75.6 | 489 | 58.1 |
| | Peoria | 656 | 87.8 | 584 | 68.7 |
| Central | Springfield | 358 | 87.7 | 316 | 65.5 |
| | Champaign | 799 | 92.0 | 739 | 67.7 |
| | East St. Louis | 468 | 83.5 | 306 | 69.9 |
| Southern | Marion | 447 | 92.8 | 331 | 80.4 |
| | Cook North | 306 | 69.3 | 166 | 62.7 |
| Cook | Cook Central | 364 | 71.4 | 230 | 63.0 |
| | Cook South | 699 | 72.2 | 375 | 64.0 |

*The data for fathers include all types: stepfathers, putative fathers, legal fathers, adoptive fathers, and biological fathers. Similarly, numbers and rates of mothers include stepmothers, adoptive mothers, and biological mothers.

³ According to the IA model, all interviews are to be completed within 20 days after the child is placed in protective custody. Analyses of data in the IA database indicate that the average length of time to completion of the last interview is 27.59 days.

⁴ An example of the type of case in which this might occur would be a disrupted subsidized guardianship case in which neither parent is involved and the child’s caregiver at the time of the current petition for temporary custody is a relative who was granted guardianship in a prior case.

Factors Associated with One, Both, or Neither Parent Being Interviewed

Table 3 provides descriptive characteristics of the children and cases, grouped by whether IA interviews were completed with one, both, or neither parent. Among cases where the mother and father are both interviewed, a greater percentage of children are younger than age 6, a greater percentage of children are white, a smaller percentage of children have a prior foster care placement, a slightly higher percentage of children are initially placed with a relative, and there are fewer cases from Cook County. Among cases where only the father was interviewed, a greater percentage of children are over age 13, the percentage of children who are white is still high—but not as high as cases in which both parents are interviewed, and initial placement type and regional distribution are more similar to cases where only the mother was interviewed.

When all of the child and case characteristics were included in a multinomial model, age, race, region, and type of initial placement significantly predict whether neither parent, only the mother, only the father, or both parents were interviewed in the IA process (see Appendix A for full results of the model), confirming not only the need to control for regional variation but also for case characteristics in assessing outcomes that may be associated with parent interview completion. We return to this issue in the last section of this report.

Table 3. Characteristics of Cases Grouped by Completion of Parent Interviews

| | Both parents interviewed | | Father only | | Mother only | | Neither parent interviewed | |
|---|---------------------------------|----------|--------------------|----------|--------------------|----------|-----------------------------------|----------|
| | <i>(N=3,808)</i> | | <i>(N=515)</i> | | <i>(N=3,631)</i> | | <i>(N=1,724)</i> | |
| | <i>N</i> | <i>%</i> | <i>N</i> | <i>%</i> | <i>N</i> | <i>%</i> | <i>N</i> | <i>%</i> |
| Age | | | | | | | | |
| 0 | 974 | 25.58 | 96 | 18.64 | 720 | 19.83 | 421 | 24.42 |
| 1 to 5 | 1359 | 35.69 | 133 | 25.83 | 1151 | 31.70 | 315 | 18.27 |
| 6 to 13 | 1039 | 27.28 | 175 | 33.98 | 1228 | 33.82 | 457 | 26.51 |
| 14 to 20 | 436 | 11.45 | 111 | 21.55 | 532 | 14.65 | 531 | 30.80 |
| Race/Ethnicity | | | | | | | | |
| African American | 1260 | 33.09 | 236 | 45.83 | 1966 | 54.14 | 1094 | 63.46 |
| White | 2213 | 58.11 | 230 | 44.66 | 1382 | 38.06 | 479 | 27.78 |
| Hispanic | 230 | 6.04 | 29 | 5.63 | 204 | 5.62 | 116 | 6.73 |
| Other | 105 | 2.76 | 20 | 3.88 | 79 | 2.18 | 35 | 2.03 |
| Allegations | | | | | | | | |
| Physical/Emotional Abuse | 457 | 12.00 | 49 | 9.51 | 398 | 10.96 | 108 | 6.26 |
| Sexual Abuse | 129 | 3.39 | 20 | 3.88 | 107 | 2.95 | 54 | 3.13 |
| Substance-Exposed Infants | 196 | 5.15 | 46 | 8.93 | 203 | 5.59 | 223 | 12.94 |
| No Prior Indicated Allegation Identified | 280 | 7.35 | 51 | 9.90 | 364 | 10.02 | 266 | 15.43 |
| Neglect | 2746 | 72.11 | 349 | 67.77 | 2559 | 70.48 | 1073 | 62.24 |
| 1st Placement | | | | | | | | |
| Nonrelative Foster care | 1242 | 32.62 | 171 | 33.20 | 1124 | 30.96 | 509 | 29.52 |
| Residential | 249 | 6.54 | 64 | 12.43 | 434 | 11.95 | 345 | 20.01 |
| Juvenile Detention, Runaway, or Hospitalization | 194 | 5.09 | 31 | 6.02 | 320 | 8.81 | 230 | 13.34 |
| Independent, All Other | 154 | 4.04 | 14 | 2.72 | 94 | 2.59 | 23 | 1.33 |
| Relative Care | 1969 | 51.71 | 235 | 45.63 | 1659 | 45.69 | 617 | 35.79 |
| Region Incident Occurred | | | | | | | | |
| Northern | 638 | 16.75 | 97 | 18.83 | 837 | 23.05 | 388 | 22.51 |
| Central | 1731 | 45.46 | 175 | 33.98 | 1004 | 27.65 | 276 | 16.01 |
| Southern | 784 | 20.59 | 99 | 19.22 | 705 | 19.42 | 210 | 12.18 |
| Cook | 655 | 17.20 | 144 | 27.96 | 1085 | 29.88 | 850 | 49.30 |
| Prior Entry | | | | | | | | |
| Indicator of Previous Entry | 401 | 10.53 | 90 | 17.48 | 546 | 15.04 | 484 | 28.07 |

Caseworkers Perceptions of Father Involvement

In the interviews with caseworkers, we asked both about specific cases referred to the IA program and also about their general experiences with respect to trainings or efforts to engage fathers. Their responses to the more general questions, or statements they made, indicate a disparity between the number of cases in which a father was involved in the IA process and caseworkers' perceptions of the number of fathers that participate in the process. According to the data, fathers have participated in the IA in over 50 percent of cases. However, many caseworkers seemed to view father involvement as something of a rarity.

Relative to working with fathers, as you know, statistically I'm certain that you have a very small percentage of the fathers. I can count in my 18 years and I'm thinking maybe 15 fathers that were active out of all of the cases I've had. **[Caseworker #6]**

In my cases a lot of my fathers aren't present. So I haven't had to work with many of them. And the fathers that I do have are either out of state or they've just been kind of handed down to me. I think there's only been—I'm trying to think...maybe about two that have been really involved with my cases that are current. **[Caseworker #36]**

The majority of my cases do not have fathers. I think I may have had a handful that had fathers. One case in particular, the father was not very cooperative, was resistant to services, and blamed the agency as well as everybody else for his lack of participation. Let's see. That was that case. One of my cases was a result of rape, so we don't have any father. Two cases like that. I have one father now, he's a little resistant, but because he still has a criminal history ... Then I have another father who's somewhat cooperative...and then I have another father, who's in Mexico, so there's lack of participation with his particular case because of the distance. **[Caseworker #24]**

This disparity may reflect the fact that the IA interview completion rates pertain only to the roughly 50 percent of placement cases that get referred to the IA program.⁵ The involvement of IA screeners may result in higher interview rates with fathers, since IA intake coordinators or screeners assist in identifying, locating, arranging, and conducting interviews with fathers; however, due to differences in data collection for non-IA cases, we were unable to confirm this. The discrepancy between IA interview completion rates and caseworkers' reports of father involvement also raises questions about

⁵ When the IA program was launched, only *standard* placement cases were referred to the program. DCFS uses *standard* to refer to new cases, not opened for services in the home, but for which a child needs out-of-home placement at the time of case opening; or an adopted child for whom out-of-home placement is required; or a previously closed DCFS case that is reopened based on new findings and for which the child requires a new placement. Data indicate that between 2005 and 2008, *standard* placement cases comprised 46 to 53 percent of all DCFS placement cases. Therefore, an IA was completed for about half of all placement cases during this time period.

whether father involvement extends beyond the initial interviews to ongoing case planning and service engagement, which we explore later in this report. In the next section, we draw on the IA reports from a random sample of interviewed fathers to understand the context and nature of their involvement in child welfare cases.

