

Is the Client-Worker Relationship Associated With Better Outcomes in Mandated Child Abuse Cases?

Cheryl D. Lee

Cecilia Ayón

California State University, Long Beach

Objective: The purpose of this research was to (a) find if there were associations between child welfare outcomes and the client-worker relationship and (b) learn what are the predictors of a positive client-worker relationship. *Method:* 100 (55 Family Maintenance [FM] and 45 Family Preservation [FP]) clients were interviewed in English and Spanish. Pearson's *t* tests, chi-squares, and a regression analysis were conducted. *Results:* A majority of the participants were Latino single mothers. Higher scores on the Relationship with Worker Instrument were correlated with better outcomes in discipline and emotional care of children ($p < .01$). FP clients were more satisfied with their workers than routine FM participants ($p < .01$). Ability to openly communicate ($p < .001$), frequency of visits ($p < .05$), and receipt of public assistance ($p < .05$) were found to be predictors of good client-worker relationships. *Conclusions:* This assessment indicates that client-worker relationships and open communication matter.

Keywords: relationship with worker, family preservation, child welfare outcomes, family maintenance

The ability to establish a good relationship with clients has been described as one of the most powerful tools a service provider possesses (Woods & Hollis, 2000). Rogers (1959) stated that three characteristics of a therapist would bring about a positive relationship: an empathetic understanding of the client, unconditional positive regard, and genuineness. Several early studies, based on the client-therapist psychotherapeutic relationship, found that the quality of the relationship was linked to a client's outcomes (Beutler, Crago, & Arizmendi, 1986; Lambert, Shapiro, & Bergin, 1986; Orlinsky & Howard, 1986).

Recent studies continue to find an association between client-worker relationship and positive outcomes. Lambert and Cattani-Thompson (1996) found that counselor-client factors were the best predictors of outcome with the exception of client variables. They stated that a wise counselor would carefully attend to the process when counseling by providing high levels of empathy, respect, and

collaboration. Other variables, such as clear expectations of the parties involved (Al-Darmaki & Kivlinghan, 1993) and the manner (hierarchical vs. collaborative) in which the therapist defines the relationship, have been found to affect the client-worker relationship (Callaghan, Naugle, & Follette, 1996). For example, clear expectations and a collaborative style were found to positively affect the client-worker relationship. Marziali and Alexander (1991) stated that therapy orientations, such as cognitive behavioral or psychodynamic, did not determine outcome in their study. Instead, the alliance established by the client-therapist interactions determined the outcome of treatment. Halstead, Wagner, Vivero, and Ferkol (2002) examined the concept of caring within the therapeutic relationship. They described a communication flow and process that emphasized acceptance of the client and found that this attribute enhanced the counseling relationship and client outcomes.

The literature has emphasized the therapeutic relationship. Can this client-worker relationship phenomenon transcend all social service relationships? How efficient can child welfare workers be in establishing a relationship with someone who is, for example, court mandated, because of abuse or neglect of children? There are several programs that address the needs of court-mandated child welfare cases in which parents have been neglectful and/or abusive with their children. This article

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focuses on two programs in the Los Angeles County Department of Children and Family Services (DCFS), Family Maintenance (FM) and Family Preservation (FP).

FAMILY PRESERVATION AND FAMILY MAINTENANCE SERVICES

Family Preservation (FP) Services were developed as remedies for the high numbers of children that were being removed from their families and placed in the foster care system. The detrimental effects experienced by children after they are removed from their families, such as aggression and inability to form attachments, directed the child welfare system toward permanency planning (Berry, 1997). The Adoption Assistance and Child Welfare Act of 1980 established the state's obligation to "make reasonable efforts" to maintain at-risk children in their own homes and required judges to determine whether efforts had been made to provide adequate services (Pecora, Whittaker, Maluccio, Barth, & Plotnick, 2000). The move toward maintaining children with their biological families led to a growth in family preservation programs.

