



October 2004

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Park, J., Metraux, S., Broadbar, G., & Culhane, D. P. (2004). Child Welfare Involvement Among Children in Homeless Families. Retrieved from http://repository.upenn.edu/spp_papers/22

Reprinted from *Child Welfare*, Volume 83, Issue 5, October 2004, pages 423-436. Publisher URL: <http://www.cwla.org/>

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Abstract

An analysis of 8,251 homeless children in New York City found that 18% of them received child welfare services over the five-year period following their first shelter admission, and an additional 6% had a history of having received such services before their first shelter admission. Recurrent use of public shelters, exposure to domestic violence, older age at first episode of homelessness, and larger number of children in a household were associated with an increased risk of child welfare involvement. The high rate of crossover between homelessness and the child welfare system suggests the need for service coordination for children in homeless families.

Keywords

child welfare services, public shelters, homelessness

Comments

Reprinted from *Child Welfare*, Volume 83, Issue 5, October 2004, pages 423-436. Publisher URL: <http://www.cwla.org/>



Child Welfare Involvement Among Children in Homeless Families

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and Dennis P. Culhane*

An analysis of 8,251 homeless children in New York City found that 18% of them received child welfare services over the five-year period following their first shelter admission, and an additional 6% had a history of having received such services before their first shelter admission. Recurrent use of public shelters, exposure to domestic violence, older age at first episode of homelessness, and larger number of children in a household were associated with an increased risk of child welfare involvement. The high rate of crossover between homelessness and the child welfare system suggests the need for service coordination for children in homeless families.

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0009-4021/2004/050423-14 \$3.00 © 2004 Child Welfare League of America

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Although researchers have found high rates of childhood experiences in out-of-home care among homeless adults (Bassuk et al., 1997; Burt et al., 1999; Herman, Susser, Struening, & Link, 1997; Piliavin, Sosin, Westerfelt, & Matsueda, 1993), the dynamics between child welfare services and homelessness among children are largely unexplored. Researchers have noted that economic hardships, housing instability, and psychological distress related to homelessness lead parents to place their children with extended family members or friends, or lead child welfare services to intervene (Nelson, 1992; Steinbock, 1995; Williams, 1991). McChesney (1995) noted that homeless mothers were more likely than housed mothers to have an open child neglect or abuse case or to have a child protective services caseworker assigned to them.

Although children in homeless families are considered at great risk of child welfare involvement, only a few empirical studies have examined the prevalence of child welfare involvement among this population. A study of 178 sheltered homeless adults in Maryland found that among parents of minor children, approximately 6% had at least one child in foster care (DiBlasio & Belcher, 1992). A study of 179 homeless women in California showed that 15% of homeless mothers had children in the formal foster care system (Zlotnick, Robertson, & Wright, 1999). A study of 543 homeless and housed low-income families in New York City found that homelessness was an important predictor of mother-child separations among those families and that 11% of children from homeless families were in foster care (Cowan, Shinn, Weitzman, Stojanovic, & Labay, 2002).

These studies, however, were based on small samples and retrospective self-reports by homeless parents. Using an alternate approach, J. F. Culhane, Webb, Grim, Metraux, and Culhane (2003) followed an entire one-year cohort of children born to women in Philadelphia and found that 37% of children of ever-homeless mothers received in-home services or were placed in foster care.



This study is limited in that it did not look into the sequencing of homelessness and child welfare involvement.

The present study prospectively follows a cohort of children in sheltered homeless families to examine the extent of their subsequent involvement in the child welfare system. This entails examining child welfare service use among the children before and after their initial episode of homelessness. In addition, this study examines the associations among experiences in the homeless shelter system, children's demographic and familial characteristics, and children's entry into the child welfare system, either through a foster care placement or nonplacement preventive services.

