2016

Metoder for innhenting, systematisering og vurdering av informasjon i barnevernets undersøkelsessaker

Systematisk litteratursøk med sortering

Innhold

Hovedbudskap

Kunnskapssenteret for helsetjenesten ved Seksjon for velferdstjenester fikk i oppdrag av Barne-, ungdoms- og familiedirektoratet å utføre et systematisk litteratursøk med påfølgende sortering av mulig relevante publikasjoner. Oppdraget var å identifisere ulike metoder for innhenting, systematisering og vurdering av informasjon i barnevernets undersøkelsessaker.

Metode

Vi utarbeidet søkestrategi for et systematisk litteratursøk. Det ble søkt i samfunnsvitenskaplige og medisinske databaser og i Google og Google Scholar. Søket ble utført i november og desember 2015. To forskere gikk uavhengig av hverandre gjennom identifiserte referanser og vurderte relevans i forhold til inklusjonskriteriene.

Resultater

- Litteratursøket gav 12 833 referanser etter dublettsjekk samt 428 leste referanser fra BASE, Google og Google Scholar
- Vi identifiserte totalt 132 relevante referanser
  - 1 referanse var en mulig systematisk oversikt
  - 41 referanser omhandlet enkeltinstrumenter
  - 15 referanser omhandlet flere instrumenter
  - 39 referanser omhandlet enkeltmodeller
  - 18 referanser omhandlet flere modeller
  - 18 referanser omhandlet andre typer studier

I dette systematiske litteratursøket med sortering har vi ikke lest publikasjonene i fulltekst og dermed ikke vurdert studienes kvalitet. Vi har kun sortert referansene etter type, basert på sammendragene.

Tittel:
Metoder for innhenting, systematisering og vurdering av informasjon i barnevernets undersøkelsessaker

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Publikasjonstype:
Systematisk litteratursøk med sortering
Et systematisk litteratursøk med sortering er resultatet av å
- søke etter relevant litteratur ifølge en søkestrategi og
- eventuelt sortere denne litteraturen i grupper presentert med referanser og vanligvis sammendrag

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Svarer ikke på alt:
- Ingen kritisk vurdering av studienes kvalitet
- Ingen analyse eller sammenfatning av studiene
- Ingen anbefalinger

Hvem står bak denne publikasjonen?
Kunnskapssenteret har gjennomført oppdraget etter forespørsel fra Barne-, ungdoms- og familiedirektoratet

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Når ble litteratursøket utført?
Søk etter studier ble avsluttet desember 2015

Key messages

The Norwegian Knowledge Centre for the Health Services was commissioned by the Norwegian Directorate for Children, Youth and Family Affairs to conduct a systematic literature search with a subsequent categorization of relevant research. The commission was to identify various methods for collecting, systematizing, and evaluating information in child welfare investigations.

Methods

We developed a search strategy for a systematic literature search. In November and December 2015, the search was carried out in social and medical scientific databases and in Google and Google Scholar. Two researchers independently screened all identified references to assess inclusion according to predefined criteria.

Results

- The literature search resultet in 12 833 references after duplicates were removed and 428 read references from BASE, Google and Google Scholar
- In total, we identified 132 relevant references
  - 1 reference was a possible systematic review
  - 41 references dealt with single instruments
  - 15 referanser dealt with several instruments
  - 39 referanser dealt with single models
  - 18 referanser dealt with several models
  - 18 referanser dealth with other kinds of studies

In this systematic literature search we have not read the publications in full and hence not critically evaluated the studies. We have only sorted the references by type, based on the abstracts.

Title:
Methods for collecting, systematizing, and evaluating information in child welfare investigations
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Type of publication:
Systematic reference list
A systematic reference list is the result of a search for relevant literature according to a specific search strategy. The references resulting from the search are then grouped and presented with their abstracts.

Doesn't answer everything:
- No critical evaluation of study quality
- No analysis or synthesis of the studies
- No recommendations

Publisher:
Norwegian Knowledge Centre for the Health Services, National Institute of Public Health
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Updated:
Last search for studies:
December 2015.

Forord

Seksjon for velferdstjenester ved Kunnskapssenteret for helsetjenesten fikk i april 2015 oppdrag av Barne-, ungdoms- og familiedirektoratet å identifisere ulike metoder for innhenting og vurdering av informasjon i barnevernets undersøkelsessaker. Dette oppdraget skulle løses som et systematisk litteratursøk med sortering. Vi har dermed gjort systematiske søk etter litteratur, lest sammendrag i tråd med definerte inklusjonskriterier og sortert inkluderte studier etter type. Vi har ikke lest artiklene i sin helhet, vurdert studienes metodiske kvalitet eller sammenstilt resultatene, slik vi ville gjort det i en systematisk oversikt.

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Innledning

Problemstilling

Hva finnes av dokumentasjon om ulike metoder for innhenting, systematisering og vurdering av informasjon i barnevernets undersøkelsessaker? Hvilke helhetlige tilnærminger eller modeller finnes; hvilke verktøy eller instrumenter som dekker deler av feltet (innhenting, systematisering, vurdering, beslutningstaking) finnes; og hva finnes av kunnskap som er produsert om disse modellene/instrumentene?

Bakgrunn

I 2014 mottok barneverntjenesten i Norge 53 000 bekymringsmeldinger om 46 950 barn og unge (1). Av disse gikk 79 prosent av meldingene videre til en undersøkelsessak, resten ble lagt bort. Barnevernet igangsatte rundt 41 900 undersøkelsessaker for 39 400 barn i løpet av 2014. Av de 41 000 undersøkelsessakene som ble avsluttet i 2014, ble det gjort vedtak om tiltak i 42 prosent av dem. De øvrige ble avsluttet med ulik begrunnelse. Rundt 44 prosent ble lagt bort etter barneverntjenestens vurdering, åtte prosent ble lagt bort fordi familien ikke ønsket hjelp og fem prosent fordi familien flyttet (1).

En barnevernssak starter med en melding til barneverntjenesten i den kommunen der barnet oppholder seg (2). Bekymringen kan handle om omsorgssvikt, rus, psykiske problemer, overgrep m.m. Barneverntjenesten skal undersøke barnets omsorgssituasjon når det er grunn til å anta at barnet har behov for hjelp fra barnevernet. I den videre undersøkelsessaken er hovedhensikten å innhente, bearbeide og vurdere informasjon om barnet, forholdene i hjemmet og i nærmiljøet. På bakgrunn av denne informasjonen vil barneverntjenesten fatte en beslutning om hvorvidt det er behov for å sette i gang tiltak eller ikke, samt hva slags type tiltak (2).

Tilsyn med landets barneverntjenester har over flere år påpekt svakheter ved informasjonsinnhenting, vurdering og beslutning, særlig i undersøkelsessaker (se bl.a. statusrapport fra 2015 (3)). Arbeidet i en undersøkelsessak er vesentlig for videre innsatser overfor barnet/ungdommen og må derfor være av god kvalitet for å sikre tilstrekkelig hjelp. Internasjonal forskning har vist til betydelig variasjon med hensyn til vurderinger og beslutninger (4), og strukturerte metoder vil kunne minske risikoen for å ta beslutninger på sviktende grunnlag.

Barne-, ungdoms- og familiedirektoratet kjenner allerede til noen helhetlige modeller for utredning, vurdering og beslutning som er i bruk i andre land, slik som *Integrated Children's System* (5). Den er i bruk i bl.a. England, Danmark og Sverige (i en omarbeidet utgave: *Barns behov i centrum* (6)).

Det er hovedsakelig to typer tilnærming når det gjelder standardiserte modeller eller instrumenter for vurdering av risiko: konsensus (primært basert på klinisk/faglig ekspertise) og aktuarisk («actuarial», basert på analyser av statistisk sannsynlighet for fremtidig risiko) (4, 7).

Det er nå en prioritert oppgave for Barne-, likestillings- og inkluderingsdepartementet og direktoratet å utarbeide en faglig anbefaling på dette feltet. Departementet har gitt direktoratet i oppdrag å komme med forslag til en nasjonal modell for kartlegging i barnevernets undersøkelsessaker.

Med utgangspunkt i dette oppdraget skulle seksjonens medarbeidere identifisere og sortere informasjon om både eksistensen av relevante modeller/instrumenter og kunnskap om disse. Søket er derfor bredt med relativt vide inklusjonskriterier.

Styrker og svakheter ved litteratursøk med sortering

Til en full systematisk forskningsoversikt ville vi ha innhentet artiklene i fulltekst for endelig vurdering opp mot inklusjonskritene. Inkluderte studier ville så blitt kvalitetsvurdert i henhold til våre sjekklister og resultater sammenstilt og diskutert.

Ved litteratursøk med sortering gjennomfører vi systematiske litteratursøk i elektroniske databaser for en gitt problemstilling. I utgangspunktet benyttes kun databaser for identifisering av litteratur. I det aktuelle litteratursøket har vi imidlertid søkt etter litteratur også i Google og Google Scholar, fordi vi har ønsket å identifisere for eksempel evalueringsrapporter som er utgitt av ulike myndigheter eller offentlige/private forskningsinstitusjoner.

Resultatene fra søket blir grundig gjennomgått for å ekskludere ikke-relevante publikasjoner. Dette gjøres basert på tittel og eventuelt sammendrag. Ettersom vi ikke har innhentet publikasjonene i fulltekst, kan vi ha inkludert publikasjoner som ville vist seg ikke å være relevante ved gjennomlesning. Vi har sortert de inkluderte publikasjonene etter innhold slik det fremkommer av publikasjonens sammendrag.

Metode

Inklusjonskriterier

Populasjon:	Barn i en undersøkelsessak i barnevernet
Tiltak:	Modeller eller instrumenter til bruk når barns og unges situasjon utredes i forbindelse med at barnevernet har opprettet en undersøkelsessak
Sammenlikning:	Andre modeller/instrumenter, evt. ingen sammenligning
Utfall:	Innhenting, systematisering og vurdering av relevant informasjon; beslutningstaking
Studiedesign:	Valideringsstudier, evalueringsstudier, sammenlignende studier, kvalitative studier, deskriptive publikasjoner som omhandler instrumenter/modeller eller erfaringer med disse
Kontekst:	Barnevern, eventuelt sosialtjeneste
Språk:	Alle, betinget av at sammendraget er på engelsk eller et skandinavisk språk (norsk, svensk, dansk)
Land:	Europa og store engelskspråklige land (Australia, Canada, New Zealand og USA)
År:	1995-2015

Vi ekskluderte studier av smale og spesifikke instrumenter, som diagnostiske medisinske/psykologiske tester eller pedagogiske tester. Etter konferering med oppdragsgiver ekskluderte vi også studier av familieråd som tilnærming (utdypet senere i kapittelet).

Litteratursøking

Søkestrategien ble utarbeidet av forskningsbibliotekar Lien Nguyen.

Vi søkte systematisk etter litteratur i følgende databaser: MEDLINE, PsycINFO, EMBASE, CINAHL, Cochrane Library, Web of Science Core Collection (SCI-EXPANDED & SSCI), ProQuest (Sociological Abstracts & Social Services Abstracts), PubMed, Epistemonikos, Health Evidence og The Campbell Library.

Søket bestod av emneord og tekstord som omfattet barn, mishandling, risikovurderingsverktøy og barnevern. Det ble avgrenset til år 1995 og nyere. Søket ble avsluttet i desember 2015, og resulterte i 12 833 unike treff. Den fullstendige søkestrategien er gjengitt i Vedlegg 1.

I tillegg søkte vi i etter ikke-indeksert («grå») litteratur i databasen BASE, samt i Google og Google Scholar. I Google og Google Scholar søkte vi også med relevante søketermer på svensk og dansk. Søketermer og antall treff for disse søkene finnes også i Vedlegg 1.

Artikkelutvelging

To forskere (HN og RB/NB/GF/NK/JM) gikk gjennom alle titler og sammendrag for å vurdere relevans i henhold til inklusjonskriteriene. Vurderingene gjorde vi uavhengig av hverandre og sammenlignet i etterkant. Der det var uenighet om vurderingene, ble inklusjon eller eksklusjon avgjort ved diskusjon, eventuelt konsultasjon med en tredjeperson.

Utvelging av litteratur ble kun gjort basert på tittel og sammendrag og i henhold til inklusjonskriteriene. Vi bestilte ikke fulltekst av publikasjonene. Kun basert på sammendragene var det i noen tilfeller vanskelig å avgjøre om publikasjonen faktisk var relevant. Usikkerheten var særlig knyttet til hvorvidt den aktuelle modellen eller instrumentet primært var tiltenkt bruk i barnevernet og ikke i andre sammenhenger hvor man ønsker å undersøke barns eller familiers situasjon. Der vi var i tvil, valgte vi å inkludere. I tilfeller der konteksten åpenbart ikke var barnevernstjeneste eller sosialtjeneste (men for eksempel helsestasjon, barneavdeling på sykehus eller den generelle befolkningen), ble publikasjonen ekskludert.

Etter diskusjon med Barne-, ungdoms- og familiedirektoratet ble vi enige om ikke å inkludere studier som vurderte ulike varianter av familieråd-modellen (f.eks. *family team conferencing, family team meetings*, *family group conferencing*, *family team decision-making*, *family unity meetings*, *team decision-making*). Årsaken var at denne modellen er godt kjent for direktoratet fra tidligere og at mengden inkluderte publikasjoner allerede var relativt omfattende.

Direktoratet ønsket opprinnelig en oversikt kun over instrumenter og modeller som er i bruk i dag. Dette var imidlertid vanskelig å vurdere med utgangspunkt i sammendragene. Det er derfor mulig at også publikasjoner som beskriver instrumenter og modeller som ikke er i bruk i dag er inkludert i vår liste.