Family Maintenance is the traditional DCFS casework program. Family Maintenance (FM) differs greatly from FP services. Lindsey, Martin, and Doh (2002) identified the following differences between the programs: caseload (FP 2 to 5 families, FM 30 to 40 families); length of services (FP 4 to 6 weeks, FM 6 to 8 months); focus (FP on the family system, FM on child protection); intervention (FP crisis intervention, FM case management); availability (FP around the clock, 7 days a week, FM only business hours); location of services (FP in the client's home, FM in office); frequency (FP often daily, FM weekly or monthly); and primary goal (FP family preservation, FM child safety). In California, FP provides short-term intensive services (6 to 12 months) by community-based agencies, while FM provides long-term case-management with most services offered outside of clients' homes (1 to 2 years or as required). Although there is a plethora of literature on FP programs, no articles were found that focused primarily on the clients' relationships with their workers and how this variable was correlated with outcomes.

The purpose of this study was threefold: to learn whether there was an association between client-worker relationship in mandated child abuse cases and outcomes, to explore if there were any differences between the FM and FP programs related to client-worker relationships, and to discover the predictors of a positive client-social worker relationship.

RESEARCH QUESTIONS

A cross-sectional survey design was used to answer the following research questions: (a) Is there a correlation between the clients' relationship with their social worker and their outcome scores? It is hypothesized that there will be significant correlations; (b) Which demographic variables (age of caretaker, presence of secondary caretaker, level of education, ethnicity of caretaker, number of children in the family, primary language, and level of income) will be associated with improved well-being of families? It is expected that there will be significant correlations; (c) Is there a difference in FM and FP clients' perception of relationship with their social worker? It is hypothesized that FP clients will report better relationships with their social workers; and (d) What are the predictors of a positive relationship in child welfare cases? It is hypothesized that the ability to communicate openly and frequency of visits by the social worker will be predictors of positive client-worker relationships in child welfare cases.

METHOD

Participants

The sample consisted of 100 former DCFS clients. Of this sample, 45 participants received FP services and 55 participants received FM services. The contact information for the current study was provided by DCFS following approval by California State University, Long Beach's Institutional Review Board. DCFS developed a list of FM and FP cases that had been closed between 1999 and 2000. There were attempts to contact every person on this list by telephone or mail ($N = 1,000$). Of the 700 FM cases and 300 FP cases, 125 (65 FM and 60 FP) were actually located. Of these, 55 FM cases and 45 FP cases agreed to participate by the deadline for scheduling interviews. Therefore, this can be considered an 80% response rate when the base is participant-located rather than every participant included in the DCFS database. Once located, participants were asked if they wished to participate in 45-minute telephone interviews in exchange for a compensation of U.S. \$20.00. The interviews were conducted in Spanish and English.

Measures

The current study utilized The Parent Outcome Interview, a standardized measure used to evaluate child

welfare case outcomes and clients' relationships with their workers (Magura & Moses, 1986). FP participants were asked to reflect only on their FP worker and services, and FM clients were asked to reflect only on their DCFS worker and services. In both groups, if the participants had multiple FM or FP workers, they were asked to reflect on the worker who was involved in their case for the longest period of time. Seven subscales were used for this study. There were six outcome subscales (Children's Academic Adjustment, Children's Conduct, Physical Child Care, Discipline and Emotional Care of Children, Children's Symptomatic Behavior, and Parent's Coping) and one subscale measuring the relationship of the client with the worker (Relationship with Social Worker). The face, construct, and convergent validity of the instrument were assessed by Magura and Moses (1986) from responses and change scores of a study of 250 families receiving child welfare services in Texas, Florida, and Minnesota. The descriptions of change reflect what child welfare experts regard as substantive improvement in client well-being. Moderate correlations between services offered and case change supported construct validity of the instrument. Convergent validity was assessed by comparing clients' ratings with worker ratings and the mean kappa = .62 (Magura & Moses, 1986). For the six outcome subscales used in the current study, the average internal consistency was alpha = .84 (Magura & Moses, 1986). Internal consistency of the Relationship with Social Worker subscale was alpha = .93. In addition to the English version of this instrument, a Spanish translation was used. There is no known reliability of the Spanish version of the instrument. It has face validity as it was based on the standardized English version of the instrument. In addition, the administrators of the instrument were native Spanish speakers and reported no problems in completing the interviews.