Method

Data

To examine child welfare involvement among homeless children, this study used administrative data from two New York City service systems: the Department of Homeless Services, which maintains comprehensive records of shelter use and basic demographic information on family shelter users, and the Administration for Children's Services, which maintains the Child Care Review Service database on children who enter the child welfare system. The data on family shelter users were available back to 1986, and information on children in child welfare was available from 1981 through 2001.

The researchers selected the children for this study from households that entered the family shelter system for the first time in 1996. All children included in the analyses were younger than 16 at the time they entered the shelter. The inclusion year ensures that each child has an observation period of five years for child welfare involvement after his or her first entry into a family shelter. Of 8,251 children who met these criteria, 467 had a child welfare history before their first shelter entry. For bivariate



and multivariate analyses, the study included 7,784 children who were not involved with the child welfare system before their first shelter admission. For multivariate analysis, the researchers randomly selected one child per family to avoid a violation of the regression assumption of independence among observations.

Measures

Dependent Variable. Child welfare involvement in this study is defined as placement in out-of-home foster care or receipt of preventive services from the Administration for Children's Services without out-of-home placement in New York City.

Independent Variables. The dataset on family shelters contains information on the dates of shelter stay, basic demographic characteristics, and family characteristics. Researchers measured experiences in the homeless shelter system by the number of shelter admissions and average annual length of shelter stay during the observation period. An episode of shelter stay is considered a span of shelter use that both follows and precedes a 30-day absence from a shelter (D. P. Culhane & Kuhn, 1998; Metraux & Culhane, 1999; Piliavin et al., 1993). The average annual length of shelter stay is the total number of days in shelters divided by the number of years observed, which standardizes length of shelter stay.

Variables related to children's characteristics are race and ethnicity, gender, age at the first admission to public shelter, and receipt of public assistance benefits. Race and ethnicity are classified as non-Hispanic African American, Hispanic, and other. Variables measuring family characteristics include the reason for homelessness, the number of children in a household, the number of adults in a household, the gender of the household head, and the age of the household head at the first entry into the homeless shelter system. Researchers classified the reason for homelessness into three categories: economic reasons, such as eviction by landlord or primary tenants; domestic violence, indicating



spousal or child abuse; and other reasons, which include disaster, crime, referral by an outside agency, and new arrival in town.

Data Analysis

The first part of the analysis presents descriptive information on child welfare involvement of the study group. The second part of the analysis uses Cox regression to examine the influence of demographic and familial characteristics and experiences in homeless family shelters on the risk of entry into the child welfare system following the first admission to a family shelter. This study followed children in homeless families over a five-year period to examine the extent of their involvement in the child welfare system.

Cox regression, a type of statistical method known as survival analysis, is useful for analyzing longitudinal data on the occurrence and timing of events. In Cox regression models, participants are considered at risk for experiencing an event until they either experience the event or are censored, in the sense that observation is terminated before the event occurs. In addition to its ability to handle censored observations, other attractive features of Cox regression are that it makes it easy to incorporate covariates whose values change over time and that it does not require choosing a particular probability distribution describing survival times (Allison, 1995).

Results

As Table 1 shows, 24% of the 8,251 sheltered children had some record of involvement with the child welfare system. Of the study group, 18% were placed in out-of-home care or received preventive services without out-of-home placement over the five-year period following their first shelter admission. An additional 6% had histories of having received such services before their first admission to a public shelter. With respect to type of services, 16% of the study group experienced out-of-home placement

TABLE 1
Child Welfare Involvement of Homeless Children in New York City (N = 8,251)

<i>Involvement Issue</i>	<i>Percentage</i>
<i>Timing of Child Welfare Involvement</i>	
Before first shelter admission	5.7
During shelter stay	2.6
Between shelter admissions	15.3
<i>Type of Service</i>	
Nonplacement preventive services	7.4
Ever placed in out-of-home care or received preventive services	23.5

through the child welfare system and 7% received preventive services without out-of-home placement. Of those who entered the child welfare system after their first shelter admission, 15% received child welfare services while staying in a shelter, whereas the other 85% did so between or after shelter admissions.