Resultater

Resultat av søk

Søket resulterte i 13 261 referanser totalt. Vi vurderte 132 av de identifiserte referansene til å være mulig relevante i henhold til inklusjonskriteriene. Hovedårsakene til eksklusjon var at konteksten ikke var barnevernet eller at fokus for publikasjonen ikke var et instrument eller en modell. Utvelgelsesprosessen er illustrert i Figur 1.
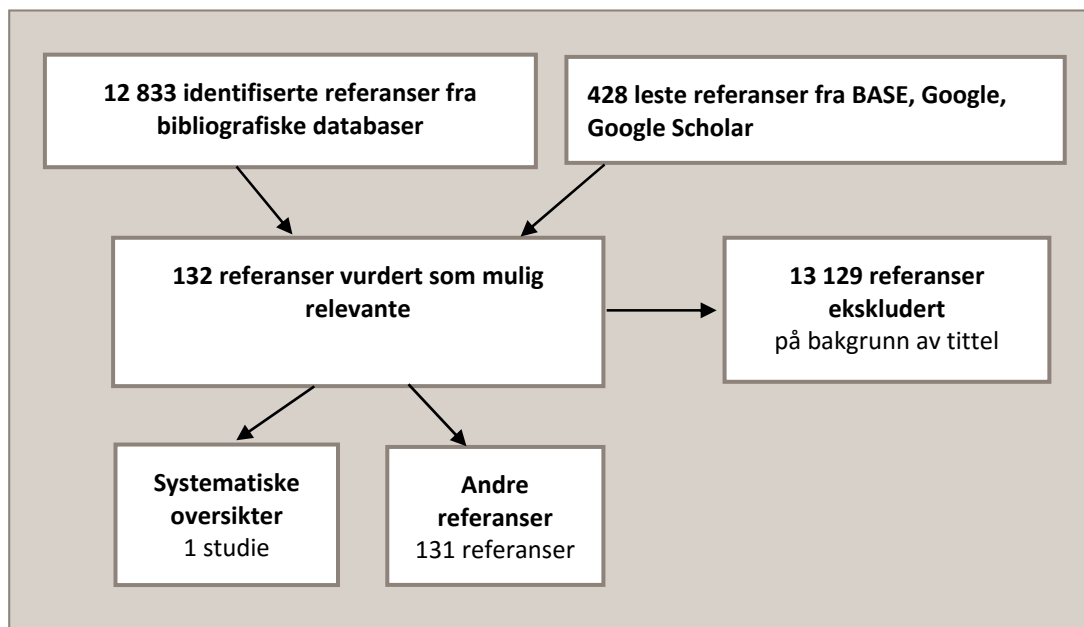
Figur 1. Flytskjema over identifisert litteratur

Resultat av sorteringen

Identifiserte studier

Vi fant én mulig systematisk oversikt over relevante modeller. Oversikten er «mulig» systematisk fordi vi ikke vet om den faktisk tilfredsstiller kriteriene for systematiske oversikter.

Videre inkluderte vi 131 referanser som omhandlet modeller eller instrumenter (hovedsakelig primærstudier). Disse 131 referansene er sortert etter hvorvidt de presenterer:

a) kun ett enkelt instrument til bruk i deler av undersøkelsesforløpet (deskriptive studier, valideringsstudier, evalueringsstudier, kvalitative studier)

b) flere instrumenter (sammenlignende studier, oversikter/sammenstillinger)

c) kun en enkel modell for hele eller større deler av undersøkelsesforløpet (deskriptive studier, evalueringsstudier)

d) flere modeller (oversikter, gjennomgang og diskusjoner av flere modeller)

e) andre typer referanser/studier, f.eks. mer generelle eller teoretiske diskusjoner

En oversikt over hvor mange studier som faller inn under de ulike kategoriene finnes i tabell 1.

Sorteringen i de ulike kategoriene er kun basert på tilgjengelig informasjon fra sammendragene. I noen tilfeller var det vanskelig å skille mellom *modeller* (helhetlige systemer for gjennomføring av undersøkelsessaken, inkludert beslutningstaking) og *instrumenter* (verktøy eller tester som benyttes i deler av undersøkelses- eller beslutningsprosessen), også fordi begrepsbruken varierer noe.

Tabell 1: Antall inkluderte studier sortert etter type referanse

Type studier	Antall studier: 132	Tabell
Mulig systematisk oversikt	1	2
Primærstudier		
Enkelt instrument	41	3
Flere instrumenter	15	4
Enkel modell	39	5
Flere modeller	18	6
Andre typer studier	18	7

I vedlegg 2 presenterer vi de inkluderte referansene fordelt på tabellene 2-7. I første kolonne i tabellene oppgir vi forfattere, publikasjonsår, tittel på publikasjonen og publikasjonssted. I andre kolonne gjengir vi sammendrag av artikkelen slik det fremkommer i de elektroniske databasene eller i selve dokumentet. I tredje kolonne har vi satt inn et emnestikkord for hver publikasjon for å kunne gi en rask oversikt (eksempelvis navn på instrument eller modell). I tillegg oppgir vi type publikasjon der det fremkommer. Innenfor kategoriene «enkelt instrument» og «enkel modell» (tabell 3 og 5) er referansene sortert etter navn på type instrument/modell. For øvrig er referansene sortert alfabetisk etter forfatter (tabell 4, 6 og 7).

I dette systematiske litteratursøket med sortering har vi ikke lest publikasjonene i fulltekst, og vi har dermed ikke vurdert studienes metodiske kvalitet eller sammenstilt resultatene. Kvalitetsvurdering og sammenstilling inngår når vi utfører en full systematisk oversikt.

Referanser

(1) Statistisk sentralbyrå (2015) Barnevern, 2014. https://www.ssb.no/sosiale-for-hold-og-kriminalitet/statistikker/barneverng/aar/2015-07-09 (lest 7. 1.2016)

(2) Barne-, ungdoms- og familiedirektoratet (2015). *Gangen i en barnevernssak*. 6.8.15. http://www.bufdir.no/Barnevern/Om_barnevernet/Gangen_i_en_barneverns-sak/

(3) Vis SA, Storvold A, Skilbred DT, Christiansen Ø, Andersen A (2014) *Statusrapport om barnevernets undersøkelsesarbeid – høsten 2014*. Universitet i Tromsø: RKBU Nord rapport

(4) Amy C. D'Andrade, M Austin, and A Benton. "Risk and safety assessment in child welfare: Instrument comparisons" *Journal of Evidence-Based Social Work* 5.1-2 (2008): 31-56. doi:10.1300/J394v05n01_03

(5) About the Integrated Children's System. http://webarchive.nationalarchi-ves.gov.uk/20091223141128/dcsf.gov.uk/everychildmatters/safeguardingandso-cialcare/integratedchildrenssystem/abouttheintegratedchildrenssystem/about/ (lest 7. 1.2016)

(6) BBIC, Barns behov i centrum. http://www.socialstyrelsen.se/barnochfamilj/bbic/ (lest 7. 1.2016)

(7) Barlow J, Fisher JD, Jones D (2012) Systematic review of models of analysing signifi-cant harm. Research Report DFE-RR199

Vedlegg

Vedlegg 1 Søkestrategi

Database: Ovid MEDLINE(R) In-Process & Other Non-Indexed Citations, Ovid MEDLINE(R) Daily, Ovid MEDLINE(R) and Ovid OLDMEDLINE(R) 1946 to Present
Dato: 09.11.2015
Treff: 3339

1   Adolescent/
2   Adolescent, Institutionalized/
3   exp Child/
4   Child, Institutionalized/
5   Child, Orphaned/
6   Child, Unwanted/
7   Child, Abandoned/
8   Homeless Youth/
9   Minors/
10   exp Infant/
11   or/1-10
12   Child Abuse/
13   Child Custody/
14   Child Welfare/
15   Foster Home Care/
16   Social Work/
17   (maltreat* or mistreat* or abuse* or neglect*).tw.
18   or/12-17
19   11 and 18
20   (((adolescen* or child* or baby or babies or boy$1 or casework* or girl$1 or in-fant$1 or juvenile$1 or kid$1 or minor$1 or preschool or pubescent or runa-way$1 or social service* or social worker* or teen$1 or teenager$1 or toddler$1 or underage* or under-age* or youth or (young adj (people or person))) adj2 (abuse* or maltreat* or mistreat* or neglect*)) or (foster adj (home* or car*)) or child protect* or child welfare or child custody).tw.
21   19 or 20
22   *Risk/
23   *Risk Factors/
24   Risk Assessment/
25   (risk$1 adj1 (assess* or instrument* or tool$1 or model* or scale* or measure* or predict* or prevent* or identif* or detect* or analyz* or analys*)).tw.
26   ((screening or identif* or detect*) adj2 (abuse* or maltreat* or mistreat* or ne-glect*)).tw.
27   decision making.tw.
28   Decision Making/
29   (standardized adj (procedure* or measure* or method*)).tw.

30	or/22-29
31	21 and 30
32	(news or letter or editorial or comment).pt.
33	31 not 32
34	remove duplicates from 33
35	limit 34 to yr="1995-Current"

Database: PsycINFO 1806 to November Week 1 2015
Dato: 09.11.2015
Treff: 5014

1	(adolescence 13 17 yrs or childhood birth 12 yrs).ag.
2	Adopted Children/
3	"Children of Alcoholics"/
4	Foster Children/
5	Missing Children/
6	Only Children/
7	or/1-6
8	Child Abuse/
9	"Child Abuse Reporting"/
10	Child Custody/
11	Child Neglect/
12	Child Welfare/
13	Foster Care/
14	Physical Abuse/
15	Protective Services/
16	Sexual Abuse/
17	Social Casework/
18	Social Services/
19	Social Workers/
20	(maltreat* or mistreat* or abuse* or neglect*).tw.
21	or/8-20
22	7 and 21
23	(((adolescen* or child* or baby or babies or boy$1 or casework* or girl$1 or infant$1 or juvenile$1 or kid$1 or minor$1 or preschool or pubescent or runaway$1 or social service* or social worker* or teen$1 or teenager$1 or toddler$1 or underage* or under-age* or youth or (young adj (people or person))) adj2 (abuse* or maltreat* or mistreat* or neglect*)) or (foster adj (home* or car*)) or child protect* or child welfare or child custody).tw.
24	22 or 23
25	Risk Assessment/
26	*Risk Factors/
27	(risk$1 adj1 (assess* or instrument* or tool$1 or model* or scale* or measure* or predict* or prevent* or identif* or detect* or analyz* or analys*)).tw.
28	((screening or identif* or detect*) adj2 (abuse* or maltreat* or mistreat* or neglect*)).tw.
29	decision making.tw.
30	Decision Making/
31	(standardized adj (procedure* or measure* or method*)).tw.
32	or/25-31
33	24 and 32
34	(news or letter or editorial or comment).dt.
35	33 not 34
36	remove duplicates from 35
37	limit 36 to yr="1995-Current"
17	Vedlegg

Database: Embase 1974 to 2015 November 09
Dato: 09.11.2015
Treff: 1074

1   adolescent/
2   Adolescent, Institutionalized/
3   exp child/
4   Child, Institutionalized/
5   child, orphaned/
6   child, unwanted/
7   child, abandoned/
8   homeless youth/
9   minors/
10   exp infant/
11   or/1-10
12   child abuse/
13   child custody/
14   child neglect/
15   child welfare/
16   foster care/
17   physical abuse/
18   child sexual abuse/
19   social work/
20   social worker/
21   (maltreat* or mistreat* or abuse* or neglect*).tw.
22   or/12-21
23   11 and 22
24   (((adolescen* or child* or baby or babies or boy$1 or casework* or girl$1 or infant$1 or juvenile$1 or kid$1 or minor$1 or preschool or pubescent or runaway$1 or social service* or social worker* or teen$1 or teenager$1 or toddler$1 or underage* or under-age* or youth or (young adj (people or person))) adj2 (abuse* or maltreat* or mistreat* or neglect*)) or (foster adj (home* or car*)) or child protect* or child welfare or child custody).tw.
25   23 or 24
26   risk assessment/
27   *risk factor/
28   *risk/
29   (risk$1 adj1 (assess* or instrument* or tool$1 or model* or scale* or measure* or predict* or prevent* or identif* or detect* or analyz* or analys*)).tw.
30   ((screening or identif* or detect*) adj2 (abuse* or maltreat* or mistreat* or neglect*)).tw.
31   (standardized adj (procedure* or measure* or method*)).tw.
32   decision making/
33   decision making.tw.
34   or/26-33
35   25 and 34
36   remove duplicates from 35
37   limit 36 to exclude medline journals
38   (abstract or conference or conference paper or conference proceeding or conference proceeding article or conference proceeding conference paper or conference proceeding editorial or conference proceeding note).pt.
39   36 and 38
40   37 or 39
41   limit 40 to embase

42   (news or letter or editorial or comment).pt.
43   41 not 42
44   limit 43 to yr="1995 -Current"

Cochrane Library
Dato: 09.11.2015
Treff: 335

#1   [mh ^Adolescent]
#2   [mh ^"Adolescent, Institutionalized"]
#3   [mh Child]
#4   [mh ^"Child, Institutionalized"]
#5   [mh ^"Child, Orphaned"]
#6   [mh ^"Child, Unwanted"]
#7   [mh ^"Child, Abandoned"]
#8   [mh ^"Homeless Youth"]
#9   [mh ^Minors]
#10   [mh Infant]
#11   {or #1-#10}
#12   [mh ^"Child Abuse"]
#13   [mh ^"Child Custody"]
#14   [mh ^"Child Welfare"]
#15   [mh ^"Foster Home Care"]
#16   [mh ^"Social Work"]
#17   (maltreat* or mistreat* or abuse* or neglect*):ti,ab,kw
#18   {or #12-#17}
#19   #11 and #18
#20   (((adolescen* or child* or baby or babies or boy? or casework* or girl? or infant? or juvenile? or kid? or minor? or preschool or pubescent or runaway? or social next/1 service* or social next/1 worker* or teen? or teenager? or toddler? or un-derage* or under-age* or youth or (young next/1 (people or person))) near/2 (abuse* or maltreat* or mistreat* or neglect* or incest)) or (foster next/1 (home* or car*)) or child next/1 protect* or "child welfare" or "child custody"):ti,ab,kw
#21   #19 or #20
#22   [mh ^Risk]
#23   [mh ^"Risk Factors"]
#24   [mh "Risk Assessment"]
#25   (risk* NEAR/1 (assess* or instrument* or tool? or model* or scale* or measure* or predict* or prevent* or identif* or detect* or analyz* or analys*)):ti,ab,kw
#26   ((screening or identif* or detect*) NEAR/2 (abuse* or maltreat* or mistreat* or neglect* or incest)):ti,ab,kw
#27   "decision making":ti,ab,kw
#28   [mh ^"Decision Making"]
#29   (standardized next/1 (procedure* or measure* or method*)):ti,ab,kw
#30   {or #22-#29}
#31   #21 and #30
        [Publication Year from 1995 to 2015]

