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**Project Title:**  
An Evaluation of School-  
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programs

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Avon-Maitland District  
School Board  
Huron County Children's  
Aid Society  
Renfrew County Children's  
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Renfrew County Catholic  
District School Board

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## *CREATING A CLIMATE OF SAFETY:*

### AN EVALUATION OF THE SCHOOL BASED CHILD WELFARE SOCIAL WORKER PROGRAM IN HURON AND RENFREW COUNTIES

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## **Executive Summary**

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Across Ontario, child welfare agencies are collaborating with school boards to place social workers in schools. This report presents the findings of an outcome evaluation of two such programs. The evaluation design included 56 in-depth interviews with children, parents, and other key stakeholders. It also included a survey of 211 teachers, and a quasi-experimental component that tracked child outcomes for 159 children over the first six months of participation. The study compares two models of school-based social work to traditional agency-based approaches. Findings suggest that school-based social workers connect with children that agency-based models miss. School-board/child welfare partnerships extend the reach of both institutions, and help parents and teachers to feel comfortable collaborating with child welfare workers.

### **Background:**

Recent trends in child welfare service delivery include:

**Emphasis on Partnerships.** Child welfare agencies are working to increase their effectiveness by working closely with other community organizations. Sometimes, these partnerships focus on collaborative planning, coordination of services, and collective advocacy. Other partnerships involve collaborative service delivery.

**Exploration of New Settings for Service delivery.** Child welfare agencies are recognizing that access and awareness are improved when their workers move outside of the agency building and establish a presence in settings that are familiar and comfortable to the families they hope to reach. Examples include neighbourhood centres, family resource programs, and schools.

**Emphasis on Prevention.** The two trends already listed are both, in part, strategies intended to help child welfare organizations make contact with families before a child has been harmed, and build positive, trusting relationships with families and community organizations.

**Placing social workers in schools is one of the ways child welfare agencies have tried to put these ideas into practice.**

### **Eight Reasons to Fund School-Based Services**

- to identify at-risk children and families who would otherwise have gone undetected
- to improve speed and frequency of access to social workers
- to more effectively help families to provide social support to children (as compared to traditional approaches to child welfare)
- to improve child behaviour in school settings (as compared to traditional approaches)
- to enhance partnerships between schools and child welfare agencies
- to allow schools and child welfare organizations to work more efficiently
- to improve the public image of child welfare agencies
- to move beyond reactive approaches and create a climate of safety within schools

## Program Description

| Activity Clusters                                       |  | Sample Activities   |
|---|--|---|
| Working with the School Community                       | Activities with all children                                   | <input type="checkbox"/> Run prevention programs (e.g., peer mediation)<br><input type="checkbox"/> Present in classroom (e.g., skill building, conflict resolution)  |
|   | Activities with community, school and family                   | <input type="checkbox"/> Build relationships with community groups (e.g., police, doctors)<br><input type="checkbox"/> Present at parent council meetings   |
| Working with Children and Families on a voluntary basis | Consultation with families and school staff                    | <input type="checkbox"/> Attend teacher staff meetings<br><input type="checkbox"/> Educate school staff about protection legislation<br><input type="checkbox"/> Plan and consult with principals, resource teachers and guidance counselors                |
|   | Treatment and support of children and families at risk         | <input type="checkbox"/> Crisis intervention within school<br><input type="checkbox"/> Individual and group counseling with children  |
| Case Management Work with Protection Cases              | Treatment and support of children and families on CAS caseload | <input type="checkbox"/> Complete risk assessment<br><input type="checkbox"/> Crisis intervention within school<br><input type="checkbox"/> Consult with teachers re: behaviour management<br><input type="checkbox"/> Run groups for support and treatment |
|   | Links to other community services                              | <input type="checkbox"/> Refer to school psychologist or other community services<br><input type="checkbox"/> Attend court cases, and do IPRC case reviews  |

Children's Aid Societies in Huron and Renfrew both base some of their child welfare social workers in local schools. These positions are jointly supervised and funded with local School Boards. School-based social workers provide the full range of child protection services, and also work with children in the school community on a voluntary basis. The two Children's Aid Societies involved in this study see this approach as more than a practical and cost-effective way to deliver traditional child welfare services. By placing these services in schools and making social workers fully integrated members of the school staff, these agencies hope to create school environments that are healthier and more nurturing for all students. The schools, it is hoped, will be equipped to respond effectively to children with a wide variety of needs - in a way neither child welfare social workers, nor school social workers could do individually.