A Closer Look at Interviewed Fathers

DCFS describes the purpose of the IA interviews with parents, guardians, stepparents, paramours, and other household persons as follows:

The interview will reveal psychosocial history, functioning, and strengths. In addition, interviews will identify problematic behaviors related to substance abuse, sexual abuse, sexually problematic behaviors, domestic violence, developmental issues, mental illness and other mental health concerns.

The information that caseworkers and IA screeners gather in these interviews is then integrated into the final IA report, which caseworkers described as a “living document” or a “roadmap” for the case moving forward. In this section, we draw on a sample of reports to provide detailed information about the circumstances of fathers and the role they play or could play with respect to the family’s involvement with child welfare.

Individual and Case Characteristics

As would be expected with random sampling, the characteristics of the fathers in this sample of 49 records were reflective of the *both parents* and *father only* groups in that a majority of the fathers were white, a majority of the cases involved neglect, and the proportion of cases in which both parents were interviewed was predominant. The detailed information contained in the IA reports augments the characteristics captured in the administrative data to provide a more comprehensive description of these fathers.

- Half of the fathers interviewed were over age 36, while slightly less than half were between the ages of 22 and 35, and a small number of fathers were age 21 or under.

- Three-fourths of the fathers interviewed were biological fathers; the remaining fathers interviewed were stepfathers, paramours, putative fathers, adoptive fathers, and legal fathers.
- More than half of the fathers were residing with the child at the time DCFS took custody, although some of these resident fathers were under legal “no-contact” orders (they were not supposed to be living with the children).⁶ The remaining fathers in the sample were not residing in the child’s home at the time the child entered care.
- Several of the interviewed fathers had children other than those in care with the same mother named in the report, and almost a quarter of the fathers interviewed had fathered other children with someone other than the mother named in the report.
- Two-thirds of the interviewed fathers were married or in a relationship at the time of the interview, although not necessarily with the mother named in the report.
- The vast majority of the perpetrators were mothers or mothers and fathers together. For three quarters of these cases, the charge was neglect. A small proportion of the cases named only the father as the alleged perpetrator, and in those cases almost three-fourths involved physical abuse. In some cases, the family was struggling with a child’s emotional or behavioral issue that led to one or more psychiatric hospitalizations.

Fathers’ Circumstances and Problematic Behaviors

Family dynamics, poverty, unemployment, drugs and alcohol, and social isolation have all been identified as important factors in understanding the etiology of child maltreatment (National Research Council, 1993). Less is known, however, about how fathers fit into this ecological perspective. Several researchers have identified a need to move beyond demographic data, preferably by interviewing fathers and children, in order to fully comprehend the relationships, contributions, and circumstances of fathers whose children are involved in child welfare systems (Dubowitz, 2009; Dubowitz et al., 2001; Guterman & Lee, 2005).

Here, we describe the ecology of fathers interviewed in the IA process as depicted in the screeners’ reports, which are based on information gathered directly from the fathers, their children, and other family members interviewed in the assessment process. Such factors are important not only to

⁶ Fathers’ housing, residency, and household frequently change early in the integrated assessment period. Five fathers were in jail at the time the child was placed in custody, another four fathers were in jail by the time the interviews were conducted.

understand variation in the level or nature of father involvement but also in efforts to target service provision to fathers and successfully engage them in services to meet the child's and family's needs.

Housing

When possible, the caseworker and IA screener try to observe the residence at the time of the interview, noting any safety hazards, whether there is adequate space, and other concerns about the condition of the residence. For over half of the cases in this sample, the father reported or was observed to have a stable and adequate residence. In fewer than one-fifth of the cases, the father was incarcerated at the time custody was taken, and in about half of those cases, the father reported plans to move in with his parents or other relatives after his release. Only three fathers had stable, independent housing but insufficient space for children, although this has been cited as a barrier to being considered as a placement resource (Scalera, 2001).

Cohabitation with adults other than a mother or paramour was noted for just over a third of the fathers interviewed. In the majority of these cases, the father was living with relatives at the time the child was placed in custody, sometimes with the mother as well. In a few more cases, there were other unrelated adults in the home. The financial benefit of living with others was clear as the screeners frequently noted that the father and/or both parents were not paying any rent or sometimes were behind in the rent they were expected to pay. Overall, though, it was often unclear whether living with relatives was supportive or detrimental. In some cases, screeners documented the benefits of having other adults available to provide childcare, and in other cases, they raised concerns about risks due to smoke inhalation, domestic violence, or drug use by other adults in the home.

Education and Employment

Slightly fewer than half of the fathers interviewed dropped out before completing high school. Of those fathers, just over half obtained their GED. For most of the other half of the fathers interviewed, a high school diploma was their highest level of educational attainment. Although some did go on to attend college or trade school, few had a postsecondary degree.

Half of the fathers were employed at the time of the assessment. Aside from current employment status, over a third of the fathers interviewed described a history of unstable and sporadic employment, with brief employment periods and/or repeated job loss, frequently due to periods of incarceration. In many instances, fathers currently unemployed indicated their employment had been recently interrupted by such crisis events as lay-offs, incarceration, or a poor health diagnosis. Finally, a small but notable number (5) of the fathers who were interviewed had served in the military at some point. Three of the five military-involved fathers were discharged for medical reasons and/or reported effects of military service on their functioning (i.e., post-traumatic stress disorder).

Educational attainment and employment status are strongly correlated. Among employed fathers, a large majority have either graduated from high school and/or furthered their education beyond a high school diploma. Only two employed fathers had not achieved a high school diploma or a GED. Of the fathers who were unemployed, half had a high school diploma, one-fifth had less than a high school diploma, and approximately one-third obtained a GED, with several completing the GED while incarcerated.

Financial Security

Employment has important ramifications for—but does not fully explain—the level of financial security that the employed fathers describe during their interview. Approximately one-third of the employed fathers also received public or private financial assistance, primarily from sources other than family members.

Finances were clearly strained for the vast majority of the fathers who were not working. Most unemployed fathers relied heavily on family support for money and/or housing, rather than public benefit programs or other forms of financial assistance. Although it occurred less frequently than with employed fathers, some unemployed fathers did describe reliance on public benefits such as SSI-D (disability payments).

Informal Supports

According to the reports, the overwhelming majority of fathers in this sample indicated they had informal supports on which they could rely, as needed. Those supports were frequently immediate or extended family networks—sometimes their own, sometimes their spouse's or partner's—and the nature of the support included housing, childcare, and financial assistance as well as emotional support.

Domestic Violence

As noted in the methods section of this report, this particular topic was not addressed in a consistent manner across all reports, sometimes due to recommendations made by an attorney for the father, and sometimes due to screeners' inability to compare the self-report to the Law Enforcement Agencies Data System (LEADS) reports. Where LEADS reports were available, they provided several examples in which fathers denied the presence of domestic violence, only to have their LEADS reports show active orders of protection or domestic battery arrests. It is evident that domestic violence was a factor contributing to the child's removal from the home in approximately 10 percent of cases. Furthermore, domestic violence was noted by the screeners as a concern in more than half of the cases where fathers were interviewed.

Substance Abuse

The overlap between parental substance abuse and child welfare are well documented (Ryan, 2006). In more than a third of the cases in the sample, alcohol or drug abuse was a contributing factor to the removal of the children. However, there were stark differences among the perpetrators of child abuse. When mothers were the sole perpetrators of the abuse or neglect, drug or alcohol abuse was a factor in almost two-thirds of the cases. In contrast, substance abuse played a role in less than a quarter of the cases in which both parents or only the father was named as the perpetrator. In three of the four drug-related cases with both parents named as perpetrators, methamphetamine labs were found in the residence.

