Targeting Special Populations for Family Preservation: The Influence of Worker Competence and Organizational Culture

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Targeting Special Populations for Family Preservation: The Influence of Worker Competence and Organizational Culture

Ramona W. Denby, Keith A. Alford, and Carla M. Curtis

Today there are approximately 581,000 children in the United States foster care system. Children of color, one special population group, are disproportionately represented in the foster care system. Family preservation, a program that aims to improve family functioning and thus decrease the need for foster care, has been examined closely. Some researchers believe that family preservation programs have failed partly due to practitioners' inability to target appropriate families (Feldman, 1990; Schuerman, Rzepnicki & Littell, 1994). Additionally, research confirms that children of color are not the target of family preservation services (Denby, Curtis, & Alford, 1998). Improvements in the effectiveness of family preservation will require many types of reform both internal and external to the program. Among the types of internal reform needed is accurate “targeting of services.” Given the overrepresentation of children of color in the foster care system, this group must be among those who are targeted for services. The results of a national survey of 254 family preservation workers reveal a “profile” of the worker who is likely to target special populations, including children of color, for family preservation services. A case is made for service improvements and training to facilitate the “profiled” workers’ competencies.

Introduction

Certain segments of the population experience a disproportionate number of hardships, which can lead to their children being placed outside the home for care and protection. Such hardships place special populations in a precarious situation requiring the services of family preservation programs. Special populations can include children of color who enter the system at high rates, remain for long periods of time, and experience difficulty with permanency planning. Nearly 60% of the children in foster care are children of color, with African Americans comprising nearly 40% (U.S. Dept. of Health and Human Services—AFCARS, 2001). Arguably, since special populations like children of color disproportionately occupy foster care rolls, a significant impact on placement rates can
be made by reducing these groups’ representation. For African American children, their especially vulnerable status in the child welfare system has been well documented both historically and contemporarily (AFCARS, 2001; Billingsley & Giovannoni, 1972; Close, 1983; Finch & Fanshel, 1985; Gray & Nybell, 1990; Hogan & Siu, 1988; Mech, 1983; Roberts, 2002; Seaburg & Tolley, 1986; Stehno, 1982, 1990). Given the peculiar plight of children of color, family preservation programs must employ targeting strategies with services designed specially to meet the needs of special populations.

Realizing the vital role played by family preservation workers in improving services to special populations, the purpose of this study was to examine the attitudes, behaviors, and beliefs of a national sample of practitioners. The results of a national survey of 254 workers, including both referring and direct service workers, reveal a composite of beliefs and characteristics associated with workers who target special populations, including children of color. These findings have tremendous implications for program reform and the development of competencies for social work students interested in family preservation work.

**Family Preservation Effectiveness, Special Populations, and the Targeting Dilemma**

**Effectiveness of Family Preservation**

Family preservation, as both a philosophy and a service, purportedly aims to address the needs of children and families within the context of culture. Moreover, family preservation aims to improve family functioning, reduce the need for unnecessary out-of-home placement, and when appropriate, reunify children with their families. However, family preservation, a service designed to address skyrocketing out-of-home placement rates, is believed to be failing partly because of practitioners’ inability to target appropriate families (Feldman, 1990; Schuerman, Rzepnicki, & Littell, 1994). Moreover, some researchers have concluded that high rates of out-of-home placement and the lack of differences in outcomes between treatment and comparison groups prove the ineffectiveness of family preservation as a mode of service intervention and prevention (Heneghan, Horwitz & Leventhal, 1996; U.S. Department of Health and Human Services, 2001). Despite what has been advanced by some, other researchers (Kirk, 2000) find merit in family preservation services. Nonetheless, family preservation researchers (Morton & Grigsby, 1993) believe that there are special populations that are in need of intensive family preservation services. However, decision-makers are reluctant to target children of color for entry into family preservation programs (Denby, Curtis, & Alford, 1998; Morisey, 1990; Pinderhughes, 1991).
Who Are Special Populations