This table summarizes the specific questions addressed in this project, and the methods used to address them.

### Methods

| Evaluation Methodology:<br><br>Questions Guiding Evaluation   | Interviews | Teacher Surveys                                    | Outcome Tracking                                   |
|---|------------|--|--|
|   |            | 56 children, teachers, parents, and social workers | 211 teachers, principals, vp's, and guidance staff |
| How fully has the vision of the program (as expressed in the table above) been implemented?                       | ✓          | ✓  |  |
| What do stakeholders see as the strengths and weaknesses of the model?  | ✓          | ✓  |  |
| What difference has the model made at a systems level?  | ✓          | ✓  |  |
| Who is accessing the model? How do the children and families differ from those served through traditional models? | ✓          | ✓  | ✓  |
| What difference has the model made in the behaviour of children?  | ✓          |  | ✓  |
| What difference has the model made in the support available to children from families?                            | ✓          |  | ✓  |

*NOTE: Outcome tracking tools included the Child and Adolescent Functional Assessment Scale (the CAFAS), and the Risk Assessment and Eligibility Spectrum tools used by all Child Welfare agencies in Ontario.*

# What Difference Does School-Based Social Work Make?

## Enhanced Partnerships between Schools and Child Welfare Agencies

The school based social worker model appears to be highly effective in achieving system-level change. *In particular, both Children's Aid Societies involved in this study have established stronger, more innovative, and more proactive partnerships with school boards and teachers.* The majority of teachers who work in schools served by the program consult with and refer to the social workers on a regular basis. Teachers report that these consultations have made them better at identifying signs of risk among their students, more confident and quicker to act on their concerns, and better at making sure that their efforts to help any given student are fully coordinated with those of the social worker.

### The Numbers:

- ❑ 58% of surveyed teachers mentioned, without prompting, that the program had led to improved efficiency of response to problem situations
- ❑ 48% reported that the program had decreased their personal level of stress as an educator
- ❑ 45% felt they had a greater ability to problem solve with children and families

### A Teacher's Perspective:

"I've taught for a number of years and I find it less threatening now to act on a problem where you would have to deal with Children's Aid, than I did some years ago ... Now I find it less threatening and I think I have more respect, I believe they are trying to keep family units together and I understand that now"

Teachers see the social worker as a unique and essential member of the staff team, and feel that *the school as a whole averts crises better with the social worker on board.* A level of trust rarely seen in child welfare exists between the two groups of staff.

At an even broader level, the school-based social worker program does seem to have helped *all stakeholders (students, parent, and teachers) understand Children's Aid Societies better, see them as a resource partner, and feel more comfortable and safe working with them.* Although this change is perhaps more gradual and less dramatic than the teacher-social worker partnership, it is profoundly important.

## Improved Identification of Children and Families in Need

In interviews, stakeholders emphasized the importance of the social support provided to students and families by social workers. Whatever the practical focus of their work together, the social worker gave people a safe place to sit down and talk, a place where they felt trust and support. This was extremely important to the children and families we met. *The school-based approach has given some children, families, and school staff a more convenient and less threatening channel to access the child welfare system.*

### A Teacher's Perspective:

"I consult her a lot and I usually go to her first when I notice a problem with a student and I think it is longer than just temporary misbehaving or typical problems of being a teenager and I suspect that something might be going wrong at home and also trying to figure out whether I'm too harsh on the kid or too gentle, she usually can set me straight to the proper way of dealing with the situation"

It seems clear that the school-based service is reaching *children at risk that might otherwise have gone undetected.* According to our CAFAS and risk assessment data, children served through the school-based program are more likely to have had conflict with parents, to have received inadequate social support from parents, or to have been emotionally abused than those served through agencies. The students reached by school based social workers are also less likely to be acting out in school, and more likely to be boys. They are less likely to have experienced neglect or caregiver capacity issues such as alcoholism or incarceration. Although we were not able to generate clear answers about why these differences exist, we feel confident that they are real differences. They emerged in two or in some cases three different kinds of independent assessments.