More than half of fathers had a history of drug and/or alcohol abuse, and a small group of fathers acknowledged an existing problem with substance abuse. Another one-fourth of the sample denied an existing problem with illegal substances, but other information from the IA indicated that there were drug or alcohol related problems. For example, several fathers denied using drugs, but were incarcerated at the time of the interview for trafficking illegal substances. Almost half of the fathers who admit to a history or existing problem with substance abuse began using illegal substances as teenagers or at even younger ages. Most of the fathers who had a history of drug or alcohol abuse described some form of addiction treatment in their past, and many acknowledged they may have a need for continued or new treatment. Although seemingly willing to engage in treatment, few fathers acknowledged the negative effects of their substance abuse on their children and/or families.

Criminal Behavior/Background

The vast majority of the fathers who were interviewed for the IA had positive LEADS results or admitted to having a criminal background. More than half of those fathers had committed violent acts, such as aggravated sexual assault, attempted murder, and weapons offenses.⁷ More than two-thirds of fathers with histories of substance abuse had experienced an arrest or conviction for a crime related to illegal drugs or alcohol abuse. More than one-third of the fathers had spent some time in prison and two of the fathers had notations in their records that they were to be considered “armed and dangerous.”

Nature of Fathers’ Involvement

Numerous studies not specific to child welfare populations point to how factors such as employment, social supports, parental relationship dynamics, legal problems, incarceration, substance abuse, and having biological children in other residences are associated with the degree of father involvement

⁷ According to the LEADS reports, domestic violence offenses and simple assault are not considered violent acts.

(Fagan and Palkovitz, 2007; Garfinkle, McLanahan, Tienda, & Brooks-Gunn, 2001; Laasko & Adams, 2006).

Looking specifically at fathers contacted by child welfare caseworkers, Malm, Zielewski, & Chen (2008) coded nonresident father involvement based on caseworkers' reports of fathers' visits with their children in foster care as well as financial and nonfinancial support, and found greater involvement to be associated with shorter placement duration and higher likelihood of reunification.

In this section, we sought to draw on the comprehensive interviews with fathers as summarized in the IA reports to characterize fathers as *potential resource/positively involved*, *negatively involved*, or *interviewed only*. We then examine whether and how the nature of their involvement aligns with fathers' circumstances and problematic behaviors as described in the previous section.

Characterizing Fathers' Involvement

We use *negative involvement* to describe fathers whose involvement or interactions with the child or family has negative characteristics or insurmountable challenges that might be perceived to be ultimately harmful to the child. Characteristics of cases characterized with negative father involvement include cases where the father is:

- an untreated, convicted sex offender;
- an operator of a methamphetamine lab in the home and unwilling to take responsibility for damages to children or home;
- a perpetrator of intense domestic violence;
- unwilling to participate in treatment for domestic violence or drug abuse;
- in violation of a "no contact" order with the mother or child;
- and/or unwilling to participate in services to the extent that the screener articulates concerns that the father's involvement endangers the child.

The following summary describes an example of the IA report text for a case in which we characterized the father as *negatively involved*:

[FATHER] is mentally unstable, claims to suffer from bipolar disorder, to be on medication... has been threatening hospital staff, has been escorted out by security, has been belligerent, "can be almost dangerous," and is described as "volatile and explosive." ... [FATHER] does not acknowledge the impact of his behavior on [CHILD]. He did not express feelings of empathy for [CHILD] related to the present situation, nor did he express an understanding of the long-term impact this situation may have on [CHILD]. He was unable to acknowledge the fragile medical

state that [CHILD] is in and the necessity of following through with the recommended medical treatments.

For the purpose of this analysis, fathers who met any of the criteria for negative involvement were considered negatively involved. Although few instances were noted in this sample, it is conceivable that a father could meet the above typology but also participate in visitation or articulate an interest in his child’s development.

We used *potential resource/ positive involvement* to describe fathers who were perceived to contribute or have the potential to contribute to the development of a child through a variety of means, such as fathers who

- demonstrate actions that promote contact with the child;
- participate in visitation;
- the screener views as earnestly attempting to bring positive change to the family;
- and/or are legitimate permanent placement options for the child.

An example of text from an IA report for a case in which we characterized the father as *potential resource/ positive involvement* is as follows:

[FATHER] first saw [CHILD] starting at 2 months old, and saw her about ten times [over a 4-month period]. An order of protection was issued ... and expired. Dad now visits [CHILD] approximately every other day, but prior to this DCFS involvement he had limited contact with her. Dad had been living with his mother, but moved into his stepmother’s home so that [his mother] could provide daycare. [FATHER] expressed interest in obtaining custody.

Table 4 provides a breakdown of how fathers were categorized with respect to both the nature of their involvement and their residency status at the time the child was placed with DCFS. In this sample of interviewed fathers, resident fathers were close to evenly split between *negatively involved* and *potential resource/positively involved*; however, the majority of nonresident fathers were considered *potential resource/positively involved*.

Table 4. Nature of Involvement and Residency Status of Interviewed Fathers

| Father Residency | Interviewed Only | Negative | Potential Resource/ Positive | Total |
|-------------------------|-------------------------|-----------------|-------------------------------------|--------------|
| Resident | 1 | 14 | 17 | 32 |
| Non Resident | 1 | 4 | 16 | 21 |
| Total | 2 | 18 | 33 | 53 |

How Do Fathers' Circumstances and Problematic Behaviors Differ According to the Nature of their Involvement?

Having characterized the residency status and nature of involvement for each of the interviewed fathers, the circumstances and problematic behaviors described earlier were reexamined to see if any patterns emerged, and they did. Compared to fathers who were perceived to be a *potential resource or positively involved*, more of the fathers in the *negatively involved* group had left high school prior to obtaining a diploma. The *negatively involved* fathers were also less likely to be employed *and* more of them reported instability in their work history. Their lower education levels, current unemployment, and sporadic employment histories likely contributed to the fact that they were more often described by IA screeners as experiencing financial strain.

With respect to problematic behaviors, the *negatively involved* fathers were more apt to have been convicted of a violent crime and many reported problems with substance abuse. With respect to substance abuse, there were also differences within this group according to residency status. Many of the *negatively involved, resident* fathers minimized their problems with substance abuse during their interviews; few recognized the difficulties they and their families face due to their alcohol and substance abuse and/or the value of treatment. On the other hand, *negatively involved, nonresident* fathers—all of whom had been arrested or convicted of crimes related to controlled substances—were more forthcoming about problems with addictions. All four of the fathers in this group had been arrested or convicted of crimes related to controlled substances.

By virtue of the dichotomous categorization of positively and negatively involved fathers, one can deduce that fathers who were considered to be a *potential resource/positively involved* had patterns opposite those noted above for *negatively involved* fathers. However, a few additional observations are worth noting. In many of the cases where there is a *potential resource/positively involved, resident* father, the reason for removal includes child psychiatric problems, concerns about parental mental illness, concerns about parental developmental delays, and/or failed adoption. Also, despite the fact that a number of *potential resource/positively involved* fathers did not graduate from high school, many more in this group obtained their General Educational Development (GED) certificate (compared to those *negatively involved* fathers who did not graduate from high school).

From Interviewing to Intervening

Research indicates that not only are fathers frequently excluded from investigations and assessments in child welfare, but they are also frequently absent in interventions or identified as challenging to engage (O'Donnell et al., 2005; Scott & Crooks, 2006). In a recent *Child Maltreatment* special issue dedicated to fathers and child maltreatment, several authors call for further research on engagement of fathers in services, suggesting that not only is it important to include fathers, but that including and successfully engaging fathers might lead to more effective interventions (Dubowitz, 2009; Lee, Bellamy, & Guterman, 2009). In this section, we draw on data from the sample of IA reports as well as service plans for those cases, examining how information gathered in the assessment process might relate to service planning and engagement. We also draw on caseworkers' comments regarding service recommendations for fathers on their caseloads and their experiences in engaging fathers in services.

IA Screeners' Assessments of Fathers' Willingness to Engage in Services

Of the 53 fathers interviewed in the sample of IA reports reviewed, just under one-third had any mention of current or past involvement in counseling, mental health treatment, or other treatment services. Of those that did, a handful reported that their service involvement was prior to the current DCFS case, mostly counseling that was viewed as "helpful;" one father reported previously completing parenting classes that mainly covered "what [he] already knew." Resident fathers were more apt than nonresident fathers to be involved in services prior to or at the time of the assessment.