In the child welfare system (ACF, 2002) as well as mental health, the following groups have been identified as special populations: children of color (Gustavasson & Segal, 1994), homeless children (Douglass, 1996), sibling groups (Drapeau, Simard, Beaudry, & Charbonneau, 2000; Smith, 1996), children of the mentally ill (Coiro, 1998; Finzi & Stange, 1997; Luntz, 1995), reunification families (Frame, Berrick, & Brodowski, 2000; Smith, 2000; Talbot, 2001; Walton, Fraser, Lewis, Pecora, & Walton, 1993), potential adoption disruption families (Triseliotis, 2002), older children (Sedlak, 1997), chronic juvenile offenders (Loeber & Farrington, 2000; Scherer, Brondino, Henggeler, Melton, Gary, et al., 1994), severely emotionally disturbed—SED (Jonson-Reid, Williams, & Webster, 2001; Solnit, Adnopoz, Saxe, Gardner, Fallon, 1997), children under the age of five (Berrick, Needell, Barth, & Jonson-Reid, 1998), first-time parents, perinatal parents, children with birth abnormalities and/or the medically vulnerable (Berthier, Oriot, Bonneau, Chevrel, et al., 1993), children who are HIV positive or those who have AIDS (Anderson, 1998; Goicoechea-Balbona, 1998; Tenner, Feudo, & Woods, 1998), and status offenders (Nugent, Carpenter & Parks, 1993). More recently, children whose parents are infected with HIV/AIDS have been identified as a special population (Cameron, 2000; Draimin, Gamble, Shire, & Hudis, 1998; Mason, 1998; Taylor-Brown, Teeter, Blackburn, Oinen, & Wedderburn, 1998). The literature is most developed around the special population group, children of color.

The Role of Targeting in Improving Family Preservation Effectiveness

For the purposes of this paper “targeting” is defined as:

The purposeful and deliberate practice of identifying, assessing, and delivering services to groups of children and families who are defined as “special needs” groups under federal legislation.

For example, under the Adoption Assistance and Child Welfare Act of 1980, P.L.96-272, the victims of foster care drift and those for whom systemic barriers prevented permanency were identified as “special needs children” (or as the strengths-based literature and more contemporary practice jargon says, “special populations”). The legislation called for unique efforts to promote permanency for this population (Allen, et.al., 1983; U.S. Code Congressional, 1980).
Although past legislation has been enacted to deal specifically with the plight of some special populations, and research has provided a rationale for service delivery directly aimed at these groups, they do not receive family preservation services at the same rate that they receive traditional services (including substitute care). Current legislation (Promoting Safe and Stable Families (PSSF) Amendments of 2001, Public Law 107-133, January 17, 2002) does not provide any assurance that the needs of special populations like children of color will be addressed. Without clear service eligibility mandates and with the expectation that limited funding must now be disbursed more broadly, how will special populations fare under the new legislation? Although the answers to this and similar questions are unknown, family preservation officials can be empowered to make such internal program changes as the establishment of clear targeting protocols.

Service improvements in family preservation require systematic and multiple-levels of reform. Among the reforms needed are accurate “targeting of services.” Service targeting can be accomplished through such things as better risk assessment instruments, strict eligibility criteria, and more information gathering when evaluating families to take into account the unmet needs of special population families. Such service improvements as “targeting” are the responsibility of many, and by no means should workers shoulder the burden. Arguably, key decision-makers and gatekeepers involved in the process of establishing criteria for the selection of children and families for services include (1) legislators, (2) judges, (3) program managers, (4) referral agents, and (5) workers. Each of these five gatekeepers has a distinctive role in helping programs to realize their legislative goals, one of which is the targeting of services to special populations and other high-risk groups.

