

# What's the Use

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### This Issue: Highlights on Children & Families

#### THOUGHTS ON CHILDREN & FAMILIES

Gina Browne

Director, System-Linked Research Unit



### 6 Critical Life Messages

I believe in you  
I trust in you  
I know you can handle this  
You are listened to  
You are cared for  
You are very important to me  
(Barbara Coloros)



# Use as Purpose

“Using, employ for a purpose, handle as an instrument, put into operation”

## The Comparative Effects & Expense of More and Less Integration of Services that Provide Treatment and Rehabilitation for Children with Multiple Disabilities: RCT



### Objective:

To compare the effectiveness and efficiency of more and less integration of the care and treatment services for children and youth (0-19) with moderate/severe multiple developmental or disabilities and their families in Simcoe York. The question to be explored is the cost-benefit of the added resources for integration and co-ordination.

Question(s): 1) Does the more integrated Children Treatment Network (CTN) model of service improve family-centered services, parent mental health, and parental perceived social support compared to the outcomes of usual self-directed use of less integrated children's treatment services alone? 2) Does CTN produce more favourable parenting styles, family function and the quality of the child's life as well as reduce expenditures for the families' use of all other health and social services compared to the outcomes of self-directed use of less integrated services? 3) Do children with more severe disability and families with parents with a mental health problem benefit most from the more integrated CTN approach to the treatment of childhood disability in Simcoe York? At what cost?

**Project Date:** October, 2006 - September, 2009

### Proposal Submitted:

- Ontario Ministry of Children & Youth—June 2006



Robert Morton

Principal Investigator: Sandy Thurston,  
Director, Evaluation & Planning &  
Robert Morton, CEO, Children's Treatment Network  
In Collaboration with  
Gina Browne, McMaster University  
Peter Rosenbaum, CanChild

## Why bother?

Among children in Canada aged 0-4 years, 1.6% have disabilities or developmental delays and between 5-14 years of age, 4% have disabilities/delays. Of school-aged children, half of the disability was not detected until admittance to school. Of disabled children 0-14 years of age, 1.4% have a severe or very severe disability (Statistics Canada (PALS), 2001). Not surprisingly, the survey points out, the more severe the child's disability or delay, the greater the impact on the family situation. Some 73% of families of children with severe to very severe

disability experienced an impact on their employment situation. Only one-third of children with severe and very severe disability had all their needs for specialized services met and 69% of their parents indicated they did not receive all the help they needed, both issues because of costs.

Building community capacity through collaboration between agencies is offered as one response to this growing need. The obvious solution to the problem of fragmented services is to offer services through a network of integrated provider organizations that work to reduce duplication of intake and assessment procedures and enhance comprehensive care to the

family including mental health services. The problem with this approach is that collaborating organizations usually have different goals, funding streams, and stakeholders, making service integration worthwhile in theory, not easily accomplished in practice and rarely evaluated for its fidelity and impact on individual, family and system level outcomes (Provan 2003).



**Did you know...**

- Two-thirds of children with severe to very severe disability did not have all their needs met.
- ◆ 69% of parents did not receive all the help they needed
- ◆ 62% had no help from family and friends.

“I was important in the life of a child”



**Did you know...**

- 1.6% of Canadian children aged 0-4 have disabilities and 4% of children aged 5-15 have disabilities. 50% of these disabilities are not detected until school age (PALS, 2001).
- 73% of these families have impacts on their employment
- ◆ Working fewer hours (47%)
- ◆ Changed hours of work (44%)
- ◆ Did not take a job (42%)
- ◆ Quit working (30%)
- ◆ Turned down promotions (26%)

These rates are twice that of families with mild disabilities.