A prominent theme in the review of assessment reports was the screeners' notation that the father was willing to engage in services, sometimes including comments regarding insights into or acknowledgement of the problems:

[father] appears to want treatment services not only for himself but his marriage, son, and family. He is concerned about the negative impact his choices and behaviors have on his family. He wants to be better equipped to have more meaningful and healthy relationships.

[father] appeared willing to participate in whatever services are determined to be needed to address his family's needs. He appeared open about poor judgments and decisions he made.

[father] acknowledged that he has difficulty regulating his anger, which led to the current DCFS involvement. He is willing to receive anger management and therapeutic services.

[father's] participation in the IA interview demonstrated a desire to begin the process to address his significant issues. He appears to be intelligent and has some insight into how his coping strategies such as marijuana addiction and his violent outbursts, and how they have negatively affected his parenting relationships.

Statements such as those above appeared in over a third of the cases, more often cases with a resident father. In only one case did the screener comment on a father's lack of insight into his problems.

Although [father] has been taking steps to address his substance abuse issues, it is unknown if he understands the significant impact his substance abuse has on his parenting or the seriousness of his addiction.

The importance of fathers' willingness to or interest in being involved was also noted by caseworkers.

The fathers need to want to be involved. And to that end, should they want to be involved, I am more than willing, and I think that most of my coworkers are more than willing to go the distance to get them involved and to provide them with the necessary services. **[Caseworker #6]**

My other father, he wants to take custody of the baby. So we're just having him... do the services... And he is... very intelligent and very willing and cooperative to work with us... He is real positive. **[Caseworker #36]**

What, then, does this suggest with respect to fathers who are not immediately willing or open to services? Our more in-depth report data may be limited in addressing that question in that all these fathers participated in interviews, and willingness to participate in an interview may correspond with willingness to engage in services. Beyond a willingness to engage, what happens when fathers do engage in services? To what extent do those services fit with or recognize their circumstances and perspectives and address their needs while eliciting changes needed to improve family dynamics and/or assure child safety? These are important questions to answer as the child welfare field grapples not only with how to best serve these fathers but also with evaluating the effectiveness of services provided.

Alignment between Assessed Needs and Service Plans

In evaluating the implementation of the IA program, we found that most caseworkers interviewed articulated an understanding of the program that extended beyond interviewing and producing the IA reports, emphasizing how the assessment connected to the development of service plans (see Smithgall et al., 2009). However, research conducted by one of the Integrated Assessment contract agencies (Harlow & Mizan, 2008) indicates 20 percent of service plans omitted important recommendations included in the IA report, while 46 percent of service plans incorporated a new recommendation not previously mentioned in the IA report. Among those omitted recommendations, therapy recommendations were often left out of service plans. Their analysis of recommendations made specifically for secondary parents, 61 percent of whom are fathers or paramours, revealed similar proportions of omitted and added recommendations in the service plan. In this study, we applied a similar approach, focusing specifically on integrated assessments in which a father was identified and interviewed. We distilled from this analysis the types of recommendations most frequently noted, and also whether they matched, were added to the service plan, or were missing from the service plan. (Please refer to Appendix B for a more detailed breakdown of individual types of recommendations included in each of these categories.)

As noted earlier in this report, there were 49 cases in this sub-sample and 53 fathers were interviewed; however, there were 67 fathers represented in the recommendations and service plans. That is, 14 fathers of children in these families were not interviewed, yet screeners or caseworkers included them in the recommendations. The majority of the recommendations made for these 14 fathers were restricted to participating in the IA or communicating with the agency.

Recommendations for therapy and visitation were made for 78 percent of the fathers, which roughly corresponds to the proportion of fathers who were interviewed as part of the IA (see Table 5). To the extent that therapy recommendations were missing from service plans, this often reflected recommendations around family therapy, sometimes accompanied by qualifying statements such as “when approved by mom’s therapist” or “once domestic violence issues are addressed.” Other frequent recommendations were related to classes/education (includes parenting and anger management classes) and substance abuse, with education recommendations often missing from the service plans. Recommendations for further assessment were made for a third of the fathers and more often than not were present in both the IA and the service plans. On the other hand, recommendations related to finances and employment, and housing were also present for a third of the fathers, but frequently because they were added to the service plan (and not in the IA). Another type of recommendation often added to the service plans but not present in the IA was “self-improvement”—this would include such things as “take responsibility for impact of behavior on children.”

Table 5: Comparison of Recommendations for Fathers in the IA and the Service Plan (SP)

| Recommendation Category | Added to SP | Matched IA and SP | Missing from SP | Percent of fathers with this recommendation in either the IA or SP (N = 67) |
|--------------------------------|--------------------|--------------------------|------------------------|--|
| Therapy | 12 | 39 | 21 | 77.6 |
| Classes/Education | 13 | 16 | 19 | 53.7 |
| Substance Abuse | 21 | 22 | 6 | 47.8 |
| Visitation | 13 | 35 | 11 | 77.6 |
| Communication | 45 | 3 | 8 | 73.1 |
| Further Assessment | 5 | 11 | 7 | 31.3 |
| Health | 2 | 2 | 1 | 6.0 |
| Finances & Employment | 17 | 5 | 2 | 34.3 |
| Housing | 17 | 6 | 1 | 32.8 |
| Cultural | 0 | 2 | 1 | 4.5 |
| Legal | 8 | 6 | 1 | 20.9 |
| Self-Improvement | 8 | 0 | 1 | 13.4 |

For many of the categories that might be considered reflective of more concrete needs, such as housing or employment, the recommendations were frequently stated in terms that the father should secure such things. For example, one popular recommendation is “Father will secure and maintain a stable income for his family.” While 23 fathers received such recommendations, only 2 fathers received a recommendation for specific services such as job training.

Caseworkers’ Experiences with Fathers and Services

The types of services most frequently mentioned in the assessment recommendations and service plans described in the previous section also came up in the interviews with caseworkers. In many of the case examples that were discussed in the interviews, caseworkers listed a number of different types of additional assessments and services for an individual father.

Man I’m telling you, he’s doing well. We got him, he’s in individual therapy. He’s doing anger management. There were no substance abuse issues. Right. And also doing parenting.

[Caseworker #23]

We thought counseling would be beneficial for him. We actually recommended a psychiatric evaluation, parenting classes, substance abuse assessment with more likely treatment, but the assessment just to determine what level of treatment. **[Caseworker #12]**

The father was recommended to comply with court orders, comply with random urinalysis drops. Should they be dirty, complete an evaluation for substance abuse. He, because of his previous case, had some carryover tasks, the basic—well, I don't need to get into all those tasks. He was recommended for sex offender treatment and then once the—or the sex offender evaluation and the sex offender treatment because we already had evaluations and no, he needed it, and once the treatment was complete, then we would refer him to a parenting assessment, but if he wasn't going to get okay in his sex offending department, the parenting assessment's a moot point.

[Caseworker #19]

The fathers being referred to in these cases presumably fit a profile similar to the one discussed in the section on circumstances and problematic behaviors, with many facing unemployment or financial strain. This raises questions about the logistics of arranging for participation in multiple services and consistently engaging fathers for the duration those services are needed. The fact that many services are being recommended at the same time for an individual father also raises questions about coordination across providers or whether there is any evidence on service effectiveness to guide the order in which these services are put in place.

Barriers to Providing Certain Services to Fathers or Services to Certain Fathers

The previously noted high levels of unemployment and high incidence of cohabitation were reflected in the fact that employment and housing recommendations were often added to service plans and not originally included in integrated assessments. One caseworker shared some thoughts on why these types of recommendations in particular may not be consistently included in either the service plan or the integrated assessment.