EBSCO – CINAHL
Dato: 09.11.2015
Treff: 1065

S1   MH Child
S2   MH Infant
S3   S1 OR S2

S4   (MH "Child Abuse+")
S5   (MH "Child Custody")
S6   (MH "Child Welfare")
S7   (MH "Foster Home Care")
S8   (MH "Social Work")
S9   TX (maltreat* or mistreat* or abuse* or neglect* or incest)
S10   S4 OR S5 OR S6 OR S7 OR S8 OR S9
S11   S3 AND S10
S12   TX (((adolescen* or child* or baby or babies or boy# or casework* or girl# or infant# or juvenile# or kid# or minor# or preschool or pubescent or runaway# or "social service*" or "social worker*" or teen# or teenager# or toddler# or underage* or under-age* or youth or (young W0 (people or person))) N1 (abuse* or maltreat* or mistreat* or neglect*)) or (foster W0 (home* or car*)) or "child protect*" or "child welfare" or "child custody")
S13   S11 OR S12
S14   (MH "Risk Assessment")
S15   TX (risk# N0 (assess* or instrument* or tool# or model* or scale* or measure* or predict* or prevent* or identif* or detect* or analyz* or analys*)).
S16   TX ((screening or identif* or detect*) N1 (abuse* or maltreat* or mistreat* or neglect*))
S17   (MH "Decision Making")
S18   TX("decision making")
S20   TX (standardized W0 (procedure* or measure* or method*))
S21   S14 OR S15 OR S16 OR S17 OR S18 OR S20
S22   S13 AND S21
S23   [Exclude MEDLINE records]
S24   [Published Date: 19950101-20151231]
S25   PT (editorial OR letter OR "letter to the editor" OR newspaper or commentary
S26   S24 NOT S25

Database: Web of Science Core Collection: Citation Indexes (SCI-EXPANDED -- 1975-present; SSCI --1975-present
Dato: 09.11.2015
Treff: 1906

1   TS=(((("adolescen*" or "child*" or "baby" or "babies" or boy$ or "casework*" or girl$ or infant$ or juvenile$ or kid$ or minor$ or "preschool" or "pubescent* "or runaway$ or "social service*" or "social work*" or teen$ or teenager$ or toddler$ or "underage*" or "under-age*" or "youth" or ("young" NEAR/0 ("people" or "person"))) NEAR/1 ("abuse*" or "maltreat*" or "mistreat*" or "neglect*")) or ("foster" NEAR/0 ("home*" or "car*")) or "child protect*" or "child welfare" or "child custody"))
2   TS=(risk$ NEAR/0 ("assess*" or "instrument*" or tool$ or "model*" or "scale*" or "measure*" or "predict*" or "prevent*" or "identif*" or "detect*" or "analyz*" or "analys*"))
3   TS=(("screening" or "identif*" or "detect*") NEAR/1 ("abuse*" or "maltreat*" or "mistreat*" or "neglect*"))
4   TS="decision making"
5   TS=("standardized procedure*" or "standardized measure*" or "standardized method*")
6   #5 OR #4 OR #3 OR #2
7   #6 AND #1

Database: ProQuest (Social Services Abstracts & Sociological Abstracts)
Dato: 09.11.2015

Treff: 2764

S1 SU.EXACT("Adolescents" OR "Adopted Children" OR "Adult Children" OR "Children" OR "Foster Care" OR "Foster Children" OR "Infants" OR "Minor/Minors" OR "Only Children" OR "Preschool Children" OR "Runaways" OR "Youth")
S2 SU.EXACT("Child Abuse" OR "Child Custody" OR "Child Neglect" OR "Child Sexual Abuse" OR "Child Welfare Services" OR "Foster Care" OR "Social Work Cases" OR "Social Services")
S3 TI,AB,SU(abuse* or neglect* or mistreat* or maltreat*)
S4 s2 or s3
S5 s1 and s4
S6 TI,AB,SU(((adolescen* or child* or baby or babies or boy$1 or casework* or girl$1 or infant$1 or juvenile$1 or kid$1 or minor$1 or preschool or pubescent or runaway$1 or "social service*" or "social worker*" or teen$1 or teenager$1 or toddler$ or underage* or under-age* or youth or (young NEAR/0 (people or person))) NEAR/1 (abuse* or maltreat* or mistreat* or neglect*)) or (foster NEAR/0 (home* or car*)) or "child protect*" or "child welfare" or "child custody")
S7 s5 or s6
S8 SU.EXACT("Risk Factors" OR "Risk Assessment" OR "Decision Making")
S9 TI,AB,SU(risk$1 NEAR/0 ("assess*" or "instrument*" or tool$1 or "model*" or "scale*" or "measure*" or "predict*" or "prevent*" or "identif*" or "detect*" or "analyz*" or "analys*"))
S10 TI,AB,SU((screening or identif* or detect*) NEAR/1 (abuse* or maltreat* or mistreat* or neglect*))
S11 TI,AB,SU("standardized procedure*" or "standardized measure*" or "standardized method*")
S12 TI,AB,SU("decision making")
S13 s8 or s9 or s10 or s11 or s12
S14 s7 and s13
S15 S14 AND YR(>=1995)

PUBMED
Dato: 09.11.2015
Treff: 8

[PubMed]: ((child abuse) and (risk assess*)) and pubstatusaheadofprint

EPISTEMONIKOS
Dato: 09.11.2015
Treff: 75

Title OR Abstract: ("risk assessment" OR "risk instrument" OR "risk tool" OR "risk model" OR "risk scale" OR "risk measure" OR "risk analyze" OR "risk analyse")
AND
Title OR Abstract: ("child abuse" OR "child sexual abuse" or "child physical abuse" or "child emotional abuse" OR "child mistreatment" OR "child maltreatment" OR "child neglect" OR "child welfare" OR "child protective service" OR "child custody")

Health Evidence
Dato: 09.11.2015
Treff: 46

Advanced search:

("child abuse" OR "child sexual* abuse*" or "child physical* abuse*" or "child emotional* abuse*" OR "child mistreat*" OR child maltreat*" OR "child neglect*" OR "child welfare" OR "child protect*" OR "child custody")
AND
("risk asses*" OR "risk instrument*" OR "risk tool*" OR "risk model*" OR "risk scale*" OR "risk measure*" OR "risk analyz* OR "risk analys*" OR "screen* abuse*" OR "screen* sexual abuse*" or "screen mistreat*" or "screen* maltreat*" or "screen* neglect* or "screen* incest" or "identif* abuse*" or "identif* sexual abuse*" or "identif* maltreat*" or "identif* mistreat*" or "identif* neglect*" or "identif* incest" or "decision making" or "standardized procedure*" or "standardized measure*" or "standardized method*")

The Campbell Library
Dato: 09.11.2015
Treff: 121

Advanced search:
[All text:] ("child abuse" OR "child sexual* abuse*" or "child physical* abuse*" or "child emotional* abuse*" OR "child mistreat*" OR child maltreat*" OR "child neglect*" OR "child welfare" OR "child protect*" OR "child custody")
AND
[All text:] ("risk asses*" OR "risk instrument*" OR "risk tool*" OR "risk model*" OR "risk scale*" OR "risk measure*" OR "risk analyz* OR "risk analys*" OR "screen* abuse*" OR "screen* sexual abuse*" or "screen mistreat*" or "screen* maltreat*" or "screen* neglect* or "screen* incest" or "identif* abuse*" or "identif* sexual abuse*" or "identif* maltreat*" or "identif* mistreat*" or "identif* neglect*" or "identif* incest" or "decision making" or "standardized procedure*" or "standardized measure*" or "standardized method*")
[Limit to type of document: Review]

BASE (Bielefeld Academic Search Engine)
Dato: 8/12-15
Treff: 118

Entire Document: "child abuse" "risk assessment"

Google Scholar
Engelsk
Dato: 30/11-15
Søkestreng: "risk assessment"AND ("child abuse" OR "child maltreatment" or "child welfare")
Tidsperiode: 1995-2015
Treff: 5920, vi leste de 100 første

Svensk
Dato: 8/1-16
Søkestreng: "barn" AND "riskbedömning" AND ("missbruk av barn" OR "barnmisshandel" OR "sociala barn- och ungdomsvården" OR "socialtjänsten")
Tidsperiode: 1995-2015
Treff: 467, vi leste de 50 første

Dansk
Dato: 8/1-16
Søkestreng: "børn" AND "risikovurdering" AND ("misbrug af børn" OR "børnemishandling" OR "socialstyrelsen" OR "børne- eller ungesagen")

Tidsperiode: 1995-2015
Treff: 467, vi leste de 50 første

Google
Engelsk
Dato: 30/11-15
Søkestring: "risk assessment" AND ("child abuse" OR "child maltreatment" or "child welfare") file:pdf
Tidsperiode: 1995-2015
Treff: 9280, vi leste de 50 første

Svensk
Dato: 8/1-16
Søkestreng: "barn" AND "riskbedömning" AND ("missbruk av barn" OR "barnmisshandel" OR "sociala barn- och ungdomsvården" OR "socialtjänsten") file:pdf
Tidsperiode: 1995-2015
Treff: 252, vi leste de 30 første

Dansk
Dato: 8/1-16
Søkestring: "børn" AND "risikovurdering" AND ("misbrug af børn" OR "børnemishandling" OR "socialstyrelsen" OR " børne- eller ungesagen") file:pdf
Tidsperiode: 1995-2015
Treff: 64, vi leste de 30 første

Vedlegg 2 Liste over inkluderte referanser

Tabell 2. Mulig systematisk oversikt (n=1)

Referanse	Sammendrag	Innhold & type
Barlow J, Fisher JD, Jones D. (2012) <u>Systematic review of models of analysing significant harm</u>. Research Report DFE-RR199	Aims: The aim of this review was to identify, critically appraise, and evaluate the potential role of all available tools for assessing/analysing data about the likelihood of significant harm to children. We aimed to identify the adequacy of these tools in terms of their consistency with the principles of the Assessment Framework (Department of Health, Department for Education and Employment and Home Office 2000), and their potential to be used as part of a process of Structured Professional Judgment and their rigour. Methods: This study involved a systematic review of published evidence. We searched a wide range of electronic databases, alongside a number of other sources. The included tools were critically appraised using an appraisal instrument that was developed for the purpose of the study. Critical appraisal of the included tools assessed the following: • the adequacy of the domains that indicate what is to be assessed; • the provision of behavioural descriptors that define and operationalise the categories/domains of assessment; • the procedures and calculations for determining the nature and severity of harm associated with the above domains and with the overall score produced by the scale; • the standardised forms provided to capture and record the information; • the rigour of the tools in terms of reliability, validity, acceptability, equitability and impact. A summary of the included tools and their strengths/weaknesses has been provided, alongside recommendations about the potential for implementing such tools in England and further research that is needed. Findings: Review of Tools for Assessing Likelihood of Harm • The review identified 3 systems of tools: 11 individual tools and 2 audit tools (see Table 1). These all consist of: a) methods of assessing a range of aspects of harm at different stages in the assessment process; b) criteria for operationalising the above assessment domains; and c) guidance about the synthesis and analysis of the data collected following the assessment, alongside data collection forms. The above comprise the following types of tools: 1. RISK ASSESSMENT TOOLS – measure a small number of historical and static factors that research has shown to be strongly	Mulig systematisk oversikt over modeller Rapport fra det britiske utdanningsdepartementet

Referanse	Sammendrag	Innhold & type
	associated with future risk of harm. They are for use at the initial stages in terms of identifying children for whom there is need of further assessment. Some of these tools were developed using empirical techniques and are as such evidence-based (i.e. actuarial) such as the Structured Decision-Making system of tools, but some are also consensus based (see chapter 1 for further detail). 2. STRENGTHS AND NEEDS ASSESSMENT TOOLS – typically measure dynamic factors that are often defined as 'needs', and which if remedied can reduce the risk of harm posed. They range from fairly brief tools that have been developed alongside the above actuarial Structured Decision-Making (SDM) system of tools, to brief mapping tools (e.g. Resilience Framework), and more comprehensive assessment and analysis tools (e.g. Safeguarding Assessment and Analysis Framework (Bentovim et al 2010). 3. RESPONSE PRIORITY DECISION TREES - these tools are used to improve the consistency across workers and to prioritise decisions about initial reports of abuse and neglect, in order to focus the workload on the most relevant cases, and aid decision-making about the rapidity of the response that is needed. They comprise decision-trees for each of the different types of abuse or neglect (for example emotional, physical and sexual abuse, and neglect), aimed at creating clarity about what should or should not be assessed at the time the child enters the social care system. All of the response priority tools that were identified have been developed as part of the Structured Decision-Making systems. 4. PERMANENCY/PLACEMENT AND REUNIFICATION CHECKLISTS – these tools are based on the same principles as the other Structured Decision-Making tools and have been developed as part of these systems. They focus explicitly on the likelihood of recurrence of harm in relation to decisions about permanency/placement and reunification. 5. AUDIT TOOLS – these are very similar to the risk checklists in that they comprise lists of empirically based risk factors. However, they have been used to date, as a means of auditing retrospectively whether cases have been classified accurately. For example, Ward et al (2012) recently used a set of empirically based risk factors developed by Jones, Hindley and Ramchandani (2006) and Jones (1991; 1998) to identify and classify cases into four categories of risk, and then to analyse whether the actions taken were consistent with these ratings. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/183949/DFE-RR199.pdf	

Tabell 3. Enkle, navngitte/spesifikke instrumenter for måling av risiko/mishandling/neglisjering (n=41)