The Parent Outcome Interview (Magura & Moses, 1986) is a parent self-report measure used to determine children's and parents' well being. The items for the outcome subscales were anchored. Participants could choose to answer "yes" or "no" and were also asked to consider two time periods—onset of services and follow-up interview. Sample questions of the outcome subscales are found in Table 1. Scores varied depending on the number of items, *yes* was scored 0 and *no* was scored 1. Change scores were calculated by subtracting the at-referral score from the follow-up score. Higher change scores were indicative of greater improvement of parent and child well-being. Alphas for this sample were good ranging from .76 to .89 (see Table 1).

The Relationship with Social Worker subscale is a 17-item 4-point scale with possible responses of "always," "usually," "sometimes," and "never." Scores could range from 17 to 68, with higher scores indicative of a more satisfactory relationship with the worker. The alpha for the Relationship with Social Worker subscale was excellent ($\alpha = .96$). Refer to Table 1 for sample questions. In addition, the following questions regarding the worker were asked: (a) Do you feel that you talked to your worker about the most important things? The possible responses were "yes" and "no". (b) When your case first opened in FP/FM, about how often did you see your worker? This was measured using a 4-point response set (e.g., three times or more a week, twice a week, once a week, or less than once a week). (c1) Was the worker's racial/ethnic background the same as or different from your racial/ethnic background? The possible responses were "same", "different", or "not sure". (c2) Please specify the worker's racial/ethnic background and your racial/ethnic background. This was an opened end-question. Demographic information regarding the client was also obtained.

RESULTS

Of the participants, 94% ($n = 94$) were mothers, and 70% ($n = 70$) of the participants did not have a secondary caretaker (see Table 2). Of the sample, 62% ($n = 62$) had incomes lower than \$20,000, and 43% ($n = 43$) received public assistance. Fifty-four percent ($n = 54$) had acquired a high school diploma/GED, and several had some college or a BA degree. Of the sample, 48% ($n = 48$) were Latino, 26% ($n = 26$) were White, and 14% ($n = 14$) were African American. The participants reported that 42% ($n = 42$) of their workers were of the same ethnicity as they were, 41% ($n = 41$) were of a different ethnicity, and 17% ($n = 17$) were not sure or did not respond to this question. The average number of children per family was 3.33 ($n = 100$, $SD = 1.84$); FP families were significantly larger than FM families, (FM, $n = 55$, $M = 2.96$, $SD = 1.59$; FP, $n = 45$, $M = 3.80$, $SD = 2.05$, $t = 2.28$, $p < .05$ [see Table 3]). Of the interviews, 35% ($n = 35$) were conducted in Spanish, most of which were FP cases ($\chi^2 = 4.90$, $df = 2$, $p < .05$; see Table 2). There were no other differences between the FM and FP cases related to demographics. Because multiple tests were run, the alpha level was adjusted using the Bonferroni correction setting, the alpha level at .0125 for t tests and .008 for chi-squares. Following this correction, the alphas for the variables

TABLE 1: *Parent Outcome Interview Subscales*

<i>Subscales</i>	<i>Number of Items</i>	<i>Sample Questions</i>	<i>Alphas for This Sample</i>
Children's Academic Adjustment	9	Were any of your children Not enrolled in school (if of school age)? Failing any classes?	76
Children's Conduct	9	Were any of your children Breaking and busting things on purpose? Lying and not listening to you?	87
Physical Child Care	8	Were your children hungry sometimes because you had trouble preparing meals? Were you worried about leaving your children alone when you had to go out?	78
Discipline and Emotional Care of Children	12	Did your children get on your nerves so much that you sometimes lost your temper with them? Did you sometimes feel that your children were taking up too much of your time, that they kept you from doing things that you really wanted to do?	89
Children's Symptomatic Behavior	10	Were any of your children Anxious, afraid, or tense a lot of the time? Complaining about aches and pains a lot?	86
Parents' Coping	9	Were you Having any health problem that limited what you could do? Overwhelmed with work and no one to help you?	81
Relationship with Social Worker	17	Did your social worker: Give you confidence that headway or progress could be made on your problem? Visit you regularly and keep in touch with you?	95

number of children in family and *interview language* no longer reached a significant level.