I just recently had a case where the screener wanted her to have vocational help and assistance finding housing and that's just not what we do for natural parents. So we had to leave those services out of the service plan and just offer the services that we had available... I think it was the same type of situation for natural dad because he wasn't in school, so I'm sure there was some recommendations for like vocational assistance... We can offer him resources like, "Go here, go here," but there's no specific service... that he can go to on a weekly basis. He engages the services like counseling and parenting classes and stuff like that... Mostly those [services other than counseling and parenting classes] are not necessary as far as the court is concerned to have the children returned to the home... [For example,] we can return a child to the home even though the mother is not working. She just has to have some source of income... so we know that the child

will be taken care of. Things like vocational assistance... we can offer resources but there [are] no specific service[s]... the judge... might question me in court and the only thing I can say is... my agency doesn't offer the service specifically, but what we can do is offer the parent resources... But usually, [the court is] more focused on things like parenting, substance abuse treatment, domestic violence services, the major [services] are usually what the court wants to see done before you send the child back... Most of the services are safety-related as far as DCFS is concerned. **[Caseworker #41]**

Several caseworkers felt there just were not as many services for fathers as there were for mothers, perhaps requiring a greater level of effort to be put forth by fathers who are interested in making changes and gaining or re-gaining custody of their child.

...My own personal opinion, the system is not geared for the fathers, so I kind of let the father know, "You need to do this, and you need to stay on top of your game if you want to get your child back." Now I actually did have a child returned to her father, but he was determined, so that was a good thing. But you have more resources for women, so it's... hard. **[Caseworker #30]**

Caseworkers also described challenges in getting services to fathers who were incarcerated, an issue that was again fairly prevalent among our random sample of interviewed fathers.

The most that they would do [in jail] is they prescribed him Xanax or something for being anxious, but no, they don't provide any kind of substance abuse treatment, or mental health treatment, or anything like that when they're in [jail]. **[Caseworker #37]**

Despite all the apparent barriers, a number of workers were able to identify fathers who were active participants in services, and in such cases, the workers spoke of how fathers that are involved are a positive resource for the children or family.

I have a father right now where the mother is absent... The father is the one that's doing everything and... meeting with him is actually a good thing because we're able to... give him resources...to help him take care of this baby properly, and that also reassures us that he is actually gonna be the appropriate parent for the baby, to take care of the baby. **[Caseworker #33]**

From Reaching Fathers to Reunifying Children and Families

Despite the systemic bias and barriers present in this study as well as others, some research indicates that children with highly involved nonresident fathers—particularly those who provide nonfinancial support—have higher likelihood of reunification (Malm et al., 2008). In this section, we return to the four categories we created based on whether parents completed IA interviews: both parents interviewed, mother only interviewed, father only interviewed, and neither parents interviewed. Taking into account factors such as age, race, type of maltreatment and geographic location that predicted which cases would fall into these four groups, we examine rates of reunification. We also take a closer look at the subsample of IA reports and the screener and worker prognosis for reunification. Finally, we present statements from caseworkers that confirm an emphasis on service completion and the existence of a perceived bias toward reunification with mothers.

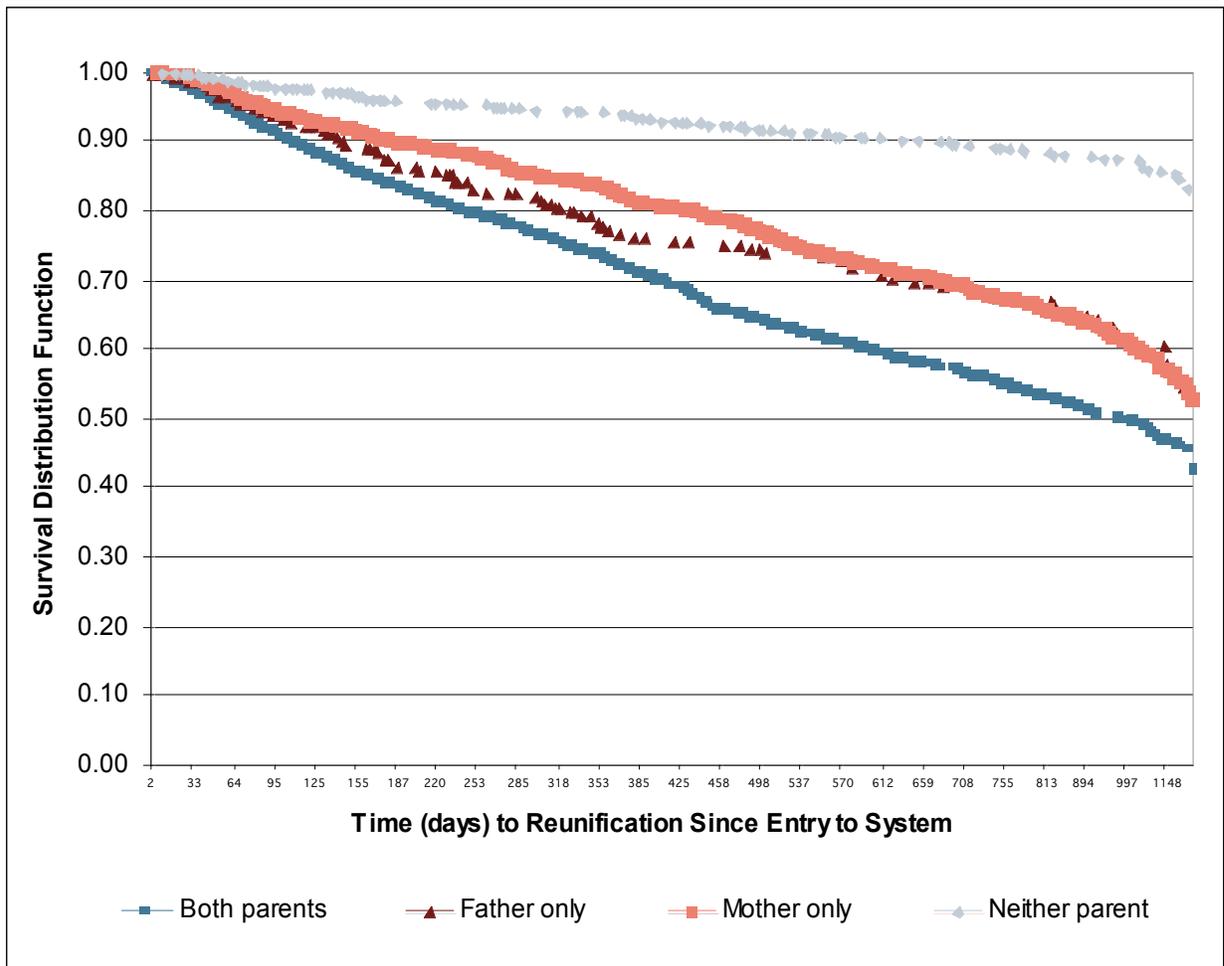
Reunification Is Higher among Children whose Fathers Were Interviewed

Not only are the child and case characteristics different for the four groups based on parent interview completion, but the likelihood of reunification is significantly different also. Over the 2005 to 2008 period, 38.2 percent of children in the group in which both parents completed IA interviews were reunified; this compares to 29.1 percent of children in the group in which only the father completed an IA interview, 28.7 percent of children in the group in which only the mother completed an IA interview, and 9.9 percent of children in the group in which neither parent completed an IA interview.

In a survival analysis controlling for age, race, type of maltreatment, initial placement type, prior foster care placement, and region, for children in the group in which both parents were interviewed the likelihood of reunification was 3.2 times greater than for children in the group in which neither parent was interviewed. The likelihood of reunification among children in both of the groups in which only one parent was interviewed was 2.4 times greater than for children in the group in which neither parent

was interviewed. While differences between both parents, one parent, and neither parent were statistically significant, there were no significant differences between the groups in which only the mother was interviewed vs. only the father was interviewed (See Appendix C for full results of the model). Figure 3 depicts these differences in reunification along a time continuum, where the X-axis shows the timeline from initial placement to reunification, and the lines in the graph decline as cases are closed for reunification.

Figure 3. Kaplan-Meier Survival Curves, by Completion of Parent Interviews



The data used for these models do not indicate which parent the child is reunified with. The group of cases in which both parents are interviewed may include nonresident fathers, much like the random sample of cases from this group in which IA reports indicate that approximately 40 percent of the fathers interviewed were nonresident fathers, the overwhelming majority of whom were considered to be positively involved with their child(ren).