**The Comparative Effects and Expense of Augmenting Usual Children’s Aid Society (CAS) Care with a Regional Differential Response and Wraparound Prevention Service for Children Referred to the Care of Children’s Aid Societies: A Multicentre Randomized Trial**

**Principle Investigator:**  
**Dominic Verticchio,**  
**Hamilton Children’s Aid Society, et al.**  
**In collaboration with Gina Browne,**  
**McMaster University.**

The purpose of this study is to compare 250 children randomly assigned to receive usual Children’s Aid Society (CAS) care versus 250 children allocated to receive usual CAS care and differential response wraparound service in 5 areas in the Hamilton-Niagara Region. Who (children and families) with what characteristics and available resources (themselves and within 5 participating communities) most benefits from which approach

to CAS care at what expense? Efforts are aimed at preventing maltreatment cases from either becoming ongoing protection cases, or the children ending up in out-of-home or out-of-community placements, as well as reducing the amount of time in Children’s Aid Society care as compared to usual Children’s Aid Society risk assessment and protection service alone. All participating families will receive a 1 year and 2 year follow-up. In response to the increase and

number of children in child welfare, we will test the Differential Response model, sometimes called alternative, multiple or integrated system responses. These have been implemented in the US, Australia and Canada and we are all at the beginning stages of systemic evaluation. Unique to our evaluation is the addition of a community mobilization team and the full economic evaluation. This research will show the benefits and costs of a differential response approach, for whom.



**The number of children in child welfare cases has increased from 10,000 in the early 1990s to over 18,000. Ontario spends \$1.1 billion a year on direct child welfare services, more than twice as much as spent in the late 1990s, with the majority of these resources spent on investigation instead of treatment.**

# Use as Practice & Impact

“Practice: A function being used or practiced; the practice pattern being suitable, useable, and available”  
 “Impact: To use, employ, ensure, exercise, influence, put to use, treat, to apply...knowledge transfer”

## Inspiration from the Director, Dr. Gina Browne



It has been inspiring for us to work with a number of community groups across Canada as they have implemented and extended important lessons in human services that we have learned from working with our local community agencies. Community groups have taken up our findings from the award winning study “When the Bough Breaks” that found comprehensive and integrated human services for single parents and their children receiving social assistance is more effective and less expensive within one year. Helping people more completely fostered their independence from social assistance. Integrated human services funded by Peel Regional Council were based on our study but refined to match local circumstances in the Peel Region (D. Swarc and J. Menard). Peel Region people and their children leaving social assistance were even greater than our own savings for a more disadvantaged population. The “Concerned Citizens” of Edmonton used our findings to create their own version of integrated services now entitled *Families First Edmonton* and was evaluated by investigators from the University of Alberta.



### Upcoming Events

December 6, 2006

Browne G. Keynote speaker: “School-aged Children Symposium”. Metro City YMCA, Toronto, Ontario. Presentation for staff of children providers, community agencies and parents.

December 18-19, 2006

Browne G. “When the Bough Breaks” presentation to Winnipeg Deputy Minister and Assistant Deputy Ministers, senior management and departmental staff. Winnipeg, Manitoba.

Findings about the value of recreation programs for children on social assistance in enhancing the competence of children with behaviour problems was taken up by 44 of Ontario’s 47 jurisdictions. During December we have been invited to advise decision makers in Winnipeg, Manitoba and the City of Toronto about the wisdom of their investment in Children’s Recreation.

Based on the popularity of these studies, 5 executive directors of the Hamilton-Niagara regional Children’s Aid Societies asked us to evaluate their study of the comparative effects and expense of providing a different way of responding to families and children in need of protection. This study now funded by the Ontario Ministry of Children & Youth began in October, 2006. Our interest in service integration as a way of providing comprehensive services led to our reports of “Convergence” and “Sewing the Seams of Children’s Services.” This thinking informed S. Thurston and R. Morton on their design of their new Children’s Treatment Network (as opposed to a centre) for children with disabilities and their families in Simcoe and York regions of Ontario. Their design is innovative, imaginative and integrated.

We have witnessed a renaissance, revitalization and continued renewal of interest by human service agencies in investing in children and youth—our nation’s greatest resources. Imagine the Inspiration we received from these communities initiating their own integrated services!

Believing in you...

Believing  
in You!

Next Issue: Spring 2007— “More” Integration of Services

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