While the aforementioned elements are critical to developing better targeting strategies, decision-makers, namely family preservation workers, play a critical role. The research literature suggests that child welfare training efforts have focused on cultural sensitivity and understanding the consequences of poverty, racism, and sexism; however, not enough attention has been directed toward understanding the relationship between workers’ attitudes, beliefs, and their professional choices. It also is important to appreciate the impact of the workplace environment on professional decision-making, and it is important that professional competence be assessed (Middleman, 1984). Although the “targeting” issue is not solely attributable to family preservation workers, their decision-making power (formal and informal) should not be underestimated. In fact, workers’ influence in helping to establish accurate and sensitive screening protocols should be supported. Workers are most supported in their efforts when their employing organization reinforces targeting competencies.
Practice Competencies: A Framework for Understanding Targeting

A review of the literature on competency-based practice in human service settings yields several recurring themes that fall under the headings of (1) relationship competence, (2) cultural competence, (3) decision-making competence, (4) organizational competence, and (5) collaboration competence. The pragmatic value of these topical headings vis-à-vis family preservation service intervention with children and families of color is significant. Family preservation workers provide intensive services to children and families and in cases involving clients of color; particular competencies that support greater cultural appreciation and indigenous service planning must be examined for their inherent utility.

Relationship Competence

Understanding client needs when building the worker-client relationship is a necessary component toward treatment goal(s) attainment. This can be achieved through a relationship built on trust and respect between worker and client. Attitudinal issues on the part of the worker about the client and/or client actions can thwart attempts to maintain an otherwise productive working relationship. Drake (1994) noted key worker-client relationship themes identified by child welfare clients included their desire for respect, for effective communication with workers, and for a comfortable relationship with workers. In order for workers to convey respect, maintain a comfortable relationship, and communicate effectively, they must recognize that families facing struggles are inherently deserving of services. To accomplish this, workers should be non-judgmental (Ribner & Knei-Paz, 2002), and they should use a problem-solving process that allows for focus on the clients’ definition of the problem (Trotter, 2001).

Cultural Competence

The call for cultural competence in human services has long been given. Formulating an understanding of such cultural factors as child rearing styles, parenting roles, and community support systems is important in accurately assessing and intervening with families of color. For example, many African American families feel they must socialize their children to live biculturally because they believe that society will judge their children more harshly because they are African American (Denby & Alford, 1996). Racism and oppression cannot be ignored, and families of color are often on the front lines as recipients of these ills. Workers who employ cultural competence must do so with the understanding that such ills are real, and program eligibility protocol should be
tailored to address service inconsistencies (Alford et al., 2001; Boyd-Franklin, 1989; Brinson, 1996; Denby, 2002; Devore & Schlesinger, 1999; Graham, 1999; Logan & Freeman, 2000; Schiele, 2000).

Decision-Making Competence

A number of factors affect decisions regarding treatment services to children and families. Moreover, decision-making involves three key concepts: authority, responsibility, and accountability (Dutton & Kohli, 1996). A decision to target special populations for services requires all of the aforementioned skills. These decision roles are that of workers, but managers and administrators must support their efforts. Workers must have a sense of ownership and responsibility in the establishment of service eligibility protocols. They should know that they are accountable to internal (clients, colleagues, managers) as well as external (stakeholders, indigenous communities) groups. Finally, authority to make decisions should be granted to those who are clear about the unique needs of special populations.

Organizational Competence

Organizational competence as it pertains to family preservation programming requires that there be an atmosphere and organizational culture that supports workers' desire to target special populations for services. Such an organizational culture is partly established by three elements: an agency philosophy that places special populations as a service priority, leadership style that not only espouses a belief in targeting but supports workers' efforts, and a synergetic effect whereby organizational culture influences workers' behavior and workers' behavior impacts organizational rules and structure. Research (Delewski, Pecora, Smith & Smith, 1986) has shown that when workers are empowered to develop action plans to address organizational changes, implementation success is evident. Moreover, agencies must develop an organizational culture that supports such culturally competent service practices as targeting. This is done through the establishment of administrative policy and support (Quander, 2001). Finally, agencies can be furthered in their efforts by conducting organizational self-assessments (Goode, Jones, & Mason, 2002).

Collaboration Competence

Collaboration competence is multi-faceted. Family preservation workers' endeavors to improve services to special populations can be supported by building collaborative
Targeting Special Populations for Family Preservation

• 25

partnerships with other service entities, including indigenous communities, funding sources, and others. The involvement of natural helpers, community representatives, and neighborhood groups, a strategy employed by other child and family service programs (Lazear, 2002), is a technique that can be used more widely in family preservation to support the use of targeting protocols. Such a move would require programs to work in partnership with the community, indigenous groups, and funders. This level of cooperative work will involve advocacy and negotiation (Dutton & Kohli, 1996). The inherent imbalance of power in client and worker relationships speaks to the need for external, cooperative arrangements whereby client needs can be safeguarded by stakeholders, funders, and community representatives who advocate for their inclusion in the receipt of services. Funders and other community groups can use their “position and role” (Dutton & Kohli, 1996) to foster collaboration competence among organizations.