## Presenting Issues on Eligibility Spectrum at Intake

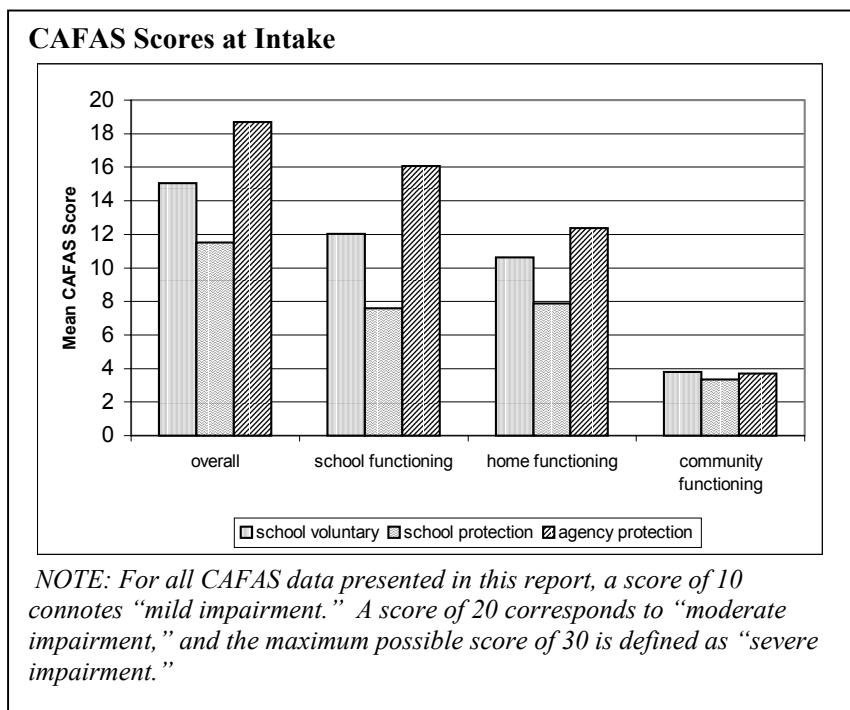
|                                      | School-based non-protection cases | School-based protection cases | Agency- based cases |
|--------------------------------------|-----------------------------------|-------------------------------|---------------------|
| Physical/sexual harm                 | 16.98% (34.5%)                    | 13.64%                        | 16.67%              |
| Harm by omission                     | 1.89% (3.9%)                      | 9.09%                         | 20.83%              |
| Emotional harm                       | 3.77% (7.7%)                      | 13.64%                        | 8.33%               |
| Abandonment, separation, or conflict | 9.43% (19.2%)                     | 31.82%                        | 16.67%              |
| Caregiver capacity                   | 16.98% (34.6%)                    | 31.82%                        | 37.50%              |
| Counseling request                   | 50.94%                            |                               |                     |
| <b>Sample Size</b>                   | <b>53 (26)</b>                    | <b>22</b>                     | <b>24</b>           |

NOTE: Percentages in brackets exclude the 27 non-protection cases whose presenting issue was “counseling request.” In other words, bracketed percentages include only those voluntary children would have been assessed as “at risk” in the traditional child welfare model.

School-based social workers appear to work with a different mix of clients than agency-based social workers.

- school-based cases (and especially school-based protection cases) were likely to have fewer behavioural problems than agency-based cases. This difference was especially marked for behaviour at school.
- School-based cases tended to come from homes where there was less access to social support, and somewhat more negative family interactions. They were more likely than agency-based cases to have suffered emotional abuse or to have experienced parent-child conflict.
- school-based cases were less likely to have suffered neglect or to have had caregivers whose capacity to parent was influenced by substance abuse or similar issues.