The study group was predominantly African American (60%) and Hispanic (38%). Approximately half of the study group was male. The mean age of the study group at first entry into public shelters was 4 years. Most sheltered children (70%) were preschoolers when they entered a public shelter for the first time, followed by school-age (22%) and teenage children (8%). Most of the children (77%) came from families that became homeless primarily due to economic reasons, followed by children in families that became homeless due to domestic violence (10%). A large proportion of the children (69%) received public assistance benefits at the time of shelter entry.

The average number of adults in the children's household was 1.2, and 94% of household heads were female. These findings indicate that a substantial proportion of the children lived in families headed by single mothers. The households had an average of 2.4 children. The average household head was 27 years old when he or she first used a public shelter.

This study also examined the children's experiences in the homeless shelter system. For those who received child welfare services after their first shelter admission, researchers calculated entries into and length of stay in the shelter system up to the point when each child entered the child welfare system. Of the study group, 28% stayed in the shelter system more than once. Children who received child welfare services after entering a shelter were more likely than those without child welfare involvement to experience recurrent shelter admissions (40% vs. 24%). The average annual length of shelter stay was 143 days for children with child welfare involvement, compared with 66 days for those without child welfare involvement.

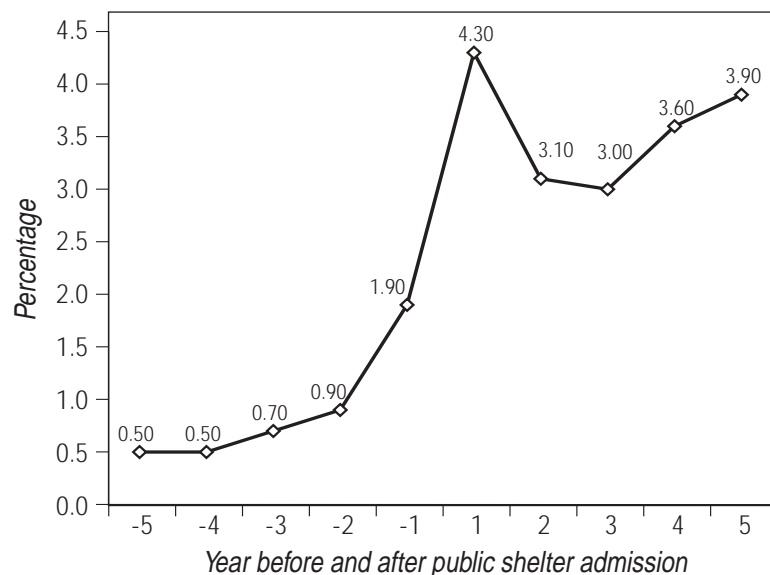
Figure 1 shows the timing of child welfare involvement of homeless children. The percentage of children who first began to receive child welfare services substantially increased after the first episode of shelter entry and remained comparatively high thereafter. More than 4% of all children in the study group became involved with the child welfare system for the first time within one year of their first shelter admission, whereas the rates were less than 2% in the years before homeless episodes.

The prevalence rate of child welfare involvement in the study group varied by demographic characteristics and shelter experiences, as Table 2 shows. School-age and teenage children at the time of first entry into the homeless shelter system were more likely than were preschool children to receive child welfare services (21%, 23%, and 18%, respectively). Children in families that became homeless due to domestic violence had a higher rate of child welfare involvement than did those in other groups: 24% of children from the domestic violence group received child welfare services, compared with 19% of those from the economic reasons group and 17% of those from the other reasons group.