Methodology

Design and Research Objectives

The primary objective of the study was to examine the attitudes and behaviors of family preservation workers regarding the service criterion “special population.” The objective was pursued through the use of the cross-sectional survey research technique. A theoretical decision-making model, which maintains that workers’ values, biases, and characteristics have an effect on their attitudes, belief structure, and their subsequent behavior, was used. Largely a descriptive study, the chief aim of the research reported herein is to uncover those variables and conditions that influence a worker’s decision to target services to special populations. The research protocol was derived largely from Dillman’s (1978) “Total Design Method (TDM).”

Sample

The sample was derived from the National Resource Center on Family-Based Services Annotated Directory of Selected Family-Based Services Programs, 1994. Using a systematic random sampling technique, 250 agency names were selected from the sampling frame. Each agency received two instruments that produced an “attempted” sample of 500 family preservation workers. The primary recipient (i.e., an administrator) was directed to designate two workers to complete the instruments. The only constraints imposed on the administrators were as follows: the workers had to be directly involved in delivering intensive family preservation services as either direct providers of services.
or those who screen cases and make a service determination, and if the agency employed screeners and direct service workers, the respondents had to be one of each type.

**Instrumentation**

*Face, content, and construct validity.* A 127 Likert item mail-survey was used to collect data. Items for the survey were developed using two sources: (1) secondary analysis of a study (Walton & Denby, 1997) pertaining to the issue of targeting “imminent risk” cases; and (2) search and review of empirical literature. Sixteen (16) groups (as described in the Introduction section) considered to be “special populations” were examined. Certain parts of the survey contained questions, which positioned the respondents to give their experiences with particular “special populations.” On the other hand, portions of the survey involved questions in which respondents were asked to consider “special populations” as a whole. Although all sixteen types of “special populations” were studied, this article focuses on the findings, which related to children of color.

*Reliability and response rate.* The survey instrument was pilot tested so that reliability could be established. The reliability scores (i.e., Cronbach Alphas) for the sub-scales ranged from .63 to .98, suggesting strong inter-item correlation. After accounting for frame error, the return rate for the survey was sixty percent (60%). However, to assure that non-response bias was not an issue in the study, Miller and Smiths’ (1983) plan of analysis for non-response bias was used. A random sample of twenty percent (20%) of the early and late respondents was drawn. A t-test was computed to compare the demographic data of the two groups. The t-test was used to ascertain whether there was a difference between those who answer and those who do not. There is no difference on demographic data between those respondents who returned their surveys early and those who returned them late. Therefore, because research has suggested that late respondents are most like non-respondents, it can be inferred that those family preservation workers who did not return their surveys were no different from those who did; thus non-response bias is assumed a non-factor.

*Study limitations.* Exploratory studies that rely heavily on descriptive and correlation analyses have inherent limitations. Additionally, construct validity may be a concern of this study. Although great care was given to operationalize the term special populations into categories of 16 groups, respondents may not have retained the specific definitions as they moved through various parts of the survey. Nonetheless, given the richness of the data, a solid direction for follow-up research is provided.
Socio-Demographic Characteristics

Six socio-demographic variables were used to describe the type of agency in which the respondents are employed: (1) type of program; (2) caseload size; (3) length of service; (4) treatment model; (5) reason for referral; and (6) ethnicity of service population. The type of program that the majority (i.e., 63%) of the respondents in this study represent is a private, nonprofit agency. Public child welfare agencies comprise a high category, thirty-one percent (31%). For most (72%) workers, the caseload size is 1-10 families. Twenty-four percent (24%) of the respondents report that their cases can remain open for up to 10 weeks. Twenty percent (20%) of the workers service cases 11-15 weeks. One-half of the sample report using a “family systems” treatment model. Twenty-two percent (22%) use a modified Homebuilders or some other approach. Nearly seventy percent (70%) of the respondents indicate that their primary service population (i.e., reason for referral) comprises clients who enter the service system primarily as a result of child abuse and neglect. Nearly eighteen percent (18%) report that their clients are largely referred as a result of mental health difficulties. The majority, seventy percent (70%) of the sample, indicates that the ethnicity of their primary service population is European American. African American and Hispanic clients only comprise twenty-one percent (21%) and three percent (3%), respectively, of the primary service population.