Neither school-based nor agency-based models emerge from these data as clearly superior in reaching the full range of children at risk. However, the *school-based programs have clearly extended the reach of the child welfare agencies involved.* For parents, for teachers, and for students, one of the most important things about the school based program was that it afforded them access to an organization (and a body of expertise) they otherwise would have hesitated to contact. Similarly, this partnership has allowed *school boards to continue to serve children who might otherwise have developed disruptive behaviours and been difficult to teach in regular school settings.* These findings are perhaps best interpreted as evidence of the *value of using a diverse range of outreach and treatment approaches* in both school board and child welfare systems.



# Improved Social Support Within Families

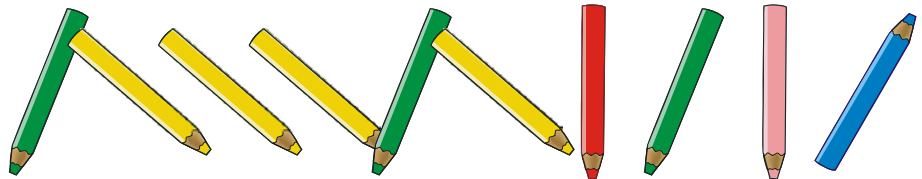
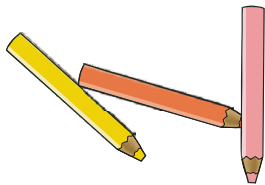
## Social Support Scores at Intake

|   | School-based non-protection cases | School-based protection cases                          | Agency- based cases                     |
|---|-----------------------------------|--|---|
| Mean score for level of impairment in family/social support (CAFAS)                         | 10.0 (mild)                       | 10.03 (mild)   | 4.6 (none to mild)                      |
| % of participants with “severe” impairments in social support (CAFAS)                       | 14.3%                             | 12.9%  | 0%                                      |
| Mean rating of availability of social supports (Risk Assessment)                            | Not available                     | 2.39 (some support, but of limited use or reliability) | 1.00 (some reliable and useful support) |
| % of cases where families are rated as having multiple sources of support (Risk Assessment) |                                   | 3%   | 42.9%                                   |

### A Parent’s Perspective:

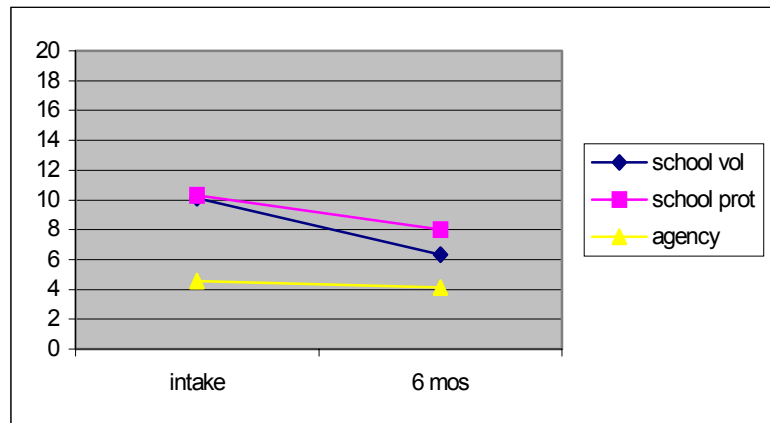
"[It has helped to be able to call] by phone for professional help when dealing with my children when my frustrations get the best of me. The help is right there with a new idea right on hand."

Access to social support has arisen as a theme throughout our findings. Our interview data suggested that *parents come to trust school-based social workers more than traditional child welfare workers*. We also heard that parents appreciated the role the social worker was able to play in keeping them up-to-date and involved with respect to their child’s life in school.



Perhaps it is not surprising then that school-based social work appears to excel when it comes to improving the social support provided to children by their families. When we tracked levels of impairment in family support across the first six months of contact, we found that *school-based programs were improving the quality of social support available to the child from his or her family*. This was especially true for cases that were classified as voluntary.

