Reunification for children in out-of-home care - Part 4: The need to focus on re-entry, not just reunification outcomes  

November 2018

Knowledge and research are very limited around services and supports which promote successful reunifications. Furthermore, assessments of effectiveness generally use ‘rate of reunification’ as their primary outcome measure and do not monitor program impact after children have been returned. Given the high level of reunification breakdowns, this paper will highlight the importance of including measures of post-reunification outcomes to determine program effectiveness.

Rates of post-reunification breakdown
There is strong and reliable evidence to indicate that after leaving out-of-home care and being reunified with their parents, many children subsequently experience abuse and re-enter the child protection system. A large UK study found that around half of children who had been reunified with their birth families suffered further abuse. Rates of re-victimisation were especially high (around 78%) for children reunified with substance misusing parents.

The study used data from the UK Department for Education to track a cohort of 10,270 care-leavers over a 5-year follow-up period. The study found that 30% of reunified children were returned to out-of-home care within five years. These findings highlight that given the high rates of reunification failure, determining the effectiveness of supports and services aimed at promoting reunification also requires monitoring children’s progress after they have returned home.

Limited research on re-entry outcomes
Research on effective reunification programs is very limited particularly in an Australian context. The focus of much research is on whether or not participating in a particular program increases the likelihood that a child will leave out-of-home and be reunified with their birth family. For example, a recent Australian review compared a number of studies which had explored the effectiveness of substance use disorder (SUD) treatment programs for mothers of children in care using rate of reunification as a key outcome measure. The authors of the review

FAST FACTS

- Rates of maltreatment are high for reunified children, particularly those returned to substance misusing parents.

- A UK study found 78% of children reunified with a substance misusing parent suffered further abuse.

- Around 1 in 3 reunified children return to out-of-home care within 5 years (UK data).

- Most evaluations of reunification programs focus on whether program participation increases the likelihood that a child is reunified with their family.

- Very little research examines whether program participation reduces rates of future maltreatment, or re-entry into the child protection system even though these are common outcomes for reunified children.
There is a significant risk of failure when attempting to reunify a child from out-of-home care with their birth family, particularly when a parent has a substance misuse disorder.

Failed reunifications can often have serious and negative consequences including exposing children to additional experiences of abuse and neglect.

Important insights can be gained from research on programs which have focused on reunification as an outcome. However, programs and services shown to promote reunification do not necessarily prevent re-entry into the child protection system.

Research on programs with evidence of impact on post-reunification outcomes, such as reducing future maltreatment and re-entry to OOHC, should inform the selection of programs aimed at supporting reunification.

Where possible, future evaluations of programs designed to promote successful reunification should include measures of post-reunification outcomes such as future maltreatment notifications and rates of re-entry to OOHC.

Identified important elements of programs which were associated with higher rates of reunification. These included longer treatment duration and the provision of additional tailored support services. However the authors did not report on the impact of SUD treatment programs on the quality of care the reunified child received or the rate of re-entry to the child protection system.

The importance of re-entry outcome data

A number of studies have suggested that participating in certain reunification programs and services may increase the likelihood that a family will be reunified with their children in the short term. However very few studies have tracked children over time to demonstrate whether programs are effective in the long term at reducing the recurrence of maltreatment and preventing re-entry into care. This is widely acknowledged as an important gap in the research.

A recent study which illustrates importance of tracking re-entry outcomes was an evaluation of the Strengthening Families Program (SFP). This was a 14 week evidence-based program focused on improving parenting, child and family skills. Prior evaluations had identified that program families demonstrated greater reductions in children’s problem behaviours, and improvements in parenting abilities and family functioning. However, a 3-year follow up identified that 24 percent of intervention children versus 19 percent of comparison children had re-entered the foster care system. Similarly, a US program that looked at the impact of SUD treatment on re-entry rates also failed to find positive long term results. Families were provided with a range of services including substance abuse treatment, employment counselling and parent training. While reunification rates were similar for the program and the comparison group, at a 400-day follow-up, more of the program children than the comparison children had re-entered care (23% versus 7%). Findings from both of these programs highlight the need for evaluations of reunification programs and services to examine long term outcomes including the recurrence of maltreatment and re-entry rates.

Supporting families to be safely and permanently reunified with their children is a complex and long term process. Research can give some valuable insights into effective practices. Programs with evidence of reducing re-entry to care are reviewed in a separate research summary.
Reunification

References