In terms of the respondents’ personal characteristics, eight descriptive variables were used: (1) age; (2) gender; (3) years of social service experience; (4) family preservation experience; (5) type of worker; (6) race; (7) highest level of education; and (8) type of degree. There is a wide range of age categories. More than half (i.e., 56%) of the respondents are under the age of 40. A third of the respondents are 41-50 years of age. The remaining respondents are over the age of 50. A third of the respondents are 41-50 years of age. The remaining respondents are over the age of 50. The majority (i.e., 76%) of the respondents are female. A third of the respondents report 1-5 years of experience in social services. Another third of the sample has 6-10 years of experience. The remaining third have anywhere from 11-20 years of experience. Overwhelmingly, the vast majority (65%) of the sample has only 1-5 years of family preservation experience. Twenty-three percent (23%) have 6-10 years of experience in family preservation. The type of worker surveyed was largely (63%) one who works in a family preservation unit that is housed within a major agency. The race of eighty-three percent (83%) of the sample is European American. Workers of color make up the remaining seventeen percent (17%). The level of education for the majority of the sample extends beyond undergraduate work. Forty-
two percent (42%) of the respondents possess a master’s degree. Another twenty-two percent (22%) have at least a bachelor’s degree. A near even split, forty-nine percent (49%) of the sample have social work degrees, while the other forty-six percent (46%) hold nonsocial work degrees.

Why Workers Agree with the Service Criterion “Special Population”

A summary analysis of descriptive data (i.e., Mean scores) pertaining to reasons why workers agree with the use of the special population service criterion is reported herein. A four-point Likert scale was used. A response of “1” indicates strongly disagree, “2” indicates disagree, “3” indicates agree, and “4” indicates strongly agree. The study did not show many factors that support the use of the service criterion special population, especially in the categories pertaining to children of color. This could be because workers are so vehemently opposed to targeting services in this manner, no moderating factors are evident. This finding may also be an artifact or limitation of the data collection instrument in that the listed support variables might not be the ones that are indeed in operation, and others may exist. However, the researchers were able to show one main factor that may support a worker’s use of the criterion: the fact that the agency they work for supports the use of the criterion (M = 2.48). Additionally, in instances where workers may be in favor of targeting services to special populations, they do so because they believe that such groups are over represented in service delivery systems (M = 2.57) and that they are usually most in need of services (M = 2.54).

Why Workers Against the Use of the Service Criterion “Special Population” Use It Anyway

Pearsons Product-Moment Correlation Coefficient was used to assess the relationship between variables that measure worker attitudes toward the service criterion special populations and the variables that measure workers belief structures. In terms of those workers who disagree with the service criterion special population but use it in their decision-making process, some evidence was found for the notion that agency-level variables factor into their decisions. Although the discovered correlations are moderate, the highly significant p-value strengthens the association between the variables. Workers who disagree with the criterion and use it, do so because of agency influence (r = .35, p = .000), the influence of the indigenous community (r = 30, p = .000), and the specifications given by a referring/funding source (r = 36, p = .000).
Differences Among Workers Who Favor the “Special Population” Criterion and Those Who Do Not

Tables 1-4 display the results of four discriminant analyses that were used to assess the workers’ attributes, attitudes, and beliefs in order to discern between those who target services to special populations and those who do not. An examination of agency and worker socio-demographic characteristics (Model #1) alone, reveal that the attribute variables that distinguish between those workers in favor of the use of special populations and those not in favor, are: length of time cases remain open, hours of direct contact with clients, number of public agency cases, a workers tenure within social services, and the degree to which an agency’s primary service populations are children of color. In other words, those workers who target special populations for services are seasoned, public service agency workers who work with cases for longer periods of time, have a significant amount of direct service contact with clients, and whose agency service population consists largely of children of color. Model #1 is the weakest model of the four. Model #1 correctly classified only seventy-one percent (71%) of the cases, has a low canonical correlation of .25, and its p-value of .08 is not statistically significant.