**Level of Impairment in access to family support (CAFAS)**



## Improved Child Behaviour in School

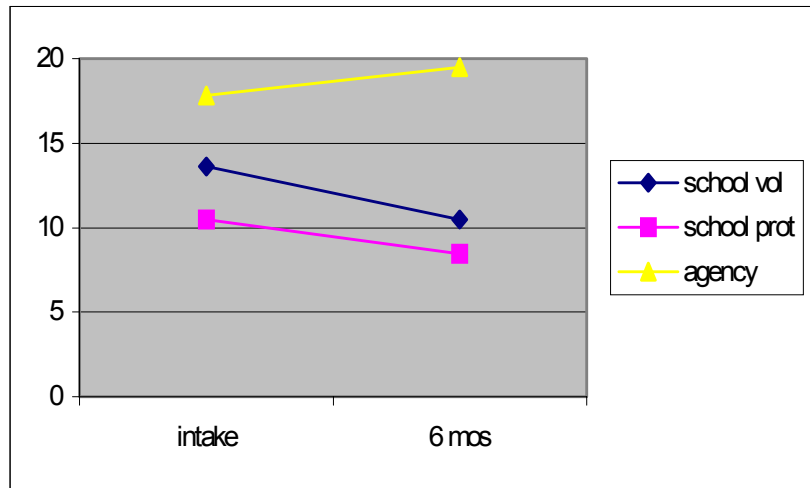
Our qualitative data shows that people involved with the program believe it is improving the behaviour of children. Teachers and parents identified better problem solving and anger management skills in students who had worked with the social workers.

### A Student's Perspective:

"It's pretty good. You learn how you can control your anger better and identify different types of anger and responses; I know everybody in [the group run by the social worker]; they talk to me in the halls and stuff and they ask me questions; the social worker helped that and they're [friends from the group] there to help too. I hang out more than before with some of them cause you know you can trust each other and stuff."

Both models appeared to be making a positive change in the behaviour of children over a six month period, and each model had different strengths in terms of its clinical outcomes. *School-based social work was especially effective in enhancing social support and improving behaviour in school settings.*

Level of Impairment in role performance at school: For boys (CAFAS)

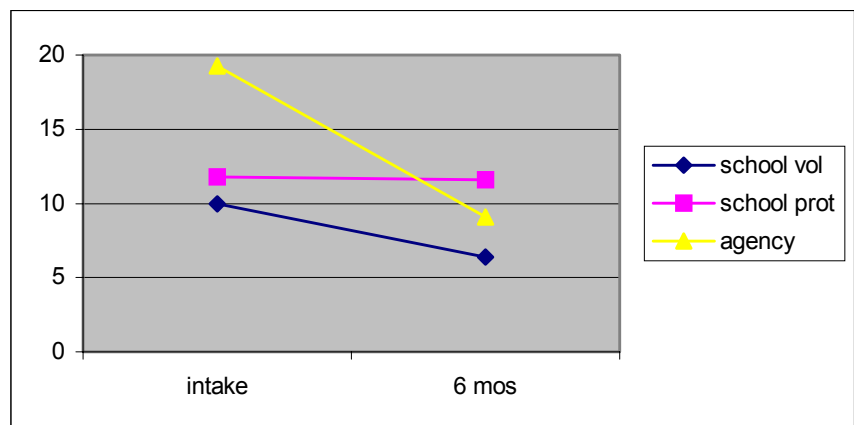


55% of surveyed teachers reported, without prompting, that the program had led to improved behaviour of students who have worked with school-based social workers.

When we analyzed our six-month pre-post intervention data, we found that *both school-based models appeared more effective at addressing behaviour in school than the agency-based model – especially for boys.*

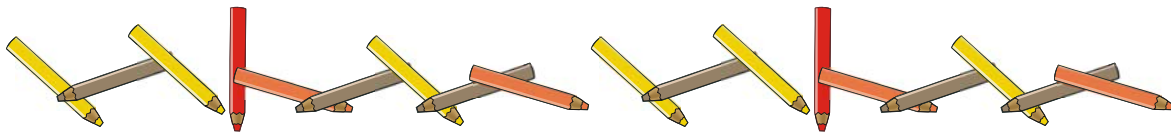
On the other hand, children aged 10-13 were much more likely than older or younger children to present with behavioural problems at home. Amongst children in this age group, the agency model dealt with more serious cases and led to greater improvements than school-based models. We also found that the agency model seemed more effective in dealing with self-harm, especially among girls. In fact, self-harm issues appear to have become more serious over time among girls participating in the school-based protection model of treatment.

