Rural Child Welfare Practice: A Literature Review

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Peer Review Journal Articles

The Child Welfare Journal, (Sept/Oct edition) on "The Crisis in Rural Child Care" was where the majority of current discourse/ research on rural child welfare was located.

1. Cochran, C. (2002). *A Rural Road: Exploring Opportunities, Networks, Services, and Supports that Affect Rural Families. Child Welfare, 81, 837-848.*

   Abstract

   The Great Plains Rural Collaborative project explored rural poverty through the experiences of people living at or below 185% of poverty. Researchers collected information through qualitative and quantitative research methods. They designed focus group questions to identify obstacles rural families face when trying to access economic opportunities, social networks, and services and supports. The article highlights the salient findings.

2. Fluharty, C. (2002). Toward a Community-Based National Rural Policy: The Importance of the Social Services Sector. *Child Welfare,* 81, 663-688.

   Abstract

   Today, an emergent dialogue regarding the development of a more integrative, community-based, national rural policy is occurring. Although discussions of rural America's challenges have surfaced at regular intervals over the past half-century, this issue is receiving significantly greater substantive policy discussion than has occurred in the past 25 years. This article outlines this unique "rural policy moment," assesses the potential for a community-based rural policy for our nation, and discusses the critical role rural social services practice and policy should play in the support of these opportunities to address the significant disadvantages faced by rural people.

3. Jacobson, M. (2002). Local Realities: A Frontier Perspective on Child Protection Team Practice. Child Welfare. *Child Welfare*, 81, 737-755.

   Abstract

   This article presents a case study of a child protection team in a frontier county in Montana. Narratives from individual and group interviews highlight team members' experiences and the structuring of team practice in their frontier community, the power and challenge of community culture and history, and the interplay of constructions of children and child abuse as key elements that influence and shape team practice. This exploration suggests a framework for rethinking child protection team practice in diverse locations.

4. Landsman, M. (2002). Rural Child Welfare Practice from an Organization-in-Environment Perspective. *Child Welfare*, 81, 791-819.

Abstract

An "organization-in-environment" perspective can help researchers understand how rurality influences child welfare practice. Drawing from theoretical perspectives on environment and organizations, researchers find rural/urban differences in practice at the level of the organization, which is the immediate environment of child welfare practice, and also in the relationship between organization and environment. Results challenge previous findings of few differences between rural and urban practice and offer particular implications for rural child welfare practice.

5. Larson, N. (2002). *S*trengths of Farming Communities in Fostering Resilience in Children*. Child Welfare,* 81, 821-836.

Abstract
The cultural context in which rural farm children are raised has a significant effect on their lives. Researchers have traditionally viewed rural environments from a deficit perspective. Yet many children demonstrate resilience even in the face of significant adversity. This article focuses on strengths of rural farming communities in providing a cultural context that supports healthy development in children. It also   notes practice considerations for child welfare in small agricultural communities.

6. Menanteau-Horta, D. & Yigzaw, M. (2002*).* Indicators of Social Well-Being and Elements of Child Welfare in Minnesota Rural Counties. *Child Welfare,* 81, 709-735.

Abstract
Organizational and structural conditions of rural communities and counties are significant factors in determining child welfare levels and general quality of life in rural areas. This article analyzes the relationship between elements of child welfare and an index of social well-being estimated for the state of Minnesota. The study suggests that social workers may enhance their services by considering county data that depict the viability of rural communities.

7. Templeman, S. (2002). Challenging the One-Size-Fits-All Myth: Findings and Solutions from a Statewide Focus Group of Rural Social Workers*, Child Welfare,* 81, 757-772.

Abstract
Of America's counties, 76% are rural, comprising 83% of U.S. land and 25% of the American population. Yet most child welfare programs are designed to fit the needs of urban and suburban families. This article reviews the unique needs and assets of rural children and families in Texas. It presents recommendations from a focus group for overcoming the inappropriate transfer of urban models to rural communities.

8. Carter, R., Betts, S. C., Marczak, M. S., Rogers, H. E., Huebner, A. J. (1998). Evaluation research in context: A community application for youth and family programs. Family & Consumer Sciences Research Journal, 26, 346-363.

Abstract
The use of model community-based evaluation methods was demonstrated through the observation of the development and evaluation of a pregnancy prevention program in a small southwestern community of about 6,000 citizens. The community-university partnership stressed that everyone in the community have something at stake in the program. A workshop with participating citizens identified a vision of the future for youth in the community.