Assessment Report Prognosis for Reunification Often Leaves Fathers Out

A prognosis about the likelihood of family reunification should be made upon completion of the integrated assessment and is included in the IA report. In comparison to other sections of those reports, the content of the Prognosis section varied dramatically from case to case, and in some instances the prognosis for reunification was altogether absent. Reports also may have included a rationale for the prognosis, including an assessment of the psychological state of the parent(s), the perceived likelihood that the parent(s) would participate in services, and/or an assessment of the parent(s) ability to meet minimum parenting standards. In several cases, the IA report made a prediction about whether the parent(s) would participate in services and/or improve their parenting skills, but no specific prognosis for reunification.

Approximately one-quarter of the fathers were described as having a good/favorable prognosis for reunification with their children. All but one of the fathers with a good or favorable prognosis was considered a *potential resource/positively involved* and most were *residents* at the time of the child was taken into DCFS custody. For almost half of the fathers interviewed in the cases in which we reviewed IA reports, the prognosis for reunification was guarded or poor. In the remaining cases in this sample, the fathers were not discussed at all in the prognosis section of the report. The great majority of the fathers who were not discussed were *negatively involved, resident* fathers. However, in a few cases the prognosis for the *potential resource/positively involved* father was not described at all, including one case where the father was actively seeking custody of the child.

Among cases with resident fathers, the prognosis generally described both parents, rather than describing the prognosis for reunification for each parent separately. However, in four cases, the prognosis of the resident father was different than the prognosis of the resident mother. Most of the IA reports in which nonresident fathers were interviewed described the mother as the first priority for reunification. In several of the cases where the mother was the more likely candidate for reunification, the nonresident father was also positively involved and engaged with the child. Among the cases with nonresident fathers, very few were viewed as the more-likely parent for reunification.

In a few cases, fathers were described as having a good prognosis for reunification with their children, yet it was also noted in the report that the child did not have an interest in reunification with their father. It was unclear how the author would suggest treating the child's preference in the recommendation.

Is There a Systemic Bias toward Reunifying the Child with the Mother?

The apparent biases that emerged from the analysis of the IA reports—whereby mothers were described as the first priority for reunification or the prognosis for reunification with the father was not addressed at all—also emerged in statements caseworkers made in the interviews. Several caseworkers perceived or articulated a systemic bias toward reunifying the child with the mother rather than the father. They

also noted some challenges—such as having sufficient space—that may thwart fathers even when they complete the recommended services.

When most cases come in, they're either poverty or divorce, single mothers, you know what I mean, and so usually the mother has the child. Therefore, the father really hasn't had any involvement, and so more of the concentration, I believe, is stressed on putting the child back in the home that it came from, which is usually the mom. Therefore, dads kind of get [left] on the wayside. **[Caseworker #14]**

Dad may have a little bit more success in services and in having them returned home with him, yeah, I think that's it. Sounds about right. She's one of those cases where she does everything and so when push comes to shove, I'll have no choice but to recommend that her children return to her but my gut is telling me they might be back in the system sooner than later. ...The biggest issue for dad is if they were returned to him, he doesn't have the space for 'em. **[Caseworker #41]**

For my one case the child was taken away from the father. So that one was real easy because there was no mother involved. So he was the primary parent. But let's see, my other father, he wants to take custody of the baby. So we're just having him, you know do the services. And we kind of say that it's like a race to the finish line. Whoever finishes the services first. And he is real...he's very intelligent and very willing and cooperative to work with us. So, you know he is real positive.

[Caseworker #36]

Beyond noted changes in behavior or attitudes that may have contributed to the initial determination of risk, caseworkers' statements indicate that the willingness to participate in and complete services is the driving factor in assessing the prospects for reunification. This may tie in, then, to the previous finding suggesting an association between willingness to engage in the IA interview and willingness to participate in services, creating the sense that while not all fathers engage with workers and services, those that do have better prospects for reunification.

I don't have very many fathers that have ever stepped forward...those that have I can almost say without equivocation that those kids went back home. **[Caseworker #6]**

Conclusions

This study augments the existing knowledge regarding father involvement and child welfare in that it draws on data produced as part of an innovative statewide family assessment initiative with an explicit emphasis on interviewing fathers, both resident and nonresident. The Illinois Integrated Assessment (IA) process is designed to provide better information about child and family strengths, support systems, and service needs, and thus collects in-depth information on fathers' circumstances as well as mothers'.

The fathers who participated in these assessment interviews do not represent a homogeneous population, and drawing on the assessment reports, we were able to group fathers based on whether or not they shared a residence with the child and on the character of their involvement or interactions with the child. Although nearly all of the nonresident fathers were described as being positively involved or a potential resource for the child, the same was not true of all resident fathers. Thus, the three groups of fathers that emerged from this work are those fathers who are resident fathers who are *a potential resource/positively involved*, resident fathers who are *negatively involved*, and nonresident fathers who are *a potential resource/positively involved*. Examining these groups more closely, it is clear that a differentiated approach to engaging fathers is needed, as well as an array of services that best meets their particular circumstances.

Consistent with prior research, the *potential resource/positively involved*, nonresident fathers may represent a substantial resource for children. Despite their contributions or potential to contribute to their child's well-being, some of these fathers also faced resource constraints that prohibited them from assuming a custodial role, and child welfare caseworkers seemed to indicate that few resources were available to meet these fathers' needs. Efforts to draw on these fathers' extended resource networks and to support their ongoing involvement in their children's lives may have significant payoff.

Potential resource/positively involved, resident fathers often were members of families with unusual circumstances, such as cases where the mother or child was suffering from mental illness. In many of these families, the child welfare system has an opportunity to provide services and supports to resolve crisis situations, leading to reunification. In addition, all four step-fathers in the sample were positively

involved and residents. The legal commitment to partnership in a marriage with step-children may indicate meaningful differences in engagement and supportive capacity as compared to the level of commitment to partners who are paramours.

Perhaps the most challenging group is the *negatively involved/resident* fathers. This was the group who experienced a number of difficulties, including failure to complete high school or unemployment or sporadic employment. Domestic violence, substance abuse, and criminal behaviors were also prevalent among this group. Although many of these fathers had some assets, such as their role in securing stable housing, many of them did not understand or acknowledge the impact of their behaviors on their child or the rest of the family. These fathers may be more difficult to engage in services and reunification efforts. When considering how to engage fathers who are seen as a negative influence in the family and on reunification efforts, caseworkers must be attuned to and equipped to address the dynamics of the entire family and the potential resistance they may encounter.

Aside from direct financial or in-kind supports they might offer and regardless of the nature of their own involvement, many of the interviewed fathers also provided additional resources through immediate or extended family networks, sometimes serving as a placement option, other times offering additional assistance such as childcare and financial or emotional support. Perhaps reflecting fathers' contribution to the overall resources available for children, when both parents were interviewed as part of the IA, children were significantly more likely to be reunified than when only one or neither parent was interviewed. Thus, the importance of engaging fathers early in the assessment process cannot be understated.

Sustaining that engagement through services and interventions, however, warrants further attention. Despite the in-depth information gathered regarding their circumstances and behaviors, and caseworkers' reports that many fathers were willing to engage in services, and the degree to which the assessments, service plans, and services themselves are reflective of and responsive to fathers' needs and circumstances, was not clear. There was an overwhelming tendency to recommend therapeutic services and to require ongoing communication with the child welfare agency. Along with therapeutic recommendations to address behaviors and relationship dynamics, fathers were often required (or reminded) to comply with probation requirements and also undergo further assessments. At the same time, although many of these fathers need housing and employment, caseworkers themselves acknowledged a paucity of resources or an inability of the child welfare system to leverage resources to address these problems.

In recent years, a number of efforts have been launched at both the state and federal levels, recognizing that fathers need supports not only to confront the immediate crises that precipitate child welfare involvement, but also to address deeper barriers to both engagement and progress, such as poverty, chronic unemployment, limited education or training, and criminal histories (Miller & Knox, 2001). Illinois is one of many states working to develop appropriate responses to these issues, as evidenced by

the creation of Paternal Involvement Centers (PICs). These centers are designed “to help fathers move more successfully through the DCFS system” by providing a wide range of services, often including not only literacy programs, GED or educational assistance, transportation, job placement services, training on parental rights, and visitation centers—but also counseling services, substance abuse education, and other programs to address clinical issues.