Level of Impairment in Home Performance for children aged 10- 13 (CAFAS)



## Reflections

The provincial government has expressed its support for cross-sectoral partnerships in children’s services, through such initiatives as Making Services Work for People, and the Early Years Challenge Fund. These initiatives, and the background research they are based upon, also emphasize the importance of service integration and simplifying access for families. However, changes in provincial policy have narrowed the mandate of both schools and child welfare organizations. The school boards involved in this project have experienced increasing pressure from provincial funders to focus their resources on basic classroom education, coupled with more centralized control over how this mandate is carried out. Similarly, child welfare organizations have been required to focus much more narrowly on child protection. *These trends greatly reduce the capacity of these kinds of organizations to form the kinds of partnerships envisioned by, for example, the McCain & Mustard report.* Since these data were collected, the programs described here have been forced to cut back the school-based services they provide.



### Additional Information on Methodology

#### Sample for Outcome Tracking

|         | School-based non-protection cases | School-based protection cases | Agency- based protection cases |
|---------|-----------------------------------|-------------------------------|--------------------------------|
| Renfrew | 34                                |                               | 37                             |
| Huron   | 46                                | 33                            | 9                              |

#### Data Sources for Outcome Tracking

| Data Source  | Information included   | Methodology used   |   |
|--|--|--|---|
|  |  | Renfrew  | Huron   |
| <b>Child and Adolescent Functional Assessment Scale (CAFAS)</b> – a standardized assessment of child behaviour used specifically for this study  | Child behaviour at intake and 6 months (some family situation) | Specially Trained Assessor completes form with input from primary social worker and others as needed |   |
| <b>Risk Assessment</b> – a tool used by all CAS’s when they begin working with a child, and at six month intervals. Intended to help agencies accurately assess the level of risk to the child | Family situation at intake and 6 months (some child behavior)  | Primary Social Worker (at intake and 6 mos)  | Intake worker (at intake)<br>Primary Social Worker (at 6 mos) |
| <b>Eligibility Spectrum</b> –another tool used by all CAS’s to track the reasons why children come into contact with the child welfare system, and their severity.                             | Presenting Issue for all cases at intake                       |  |   |
| School Board Records   | # of Suspensions   | School board staff   |   |

## Creating a Climate of Safety: The Policy Implications

Our evaluation project concluded with a forum at which partners explored the broader implications of the findings reported here. They identified several key policy questions that emerged out of the research findings. These questions are intended to provoke and inform discussion among advocates, policy makers, and practitioners about how public policy can maximize the return on resources invested in child welfare.

- ❖ This report demonstrated that it is possible for child welfare organizations to play an important role in partnerships for safer, healthier school environments. Given that the province has expressed a commitment to improved child health and safety through greater service integration, ***how can mandatory services be supported to participate?***
- ❖ This report demonstrated that school-based social work programs enhance collaboration between child welfare organizations, schools, and families, and allow each to work more efficiently and effectively within existing funding envelopes. ***How can public policy continue to support innovation in child welfare? How can policy support creative programming within existing service structures and not only in demonstration projects?***
- ❖ This report demonstrated that alternative, collaborative approaches can improve the effectiveness of child welfare services. However, it also shows that this kind of programming is becoming increasingly difficult to sustain within existing funding structures. ***How can public policy ensure effective and efficient services, without imposing restrictive models of service delivery that do not fit the needs of every community?***
- ❖ No single organizations can address complex issues like bullying or youth crime alone. However, this report demonstrated that school board/child welfare partnerships can, with sufficient resources, initiate preventative programs that neither organization had the skills or resources to sustain alone. Given that the province has acknowledged the importance of removing obstacles to a child's readiness to learn, ***how can public policy support proactive and preventative efforts to create a climate of safety and well being?***
- ❖ This report demonstrated that school-based social work allows teachers and child welfare workers to understand the needs of individual children more holistically. It also allows for earlier intervention with certain groups of children at risk, and the development of more coordinated strategies for action. It appears that this partnership has led to efficiencies that are visible only when the two systems are considered as components of a larger whole. ***How can public policy document and support these kinds of system level efficiencies?***