Referanse	Sammendrag	Innhold & type
Conners NA, Whiteside-Mansell L, Deere D, Ledet T, Edwards MC. (2006) Measuring the potential for child maltreatment: the reliability and validity of the Adult Adolescent Parenting Inventory--2. Child Abuse & Neglect 30(1):39-53.	OBJECTIVE: The field of child protection needs reliable and valid methods of assessing the potential for child abuse and neglect. The purpose of this study was to examine the psychometric properties of the Adult Adolescent Parenting Inventory--2 (AAPI-2), Form B, using a sample of 309 low-income, rural families in a southern state. METHOD: The AAPI-2 is a 40-item survey designed to assess the parenting and child rearing attitudes of adult and adolescent parent and pre-parent populations. Each of the five AAPI-2 scales was (a) examined using factor analysis in order to determine the unidimensionality of the scale, (b) evaluated based on estimates of the scales reliability in order to determine the consistency with which the construct was measured, and (c) when possible, examined to determine if it is related to other constructs in meaningful and expected ways. RESULTS: While the factor structure reported by the developer was not fully confirmed in this sample, there is some evidence that the instrument is measuring at least two of the constructs it purports to measure and that the total score may be useful. Correlations with other instruments measuring parenting behavior and child behavior were significant, and in the expected direction, offering some support for the validity of the AAPI-2. CONCLUSIONS: While the AAPI-2 appears to measure attitudes related to harsh or neglectful parenting, caution should be used in the interpretation of the individual AAPI-2 scales.	Adult Adolescent Parenting Inventory-2 (AAPI-2) Tidsskriftsartikkel
Hitchcock J. (2011) Adult-Adolescent Parenting Inventory-2 as a predictor of risk for child maltreatment. Dissertation Abstracts International Section A: Humanities and Social Sciences 72(4-A):1448.	Scope and Method of Study. The purpose of this study was to investigate the Adult-Adolescent Parenting Inventory (AAPI-2) as a predictor of level of risk for child maltreatment as determined by the Department of Human Services (DHS) safety assessment. The AAPI-2 consists of five scales. The scales are inappropriate parental expectations, empathy, value of corporal punishment, family role reversal, and restrict power and independence. Archival data from a community education program for CPS referred parents was used in the study. The archival data consisted of 341 records of adult participants in the program. Predictive discriminate analysis was performed to investigate the ability of the AAPI-2 to predict risk as determined by DHS safety assessments. Exploratory investigation of influences of various demographics on the AAPI-2 composite score and on level of risk utilized multiple regression and discriminate analysis techniques. Findings and Conclusions. Results indicated significant results put poor model fit for the AAPI-2 in correctly classifying level of risk for maltreatment as determined by the DHS safety assessment. The exploratory analysis found gender to predict scores on the AAPI-2, p < .05. There were no significant findings related to demographics and prediction of level of risk for child maltreatment, although strong associations for education level, income level, and experiences of family violence. Implications of the results point to the need for future research to investigate the structure of the AAPI-2. Demographics of low income and experience of family violence both support previous research in their association with child maltreatment. Results indicate that in practice the use of the AAPI-2 with populations involved with child welfare services should be done so with caution.	Adult-Adolescent Parenting Inventory-2 (AAPI-2) Doktoravhandling

Referanse	Sammendrag	Innhold & type
Zijlstra AE, Kalverboer ME, Post WJ, Ten Brummelaar MDC, Knorth EJ. (2013) Could the BIC-Q be a decision-support tool to predict the development of asylum-seeking children? International Journal of Law and Psychiatry 36(2):129-135.	The Best Interest of the Child Questionnaire (BIC-Q) is an instrument to measure the quality of the childrearing environment. We used a sample of asylum-seeking children (N = 79) in the Netherlands to determine the relationship between the quality of the childrearing environment and the child's internalizing behavioural problems. In decisions as to whether asylum-seeking children may remain in the Netherlands or must return to their country of origin, those in favour of the child's positive development are in line with the Convention on the Rights of the Child. The aim of the present study is to determine the criterion-related validity of the BIC-Q using internalizing behavioural problems as criteria. In the case of good predictive validity, this instrument might be a suitable tool in judicial decision-making with respect to a possible change in an asylum-seeking child's place of residence.We investigated the criterion-related validity of the BIC-Q using logistical regression analysis and an ROC-curve to determine the relation between the quality of the childrearing environment and the child's internalizing behavioural problems. Logistic regression analysis showed that the current quality of the child-drearing environment is negatively related to the risk of internalizing behavioural problems in children. The ROC shows that 81% of the children are correctly predicted whether they have internalizing behavioural problems or not. For seven conditions, the sum of the sensitivity and specificity was at a maximum (.75 and .71, respectively).	Best Interest of the Child Questionnaire (BIC-Q) Tidsskriftsartikkel
Lyons P, Doueck HJ, Koster AJ, Witzky MK, Kelly PL. (1999) The child well-being scales as a clinical tool and a management information system. Child Welfare 78(2):241-258.	In June 1992, a family services agency in the Niagara region of southern Ontario began implementing and operating a computerized version of the Child Welfare League of America's Child Well-Being Scales [Magura & Moses 1986]. The scales are completed on all cases at the point of transfer from intake to long-term family service, and then again every 120 days until case closure. The scales have been useful in clinical and administrative practice for case planning in aggregate form, service planning, community profiling, and outcome measurement.	Child Well-Being Scales Tidsskriftsartikkel
Lyons P, Doueck HJ. (2009) Child Well-Being Scales as a Predictor of Casework Activity and Services in Child Protection. Journal of Public Child Welfare 3(2):139-158.	This study examined the use of the Child Well-Being Scales (CWBS) as an aid to structured decision making in a child protection agency in Ontario, Canada. A total of 337 closed case records from a large multi-service agency in Ontario, Canada, were reviewed and abstracted by trained coders in order to determine whether or not the scales, completed by intake workers, were predictive of the subsequent decisions and activities of family service workers. Using regression models to control for demographic, case, family, community, and organizational variables results indicated that lower CWBS scores, implying increased threats to well being, were associated with greater activity and more services.	Child Well-Being Scales Tidsskriftsartikkel
De Bortoli, L (2014) Child removal in child protection	The decision to remove a child from the family home is affected by a multitude of factors. The literature describes difficulties experienced by child protection practitioners when making these decisions. Difficulties arise from uncertain contexts and unclear information,	Child Protection Removal

Referanse	Sammendrag	Innhold & type
practice: comparing structured professional judgement and actuarial risk assessment instruments. Monash University.	leading practitioners to rely upon heuristics that may lead to errors in judgement. In an effort to improve decision-making in child protection, a body of literature on risk assessment instruments has emerged. Currently, in child protection the prevailing body of literature relates to consensus and actuarial instruments. Structured Professional Judgement (SPJ) is a third approach to guiding decision-making and is yet to be meaningfully explored in the field of child protection practice. The aim of the thesis is to report on the development and pilot evaluation of a newly devised SPJ instrument. The Child Protection Removal Assessment (ChiPRA) was developed as a part of the current program of research studies that aim to assist child protection practitioners decide whether protective concerns should be managed while the child resides within or outside the family home.	Assessment (ChiPRA) Doktoravhandling
Milner JS, Murphy WD, Valle LA, Tolliver RM. (1998) Assessment issues in child abuse evaluations. Handbook of child abuse research and treatment. New York: Plenum Press. pp. 75-115.	(from the book) Discuss assessment in child abuse and neglect (CAN). The authors note that despite the number of assessment techniques currently available in CAN, researchers and practitioners have few methods of clearly identifying risk and mitigating factors in CAN. In this chapter, these authors cover interviews, direct observation, personality measures, offender-specific measures, and risk assessments. Their overall conclusion is that risk assessment in the form of the Child Abuse Potential Inventory and direct assessment techniques currently offer the best assessment strategies in CAN. Unfortunately, a child care worker is the least reliable predictor of further risk.	Child Abuse Potential Inventory (CAP) Bokkapittel
Ondersma SJ, Chaffin MJ, Mullins SM, LeBreton JM. (2005) A Brief Form of the Child Abuse Potential Inventory: Development and Validation. Journal of Clinical Child and Adolescent Psychology 34(2):301-311.	A brief version of the Child Abuse Potential Inventory (CAP) was developed using a development sample of N = 1,470, and cross-validated using an additional sample of N = 713. Items were selected to maximize (a) CAP variance accounted for; (b) prediction of future child protective services reports; (c) item invariance across gender, age, and ethnicity; (d) factor stability; and (e) readability and acceptability. On cross-validation, scores from the resulting 24-item risk scale demonstrated an internal consistency estimate of .89, a stable 7-factor structure, and substantial correlations with the CAP Abuse Risk score (r - .96). The CAP risk cutoff was predicted with 93% sensitivity and 93% specificity (area under the receiver operating characteristics curve = .98), and the Brief Child Abuse Potential Inventory (BCAP) and CAP demonstrated similar patterns of external correlates. The BCAP may be useful as a time-efficient screener for abuse risk.	Child Abuse Potential Inventory (CAP) Tidsskriftsartikkel
Walker CA, Davies J. (2010) A Critical Review of the Psychometric Evidence Base of the Child Abuse Potential Inventory. Journal of Family	Screening for potential child abuse is an essential component of work in many child and family services. The Child Abuse Potential inventory (CAP; Milner 1986) is one measure developed to help in this task. The primary aim of this review is to critically evaluate studies reporting psychometric information of the CAP. A previous paper by Milner (Clinical Psychology Review 14(6): 547-583 1994) reviewed studies evaluating the psychometric properties of the measure up to 1994. Since then over 100 articles have been published that consider the measurement properties of this tool. This review considers 27 papers published since Milner's (Clinical Psychology	The Child Abuse Potential inventory (CAP)

Referanse	Sammendrag	Innhold & type
Violence 25(2):215-227.	Review 14(6): 547-583 1994) review that clarify previous findings in relation to specific psychometric properties of the CAP. In particular, this review focuses on studies that provide information on the cross-cultural validity of the CAP, on the internal consistency of the CAP measure as a whole and its subscales, or on sensitivity and specificity classification rates. Studies providing information on the differential validity of the CAP (using at least two differentiated sample groups) or the efficacy of the CAP to identify change are also considered. Published evidence suggests that the CAP can help assess for a range of difficulties associated with increased risk for physical child abuse. The CAP scales have shown good internal consistency estimates across sample groups and cultures, with similar underlying themes for CAP factors reported for the different cultures studied. The differential validity of the CAP has also been shown, although sensitivity and specificity classification rates have varied. The CAP appears able to indicate some degree of pre-to post-intervention change, although further investigation is required to clarify what changes in CAP scores actually reflect. Further investigation of this measure in other countries is also required.	Tidsskrifts-artikkel
Budd KS, Heilman NE, Kane D. (2000) Psychosocial correlates of child abuse potential in multiply disadvantaged adolescent mothers. Child Abuse & Neglect 24(5):611-625.	Examined psychosocial correlates of child maltreatment risk, and assessed the validity of the Child Abuse Potential (CAP) Inventory with multiply disadvantaged teenage mothers. Ss were 75 adolescent mothers who were wards of the Illinois child protection system. Mothers (aged 14-18 yrs) and infants participated in home-based psychosocial assessment of personal and parenting functioning. Group comparisons examined differences for mothers with elevated versus normal versus invalid CAP scores due to faking good. Abuse risk groups differed on emotional distress, social support satisfaction, reading achievement, and years of education, but not on parenting beliefs or quality of child stimulation. Differences favored the normal over the elevated risk group in all significant comparisons, while Ss elevated faking good differed from normals only in lower reading achievement. Emotional distress, support dissatisfaction, and low achievement were also highlighted as significant predictors of greater abuse risk. Results support the concurrent validity and clinical applicability of the CAP Inventory with disadvantaged teenage mothers.	Child Abuse Potential Inventory (CAP) Tidsskrifts-artikkel
Milner JS, Crouch JL. (2012) Psychometric characteristics of translated versions of the Child Abuse Potential Inventory. Psychology of Violence 2(3):239-259.	Objective: The present study was designed to assess the psychometric adequacy of translated versions of the Child Abuse Potential (CAP) Inventory. Method: Numerous terms were used to search databases for studies on translated versions of the CAP Inventory. Results: Across translations, meta-analyses produced Abuse scale internal consistency estimates of .88 and .91 for general population and comparison/maltreating parents, respectively. Abuse scale correct classification rates based on discriminant analyses ranged from 83.0% to 100% for maltreating parents and from 86.5% to 100% for comparison parents. When English (U.S.) item weights and cut scores were used, overall correct classification rates were about 10% lower. Construct validity data for translated versions of the Abuse scale were comparable to those for the English (U.S.) version. Even so, in many cases the CAP inventory Lie scale using English (U.S.) cut scores produced excessive false-positive classifications. Conclusions: Across translations, the Abuse scale had reliability and classification rates similar to those reported for the English (U.S.) version. Construct validity data suggested that similar risk	Child Abuse Potential Inventory (CAP) *i ulike oversettelser* Tidsskrifts-artikkel

Referanse	Sammendrag	Innhold & type
	factors are measured by both translated and English (U.S.) versions of the Abuse scale. However, U.S. norms for the CAP Inventory Lie scale may not be appropriate for use with translated versions of the Lie scale.	
Pecnik N. (2003) "Child Abuse Potentional Inventory": Presentation of Instruments and Results of Its Validation in Croatia. Ljetopis studijskog centra socijalnog rada 10(2):211-228.	In this article the author presents the "Child Abuse Potential Inventory" (Milner, 1986), its metric characteristics, the results of its first application in Croatia, & recommendations for its further use.	Child Abuse Potential Inventory (CAP) i *Kroatia* Tidsskrifts-artikkel
Spangler G, Bovenschen I, Globisch J, Krippl M, Ast-Scheitenberger S. (2009) Subjective parental stress as an indicator for child abuse risk: The role of emotional regulation and attachment. Praxis der Kinderpsychologie und Kinderpsychiatrie 58(10):814-837	The Child Abuse Potential Inventory (CAPI) is an evidence-based procedure for the assessment of the risk for child abuse in parents. In this study, a German translation of the CAPI was applied to a normal sample of German parents (N = 944). Descriptive analysis of the CAPI scores in the German provides findings comparable to the original standardization sample. The subjects' child abuse risk score was associated with demographic characteristics like education, marital status, occupation and gender. Long-term stability of the child abuse risk score and associations with individual differences in emotional regulation and attachment were investigated in a sub-sample of mothers with high and low child abuse risk scores (N = 69). The findings proved long-term stability. Furthermore associations between the child abuse risk score and anger dispositions were found which, however, were moderated by attachment differences. The findings suggest attachment security as a protective factor against child abuse.	Child Abuse Potential Inventory (CAP) i *Tyskland* Tidsskrifts-artikkel
Miragoli S, Camisasca E, Di Blasio P (2015) Validation of the Child Abuse Potential Inventory in Italy. A Preliminary Study. SAGE Open DOI: 10.1177/2158244015597044	The aim of this study was to provide preliminary findings on the reliability and the validity of the Italian Child Abuse Potential (CAP) Inventory, a screening tool that measures parents' potential for child physical abuse. The CAP Inventory and measures on parenting stress (Parenting Stress Index–Short Form [PSI-SF]) and parents' perceptions of child adjustment (Child Behavior Checklist [CBCL]) were administered in a nonclinical sample of Italian parents (N = 551) with a 2- to 6-year-old child. The Abuse scale showed adequate internal consistency (α = .87), with significantly negative correlations between socioeconomic status and educational level of the parents. Also, the Abuse scale scores were significantly predicted by high levels of parenting stress and by parental negative perceptions of the child's behavior. Finally, using a cut score for the English version of the Abuse scale (where 95% of parents would be expected to be classified), 93.8% of Italian parents were classified as nonabusive by the Abuse scale. These results supported the cross-cultural	Child Abuse Potential Inventory (CAP) i *Italia* Tidsskrifts-artikkel