Recurrent shelter entries and longer stays in the shelter system were also related to an increase in child welfare involvement: 17% of children with one episode received child welfare services,

FIGURE 1

Percentages of Children Who First Received Child Welfare Services Before and After First Entry into the Homeless Shelter System (N = 8,251)



compared with 22% of those with two episodes and 27% of those with three or more episodes. Of children with an average annual length of shelter stay of more than 90 days, 40% entered the child welfare system, whereas approximately 10% of those with the annual average length of shelter stay of less than 90 days did so.

Table 3 displays the results of a Cox regression. School-age children at the time of first entry into a shelter were 1.25 times more likely than preschool children to be involved with the child welfare system. Teenage children showed a high prevalence of child welfare service use in the descriptive results, but their associations were not statistically significant in the multivariate model. The likelihood of child welfare involvement for African American children was 20% lower than that of Hispanic children.

An increase in the number of children in a family was associated with a 6% increase of the risk of child welfare involvement,

TABLE 2
Rates of Child Welfare Involvement Among Homeless Children Without Child Welfare Histories Before Shelter Admission ($n = 7,784$) (in percentages)

<i>Characteristic</i>	<i>Child Welfare Involvement</i>
<i>Age</i>	
Preschool	17.8
School-age	21.3
Teenage	23.2
<i>Reasons for Homelessness</i>	
Economic strain	18.6
Domestic violence	23.6
Other reasons	17.2
<i>Number of Episodes of Shelter Stay</i>	
1	17.1
2	22.3
3 or more	27.1
<i>Average Annual Length of Shelter Stay (in days)</i>	
1–30	12.8
31–60	7.2
61–90	12.7
91 or more	39.5

$p < .001$.

whereas an increase in the number of adults in a family was associated with a 26% decrease of the risk of child welfare service use. A one-year increase in age of household head decreased the likelihood of child welfare involvement by 1%. Domestic violence as a major reason for homelessness was associated with a 26% increase in the risk of child welfare involvement of the children, compared with economic reasons. Recurrent shelter entries and longer stays in a shelter were related to a higher risk of child welfare involvement. An additional number of shelter admissions increased the risk of child welfare involvement by 70%. An additional 30 days in the average annual shelter stay was associated with an approximately 90% increase in the risk of receiving child welfare services.

TABLE 3
Cox Regression for Child Welfare Involvement Among Children In Homeless Families (n = 4,534)

<i>Characteristic</i>	Risk Ratio
African American (reference group: Hispanic)	0.80*
Male	1.02
Number of children in household	1.06*
Number of adults in household	0.74***
Age of household head	0.99*
Male household head	1.06
Number of episodes of shelter stay	1.70***
Average annual shelter stay (30 days)	1.89***
Number of episodes X Annual length of stay	0.97***
Likelihood ratio χ^2	1,329*** (13 df)
<i>Age (Reference Group: Preschool Children)</i>	
Teenage children	1.04
School-age children	1.25*
<i>Reason for Homelessness (Reference Group: Economic Reasons)</i>	
Domestic abuse	1.26*
Other reasons	0.66**

* $p < .05$. ** $p < .01$. *** $p < .001$.

Discussion

This study examined the prevalence of and factors associated with child welfare involvement among children who have lived in the New York City homeless shelter system. The findings identified 18% of this group as having been placed in out-of-home care through the child welfare system or having received nonplacement preventive services through the child welfare system within five years of their first admission to the shelter system. Given findings that between 3% and 8% of children from families receiving public assistance had open child welfare cases or were placed in foster care over a five-year period (Cowal et al., 2002; Needell, Cuccaro-Alamin, Brookhart, & Lee, 1999), children in sheltered families were at greater risk for child welfare involvement than were those among comparably poor but, in the aggre-



gate, more stably housed populations. An observation of the rate of child welfare involvement in the study group before and after the families' first shelter admissions also showed that this rate substantially increased once children entered homeless shelters. Furthermore, frequent shelter admissions and longer stays in shelters were closely associated with elevated risk for children's entry to the child welfare system.

