

Spokane County's
Drug Endangered Children Project:
How are the Children?
Executive Summary

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Introduction

The United States is facing an epidemic of manufacturing, trafficking and use of methamphetamine and other illegal inhalant drugs. While this epidemic has caught the attention of law enforcement and public health, the needs of the children living in the so-called “methamphetamine homes” have not yet been addressed. These children are endangered, not only from the chemicals involved, but also from parental abuse and/or neglect.

Parental drug use is significantly and consistently associated with the compromised safety, health and well-being of their children. Incidents of reported child abuse and neglect are strongly correlated with parental drug use. Over the past 10 years, the production, use and sale of methamphetamine has exploded throughout the county, moving geographically from the west to the east.

Communities are beginning to recognize the crucial need for extensive inter-agency collaboration for addressing the myriad of consequences for children that are created by this epidemic. Spokane County, in the State of Washington, created its own community response titled “the DEC Project,” whose mission is to implement and evaluate a collaborative community response among law enforcement, prosecutorial, medical and social service professionals to the needs of drug-endangered children.

This Executive Summary provides an overall review of the Final Report (see, Altshuler, Cleverly-Thomas, and the Spokane County DEC Team, 2007) that presented the findings from the evaluation of the four years of the DEC Project, focusing specifically on the health status and well-being of the children involved.

Purpose and Methodology

The overarching purpose of the Collaborative Community Response to Drug Endangered Children (DEC) project is to implement and evaluate a collaborative response among law enforcement, prosecutorial, medical, child protection (CPS), and social service professionals to the needs of children endangered by exposure to substance abuse and manufacturing, trafficking, and use of illegal drugs, including methamphetamine, throughout Spokane County. A broad coalition of community stewards, including law enforcement and

prosecution, child protective services, and social service agencies, joined together to create and implement an organized plan for supporting the health of their children. The Spokane County DEC Team added additional agencies and professionals to address the expanding scope of the DEC crisis. The Team also invited an external evaluation team to evaluate the project's goals.

To evaluate the project's goals, the evaluation team assessed both the extent of interagency collaboration achieved and the extent to which the needs of the children were being addressed. The first assessment was completed within the first year of the project, and has already been extensively reported in a variety of outlets, including in a major journal publication (see, Altshuler, 2005; Altshuler, et al., 2004). The second assessment was completed after four years of the DEC project.

We began our attempt to determine the needs of the children involved with substance abusing families by following an already existing model of comprehensive assessment for maltreated children created by Perry and his colleagues (Perry, et al., 2003). Because of the myriad of DEC partner agencies with their own plethora of individualized required documentation, we were strongly committed to collecting data from their already existing assessment and intake forms completed by workers at each participating agency, including social services and/or law enforcement. Therefore, we categorized the existing agency data into the six life domains that Perry and his colleagues had identified: (1) physical/medical, (2) trauma history, (3) developmental, (4) social/family, (5) mental health: emotional/behavioral, and (6) cognitive/academic: school functioning. Together with basic demographic information, we added a domain for child welfare history. In addition, we created a set of variables that addresses law enforcement and prosecutorial involvement. As thoroughly delineated in the Final Report, this commitment to using agency-based data was probably our most significant methodological challenge and limitation, in that we were completely reliant upon each agency's willingness and ability to provide us with access to their potentially unreliable records. This is not intended as a criticism of agency records; it is, rather, an acknowledgement of the ongoing difficulty of community-based research with agencies whose primary focus needs to be on service delivery over record keeping.

After securing all the requisite Human Subjects Protection approval, all the partner agencies worked diligently to ensure that data were provided accurately and thoroughly to the evaluators, albeit within the bureaucratic and agency limitations by which they were faced. The remainder of this Executive Summary focuses on what was learned, and then the implications for the future of these findings.

Summary of Findings

Demographic Information: From January 2004 through December 2006, there have been 399 children, from 215 unique families, identified as drug-endangered through this project. Almost 75% of the children had at least one sibling who was also identified as “drug endangered.” The children ranged in age from infancy to 16 years old, averaging 61.7 months (5.1 years) at the time of referral. Overall, there were 219 (54.9%) males and 180 (45.1%) females. The children were predominantly Caucasian (68.7%). The next largest segment was children who were identified as being bi-racial or tri-racial (10.5%). Also represented were Native Americans, African Americans, Hispanics/Latinos, and Asians. This racial breakdown reflects the overall demographics of children placed into foster care throughout Spokane County, with higher than average representation of children of color and Native Americans.

Child Welfare History: Almost three-quarters of the enrolled children enrolled in the DEC program had a law enforcement-signed authorized emergency placement (AEP) that resulted in placement into substitute care by child welfare. These AEPs resulted from both arrests and CPS referrals where law enforcement felt there was enough risk of imminent harm to place the children into care.