To test Research Question A, Pearson's *r* correlations were conducted to determine the association between client-worker relationship and outcomes (see Table 4). Results indicated that the Pearson's *r* was significant for the following subscales: Physical Care ($r = .25, p < .05$), Discipline and Emotional Care ($r = .36, p < .01$), and Parent Coping ($r = .29, p < .05$). To protect against a Type-1 error, a Bonferroni correction was completed. The Bonferroni correction lowered the alpha to a .0083 level of significance. Only the alpha level for Discipline And Emotional Care remained significant. The hypothesis for Research Question A was partially supported with one outcome resulting in a significant finding. The client-worker relationship had a mild effect on the discipline and emotional care of children with a R^2 value of .13.

To test Research Question B, Pearson's *r* correlations were conducted for demographic variables (*age of caretaker, presence of secondary caretaker, number of children in the family, primary language, and level of income*) to learn which variables would be associated with outcomes. Age of caretaker and children's academic adjustment had a significant correlation ($r = .32, p < .01$). After the Bonferroni correction, this outcome remained significant as the alpha level was reduced to .01. Although the correlation between age of caretaker and children's

academic adjustment reached significance, the R^2 value was small at .10, indicating a minimal effect.

Research Question C was tested using a *t* test to determine if client satisfaction with workers differed by programs (FM or FP; see Table 5). The results indicated that FP clients were more satisfied with their worker (FM, $M = 45.14, SD = 2.62$; FP, $M = 56.28, SD = 13.85$), $t = 3.25, p < .01$. The hypothesis was supported. This alpha level remained significant following the Bonferroni correction.

The final research question was tested with a stepwise regression analysis (see Table 6). *Relationship with social worker* was the criterion variable, and the five predictor variables were *receipt of public assistance, level of education, ethnicity of counselor, ability to openly communicate, and frequency of counselor visits*. In addition, two covariates, client's *primary language* and *number of children in the home*, were used as they tended to differentiate clients in the FP and FM programs. The predictor variables, *ability to openly communicate, receipt of public assistance, and frequency of visits*, accounted for 49% of the variance. The predictor variable, *ability to openly communicate*, had a large effect on the criterion variable *relationship with worker* accounting for 36% of the variance (R^2 change = .36). *Receipt of public assistance* had a small effect as it accounted for 9% of the variance (R^2 change = .09). *Frequency of visits* had a minimal effect as

TABLE 2: *Demographics of Caregivers*

Variable	Study Sample		Family Preservation (n = 45)		Family Maintenance (n = 55)		Significance	
	n	%	n	%	n	%	χ^2	p
Primary caregiver								
Mother	94	94.0	43	95.6	51	92.7		
Father	1	1.0	1	2.2	0	0.0		
Grandmother	1	1.0	0	0.0	1	1.8		
Missing	4	4.0	1	2.2	3	5.5		
Secondary caregiver							0.57	.45
None	70	70.0	33	73.4	37	67.3		
Father	26	26.0	10	22.2	16	29.1		
Other	4	4.0	2	4.4	2	3.6		
Ethnicity of primary caregiver							1.63	.44
Latino	48	48.0	24	53.3	24	43.6		
White	26	26.0	9	20.0	17	30.9		
African American	14	14.0	6	13.3	8	14.5		
Missing	12	12.0	6	13.3	6	10.9		
Language interview was conducted in							4.90	.03*
English	65	65.0	24	54.0	41	74.0		
Spanish	35	35.0	21	46.0	14	26.0		
Education of primary caregiver							1.03	.59
Less than high school	31	31.0	13	28.9	18	32.7		
High school grad	15	15.0	4	8.9	11	20.0		
Some college/trade school or college graduate	39	39.0	14	31.1	25	45.5		
Missing	15	30.7	14	31.1	1	1.8		
Current income							0.11	.74
Less than U.S. \$19,999	62	62.0	25	55.6	37	67.3		
More than \$20,000	22	22.0	8	17.8	14	25.5		
Missing	16	16.0	12	26.7	4	7.3		
Receive public assistance currently							1.57	.46
Yes	43	43.0	19	42.2	24	43.6		
No	45	44.0	15	33.3	30	52.7		
Missing	12	12.0	11	24.4	1	1.8		