Although PIC centers, with their wide range of programs and services, appear to be a reasonable fit for the needs and circumstances of many of the fathers assessed in this study, further evidence is needed regarding the uptake of services, sustained engagement, and effectiveness in achieving change through these centers or other service systems. Caseworkers play a key role in making linkages, and based on findings from this study, they may need to take a stronger role in monitoring not only the follow-through with referrals but also the levels of engagement and the extent to which the interventions are appropriately addressing the identified needs and concerns of these fathers.

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Appendix A: Factors Associated with Interviewing Neither, One or Both Parents

Age: The older a child is, the more likely he/she is to be in the groups other than our reference group, the group where both were interviewed.

Race/Ethnicity: Blacks, in contrast to their white counterparts, are more likely to be in the groups other than our reference group, the group where both were interviewed. Hispanics are more likely to be in the group where neither was interviewed than our reference group; other races are more likely to be in the group where a father alone was interviewed than our reference group.

Region: Children from central, and southern DCFS regions are more likely to be in our reference group than are children in Cook. There is no difference between northern and cook regions.

Placement: Children placed in nonrelative foster homes, in contrast to their counterparts placed in kinship settings, are more likely to be in the groups where a mother alone was interviewed or where neither was interviewed, compared to our reference group; the same explanation holds for children placed in residential settings or children who experienced negative events. By comparison, children residing in independent settings, in parents' home initially or all other settings, were less likely to be in the groups other than our reference group. In other words, children in kinship settings, in contrast to their counterparts residing in independent settings, in their parents' home initially or all other settings, are more likely to be in the groups other than our reference group.

Allegation: Children placed out-of-home for physical/emotional abuse, in contrast to their counterparts placed out of home for neglect, are less likely to be in the group where neither parent was interviewed than the reference group. An opposite story holds for children placed for substance abuse infants: Substance abuse infants are more likely to be in the groups other than the reference group. The allegation reason Sexual Abuse did not differ from the reason Neglect in differentiating between the

interviewee groups. Finally, children with no prior indication of maltreatment, in contrast to their counterparts placed out-of-home for neglect, were more likely to be in the group where neither parent was interviewed.

Table 6. Factors Associated with Interviewing Neither, One, or Both Parents

| Variable (Reference group) | Interviewed (vs. Both parents) | Odds Ratio | | |
|----------------------------|-----------------------------------|-------------|--------------|--------------|
| | | Odds Ratio | Lower 95% CI | Upper 95% CI |
| Age (0) | | | | |
| 1–5 | Father alone | 1.38 | 1.00 | 1.89 |
| | Mother alone | 1.33 | 1.16 | 1.53 |
| | Neither | 0.89 | 0.73 | 1.09 |
| 6–13 | Father alone | 2.38 | 1.76 | 3.24 |
| | Mother alone | 1.83 | 1.59 | 2.11 |
| | Neither | 1.63 | 1.35 | 1.98 |
| 14–20 | Father alone | 3.38 | 2.41 | 4.75 |
| | Mother alone | 1.69 | 1.42 | 2.02 |
| | Neither | 3.80 | 3.09 | 4.68 |
| Race (White) | | | | |
| Black | Father alone | 1.59 | 1.28 | 1.96 |
| | Mother alone | 1.59 | 2.01 | 2.49 |
| | Neither | 1.59 | 2.31 | 3.10 |
| Hispanic | Father alone | 1.14 | 0.74 | 1.74 |
| | Mother alone | 1.31 | 1.06 | 1.62 |
| | Neither | 1.83 | 1.40 | 2.38 |
| Others | Father alone | 1.78 | 1.08 | 2.95 |
| | Mother alone | 1.18 | 0.87 | 1.60 |
| | Neither | 1.32 | 0.87 | 1.10 |
| Region (Cook) | | | | |
| Northern | Father alone | 0.84 | 0.61 | 1.14 |
| | Mother alone | 1.14 | 0.97 | 1.33 |
| | Neither | 0.76 | 0.63 | 0.91 |
| Central | Father alone | 0.55 | 0.42 | 0.73 |
| | Mother alone | 0.49 | 0.42 | 0.57 |
| | Neither | 0.19 | 0.16 | 0.24 |
| Southern | Father alone | 0.70 | 0.51 | 0.97 |
| | Mother alone | 0.83 | 0.70 | 0.98 |
| | Neither | 0.34 | 0.27 | 0.42 |

| (reference group in parentheses) Placement (HMR) | Interviewed (vs. Both parents) | Odds Ratio | | |
|--|---|-----------------------|-------------------------|-------------------------|
| | | Odds Ratio | Lower 95% CI | Upper 95% CI |
| Non-relative foster care | Father alone | 1.17 | 0.95 | 1.45 |
| | Mother alone | 1.12 | 1.01 | 1.29 |
| | Neither | 1.41 | 1.22 | 1.63 |
| Residential care | Father alone | 1.25 | 0.88 | 1.76 |
| | Mother alone | 1.38 | 1.14 | 1.67 |
| | Neither | 1.52 | 1.23 | 1.89 |
| Juvenile Detention, Runaway, or Hospitalization | Father alone | 0.93 | 0.61 | 1.43 |
| | Mother alone | 1.61 | 1.31 | 1.98 |
| | Neither | 1.55 | 1.22 | 1.98 |
| Independent settings, Home of parents, all other settings | Father alone | 0.66 | 0.37 | 1.16 |
| | Mother alone | 0.67 | 0.51 | 0.88 |
| | Neither | 0.39 | 0.24 | 0.62 |
| Allegation (Substantial risk of harm) | | | | |
| Physical/emotional abuse | Father alone | 0.81 | 0.59 | 1.12 |
| | Mother alone | 0.87 | 0.77 | 1.01 |
| | Neither | 0.49 | 0.39 | 0.62 |
| Sexual abuse | Father alone | 0.87 | 0.53 | 1.44 |
| | Mother alone | 0.81 | 0.61 | 1.06 |
| | Neither | 0.77 | 0.54 | 1.10 |
| Substance-exposed infant | Father alone | 2.78 | 1.86 | 4.14 |
| | Mother alone | 1.30 | 1.03 | 1.63 |
| | Neither | 2.90 | 2.26 | 3.73 |
| No prior indication | Father alone | 1.09 | 0.78 | 1.52 |
| | Mother alone | 1.18 | 0.99 | 1.40 |
| | Neither | 1.43 | 1.17 | 1.76 |

Bold text indicates significance at $p < 0.05$

Appendix B: Comparison of IA and SP Recommendations

Table 7. Comparing Recommendations Made for Fathers in IA Reports and Service Plans (SP)

| Type of Recommendation | | Added to SP | Matched | Missing from SP | Total |
|-------------------------------|--|--------------------|---------------------|------------------------|--------------|
| | | (not in IA) | (in both SP and IA) | (in IA) | |
| Therapy | Individual therapy | 5 | 21 | 6 | 32 |
| | Family therapy | 0 | 10 | 9 | 19 |
| | Couples therapy | 1 | 4 | 1 | 6 |
| | Psych Eval | 5 | 5 | 3 | 13 |
| | Domestic Violence | 3 | 10 | 4 | 17 |
| | Other therapy (Inpatient psych, Sex abuse perp therapy, etc.) | 3 | 2 | 2 | 7 |
| Education | Parenting Classes | 7 | 13 | 10 | 30 |
| | Parent Support, 1-on-1 | 0 | 1 | 4 | 5 |
| | Continuing Ed (incl GED) | 0 | 0 | 1 | 1 |
| | Anger Management | 4 | 4 | 1 | 9 |
| | Other Adult Education | 4 | 2 | 4 | 10 |
| | Monitor School Progress/Comply with School Expectations | 1 | 0 | 1 | 2 |
| Substance Abuse | Substance Abuse Evaluation and Recommendations | 7 | 15 | 3 | 25 |
| | Substance Abuse In- or Out-Patient Treatment | 2 | 8 | 0 | 10 |
| | Substance Abuse Follow-up (AA, Aftercare, Coaching, Sponsor, etc.) | 6 | 3 | 1 | 10 |
| | Toxicology Screening | 15 | 4 | 3 | 22 |