Table 1. Model #1 – Worker/Program Attribute Variables

<table>
<thead>
<tr>
<th>Attribute Variables</th>
<th>Service Decision (Behavior)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Length of time case remains open</td>
<td>0.559</td>
</tr>
<tr>
<td>(b) Hours of direct contact with clients</td>
<td>0.595</td>
</tr>
<tr>
<td>(c) Number of public agency cases</td>
<td>-0.498</td>
</tr>
<tr>
<td>(d) Years of experience in social services</td>
<td>0.498</td>
</tr>
<tr>
<td>(e) Of the primary service population, number of children of color</td>
<td>-0.369</td>
</tr>
</tbody>
</table>

Results of the Analysis:
Canonical Correlation: -0.253
Significance Level: 0.0861
Wilk’s Lambda: 0.9358925
df: 5.0

* A negative coefficient denotes an association with a decision not to use special population as a service criterion. A positive coefficient denotes a decision to use special population as a service criterion.
Predictive Accuracy of the Discriminant Function for the Attribute Variables – Model #1
(Worker and Program Attributes)

<table>
<thead>
<tr>
<th>Actual Service Decision</th>
<th>Predicted Service Decision</th>
<th>Number of Cases</th>
<th>Use Special Population</th>
<th>Do Not Use Special Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use Special Population</td>
<td>25</td>
<td>13.0 (52.0 %)</td>
<td>12.0 (48.0 %)</td>
<td></td>
</tr>
<tr>
<td>Do Not Use Special Population</td>
<td>223</td>
<td>51 (22.86 %)</td>
<td>172 (77.13 %)</td>
<td></td>
</tr>
</tbody>
</table>

Note: Percent correctly classified = 71.00 %

Table 2 contains the results of Model #2, which was the model used to assess the degree to which workers’ attitudes about the special population service criterion predict their targeting behaviors. This model was more successful than the previous one (Canonical correlation = .32, \( p = .000 \)). The key predictors of service decisions turned out to be the workers’ opinions of different types of special populations. For example, workers who target special populations are those who believe that children with HIV/AIDS and children younger than five are true special populations. Those workers least likely to target special populations are those who do not believe children already in substitute care (i.e., reunification cases) are special populations.

Table 2. Model #2 – Attitude Variables

<table>
<thead>
<tr>
<th>Discriminant Analysis of Attitude Variables Predicting Whether Family Preservation Workers Use Special Population as a Criterion in their Service Decisions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attitude Variables</td>
</tr>
<tr>
<td>Target Children:</td>
</tr>
<tr>
<td>Already in substitute care</td>
</tr>
<tr>
<td>Have HIV/AIDS</td>
</tr>
<tr>
<td>Younger than five years</td>
</tr>
<tr>
<td>Results of the Analysis:</td>
</tr>
<tr>
<td>Canonical Correlation:</td>
</tr>
<tr>
<td>Significance Level:</td>
</tr>
<tr>
<td>Wilk’s Lambda:</td>
</tr>
<tr>
<td>df:</td>
</tr>
</tbody>
</table>

* A negative coefficient denotes an association with a decision not to use special population as a service criterion. A positive coefficient denotes a decision to use special population as a service criterion.
Predictive Accuracy of the Discriminant Function for the Attribute Variables – Model #2
(Attitude Variables)

<table>
<thead>
<tr>
<th>Actual Service Decision</th>
<th>Number of Cases</th>
<th>Use Special Population</th>
<th>Do Not Use Special Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use Special Population</td>
<td>20</td>
<td>12 (60.0%)</td>
<td>8 (40.0%)</td>
</tr>
<tr>
<td>Do Not Use Special Population</td>
<td>183</td>
<td>41 (22.4%)</td>
<td>142 (77.6%)</td>
</tr>
</tbody>
</table>