Referanse	Sammendrag	Innhold & type
	generalizability of the Abuse scale. However, complementary studies with abusive samples are needed to verify the ability of the instrument to discriminate between abusive and nonabusive parents also in the Italian population.	
Blinn-Pike L, Mingus S. (2000) The internal consistency of the child abuse potential inventory with adolescent mothers. <u>Journal of Adolescence</u> 23(1):107-111.	In this study, 105 adolescents completed the Child Abuse Potential Inventory (CAP) at an average of 2 months postpartum. The purpose was to assess the reliability (internal consistency) of the CAP with adolescent mothers. The second purpose was to begin to establish a line of inquiry that examines the value of using the CAP with this population. The results showed that the alpha reliabilities were low for the CAP abuse scale (0.65) and low to moderate for its six subscales (range 0.59-0.74). The conclusion was drawn that further research is needed to understand the psychometric properties of the CAP with adolescent mothers.Copyright 2000 The Association for Professionals in Services for Adolescents.	Child Abuse Potential Inventory (CAP) Tidsskriftsartikkel
Bergamo LPD, Bazon MR. (2012) Child physical abuse: Evaluating psychological risk factors in accused caregivers. <u>Psicologia: Reflexao e Critica</u> 25(2):256-264.	It was verified to what extent cognitive and affective/emotional variables could distinguish caregivers accused of committing physical abuse (G1) from those without physical abuse records (G2). The Child Abuse Potential Inventory (CAP), which is an instrument designed to assess psychological risk factors in caregivers, was used. A questionnaire on socio-demographic characterization and another on economic classification were also employed to equate the groups. G1 presented a greater potential risk than G2, higher levels of Distress, Rigidity, Problems with the Child and with Themselves, Problems with Others, and a lower level of Ego Strength. These variables contribute with the composition of physical abuse risk, since, in agreement with the Social Information Processing Model, they would be related to cognitive and affective basic processes which are veiled to the perceptions and evaluation/interpretations, associated to abusive parental behavior.	Child Abuse Potential Inventory (CAP) Tidsskriftsartikkel
DeStefano L (2000) CARA (Child Abuse Risk Assessment): A Situated Evaluation of an Innovative Learning Environment. University of Illinois.	Five child protection investigators participated in the study, and qualitative data was collected by means of a variety of probes. Reader-response theory, which seeks to understand the transaction between the reader, text, and context, guided the analysis of the data. Results showed that CARA was used in unique ways by each investigator to construct a flexible understanding of the domain of child abuse in varying forms, and therefore the user's transaction with the innovation is a crucial variable in evaluating innovations. The meaning of an innovation is determined not so much by the developer's idealization of it, but the process by which it comes to be used and realized.	Child Abuse Risk Assessment (CARA) Doktoravhandling
Ostler T. (2010) Assessing parenting risk within the context of severe and persistent mental illness: Validating an observational measure for	Women with severe and persistent mental illness (SMI) face formidable challenges as parents. While many raise their children to adulthood, others struggle considerably in the parenting role. In cases where there is child protective service involvement, an assessment may be requested to establish what risks an individual with SMI poses as a parent. Unfortunately, many current approaches to parenting assessments have serious methodological problems. One problem is a lack of valid and reliable measures to assess the	Child and Adult Relational Experimental Index (CARE-Index)

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families with child protective service involvement. <u>Infant Mental Health Journal</u> 31(5):467-485.	parenting behavior of individuals with SMI who have child protective service involvement. In an effort to improve the quality of parenting assessments for this vulnerable group, this study drew on a sample of mothers with SMI who had lost custody of a child to examine the reliability and validity of the Child and Adult Relational Experimental Index (CARE-Index), an observational measure of parenting behavior. Independent and trained raters achieved a high level of reliability on the measure. Mothers' ratings on the measure also were associated with children's interactive behavior and with an estimation of risk based on a multifaceted, comprehensive assessment. The measure's relation to estimation of risk remained significant when two other predictors of risk, maternal caregiving attitudes and insight into mental illness, were considered. Taken together, the findings suggest that the measure can provide reliable, valid, and independent information on parenting behavior that could inform comprehensive, multifaceted assessments of parenting risk.	Tidsskrifts-artikkel
Lyle CG, Graham E (2000) Looks can be deceiving: Using a risk assessment instrument to evaluate the outcomes of child protection services. <u>Children and Youth Services Review</u> 22(11–12): 935–949.	This study explores the use of a risk assessment instrument based on the Illinois CANTS-17B in the child protection services division of a large urban public social services agency. It addresses the usefulness of the instrument as an outcome measure tool, that is, as means of measuring successful case outcomes based on reductions in maltreatment risk between case opening and case closing. Two separate studies were conducted in which the initial and closing risk levels on the 14-item scale were compared. Results were highly statistically significant in both studies, with the difference being in the expected and desired direction: a decrease in risk scores at case closing. However, a more detailed exploration of the data and of the practice issues involved in the agency setting strongly suggests that these differences are largely due to the artificial inflation of initial risk scores by caseworkers in order to ensure children's acceptance for ongoing child protection services. These factors are discussed in detail, along with the policy decisions that ensued from the study.	Illinois CANTS-17B Tidsskrifts-artikkel
Wood, H (2011) Assessing the feasibility of using actuarial risk assessment tool to identify risks in child protection cases.	(fra abstraktet) There are currently no UK recommended valid and reliable risk assessment tools available for child protection teams, who rely on unaided professional judgement where information may be incomplete, expertise is variable and the process open to bias. Currently, UK child protection risk assessments are based on professional opinions about the range and weighting of factors associated with families where children have been abused or neglected. Study purpose: Selecting and weighting the most significant predictive factors of risk to children by using actuarial statistical methods is more likely to lead to yield accurate risk ratings. Whilst not perfect predictors, such actuarial tools categorise cases into low or high risk groups better than unaided professional judgements or consensus based assessments. Actuarial risk assessments have not previously been tested for UK child protection work, so this study selected and applied the best available North American tool. Method: The Michigan Family Risk Assessment for Abuse or Neglect (FRAAN) was selected on the basis of its published evidence base and applied to a cohort of UK Serious Case Review reports from Thirteen Counties (SCRs) to identify and rate pre-existing risks before the abusive event. Further analysis of risk factors singly and in combination was extended to compare the Thirteen Counties data with two large recently published SCR studies and one study of UK	Michigan Family Risk Assessment for Abuse or Neglect (FRAAN) Doktoravhandling

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	child homicide perpetrators. (…)	
Lennings CJ, Brummert Lennings HI, Bussey K, Taylor AJ. (2014) Family risk assessment: Characteristics of families with child abuse notifications in Australia. Journal of Child Custody: Research, Issues, and Practices 11(1):61-75.	Valid and reliable assessments are required by Courts to assist in the determination of child-at-risk findings, and in the allocation of abused children into care. This study reports on the construct validation of an actuarial risk assessment instrument: the Family Risk of Abuse and Neglect (FRAAN). One hundred and fifty expert reports were reviewed and two superordinate constructs representing history of child abuse and appropriate parenting skills respectively were extracted from the reports. The results revealed that high FRAAN scores were associated with a history of investigations for child abuse, but there was no relationship between FRAAN scores and the second construct. The results support the validity of the FRAAN for assessing risk factors associated with child abuse.	Family Risk of Abuse and Neglect (FRAAN) Tidsskriftsartikkel
Glad J, Jergeby U, Gustafsson C, Sonnander K. (2012) Social work practitioners' experience of the clinical utility of the Home Observation for Measurement of the Environment (HOME) Inventory. Child & Family Social Work 17(1):23-33.	Clinical utility of an assessment instrument can provide important information about the potential value of that instrument when used in practice. The aim of this study was to describe social work practitioners' experiences of the clinical utility of a Swedish version of the Home Observation for Measurement of the Environment (HOME) Inventory. Because knowledge of clinical utility in this area is scarce, a qualitative method based on semi-structured interviews was used to gain a deeper understanding of the phenomenon. Data were collected through 16 interviews and then analysed by qualitative manifest content analysis. The analysis yielded five categories: improves quality of child protection investigations, supports practitioners, HOME has drawbacks and difficulties, certain issues are important for future applications and basic conditions are crucial. The findings supported the clinical utility of the HOME Inventory though some critical issues have to be addressed, especially concerning the category basic conditions are crucial. A thorough education, the possibility to practice activities related to the administration of the method and support from management were found to be essential. Replication and further studies are needed in the Swedish context to confirm the applicability of the HOME Inventory.	Home Observation for Measurement of the Environment (HOME) Inventory Tidsskriftsartikkel
Robinson LR, Boris NW, Heller SS, Rice J, Zeanah CH, Clark C, et al. (2012) The good enough home? Home environment and outcomes of young maltreated children. Child & Youth Care	Background: Mixed results in the literature related to type of permanent placement and developmental outcomes of maltreated children suggest differences in postmaltreatment placement environments may be an important mechanism to consider. Objective: The goal of this study was to identify how home environment variables mediate risk in maltreated children in different types of placements. Methods: Participants included 71 maltreated and 70 non-maltreated (mean age = 7.14). Child outcomes were caregiver report of behavior problems (Child Behavior Checklist, CBCL) and cognitive assessment (Peabody Picture Vocabulary Test, PPVT, and Kaufman Brief Intelligence Test, KBIT). The home environment was examined using the Home Observation for Measurement of the Environment (HOME). Results: The maltreated and non-maltreated groups differed significantly on cognitive scores, $F(6, 268) = 3.05$, $p < .01$,	Home Observation for Measurement of the Environment (HOME) Tidsskrifts-

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Forum 41(1):73-88.	behavior problems, F(18, 258) = 2.64, p < .001, and their home environments, F(14, 264) = 6.01, p < .001. Partial F tests predicting cognitive scores by group after controlling for HOME academic resources revealed mediation of cognitive scores for the bio-kin group only and mediation of CBCL Withdrawal, Social Problems, and Attention Problems by HOME emotional resources within the bio-kin group only. After controlling for SES in meditational analyses, within group differences were only found for the bio-kin group and Attention problems. Conclusions: Results suggest that maltreated children returned to biological parents or placed with relatives may have greater need for continued parenting support and academic resources; enhancing home environments so that they are both stimulating and cohesive is necessary.	artikkel
Juhnke GA, Henderson K, Juhnke BA. (2013) The Juhnke, Henderson, Juhnke Child Abuse and Neglect Risk Assessment Scale: A mnemonic instrument used to assess potential maltreatment of children. The Family Journal 21(1):57-64.	Family counselors often counsel families where children are at increased risk of maltreatment. Yet there exists a paucity of free, brief, face-to-face, standardized, assessment instruments designed for family counselors to assess child abuse. To address this paucity, the authors created The Juhnke, Henderson, Juhnke Child Abuse and Neglect Risk Assessment scale. The scale is an evidenced informed instrument that considers 20 child maltreatment risk factors identified by the U.S. Department of Health and Human Services (USDHHS) Office of Child Abuse and Neglect. The primary purpose of the scale is to facilitate a thorough maltreatment assessment and to generate guidelines that can be used, in conjunction with clinical judgment, to aid in the creation of an effective child protective agency report and potentially facilitate effective intervention.	Juhnke, Henderson, Juhnke Child Abuse and Neglect Risk Assessment scale Tidsskriftsartikkel
Korfmacher J. (2000) The Kempe Family Stress Inventory: a review. Child Abuse & Neglect 24(1):129-140.	OBJECTIVE: The objective of this article is to review the Kempe Family Stress Inventory (KFSI), a 10-item scale that measures risk for parenting difficulties based upon responses to a thorough psychosocial interview. The article provides a historical overview, as well as reviewing research regarding its reliability and validity. METHOD: Research and documentation regarding the KFSI were gathered from journals, book chapters, presentations, workshops, and intervention evaluation reports. RESULTS: The KFSI has been used to predict parents' future risk of maltreating their children. The scale covers a variety of domains, including psychiatric history, criminal and substance abuse history, childhood history of care, emotional functioning, attitudes towards and perception of child, discipline of child, and level of stress in the parent's life. Although construct validity has been demonstrated with the KFSI, questions remain about its specificity and sensitivity. In addition, there has been minimal reliability work done on the measure. CONCLUSIONS: It is concluded that the KFSI may have clinical utility, but should be used as part of a more comprehensive risk assessment that includes multiple measures. Acceptable accuracy in predicting child abuse and neglect when used by itself has not been demonstrated. There is a need for more demonstration of reliability and validity. Suggestions for future research are noted.	Kempe Family Stress Inventory (KFSI) Tidsskriftsartikkel

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Courtney ME. (1998) Correlates of social worker decisions to seek treatment-oriented out-of-home care. Children and Youth Services Review 20(4):281-304.	Reports the results of a study of decisions by child welfare workers regarding the ideal placement type for 348 children placed in out-of-home care. Data were collected during the Level of Care Assessment (LCA) Pilot Test conducted by the California Department of Social Services (CDSS) during 1991. The LCA Pilot Test resulted from legislation requiring the CDSS to develop an LCA instrument to match the assessed needs of abused and neglected children in out-of-home care with specific types of placements. Workers completed the LCA items describing child and family characteristics while they were in the process of making a decision about placement for a child. The placement worker then recorded on the LCA form what he or she thought would be the ideal placement for the child. Factors associated with the preference to place a child in treatment foster care or group care as opposed to foster family or kinship care were examined. Child age, behavior problems, and placement history were found to be strong predictors of social worker placement preferences.	Level of Care Assessment (LCA) Tidsskrifts-artikkel
Rodriguez CM, Russa MB, Harmon N. (2011) Assessing abuse risk beyond self-report: analog task of acceptability of parent-child aggression. Child Abuse & Neglect 35(3):199-209.	OBJECTIVES: The present investigation reports on the development and initial validation of a new analog task, the Parent-Child Aggression Acceptability Movie Task (P-CAAM), intended to assess respondents' acceptance of parent-child aggression, including both physical discipline and physical abuse. METHODS: Two independent samples were utilized to develop and evaluate the P-CAAM: an undergraduate sample to initially pilot the task and a separate sample of normative parents for additional assessment of validity. Scores from the P-CAAM were compared to related measures, including measures of self-reported disciplinary attitudes, child abuse potential, harsh parenting style, and use and escalation of physical discipline practices on another analog parenting task. RESULTS: Across the studies, the P-CAAM demonstrated acceptable internal consistency and construct validity, evidencing mild to moderate associations with both self-report and analog measures. Participants demonstrating increased acceptance of physical discipline and physical abuse on the P-CAAM analog task also reported greater approval of physical discipline, greater use of and escalation of physical discipline, harsher parenting styles, and higher child abuse potential on two separate measures. CONCLUSIONS: The P-CAAM analog appears to offer a promising alternative and/or supplement to conventional self-report measures, assessing attitudes regarding the acceptability of parent-child aggression in a way that is less likely to be influenced by social desirability. Suggestions for future evaluations with alternative samples, as well as possible implications of the data for disciplinary reactions are discussed. PRACTICE IMPLICATIONS: The development of alternatives to self-report measurement may lead to clarification of theoretical models of abuse in ways that lead to improvements in intervention programming; analogs may also provide a useful means to assess intervention programming outcomes.	Parent-Child Aggression Acceptability Movie Task (P-CAAM) Tidsskrifts-artikkel
Broughton C. (2014) Measuring parent-infant interac-	The paper describes the genesis, construction and preliminary reliability testing of the Parent-Infant Relational Assessment Tool (PI-RAT). PIRAT is a clinical assessment tool for the identification of risk in the early parent-infant relationship. The rationale was to design a flexible, reliable measure that would enable professionals working with infants and their caregivers to assess the parent-infant	Parent-Infant Relational Assessment Tool