The drug-endangered children averaged almost six previous referrals to child protective services, with an average of almost four of those referrals being accepted for investigation. The vast majority (82%) of the referrals was for neglect, and 72% were related specifically to parental drug use. (Currently, a parent abusing substances is not enough information to open a CPS case. The referent must be able to describe how the parent’s drug use is affecting the well-being of the child. This is why the majority of the referrals are for neglect.) Parents predominantly used either methamphetamine (52.4%) or were poly-substance abusers (30.9%, which included meth and/or alcohol). Almost half of the children were removed from “mother only” households, while 43% were removed from two-parent households.

At the time of referral, approximately 70% of the children were placed into foster care, split almost evenly between non-related and kinship foster homes. Another 18% of the children were placed in more restrictive settings, while 2% remained at home (but state dependent). Almost 10% of the referred children were not placed into state custody. Unfortunately, by the end of 2006, less than 1/5 of the children had achieved permanency through adoption or guardianship, while 1/3 of the children had been returned home.

Levels of Child Well-Being: The children enrolled in the Spokane County DEC Project are a highly traumatized, troubled, developmentally delayed group. The children scored significantly and uniformly low on virtually all measures of functioning. The children's average level of developmental functioning was at the 27th percentile (significantly lower than what is considered "normal" at the 50th percentile). Over half of the children were not up-to-date on their immunizations, and fell significantly lower than the 25th percentile for height, weight and head circumference. The children's scores across domains for trauma symptoms, including anxiety, dissociation, depression, anger, and sexual concerns were statistically problematic. Potentially most concerning, the average score for post-traumatic stress suggests that the children enrolled in the DEC program are a highly traumatized group, as half fall within the "severe posttraumatic disturbance" category. On the plus side, there was a significant improvement in the categories of anxiety, depression, and posttraumatic stress for the children who received counseling services and were reassessed for trauma symptomatology. Almost 30% (115) of the children were able to receive mental health counseling.

Law Enforcement Outcomes: The majority of the parents' cases were referred for prosecution, with all those referred being charged with felonies, rather than misdemeanors. The most common result of these referrals for prosecution was the parent being convicted by entering a guilty plea. As a result, none of the children in this study ever had to go to, testify at, or observe a court hearing at which their parents were the defendants.

Discussion and Implications

Overall, the 399 children in this study were found to be a highly traumatized, troubled, developmentally delayed group of very young children. Given both the developmental delays, and the average age of five years, the majority of these children do not appear to have the capacity to protect themselves from the dangerous drug environments into which they are placed by their caregivers. The pervasively low levels of functioning across domains for these children explain the label of "drug endangered," meaning that parental drug use has significantly endangered the children's health and well-being. Additionally, it is important to be aware of the extensive medical and dental needs of this population of children.

One of the most critical lessons learned from this project is the absolute necessity of having a DEC case coordinator, who is co-located at CPS, but is an employee of the child advocacy agency. For the Spokane County DEC Project, this role was filled by a master's level social work professional who oversaw the coordination of all services, from the moment of law enforcement contact through the achievement of permanency, for all children identified as drug

endangered. This professional is available to the CPS Intake staff in order to assist in the identification and immediate placement of drug endangered children, integration of all subsequent services, and to review placement forms for drug endangered children who are placed in CPS care. The DEC case coordinator is also available on-site to respond to law enforcement requests to accompany them on calls for immediate response in cases where children may be living in a drug endangered environment.

Both CPS and law enforcement report the Spokane County DEC Project has dramatically increased collaboration between the two agencies. Both agencies have learned their respective investigations are strengthened by this collaboration. Now, if CPS is receiving allegations where there is not enough information to open a CPS investigation, they contact one of the designated DEC detectives, who can follow up with the information from their end. In turn, law enforcement views CPS as a resource that can provide necessary additional information for case investigations, such as how many people are living in the home (including children), and if CPS is currently involved. If CPS is involved, they are often able to obtain additional documentation to support their investigation. Most importantly, both agencies have discovered they have a common goal: protecting children. The DEC Project has greatly increased the trust between these two agencies.

It is important to recognize that this study occurred in Spokane, Washington, and therefore may not be generalizable to other areas or regions of the country. Spokane County's ethnic diversity is not fully representative of the U.S., because we have lower than average percentages of African-American and Hispanic/Latino citizens, together with a higher than average percentage of Caucasian and Native American citizens. Additionally, Spokane, Washington, was one area of the country in which the so-called "meth epidemic" exploded rapidly, which may or may not reflect the realities across the country as a whole.