Note: Percent correctly classified = 75.86%

Model #3 used the workers’ beliefs to predict who among them target services to special populations (see Table 3). The key correlates of a service decision were beliefs about the agency treatment model being conducive to the needs of special populations, disagreement with the notion that the lack of community resources gets in the way of targeting special populations, the belief that one’s agency supports the practice of targeting special populations, and disagreement with the notion that so few cases are “true” special populations (canonical correlation = .39, p = .01). As it turns out, Model #3 is the best model in this study. Of all four models, Model #3 was most successful in predicting service decisions (80.25% of the cases were correctly classified).

Table 3. Model #3 – Belief Variables

<table>
<thead>
<tr>
<th>Variable</th>
<th>Service Decision (Behavior)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency treatment model is conducive to special populations</td>
<td>1.0</td>
</tr>
<tr>
<td>Too few community resources</td>
<td>-0.354</td>
</tr>
<tr>
<td>Agency supports targeting to special populations</td>
<td>0.363</td>
</tr>
<tr>
<td>So few cases are actually special populations</td>
<td>-0.354</td>
</tr>
</tbody>
</table>

Results of the Analysis:
Canonical Correlation: 0.391
Significance Level: 0.0123
Wilk’s Lambda: 0.84672
df: 4.0
A negative coefficient denotes an association with a decision not to use special population as a service criterion. A positive coefficient denotes a decision to use special population as a service criterion.

### Predictive Accuracy of the Discriminant Function for the Belief Variables – Model #3

<table>
<thead>
<tr>
<th>Actual Service Decision</th>
<th>Predicted Service Decision</th>
<th>Use Special Population</th>
<th>Do Not Use Special Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use Special Population</td>
<td>7</td>
<td>3 (42.9 %)</td>
<td>4 (57.1 %)</td>
</tr>
<tr>
<td>Do Not Use Special Population</td>
<td>236</td>
<td>42 (17.8 %)</td>
<td>194 (82.2 %)</td>
</tr>
</tbody>
</table>

Note: Percent correctly classified = 80.25 %

Table 4 displays the last of the four models. In Model #4, all variables (i.e., workers attributes, attitudes, and beliefs) were combined in an analysis aimed at predicting workers’ service decisions. Although the current model was able to classify almost seventy-two percent (71.59%) of the cases correctly and has a statistically significant ($p = .006$) canonical correlation score of .33, it did not improve upon Model #3. Nonetheless, Model #4 produced the following variables: opinions about agency treatment models (agreement that the model is conducive to special populations), the amount of hours of direct contact clients receive (larger numbers), years of social service experience (greater number of years), opinions about children already in substitute care (unfavorable opinion), and young children (favorable opinion).

### Table 4. Model #4 – Combined Variables

<table>
<thead>
<tr>
<th>Discriminant Analysis of Attitude, Belief, Attribute Variables Predicting Whether Family Preservation Workers Use Special Population as a Criterion in their Service Decisions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attribute Variables</td>
</tr>
<tr>
<td>(a) Agency treatment model is conducive to special populations</td>
</tr>
<tr>
<td>(b) Hours of direct contact with clients</td>
</tr>
<tr>
<td>(c) Years of social service experience</td>
</tr>
<tr>
<td>(d) Target children already in substitute care</td>
</tr>
<tr>
<td>(e) Target children under age five</td>
</tr>
<tr>
<td>Results of the Analysis:</td>
</tr>
<tr>
<td>Canonical Correlation:</td>
</tr>
<tr>
<td>Significance Level:</td>
</tr>
<tr>
<td>Wilk’s Lambda:</td>
</tr>
<tr>
<td>df:</td>
</tr>
</tbody>
</table>
A negative coefficient denotes an association with a decision not to use special population as a service criterion. A positive coefficient denotes a decision to use special population as a service criterion.