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tion: The Parent-Infant Relational Assessment Tool (PIRAT). <u>Journal of Child Psychotherapy</u> 40(3):254-270.	relationship as it appears in the consulting room, clinic or home environment and to pinpoint areas of concern at the earliest possible opportunity. The measure was developed in the Parent-Infant Project at the Anna Freud Centre and a subsequent study was undertaken to establish whether it could be successfully transferred to healthcare professionals for use in their workplace settings. A reliability study was conducted with a panel of health professionals, including midwives, health visitors, child protection social workers and clinical psychologists, using videotapes of their consultations in the home or clinic with mothers and infants of 0-2 years old. The results demonstrate good interrater reliability for the 10 participants in the study. Verbatim excerpts from the training sessions are included to elucidate the process of training and the ways in which participants engaged with and embedded the measure into their practice.	(PIRAT) Tidsskrifts-artikkel
Counts JM. (2010) A reliability and validity study of the protective factors survey to assess protective factors in families. p. 1795.	Child maltreatment results in long term adverse consequences for victims and poses significant costs to society. Prevention programs are reframing maltreatment and focusing on protective factors in addition to risk factors. Easy-to-administer, affordable, and psychometrically sound instruments that measure multiple protective factors are lacking. The present study explored the reliability and validity of the Protective Factors Survey (PFS), a tool developed to measure protective factors in parents and caregivers. Confirmatory factor analyses were conducted with a sample of 1,078 participants, who completed a parent education program in Nevada. Results provide psychometric data that support a valid and reliable four-factor solution, consisting of family functioning, social support, concrete support, and nurturing and attachment. The present study contributes to the knowledge base of protective factors and has implications for the field as a paradigm and tool for evaluation and research	Protective Factors Survey (PFS) Doktoravhandling
Slep AMS, Heyman RE. (2004) Severity of Partner and Child Maltreatment: Reliability of Scales Used in America's Largest Child and Family Protection Agency. <u>Journal of Family Violence</u> 19(2):95-106.	This paper describes two studies investigating the interrater agreement of severity scales for family maltreatment used in America's largest child & family maltreatment agency: the US military's Family Advocacy Program (FAP). The USAF-FAP Severity Index is a multidimensional rating system for clinicians' evaluations of the severity of seven forms of family maltreatment: partner physical, emotional, & sexual abuse; child physical, emotional, & sexual abuse; & child neglect. The first study evaluated the reliability of the scale as it is used in the field. The second study compared a generalizable sample of clinicians' ratings to an established 'gold standard' of what the ratings should have been. The Severity Index demonstrated fair-to-good levels of reliability, suggesting that with minimal cost, investigating caseworkers can routinely assess, & make fairly reliable ratings of, the severity of seven forms of family maltreatment for each case they investigate.	US military's Family Advocacy Program Severity Index (USAF-FAP) Tidsskrifts-artikkel
Camasso MJ, Jagannathan R. (2000) Modeling the reliability and predictive validity	Examined the issue of the reliability and predictive validity of risk assessment in child protective services (CPS) decision-making, using an explicated confirmatory factor analysis model. 239 cases that included 432 children brought to CPS attention for allegations of	Washington State Risk As-

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of risk assessment in child protective services. <u>Children and Youth Services Review</u> 22(11-12):873-896.	physical abuse, neglect, and child/family problems were evaluated for risk of abuse or neglect using the Washington State Risk Assessment Matrix. The study employed a 3-wave panel design. The widely used risk assessment instrument exhibited high levels of measurement error and increasing stability over 1 yr. Measurement error reduces the instrument's reliability, and stability, in light of changes in allegation status and service intensity, reveals a consistency or stiffness that weakens predictive validity. Recommendations are offered for constructing risk assessments that are psychometrically sound and diagnostically useful.	sessment Matrix Tidsskrifts-artikkel
Huang CY, Bory CT, Caron C, Tebes JK, Connell CM. (2014) Relationship of risk assessment to placement characteristics in a statewide child welfare population. <u>Children and Youth Services Review</u> 46:85-90.	Risk assessments allow child and youth services to identify children who are at risk for maltreatment (e.g., abuse, neglect) and help determine the restrictiveness of placements or need for services among youth entering a child welfare system. Despite the use of instruments by many agencies within the U.S. to determine the appropriate placements for youth, research has shown that placement decisions are often influenced by factors such as gender, age, and severity of social-emotional and behavior problems. This study examined ratings of risk across multiple domains using a structured assessment tool used by caseworkers in the Rhode Island child welfare system. The relationship between ratings of risk and placement restrictiveness was also examined. Risk levels varied across placement settings. Multivariate analyses revealed that lower caseworker ratings of parent risk and higher ratings of youth risk were associated with more restrictive placements for youth. Implications for the child welfare system are discussed.	(ikke navngitt) Tidsskrifts-artikkel
Barber JG, Shlonsky A, Black T, Goodman D, Trocme N. (2008) Reliability and Predictive Validity of a Consensus-Based Risk Assessment Tool. <u>Journal of Public Child Welfare</u> 2(2):173-195.	This study examines the reliability and predictive validity of the risk assessment tool used in Ontario, Canada. For the reliability portion of the study, a stratified random sample of 132 cases receiving services was drawn from one of Ontario's largest children's aid societies. Predictive validity was tested on 1,118 cases that were selected and administratively followed for varying lengths of time. Internal consistency was poor to fair; inter-rater reliability was greater than would be expected by chance alone in eight of the 23 risk items. Survival analysis revealed mostly poor predictive capacity for individual items and no predictive capacity for caseworkers' subjective overall risk rating.	(ikke navngitt) Tidsskrifts-artikkel
Leschied AW, Chiodo D, Whitehead PC, Hurley D, Marshall L. (2003) The empirical basis of risk assessment in child welfare: the accuracy of risk assessment	The importance of risk assessment is juxtaposed with the lack of empirical support regarding the validity of risk inventories. This study compared risk ratings of one risk assessment tool to decisions made by case managers. The researchers sampled 450 children and compared predictive utility of risk assessment to child protection decisions. Risk assessment was consistent with clinical judgment in 74% to 81% of cases, more than previously reported in studies of risk assessment validity. Further analyses identified discriminate functions at the instrument's category and individual-item levels. The results have implications for the validity of the instrument and its utility in child welfare.	(ikke navngitt) Tidsskrifts-artikkel

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and clinical judgment. <u>Child Welfare</u> 82(5):527-540.		
Arruabarrena I, De Paul J. (2012) Improving accuracy and consistency in child maltreatment severity assessment in child protection services in Spain: New set of criteria to help caseworkers in substantiation decisions. <u>Children and Youth Services Review</u> 34(4):666-674.	This article describes the work carried out to develop a new instrument/set of criteria aimed at increasing Spanish Child Protection Services (CPS) caseworkers' accuracy and consistency in judgments leading to maltreatment substantiation and eligibility for CPS action decisions. A preliminary test on some of the instrument scales was conducted and presented. Method: The new instrument was developed based upon a review of the literature, extended discussions with an expert group, and a three-month pilot application. Studies conducted on the instrument used case vignettes and focused on four scales: Physical Abuse, Supervisory Neglect, Emotional Maltreatment, and Parental Incapacity to Control Child/Adolescent Behavior. Three groups of the Basque Region CPS caseworkers participated in the studies: a first group of 515 caseworkers who attended a five-hour session for a general overview of the instrument, and a second and third groups of 137 and 94 caseworkers who attended, respectively, ten- and twenty-hour training sessions about the instrument. A booklet containing four case vignettes was given to each participant. Caseworkers of the first group were asked to rate severity of the assigned case vignettes firstly before the general overview session with their prior criteria, and secondly after the session with the instrument. Caseworkers of the second and third groups were asked to rate the assigned case vignettes after the training sessions with the instrument. Results: When caseworkers used their prior criteria to rate case vignettes severity, only 20% of them accurately rated all four, or three out of the four, assigned vignettes. This percentage increased significantly to 44.9% after receiving a 5-hour general overview session of the instrument, approaching the percentage achieved by the caseworkers who received 10 h of training (45.5%). The highest percentage of caseworkers who accurately rated all four, or three out of the four, assigned vignettes was found in the group that received 20 h of training (61.7%). The instrument did not allow caseworkers to reach adequate percentages of accurate ratings or inter-worker agreement in most of the case vignettes with moderate levels of severity and in emotional maltreatment vignettes. No significant relationships were found between accuracy of severity ratings and caseworkers' professional discipline, gender, degree of dedication to CPS, and years of experience. Conclusions and implications for practice Present findings suggest high levels of inaccuracy and inconsistency in Basque Region CPS caseworkers' assessment of child maltreatment severity. Results support the hypothesis that availability of specific instruments and intensive professional training can contribute to increase accuracy and consistency, and improve substantiation in decision-making processes.	(ikke navngitt) Tidsskrifts-artikkel
Fitch D. (2007) Structural equation modeling the use of a risk assessment instru-	Risk assessment instruments have been developed to help human service workers identify risk factors associated with abusive families. Many such instruments have been incorporated into management information systems in the form of Decision Support Systems (DSS). This paper reports findings from a case study that evaluated a risk assessment instrument as a decision support tool. Respondents considered "usefulness" of the information a more important factor than how easy the system was to use, the configuration	(ikke navngitt) Tidsskrifts-artikkel

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ment in child protective services. <u>Decision Support Systems</u> 42(4):2137-2152.	of reports or whether the system was up or not. Focus groups were used to explore how to increase the usefulness of the information.	
Olsen LJ, Allen D, Azzi-Lessing L. (1996) Assessing risk in families affected by substance abuse. <u>Child Abuse & Neglect 2</u>0(9):833-842.	A new instrument assessing risk in substance abuse-affected families is presented. The instrument assesses those dimensions of substance abuse that make it more difficult for parents to meet the basic needs of their children. It also assesses those components of the parent's environment that may increase risk to the family's well-being. Information is presented on the instrument's reliability and validity. The article concludes with a discussion of the issues involved in assessing the risk for child abuse and neglect in families where there is an identified substance abuse problem.	(ikke navngitt) Tidsskrifts-artikkel
Daniel RS. (2003) Disciplined Intuition: Subjective Aspects of Judgment and Decision Making in Child Protective Services. p. 2647-A.	This qualitative study was aimed at developing an understanding of how persons involved in the investigation or deliberation of child abuse and neglect cases think and feel about the process of weighing evidence and drawing conclusions from it. Twenty investigators, supervisors, and administrators employed by the Child Protective Services agency in Texas were asked to describe cases they had investigated or reviewed that had been particularly difficult because of conflicting or ambiguous evidence. They were also asked opinion questions about the agency's actuarial risk assessment instrument and the concept of preponderance of evidence. Finally, participants were asked to respond to two short case vignettes describing allegations of sexual abuse. Constant comparative and narrative analysis of interview data revealed that the process of case deliberation in CPS makes use of both intuitive and analytic decision-making styles, and there is a general movement from intuition to analysis as a case ascends the decision-making hierarchy. This movement entails a shift from narrative forms of thought and an outcome-oriented ethic to analytic forms of thought and a rule-based ethic. Though intuitive decision making is at least partly guided from personal experience and personal values, and does produce error because of that, it is nonetheless a form of rationality as capable of being guided by scrupulousness and fidelity to truth as analysis is. The personal value and outcome-oriented ethic that intuition brings to the decision making process not only cannot be eliminated, it is necessary to the program's achievement of its mission. It is recommended that the training of new investigators should, first, acknowledge the large role that intuitive thinking plays in CPS decision making and, second, develop ways to help decision makers discipline intuition, in the words of one participant, and to create conditions that foster its optimal functioning.	(ikke navngitt) Doktoravhandling
Rittner B. (2002) The use of risk assessment instruments in child protective services case planning and closures.	Examined variables expected to predict which caretakers are most likely to reabuse children under child protective services (CPS) supervision. Caretaker variables related to poverty, mental health problems, history as a victim of abuse, substance abuse, and prior CPS reports were evaluated to determine their effectiveness in predicting which children remain at risk of maltreatment. Using a pre-tested instrument, data were collected from case records of 447 randomly selected children (aged 0-17 yrs) supervised by CPS while	(ikke navngitt) Tidsskrifts-artikkel