NOTE: * $p < .05$ TABLE 3: *Mean Comparisons of Demographic Variables*

Variable	Study Sample		Family Preservation (n = 45)		Family Maintenance (n = 55)		Significance	
	n	%	n	%	n	%	χ^2	p
Age of primary caregiver	37.85	7.80	37.47	7.68	38.14	7.96	-0.40	.69
Number of children in home	3.33	1.85	3.80	2.05	2.96	1.59	2.26	.03*
Age of first child in home (oldest)	13.21	5.86	13.72	4.85	12.80	6.59	0.78	.44

NOTE: * $p < .05$ TABLE 4: *Correlations of Relationship With Social Worker Subscale and Outcomes*

Variable	Relationship with Social Worker	
	r	p
Outcome subscales		
Children's academic adjustment	.11	.398
Parent conduct	.12	.425
Physical child care	.25	.04*
Discipline and emotional care	.36	.002**
Children's symptomatic behavior	.05	.656
Parent coping	.29	.014*

NOTE: * $p < .05$ ** $p < .01$

TABLE 5: A Comparison Between Family Maintenance and Family Preservation and Relationship With Their Social Worker

	Study Sample		Family Preservation (n = 45)		Family Maintenance (n = 55)		Significance	
	M	SD	M	SD	M	SD	t	p
Relationship with social worker	50.51	16.44	56.28	13.85	45.14	2.62	3.25	.002*

NOTE: *p < .01

it only accounted for 6% of the variance (R^2 change = .06). The covariates accounted for less than 3% of the variance (R^2 change language = .01 and R^2 change number of children = .02). The hypothesis for Research Question D was confirmed because *ability to openly communicate and frequency of worker visits* reached a significant level and accounted for 42% of the variance

Limitations

These findings were based on clients' self-reports, and participants may have reported socially desirable answers. Although standardized instruments were used in the current study for the English speakers, there was no established reliability for the Spanish version. In addition, this was a retrospective study; therefore, participants may not have accurately recalled information. A longitudinal study could yield more accurate data. The sample was relatively small and consisted of volunteers in one large urban area. This sample selection bias limits generalization of results to other clients involved in the child welfare system.

DISCUSSION AND APPLICATIONS TO SOCIAL WORK PRACTICE

A majority of the participants in the current study were Latino single mothers with three or more children. It could be deduced that clients in the current study had led stressful lives because they lived in poverty, few secondary caregivers were present in the home, and the family size was large. A greater percentage of FP participants were monolingual Spanish speakers and had more children.

The hypothesis for Research Question A was partially supported because a more positive relationship with the social worker was associated with improvement in discipline and emotional care and tendencies toward

TABLE 6: Stepwise Regression Analysis—Predictors of a Positive Relationship With Worker

Predictor	b	SE b	β
Language (Covariate)	-2.091	3.553	-.057
Number of children (Covariate)	-0.242	0.865	-.029
Ability to openly communicate	19.961	4.032	.501**
Received public assistance when a Department of Children and Family Services client	8.852	3.564	.262*
Frequency of social worker visits	4.470	1.828	.253*
$R^2 = .49$			

NOTE: *p < .05. **p < .001

improvement in children's physical care and parents' coping. This was expected because establishing a good relationship has been described as a powerful tool (Woods & Hollis, 2000). These results suggest that relationship with the worker is mildly associated with the parents' actions (Discipline and Emotional Care Of Children, Children's Physical Care, and Parent Coping) as opposed to children's outcomes (Children's Academic Adjustment, Children's Symptomatic Behavior, and Children's Conduct). People have greater ability to discuss self-perceptions. Perhaps even more intense services are needed to remedy the trauma that children have experienced from child abuse and neglect.

In answering Research Question B regarding demographics associated with outcomes, it was found that older age of parent was significantly correlated with academic adjustment. This is an important finding because academic progress is essential for children's success. It suggests that social workers may benefit their younger DCFS parents by helping them develop skills such as reading to their children and checking children's homework.