**Predictive Accuracy of the Discriminant Function for the Combined Variables – Model #4**

*(Attitude, Belief, and Attribute)*

<table>
<thead>
<tr>
<th>Predicted Service Decision</th>
<th>Number of Cases</th>
<th>Use Special Population</th>
<th>Do Not Use Special Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use Special Population</td>
<td>25</td>
<td>13.0 (52.0 %)</td>
<td>12.0 (48.0 %)</td>
</tr>
<tr>
<td>Do Not Use Special Population</td>
<td>158</td>
<td>44 (27.8 %)</td>
<td>114 (72.2 %)</td>
</tr>
</tbody>
</table>

Note: Percent correctly classified = 71.59 %

**Discussion and Implications**

It seems that the ideal conditions for targeting special populations are those heavily influenced by the worker's belief structure. Beliefs that there are many cases whose circumstances warrant the classification special population, (especially sensitivity to young children), prompt workers to target these groups. Workers’ beliefs about which populations are appropriate for family preservation services get at the heart of the targeting dilemma that now exists. Many researchers (Budde, 1995, Blythe, Jayaratne, Reithoffer, 1999; Denby, 2001, Kelly & Blythe, 2000; Wells & Tracy, 1996) note the need for family preservation program officials to better articulate who the target populations are as they work to improve services. Any discussion of targeting in family preservation is incomplete without adequate mention of special populations like children of color. Continued training and technical assistance are needed for workers to remain sensitive to the conditions that special populations experience.

Another condition that supports workers’ practice of targeting special populations appears to be the presence of a treatment model that they believe is conducive to the needs of special populations. The issue of model and treatment fidelity has been raised as a potential threat to the success of family preservation programs (Bath & Haapala, 1995; Blythe, Salley, Jayaratne, 1994). We learn from this study that workers are less likely to target special populations, if they feel that the treatment model used within their
agency does not support such families' needs. Kelly and Blythe (2000) have observed that if family preservation is to ever reach its full potential, agencies will have to assure the full implementation of treatment models. Wells and Tracy (1996) also note that family preservation program proponent's inability to agree on appropriate treatment models also has been a problem in achieving success. As we look to improve family preservation services for special populations, we will need to assure the sound implementation of models that are culturally in tune with the client's needs. The literature contains leads in our search for culturally specific family preservation models (Brides, Brown, Berger, Roark, 1997; Carter, 1997, Denby, 1996).

Finally, organizational culture seems to have a heavy influence on workers' behavior toward the service criterion special population. When agency philosophy and leadership direct workers to be sensitive to the needs of special populations, they are more likely to target these groups of children. In fact, worker attributes alone have less of an influence on their decisions to target services to special populations than belief structures that are supported by organizational culture. Therefore, it stands to reason that if special populations are to become the target of services, there must be a synergy between workers' beliefs and organizational culture. A question that can be asked is, "Does organizational culture shape workers' beliefs or do workers' beliefs shape organizational culture?" While we know that these conditions have a synergetic effect, the results of this study suggest that when organizational culture is in support of the needs of special populations, even the most skeptical worker can be positively influenced to target special populations for intervention. In this study, those workers who did not agree with targeting special populations but did so anyway, were persuaded by their agency directive, the requirement of the referral/funding source, or the influence of the community in which they worked. From a macro perspective, Kelly and Blythe (2000) believe that strong leadership is required in order for family preservation programs to have a future in the child welfare service continuum.

If programs are to be successful in targeting special populations for services, there must be a buy-in on the part of workers. In situations where there is a desire to influence the belief structure of those workers who do not agree with targeting services to special populations, three main implications can be drawn from this study: organizational culture must place a high value on special populations; there is a need for increased training about the conditions experienced by special populations; and there is a need to train workers in the use of treatment models which they feel will render the greatest amount of gain for special populations.
Conclusion and Future Research Direction

The results of this study suggest that by and large, workers do not target certain special populations for preventive family-centered services. When workers do target special populations, it is because of the presence of such competency-based practice components as (1) relationship competence, (2) cultural competence, (3) decision-making competence, (4) organizational competence, and (5) collaboration competence. The objective of the research described herein was not to refute or establish the aforementioned practice competencies as predictors of “targeting.” However, utilizing these competency components, a direction for follow-up research has been suggested.

References


National Resource Center on Family-Based Services (1994). *Annotated directory of selected family-based services programs.* Iowa City: Author.


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