Referanse	Sammendrag	Innhold & type
<u>Children and Youth Services Review</u> 24(3):189-207.	residing with parents or relatives for a minimum of 6 mo. These children, in contrast to those in foster family care, were selected because of their more likely exposure to initial abusers. The results offered little support for using variables employed by risk assessment instruments to predict which caretakers were most likely to reabuse because reabusers and non-reabusers shared many features. Importantly, the findings indicate that children residing in kinship care are not at significant risk for future maltreatment.	
Coohey C, Johnson K, Renner LM, Easton SD. (2013) Actuarial risk assessment in child protective services: Construction methodology and performance criteria. <u>Children and Youth Services Review</u> 35(1):151-161.	Purpose: To prevent the recurrence of child maltreatment, actuarial risk assessment can help child protective services (CPS) workers make more accurate and consistent decisions. However, there are few published articles describing construction methodologies and performance criteria to evaluate how well actuarial risk assessments perform in CPS. This article describes methodology to construct and revise an actuarial risk assessment, reviews criteria to evaluate the performance of actuarial tools, and applies a methodology and performance criteria in one state. Methods: The sample included 6832 families who were followed for two years to determine whether they were re-reported and re-substantiated for maltreatment. Results: Both the adopted and the revised tools had adequate separation and good predictive accuracy for all families and for the state's three largest ethnic/racial groups (White, Latino, and African American). The adopted tool classified relatively few families in the low-risk category; the revised tool distributed families across risk categories. Conclusions: The revised tool classified more families as low-risk, allowing CPS to allocate more resources to higher-risk families, but at the cost of more false negatives.	(ikke navngitt) Tidsskrifts-artikkel
Eriksson J, Morild L (2013) Förutsättningar för praktisk tillämpning av riskbedömningsinstrument inom social barnavård - En kvalitativ studie. Mittuniversitet.	Syfte: Syftet med studien var att belysa förutsättningar för den praktiska tillämpningen av riskbedömningsinstrument inom den svenska sociala barnavården. Metod: Studien hade en kvalitativ design och datainsamling skedde genom semistrukturerade intervjuer. Deltagarna kom från tre olika kommuner och bestod av nio kvinnliga socialsekreterare som arbetade med barnavårdsutredningar. Det insamlade materialet analyserades genom en tematisk analys. Resultat: Samtliga deltagare var positivt inställda till att använda riskbedömningsinstrument vilket talar för att det finns goda förutsättningar att tillämpa sådana instrument inom den sociala barnavården. Implementeringsprocessen ansågs vara den största svårigheten med en fungerande praktisk tillämpning eftersom det kan finnas ett motstånd mot att förändra ett redan etablerat arbetssätt. Enligt deltagarna bör de instrument som ska implementeras vara användarvänliga och inte för tidskrävande. Diskussion: För att tillämpningen av riskbedömningsinstrument inom social barnavård ska fungera så bra som möjligt bör hänsyn tas till socialsekreterarnas önskemål om instrumentens utformning. För att implementeringen ska lyckas krävs tydliga ledningsbeslut, utbildning och uppföljning. Socialtjänstens arbete har under senare år genomgått en ökad systematisering och i nuvarande arbetssätt finns redan inslag av strukturerade arbetsmetoder. Tillsammans med socialsekreterarnas positiva inställning talar detta för en väl fungerande övergång från en klinisk till en strukturerad riskbedömningsmetod.	(ikke navngitt) (Universitets-oppgave)

Tabell 4. Sammenlikning/vurdering av *flere* (ikke nødvendigvis navngitte) instrumenter (n=15)

Referanse	Sammendrag	Innhold & type
Camasso MJ, Jaganna-than R. (1995) Prediction accuracy of the Washington and Illinois risk assessment instruments: An application of receiver operating characteristic curve analysis. <u>Social Work Research</u> 19(3):174-183.	In recent years many child protective services (CPS) agencies have used structured risk assessment to streamline and rationalize case identification and management in a resource-depleted environment. Empirical evidence of risk assessment's capacity to predict child maltreatment has been limited to tests of single instruments. This article compares the predictive performances of the Illinois CANTS 17B and the Washington State Risk Matrix on a sample of New Jersey CPS cases using logistic regression and receiver operating characteristic (ROC) curve analysis. Both instruments predict case recidivism, closings, and substantiation with probabilities greater than chance. Moreover, in the prediction of case recidivism, the Washington instrument showed superiority at a statistically significant level. The implications of ROC analysis for child welfare decision makers and the relationship among test accuracy problem prevalence, and diagnostic cutoff points ore discussed.	Sammenligner Illinois CANTS 17B og Washington State Risk Matrix

Tidsskrifts-artikkel |
| D'Andrade A, Austin MJ, Benton A. (2008) Risk and safety assessment in child welfare: instrument comparisons. <u>Journal of Evidence-Based Social Work</u> 5(1-2):31-56. | The assessment of risk is a critical part of child welfare agency practice. This review of the research literature on different instruments for assessing risk and safety in child welfare focuses on instrument reliability, validity, outcomes, and use with children and families of color. The findings suggest that the current actuarial instruments have stronger predictive validity than consensus-based instruments. This review was limited by the variability in definitions and measures across studies, the relatively small number of studies examining risk assessment instruments, and the lack of studies on case decision points other than the initial investigation. | Gjennomgang av ikke navngitte instrumenter

Tidsskrifts-artikkel |
| Damasse J, Beaumier I, Bussères EL. (2015) <u>Effectiveness of child maltreatment risk assessment tools.</u> Health Technology Assessment Database Institut national d'excellence en sante et | (fra rapporten) In 2007, the introduction in Québec of the concept of serious risk concerning neglect, sexual abuse and physical abuse in the Youth Protection Act reflected the growing recurrence of these types of maltreatment. This is evidenced in child protective services (CPS), for example, by new child abuse reports, case reassessments, new substantiated allegations, and repeated child placements in foster homes. The cyclical path between primary care services (health and social service centres, CSSS) and secondary care services (youth centres) destined for children who have experienced or who are likely to experience one or more situations of physical abuse reflects this phenomenon that concerns the authorities responsible for these services. With a view to improving assessment practices, promoting better risk management and improving the identification of clients in order to offer appropriate services based on available re- | Presentasjon av ikke navngitte instrumenter

Rapport |

Referanse	Sammendrag	Innhold & type
en services sociaux (INESSS).	sources, the Association des centres jeunesse du Québec (ACJQ) asked the Institut national d'excellence en santé et en services so-ciaux (INESSS) to identify one or more child maltreatment risk assessment tools. (…)	
Gershater-Molko RM, Lutzker JR, Sherman JA. (2003) Assessing child neglect. Aggression and Violent Behavior 8(6):563-585.	The assessment of child neglect is the first step in the process of providing specific services and interventions to the victims and their family members. Assessment data provide valuable insight into the nature of the family's situation, as well as their specific treatment needs. Described here are assessment strategies for the detection of child neglect. These strategies are reviewed, along with a descrip-tion of the assessment measures that are most commonly used to determine child risk as well as the parental factors, child factors, and social/ecological factors related to child neglect. Examples of the use of such assessments in two neglectful families are provided. Ad-vantages and disadvantages of the current assessment process are discussed, as are suggestions for improved assessment in child ne-glect.	Presentasjon av ikke navngitte instrumenter Tidsskrifts-artikkel
Gillingham P. (2011) De-cision-making tools and the development of ex-pertise in child protection practitioners: Are we 'just breeding workers who are good at ticking box-es'? Child & Family So-cial Work 16(4):412-421.	Concern about the decision-making abilities of practitioners in child protection has led to the development and implementation of increas-ingly structured assessment tools, many based on forms of risk assessment. The positive and negative effects of such tools on practice have been widely researched and debated. This paper presents the findings from ethnographic research about the use of a particular set of decision-making tools that provide insights into how tools might affect the professional development of practitioners. The overall finding that the use of decision-making tools may impair professional development draws attention to the importance of the process of implemen-tation, in particular how tools are regarded within an organization in relation to practitioner expertise.	Presentasjon av ikke navngitte instrumenter Tidsskrifts-artikkel
Gillingham P, Hum-phreys C. (2010) Child protection practitioners and decision-making tools: Observations and reflections from the front line. British Journal of Social Work 40(8):2598-2616.	Decision-making tools, particularly risk-assessment tools, have been implemented by governments around the world, perhaps most nota-bly in the field of child protection, though little attention has been paid to how practitioners use them. This article presents the findings from ethnographic research that explored how child protection practitioners in the Department of Child Safety, Queensland, Australia, used four Structured Decision Making tools developed by the Children's Research Centre in Wisconsin in their daily practice in the intake and investigation stages of a case. The findings that the tools were not being used as intended by their designers and, in fact, tended to undermine the development of expertise by child protection workers has profound implications for the future development of technological approaches to child protection and, more broadly, human services practice.	Presentasjon av ikke navngitte instrumenter Tidsskrifts-artikkel

Referanse	Sammendrag	Innhold & type
Høybye-Mortensen M. (2015) Decision-Making Tools and Their Influence on Caseworkers' Room for Discretion. British Journal of Social Work 45(2):600-615 616p.	One of the cornerstones in the provision of social services in modern welfare states is decision making about who is eligible for particular services or benefits. Here, the central decision maker is the caseworker who assesses clients' needs and obligations. In response to concerns regarding decision-making processes and outcomes, decision-making tools directing how a decision should be made and documented are implemented. The literature on front line workers and regulation provides no clear answers concerning the relationship between regulation, such as decision-making tools, and room for discretion. This article explores how decision-making tools affect caseworkers' room for discretion. The article reports on findings from a qualitative cross-sector study of three decision-making tools used in employment services, child protection and elderly services in Denmark. The empirical data consist of thirty group interviews with caseworkers. Even though all of the tools are in the shape of a form that is to be filled in, differences are found across decision-making tools. For instance, it seems as though forms based on a theoretical foundation have greater impact on caseworkers' room for discretion than those based on an understanding of information as neutral and objective, since the latter requires intensive interpretation on the part of the caseworkers.	Presentasjon av ikke navngitte instrumenter Tidsskrifts-artikkel
Johnson M, Stone S, Lou C, Vu CM, Ling J, Mizrahi P, et al. (2008) Family assessment in child welfare services: instrument comparisons. Journal of Evidence-Based Social Work 5(1-2):57-90.	Family assessment instruments can enhance the clinical judgment of child welfare practitioners by structuring decision-making processes and demonstrating the linkages between assessment, service provision, and child and family outcomes. This article describes the concept of family assessment in the child welfare context and provides an overview of the theoretical and disciplinary influences in the family assessment field. Based on a structured review of 85 instruments, the article discusses 21 that appear to the be the most valid and reliable for evaluating four federally-defined domains of family assessment: (1) patterns of social interaction, (2) parenting practices, (3) background and history of the parents or caregivers, and (4) problems in access to basic necessities such as income, employment, and adequate housing. Key measurement criteria as well as practical considerations in the selection and implementation of family assessment instrumentation in child welfare are discussed.	Gjennomgang av 21 instrumenter Tidsskrifts-artikkel
Lou C, Anthony EK, Stone S, Vu CM, Austin MJ. (2008) Assessing child and youth well-being: implications for child welfare practice. Journal of Evidence-Based Social Work 5(1-2):91-133.	The measurement of child well-being has become increasingly important in child welfare practice in the past ten years with the federal emphasis on measuring positive outcomes for children and families. Practical and methodological barriers to evaluating well-being exist alongside positive developments in the field. This article reviews the research literature related to child and youth well-being, providing a context for the discussion of measurement issues in child welfare settings. Based on a structured review of the literature, the article discusses instruments that appear to be most appropriate for use in a child welfare setting. Instruments are presented within stages of development, including (1) Infancy and Early Childhood, (2) Middle Childhood, and (3) Adolescence. Implications for the design and use of child well-being instruments in child welfare practice are discussed.	Presentasjon av ikke navngitte instrumenter Tidsskrifts-artikkel

Referanse	Sammendrag	Innhold & type
Regehr C, Bogo M, Shlonsky A, LeBlanc V. (2010) Confidence and professional judgment in assessing children's risk of abuse. <u>Research on Social Work Practice</u> 20(6):621-628.	Objective: Child welfare agencies have moved toward standardized risk assessment measures to improve the reliability with which child's risk of abuse is predicted. Nevertheless, these tools require a degree of subjective judgment. Research to date has not substantially investigated the influence of specific context and worker characteristics on professional judgment in the use of risk assessment measures. Method: This research utilized standardized patients performing in scenarios to depict typical child welfare cases. Ninety-six workers interviewed two "families," completed risk assessment measures, and then participated in interviews regarding their subjective views of their decision making and performance. Results: There was considerable variability in risk appraisals. Confidence in risk assessment performance was related to age, acute level of stress, and the worker's perceived ability to engage family members. Confidence in risk assessment was further related to case variables. Confidence was not related to level of risk assessed. Conclusion: The variation in risk assessment appraisals in this study, despite at times high rates of worker confidence in their appraisals, speaks to the need for ongoing consultation and increased decision support strategies even among highly skilled and trained workers.	Gjennomgang av ikke navngitte instrumenter Tidsskriftsartikkel
Sand R, Schanche Selbekk A (2009) Family Assessment Pack - en bredspektret kartlegging av barns situasjon. <u>Rusfag</u> (1).	(fra innledningen) I denne artikkelen vil vi gi en presentasjon og vurdering av et interessant undersøkelsesbatteri for kartlegging av barns situasjon, som kan være aktuell å utvikle innenfor en norsk setting. Batteriet fanger opp et bredt spekter av mulige risikofaktorer i barnets totale livssituasjon. Artikkelen er basert på rapporten "Tidlig intervensjon i forhold til barn av rusmisbrukende foreldre", utarbeidet av Anders Hellman og Terje Knutheim i 2008. Selv om vårt utgangspunkt er barn av rusmisbrukende foreldre, vil dette kartleggingsverktøyet også være egnet til å fange opp annen type problematikk som psykisk lidelse, vold og annen type omsorgssvikt, og samvariasjon mellom disse faktorene. Det finnes en rekke forskningsresultater som dokumenterer at barn av rusmisbrukende foreldre er en gruppe i risiko for seinvirkninger av sine oppvekstforhold (Se for eks Mohaupt 2009). Lindgaard (2006), tar i sin kunnskapsoppsummering til orde for at alle barn til foreldre med et rusmisbruk i prinsippet skal få en vurdering og at denne skal være evidensbasert og standardisert. (…) De aktuelle kartleggingsmetodene i "The framework for the Assessment of Children in Need and their Families" tar utgangspunkt i metoder etablert innenfor forskning og omfatter fire ulike moduler: "The Family Pack of Questionnaires and Scales", "Family Assessment", "The Home Inventory" og "ASI - Attachment Style Interview".	Vurdering av flere instrumenter i et batteri Tidsskriftsartikkel
Shlonsky A, Saini M, Wu M-J. (2009) <u>The recurrence of child maltreatment: Predictive validity of risk assessment instruments.</u> (Protocol for	(fra protokollen) Protocol for a Systematic Review of The Recurrence of Child Maltreatment: Predictive Validity of Risk Assessment Instruments. 2. Background for the Review Accurate and timely identification of abused and neglected children who are at risk of further maltreatment is essential for effective targeting of child protection services. Risk assessment in child protection generally involves estimating the likelihood of future maltreatment for parents alleged to have maltreated their children and deciding whether protective measures are needed to reduce the risk of future harm	Protokoll for systematisk oversikt over ulike instrumenter for risikovurdering