The results for Research Question C indicated that FP participants reported having a better relationship with their workers. This may be because of the differences in program design. For example, FP workers are able to visit

families more often, have greater availability because of hours and smaller caseloads, and are community-based (Lindsey et al., 2002)

The final research question explored predictors of the client-worker relationship. As hypothesized, ability to openly communicate and frequency of visits with the worker were predictors of a positive relationship. The ability to openly communicate with a client was a strong predictor of developing a positive relationship. This finding is similar to that of Halstead et al. (2002), who reported that two-way communication flow and a caring approach enhanced relationships between counselor and clients. Frequency of visits with the client was a weaker, yet significant, predictor of a positive relationship. An unexpected small predictor of a good client-worker relationship was receipt of public assistance. Perhaps this is because of the client's feeling trust in the system when survival needs are met. Prior experience within the social service system may contribute to the client's being more open to receiving help.

The findings suggest that child welfare workers will benefit their clients when focusing on building quality relationships as they are related to outcomes. Child welfare agencies need to prioritize social workers' relationship building with clients in their protocols. It is suggested that caseloads be reduced to enable social workers to have time to develop positive relationships with highly stressed clients. Social work educators will want to continue emphasizing the importance of establishing and building positive associations with clients in their child welfare curriculum. In conclusion, a collaborative relationship with the social worker will assist mandated clients to overcome significant individual and societal obstacles. It is recommended that future research include information about families from other resources such as school information and interviews with older children. Replication of the current study is suggested to further elucidate these findings.

REFERENCES

- Al-Darmaki, F., & Kivlighan, D. M. (1993). Congruence in client-counselor expectations for relationship and the working alliance. *Journal of Counseling Psychology, 40*, 379-384.
- Berry, M. (1997). *The family at risk: Issues and trends in family preservation services*. Columbia: University of South Carolina Press.
- Beutler, L. E., Crago, M., & Arizmendi, T. G. (1986). Research on therapist variables in psychotherapy. In S. Garfield & A. E. Bergin (Eds.), *Handbook of psychotherapy and behavior change* (pp. 257-310). New York: John Wiley.
- Callaghan, G. M., Naugle, A. E., & Follette, W. C. (1996). Useful constructions of the client-therapist relationship. *Psychotherapy, 33*, 381-390.
- Halstead, R. W., Wagner, L. D., Vivero, M., & Ferkol, W. (2002). Counselors' conceptualizations of caring in the counseling relationship. *Counseling and Values, 47*, 34-47.
- Lambert, M. J., & Cattani-Thompson, K. (1996). Current findings regarding the effectiveness of counseling: Implications for practice. *Journal of Counseling and Development, 74*, 601-608.
- Lambert, M. J., Shapiro, D. A., & Bergin, A. E. (1986). The effectiveness of psychotherapy. In S. Garfield & A. E. Bergin (Ed.), *Handbook of psychotherapy and behavior change* (pp. 157-212). New York: John Wiley.
- Lindsey, D., Martin, S., & Doh, J. (2002). The failure of intensive case-work services to reduce foster care placements: An examination of FP studies. *Children and Youth Service Review, 24*, 743-775.
- Magura, S., & Moses, B. (1986). *Outcome measures for child welfare services: Theory and applications*. Washington, DC: Child Welfare League of America.
- Marziali, E., & Alexander, L. (1991). The power of the therapeutic relationship. *American Journal of Orthopsychology, 61*, 383-391.
- Orlinsky, D. E., & Howard, K. I. (1986). Process and outcome in psychotherapy. In S. Garfield & A. E. Bergin (Ed.), *Handbook of psychotherapy and behavior change* (pp. 311-384). New York: John Wiley.
- Pecora, P. J., Whittaker, J. K., Maluccio, A. N., Barth, R. P., & Plotnick, R. D. (2000). *The child welfare challenge: Policy, practice, and research* (2nd ed.). New York: Aldine De Gruyter.
- Rogers, C. R. (1959). A theory of therapy, personality, and interpersonal relationships, as developed in the client-centered framework. In S. Koch (Ed.), *Psychology: A study of science* (Vol. 3, pp. 184-256). New York: McGraw-Hill.
- Woods, M. E., & Hollis, F. (2000). *Casework: A psychosocial therapy* (5th ed.). Boston: McGraw-Hill.