9. Hodgkin, S. (2002). Competing demands, competing solutions, differing constructions of the problem of recruitment and retention of frontline rural child protection staff. Australian Social Work, 55, 193-203.

Abstract
This article reports on a study conducted in rural Victoria. It examines the problem of recruitment and retention of frontline staff in the Victorian Child Protection program. The article delineates those factors identified by managers and supervisors as influencing workers to enter, stay and leave the program. Managers and supervisors have collective responsibility for recruiting and retaining staff. It is for this reason that their viewpoints are considered crucial in responding to the problem. What this study found was that, while managers and supervisors recognize that the problem is complex, they differ in the emphasis placed on facets of the problem, thus their approaches to solving it. As solutions are contested the problem is exacerbated. The argument advanced is that any response should recognize the complexity of the problem and solutions be considered in a coordinated way.

Related Articles and Reports

HHS Rural Task Force Report to the Secretary (2002)

The Rural Task Force's efforts resulted in three important findings:

- HHS lacks a common definition of "rural" or set of definitions that are used by all agencies and staff offices and that accounts for the gradient between metropolitan and rural areas. As a result, it is difficult to target grants, evaluate services, develop policy and quantify HHS' investment in rural and frontier communities.
- More than 225 HHS programs currently serve rural communities. Despite the breadth of support, rural communities struggle to access resources because individual programs have unique application, implementation and evaluation requirements. This lack of coordination in HHS is amplified at the State and local levels.
- The HHS policy development process does not consistently consider rural concerns. As a result, HHS policy decisions may have negative consequences for rural areas or fail to capitalize on opportunities to improve rural health and social services.

Access to Care Among Rural Minorities: Children (2002)

This report, from the South Carolina Rural Health Research Center, is an analysis of reported health insurance coverage and health services use among rural children. It examines the effects of family income, maternal education, and other factors on children's lack of health insurance and use of health services. It presents conclusions and discusses policy implications.

Minorities in Rural America: Overview (2002)

This report, from the South Carolina Rural Health Research Center addresses these questions:

- Where do rural minorities live?
- How is the rural minority population distributed across ages and sexes?
- What is the economic structure of rural minority communities?
- What health resources are available in rural minority communities?

Young Children and the Rural Information Gap: The Weaknesses of Major Data Sources for Examining The Well-Being of Rural Children (2002)
Jeffrey Capizzano and Alexandra Fiorillo, The Urban Institute. Prepared for: The National Center for Rural Early Childhood Learning Initiatives, Mississippi State University

Abstract

The devolution of increasing amounts of responsibility for the design and implementation of child and family policy has increased demand for measures of child well-being at lower levels of geography. Currently, however, it is unclear the extent to which commonly used measures of well-being can be estimated for children living in rural areas. To investigate this issue, the authors examined a number of large, national data sets that provide source data for well-being indicators. We find that data confidentiality protocols and small sample sizes limit the extent to which child well-being indicators can be estimated for rural children. While public-use data can be used to estimate many indicators of child well-being using the imprecise "nonmetropolitan" definition of rural, few indicators can be estimated when rural is defined more precisely (areas with populations of less than 2,500 residents). Gaining access to non-public-use data increases the number of indicators that can be estimated with the more precise definition of rural, but at substantial monetary and administrative costs. The authors conclude this discussion with suggestions for next steps to promote analysis and dissemination of child well-being indicators for rural young children.

Rural Healthy People 2010
Companion Document to Healthy People 2010. Updated 2004. Identifies Rural Health priorities from survey responses from over 100 rural health stakeholders.

Strengthening the Rural Carolinas. 2002
This is a conceptual framework for the Program for the Rural Carolinas.   The Duke Endowment has undertaken a five-year $10.6 million rural development project in North Carolina and South Carolina. MDC designed and serves as the managing partner for the project with the senior staff of The Endowment. The program's goal is to increase the capacity of a group of economically distressed communities in rural North Carolina and South Carolina to revitalize their communities, focusing on increasing employment and asset development opportunities. This essay lays out the theories supporting the program's design and approaches to the work.

Books—*Very Useful*
Scales, T. L., & Streeter, C. L. (2004). Rural social work: Building and sustaining community assets. Thompson Learning.

About the Rural Success Project

The Rural Success Project seeks to identify and share the strategies rural communities are using to protect children and help families succeed. Funded at the federal level by the U.S. Children's Bureau (grant US ACYF 2003C.2), this project is a partnership between the University of North Carolina at Chapel Hill School of Social Work and 14 North Carolina counties and the Eastern Band of the Cherokee. To learn more visit our website (www.ruralsuccess.org) or contact us at:

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