A possible explanation for these findings is that, as Cowal et al. (2002) pointed out, homelessness has a lasting, detrimental effect on family stability and may magnify familial dysfunctions, even after the family has regained more stable housing. The results of this study offer some support for this conclusion, as domestic violence prior to initial shelter entry was associated with higher risk of subsequent child welfare services. Conversely, the finding that the presence of additional adults in the household was associated with a decreased risk of entry into the child welfare system also supports this explanation, as this can be seen as indicative of a more extensive or more cohesive family unit.

An alternative explanation centers on the shelter environment: Difficulties with fitting into shelter life due to exposure to new residential facilities, lack of privacy, and disconnection from schools and neighbors may strain relationships between children and parents and necessitate the involvement of child welfare services. This may explain the finding that older children, and particularly school-age children, had higher rates of child welfare involvement than did preschool children. Older children may be more likely than younger children to be aware of the distress associated with homelessness and to have difficulty in adjusting to shelter life.

A third explanation involves a "fishbowl effect"—families, once in the shelter system, are subject to heightened scrutiny from service providers in homeless shelters, and people are more likely to refer them to child welfare professionals. Support for this explanation comes from findings showing the steady increase in risk for child welfare involvement associated with longer and more frequent shelter stays, and the particularly steep increase



in child welfare placements that occurred among families accruing more than 90 days of annual shelter use.

This study's findings suggest not only that homelessness among families has wide effects on family structure, but also that considerable public costs are associated with these effects across public services systems. Furthermore, measures to prevent homelessness, as well as related housing interventions, may result in a range of benefits, such as reductions in the demand for child welfare services. Evaluations of housing programs should take into account such potential collateral effects both in the child welfare system and possibly in other social welfare systems when assessing the effectiveness of housing for homeless families.

The uncertainty regarding the specific pathways whereby shelter use leads to child welfare service involvement points to this study's principal shortcoming, as little detail is available on the dynamics of the relationship between these two systems. Further data on behavioral, family, and economic measures would facilitate understanding how experiencing a shelter stay so often precedes involvement with child welfare. As such, the broad brushstrokes provided by these findings provide opportunities for additional research that is able to collect more detailed data on more limited samples of families. Such research should include further investigation into the extent of child abuse and neglect among homeless families and whether increased occurrences of this behavior warrant an increased level of child welfare involvement or, alternatively, whether increased concerns related to lack of housing or other material hardships precipitates such surveillance.

Another issue particularly worthy of further research is the extent to which out-of-home care facilitated by the child welfare system, as is measured here, is indicative of higher rates of out-of-home care by means that this study is unable to detect, involving placements through extended kinship and other less formal conduits. This underscores that the rates of family disruption reported in this study understate the actual level of family disruption that occurs among homeless families.

Nonetheless, by showing the widespread occurrence of child welfare services by children entering homeless shelters, this study

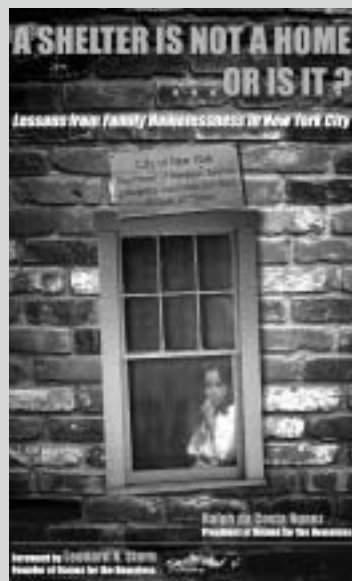
suggests the need for service integration between the homeless shelter and child welfare systems, so as to create more efficient and effective service provision, with the aim of obviating the need for further involvement in either system. In the meantime, homeless-service providers need to pay more attention to identifying and working with families at risk of child welfare service use. Such a policy focus, however, should not be blind to indications that an effective intervention against child welfare services use may be to address the conditions that necessitate a shelter stay in the first place. ♦

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