| | | Added to SP | Matched | Missing from SP | |
|----------------------------------|--|--------------------|----------------|------------------------|----|
| Visitation | Supervised Visitation | 6 | 32 | 9 | 47 |
| | Unsupervised Visitation | 0 | 2 | 2 | 4 |
| | Use Positive Parenting Skills at Visitation | 3 | 0 | 0 | 3 |
| | Must be Sober at Visitation | 1 | 0 | 0 | 1 |
| | Visitation Other (Phone contact, written contact, etc.) | 3 | 1 | 0 | 4 |
| Communication | Communicate with Agency/Caseworker | 31 | 0 | 3 | 34 |
| | Provide Documentation | 8 | 0 | 0 | 8 |
| | Sign Release | 30 | 1 | 0 | 31 |
| | Communicate with Service Providers | 6 | 0 | 3 | 9 |
| | Communication with Family Members/Attend Family Team Meeting | 0 | 2 | 2 | 4 |
| Further Assessment | Developmental Screening | 1 | 1 | 0 | 2 |
| | Sex Abuse Assessment | 1 | 2 | 0 | 3 |
| | Paternity Test | 0 | 3 | 0 | 3 |
| | Criminal Background | 0 | 0 | 5 | 5 |
| | Participate in IA | 3 | 5 | 2 | 10 |
| Health | Routine Medical Care (CHE, Well visits, Vision, Hearing, etc.) | 1 | 0 | 0 | 1 |
| | Follow-up Medical Care (Ongoing care for specific diagnosis, Specialty care, etc.) | 2 | 1 | 0 | 3 |
| | Immunizations | 1 | 0 | 0 | 1 |
| | Dental | 0 | 0 | 1 | 1 |
| | Medication (Given Rx, Monitor meds, etc.) | 0 | 1 | 0 | 1 |
| Finances & Employment | Secure Income/Employment | 16 | 4 | 0 | 20 |
| | Pay Bills | 1 | 0 | 0 | 1 |
| | Job Training | 0 | 1 | 1 | 2 |
| | Secure Other Finances (Public Assistance, WIC, etc.) | 0 | 0 | 1 | 1 |

| | | Added to SP | Matched | Missing from SP | |
|-------------------------|---|--------------------|----------------|------------------------|----|
| Housing | Secure/Maintain Stable Housing | 11 | 5 | 1 | 17 |
| | Maintain Appropriate Environment (Clean, Safe, etc.) | 11 | 1 | 0 | 12 |
| | Provide Structure, Routines, and Refrain from Corporal Punishment | 2 | 0 | 0 | 2 |
| Cultural | Bilingual (Materials & Providers) | 0 | 2 | 0 | 2 |
| | Cultural Competency (Needs bicultural or culturally competent providers) | 0 | 1 | 1 | 2 |
| Legal | Comply with Probation Terms and Requirements | 5 | 1 | 0 | 6 |
| | Follow Criminal Court Orders | 2 | 5 | 1 | 8 |
| | Present to Court | 1 | 0 | 0 | 1 |
| Self-Improvement | Self-Improvement (“accept responsibility for behavior,” “lose weight,” “behave age-appropriately,” “refrain from threatening behavior,” etc.) | 8 | 0 | 1 | 9 |

The following recommendations were made only for children, mothers, or caregivers and are therefore not represented in this table: Play therapy, Enroll in school/Evaluate school placement, Related services (Speech, OT, PT, etc.), Early childhood program, Other child education, Other substance abuse (Seek related medical treatment, remain sober, etc.), Bonding/attachment assessment, Independent life skills assessment, Create and maintain budget, Comply with rules at home, Provide for basic needs (Clothing, Food, Own bed, etc.), Day care, Supervision at home, Mentoring, Extracurricular activity, Physical activity, Social activity, Volunteer opportunity, Foster parent licensure, Seek legal protection, and Respite services.

Appendix C: Survival Analysis of Reunification

Table 8. Survival Analysis of Reunification by Completion of Parent IA interviews

| Variable (Reference group) | Parameter Estimate | Standard Error | Chi-Square | Pr > ChiSq | Hazard Ratio |
|---|--------------------|----------------|------------|------------|--------------|
| Age (0) | | | | | |
| 1 to 5 | 0.29 | 0.06 | 23.28 | <.0001 | 1.33 |
| 6 to 13 | 0.41 | 0.06 | 45.88 | <.0001 | 1.50 |
| 14 to 20 | 0.16 | 0.08 | 4.06 | 0.0440 | 1.17 |
| Region (Cook) | | | | | |
| Northern | 0.71 | 0.07 | 94.10 | <.0001 | 2.04 |
| Central | 0.81 | 0.07 | 132.05 | <.0001 | 2.26 |
| Southern | 1.07 | 0.08 | 204.03 | <.0001 | 2.92 |
| Race (White) | | | | | |
| African American | -0.17 | 0.04 | 15.21 | <.0001 | 0.84 |
| Hispanic | 0.05 | 0.09 | 0.38 | 0.5376 | 1.05 |
| Other | -0.07 | 0.13 | 0.28 | 0.5961 | 0.94 |
| Allegation (Substantial risk of harm) | | | | | |
| Physical abuse | 0.23 | 0.06 | 15.31 | <.0001 | 1.26 |
| Sexual abuse | -0.37 | 0.12 | 9.08 | 0.0026 | 0.69 |
| Substance exposed infant | -0.38 | 0.11 | 11.43 | 0.0007 | 0.69 |
| No indicated allegation | -0.31 | 0.078 | 16.03 | <.0001 | 0.74 |
| Placement (HMR) | | | | | |
| Nonrelative foster care | -0.16 | 0.04 | 14.64 | 0.0001 | 0.85 |
| Residential | -0.41 | 0.10 | 17.23 | <.0001 | 0.67 |
| Juvenile Detention, Hospitalization, Runaway | -0.46 | 0.11 | 17.98 | <.0001 | 0.63 |
| Other | 0.61 | 0.09 | 46.93 | <.0001 | 1.83 |
| Prior entry (None) | | | | | |
| Prior foster care spell | -0.31 | 0.07 | 21.12 | <.0001 | 0.74 |

| Variable (Reference group) | Parameter Estimate | Standard Error | Chi-Square | Pr > ChiSq | Hazard Ratio |
|---|---------------------------|-----------------------|-------------------|----------------------|---------------------|
| Timeliness of IA completion (Not completed in 45 days) | | | | | |
| IA completed within 45 days | 0.15 | 0.04 | 15.10 | 0.0001 | 1.16 |
| Parents interviewed (Neither parent interviewed) | | | | | |
| Both parents | 1.16 | 0.08 | 194.25 | <.0001 | 3.21 |
| Father only | 0.90 | 0.11 | 63.04 | <.0001 | 2.45 |
| Mother only | 0.89 | 0.08 | 112.23 | <.0001 | 2.43 |

Switching the reference groups confirms that the differences between cases in which both parents are interviewed and cases in which only one parent is interviewed are statistically significant.

| Parents interviewed (Both parents interviewed) | Parameter Estimate | Standard Error | Chi-Square | Pr > ChiSq | Hazard Ratio |
|---|---------------------------|-----------------------|-------------------|----------------------|---------------------|
| Father only | -0.27 | 0.09 | 9.66 | 0.002 | 0.76 |
| Mother only | -0.28 | 0.04 | 43.53 | <.0001 | 0.76 |
| Neither parent | -1.16 | 0.08 | 194.25 | <.0001 | 0.31 |

About Chapin Hall

Established in 1985, Chapin Hall is an independent policy research center whose mission is to build knowledge that improves policies and programs for children and youth, families, and their communities.

Chapin Hall's areas of research include child maltreatment prevention, child welfare systems and foster care, youth justice, schools and their connections with social services and community organizations, early childhood initiatives, community change initiatives, workforce development, out-of-school time initiatives, economic supports for families, and child well-being indicators.