Referanse	Sammendrag	Innhold & type
systematic review)	(Rycus & Hughes, 2003). Incorrect decisions can lead to any number of detrimental outcomes including leaving children in potentially dangerous environments or providing families with over-intrusive child protection services when children are not at risk of future harm (Gambrill & Shlonsky, 2000). 3. Objectives of the Review The objective of this review is to assess the predictive validity (prognostic accuracy) of risk assessment instruments used to predict the recurrence of child maltreatment. We aim to: 1) identify all relevant published and unpublished studies, 2) synthesize the evidence on the predictive validity of child maltreatment risk assessment instruments, and 3) identify major gaps in the literature in order to guide future research efforts.	Protokoll (plan) for systematisk oversikt
Stowman SA, Donohue B. (2005) Assessing child neglect: A review of standardized measures. Aggression and Violent Behavior 10(4):491-512.	Child neglect is the most prevalent type of child maltreatment, yet only a few standardized methods exist to assist in the assessment of this widespread problem. Existing measures of child neglect are limited by the nature of child neglect itself, in addition to issues of social desirability responding, and items that may infer blame and parental responsibility. This review first delineates child neglect, including its prevalence and characteristics, to provide a context in which to examine assessment issues. Later, standardized measures of child neglect are underscored, including a review of their response format and relevant psychometric support, if any. Future directions for practice and research are reported in light of these findings.	Presentasjon av ikke navngitte instrumenter Tidsskrifts-artikkel
The Center for Social Services Research (2005) Risk and Safety Assessment in Child Welfare: Instrument Comparisons.	(fra innledningen) This report, commissioned by the Bay Area Social Services Consortium, reviews the research literature regarding different instruments of risk and safety assessment in child welfare. The first section describes current approaches to risk and safety assessment. The second section describes instruments for risk assessment, and summarizes the research findings regarding instrument reliability, validity, outcomes, and use with children and families of color. The third section raises the following issues related to implementation of risk assessment models in child welfare: supports for implementation, use across the life of a case, and liability concerns. It also describes California's efforts to institute a standardized process of risk and safety assessment across the state. The report concludes with implications for practice and research. (…) http://www.sjsu.edu/socialwork/docs/1assessment.DAndrade_et_al_x2005x_Risk_and_Safety.pdf	Gjennomgang av forskning på ulike instrumenter Rapport
Wilson CJ. (2001) Identification of parents at risk	The Marschak Interaction Method (MIM) is a semi-structured assessment of the quality of parent-child relationships. As an observational measure of the quality of relationships, the MIM can be a useful tool in confirming self-report data provided by parents. The Adult-Adoles-	Marschak Interaction Method (MIM)

Referanse	Sammendrag	Innhold & type
for child abuse: A convergent validity study of the Marschak Interaction Method. <u>Dissertation Abstracts International: Section B: The Sciences and</u> Engineering 61(11-B):6182.	cent Parenting Inventory-2 (AAPI-2) is a self-report measure designed to gather information regarding parenting attitudes in order to detect parents at risk for child abuse. The hypothesis that there would be a significant positive relationship between the Empathy scale of the AAPI-2 and the Parent Domain of the MIM Rating Scheme developed by McKay, Pickens, and Stewart (1996) was supported (r[30] = .35, p < .05). Discussion is presented on the use of the AAPI-2 self-report data to verify the MIM Rating Scheme data and the need for construct validity studies to empirically assess how the MIM Rating Scheme measures various theoretical constructs.	og Adult-Adolescent Parenting Inventory-2 (AAPI-2) Doktoravhandling

Tabell 5. Mer omfattende/helhetlige, navngitte/spesifikke modeller for måling/vurdering og beslutningstaking (n=39)

Referanse	Sammendrag	Innhold & type
Cederborg AC (2006) Barns Behov i Centrum. Perspektiv på social tjänstens utredningsarbete när barn misstänks fara illa. FoU-rapport 35:2006.	Erfaringer med BBIC i kommunene Linköping, Kinda, Motala, Ydre og Åtvidaberg.	Barns Behov i Centrum (BBIC) Rapport
Rasmusson B (2009) Analys, bedömning och beslut i utredningar enligt BBIC. Socialstyrelsen.	(fra innledning) Det övergripande syftet med denna rapport är att bidra med ett kunskapsunderlag för det fortsatta utvecklingsarbetet med barnavårdsutredningar enligt Barns behov i centrum (BBIC). BBIC är ett system som förser handläggare i den sociala barnavården med olika verktyg för att utreda barns behov, föräldrars förmåga och faktorer i familj och miljö. Ett av verktygen i BBIC är ett antal formulär som ska användas för att styra och dokumentera en utredning. Frågor rörande analys, bedömning och beslut i utredningarna har emellertid hittills varit tämligen obearbetade. De handläggare som använder BBIC har därför återkommande efterlyst ytterligare vägledning i arbetet med att analysera insamlat material och göra kunskapsgrundade bedömningar som underlag för beslut.	Barns Behov i Centrum (BBIC) Rapport
Tingberg K (2012) Socialtjänstens barnskyddsarbete. En studie av socialsekreterares riskbedömningar avseende barn som utsätts för våld eller sexuella övergrepp i hemmet. Göteborgs Universitet.	(fra sammendrag) Det övergripande syftet var att undersöka hur samhällsintresset att skydda barn från våld och sexuella övergrepp i hemmet, realiseras av socialsekreterare. Studiens centrala fokus är den riskbedömning som socialtjänsten är skyldig att göra när det inkommer en anmälan som innehåller oro för att barn utsätts för våld eller sexuella övergrepp i hemmet. Studien behandlar följande frågor: - Hur går socialsekreterare praktiskt tillväga och vilket stöd och vilken kunskap används, för att avgöra om socialtjänsten behöver ingripa till ett barns skydd? - Vilka risk- och skyddsfaktorer tar socialsekreterare hänsyn till i bedömningsprocessen? - Vilka kontextuella faktorer upplever socialsekreterare påverkar dem i bedömningsprocessen? - Vilket stöd erbjuder dokumentationssystemet BBIC i bedömningsprocessen?	Barns Behov i Centrum (BBIC) Universitetsoppgave
Jonåker H, Larsson L (2007) Rättssäkerhet i barnavårdsutredningar:	(fra abstraktet) BBIC was first developed in England after a massive criticism against the way that the foster home- and institutional care was handled. In Sweden, BBIC was first tested and developed into Swedish conditions in a few project municipalities for about five years but is now being introduced all over the country. This is also one of the most important purposes with BBIC, that every childcare investigation within the country is based on the same formula. For help, the social workers have a triangle, which contains three different	Barns Behov i Centrum (BBIC)

Referanse	Sammendrag	Innhold & type
BBIC - ett nytt sätt att arbeta i socialtjänsten. Karlstad Universitet	areas of different basic needs that the child requires. The triangle, together with several forms, gives the social workers the tools to give more attention to what kind of measure the child really requires to get its basic needs satisfied. To find out how BBIC affects the legal security of the children within childcare investigations, we decided to make this essay interdisciplinary. This means that apart from the legal approach, we've also used a psychological method to base an empirical ground. The empirical material consists of interviews with persons that in different ways are working with BBIC. These interviews are then used together with the theoretical part of the study, to form an analysis. This study is not meant to generalize, but to give a glimpse of the reality and create an understanding for the complexity in these matters.	Universitetsoppgave
Gustafsson M, Ångman I (2010) Barns Behov i Centrum – rapport från ett förbättringsarbete i Örebroregionen 2006 – 2010. Rapport 2010:07	(fra innledningen) Örebroregionens uppföljning/utvärdering av BBIC. En diskussion om nödvändigheten av att följa upp och utvärdera det regionala arbetet med att införa BBIC väcktes tidigt i processen. Diskussionen handlade både om implementeringen av systemet men också om resultatet, skulle arbetet med BBIC utveckla och förbättra den sociala barnavården. Följande rapporter har publicerats: - Vilken skillnad gör BBIC, november 2010 (Ångman, 2010) - Ansvariga politikers uppfattning om styrkor och svagheter i socialtjänstens arbete med barn och unga, (Ångman, 2010) - Inspirationsdag för personal inom den sociala barnavården, oktober 2009 (Regionförbundet Örebro, 2009) - Gör BBIC skillnad, maj 2009 (Ångman, 2009) - Socialarbetarnas arbetssätt och inställning till BBIC våren 2009, (Gustafsson, 2009) - Barns Behov i Centrum, augusti 2008 (Gustafsson och Ångman, 2008) - Delrapport om socialarbetarnas arbetssätt och inställning till BBIC, januari 2008 (Regionförbundet Örebro, 2009) Denna slutrapport avser att sammanfatta de olika delrapporterna och utifrån detta formulera ett antal slutsatser och reflektioner. En förhoppning är att rapporten ska fungera som underlag för ett "nästa steg" i förbättringsarbetet inom den sociala barnavården.	Barns Behov i Centrum (BBIC) Rapport
Johnson W. (2004) Effectiveness of California's child welfare structured decision making (SDM) model: a prospective study of the validity of the California Family Risk Assessment	This report presents an evaluation of California's use of the structured decisionmaking model in family risk assessments. The California Family Risk Assessment (CFRA) uses the structured decisionmaking model (SDM) to provide child welfare workers with information necessary for determining a caretaker's risk of maltreating their children within 2 years of the receipt and investigation of a maltreatment report. This study examined the effectiveness of the CFRA in correctly calculating a family's risk of future maltreatment. Findings from the study show that in the absence of receipt of effective services, higher CFRA risk scores are associated with higher rates of maltreatment subsequent to assessment with the CFRA. In addition, the findings indicate that the relationship between higher risk scores and future maltreatment is completely monotonic, that is it is not affected by other independent variables such as race/ethnicity or county/community size. Data for this evaluation came from the analysis of risk assessments for 7,685 families in which child	California Family Risk Assessment (CFRA) Rapport

	welfare workers used the CFRA at the close of the initial investigation to determine the risk of future maltreatment. The analysis investigated the relationship between high risk scores and future maltreatment rates, and found that as risk scores rise, future maltreatment rates rise, despite the effects of independent variables.	
Johnson WL. (2011) The validity and utility of the California Family Risk Assessment under practice conditions in the field: A prospective study. <u>Child Abuse & Neglect</u> 35(1):18-28.	OBJECTIVE: Analysis of the validity and implementation of a child maltreatment actuarial risk assessment model, the California Family Risk Assessment (CFRA). QUESTIONS ADDRESSED: (1) Is there evidence of the validity of the CFRA under field operating conditions? (2) Do actuarial risk assessment results influence child welfare workers' service delivery decisions? (3) How frequently are CFRA risk scores overridden by child welfare workers? (4) Is there any difference in the predictive validity of CFRA risk assessments and clinical risk assessments by child welfare workers? METHOD: The study analyzes 7,685 child abuse/neglect reports originating in 5 California counties followed prospectively for 2 years to identify further substantiated child abuse/neglect. Measures of model calibration and discrimination were used to assess CFRA validity and compare its accuracy with the accuracy of clinical predictions made by child welfare workers. The extent of use of an override feature of the CFRA and child welfare worker reliance on CFRA risk scores for making service decisions were analyzed. RESULTS: Imperfect but better-than-chance predictive validity was found for the CFRA on a range of measures in a large temporal validation sample (n=6,543). For 114 cases where both CFRA risk assessments and child welfare worker clinical risk assessments were available, the CFRA exhibited evidence of imperfect but better-than-chance predictive validity, while child welfare worker risk assessments were found to be invalid. Child welfare workers overrode CFRA risk assessments in only 114 (1.5%) of 7,685 cases and provided in-home services in statistically significantly larger proportions of higher- versus lower-risk cases, consistent with heavy reliance on the CFRA. CONCLUSIONS/PRACTICE IMPLICATIONS: Until research identifies actuarial models exhibiting superior predictive validity when applied in every-day practice, the CFRA is, and will be a valuable tool for assessing risk in order to make in-home service-provision decisions.	California Family Risk Assessment (CFRA) Tidsskriftsartikkel
Fuller TL, Wells SJ, Cotton EE. (2001) Predictors of maltreatment recurrence at two milestones in the life of a case. <u>Children and Youth Services Review</u> 23(1):49-78.	Reports the findings from 2 studies that examined the usefulness of the Illinois Child Endangerment Risk Assessment Protocol (CERAP) for predicting short-term maltreatment recurrence (MR). The CERAP is a safety assessment tool designed to guide worker decision-making throughout the life of a case and is completed at several critical case milestones. Two milestones were chosen-within 24 hrs after the child protective service (CPS) investigator sees the alleged victim and within 5 days of case opening-for analysis in separate studies. For each study, a sample of families who experienced an indicated report of MR within 60 days of CERAP completion was compared to families who did not experience MR. Results indicated age of the youngest child, single-parent household, number of child problems, type of maltreatment and case disposition were the predictors of short-term MR for investigation cases. Five days after the	Child Endangerment Risk Assessment Protocol (CERAP) Tidsskriftsartikkel

Referanse	Sammendrag	Innhold & type
	case had been opened for intact family services, the absence of a completed CERAP form and lack of service provision were the milestone predictors. At both milestones, the number of previous indicated reports on the perpetrator and the presence of multiple caretaker problems were predictive of short term MR.	
Thomas JM. (2001) Decision-Making in Child Protection. p. 2241-A.	A study of 21 Child Protective Services (CPS) Investigators and 201 reports in the State of Illinois was conducted to develop an understanding of the use patterns of the mandated risk assessment instrument, the Child Endangerment and Risk Assessment Protocol (CERAP). Anecdotal evidence suggested that investigators are using risk assessment instrument to verify or document safety determinations, rather than to guide them. Methods. Participants were asked to complete 10 questionnaires, selecting fact-based or heuristic decision-making methods. Fact-based items were similar to the safety factors from the Child Endangerment and Risk Assessment Protocol (CERAP). Heuristic items reflected the representativeness (similarity) and availability (accessibility). A structured interview occurred after completion of the questionnaires. Participants were asked about their use of CERAP and other factors and in their safety determination. Results. Investigators reported most often completing the CERAP after making the safety determination. Even when they stated that they used the CERAP factors (but did not complete the form) they did not select more CERAP items as part of their decision. Those who completed the CERAP before making the safety determination selected more CERAP items as part of the decision. Lastly, investigators selected heuristic items more often than CERAP. Overall, they expressed great confidence in their decision. Implications for practice. The results suggest that investigators need assistance in using the CERAP form and avoiding heuristics (and their associated errors). Such assistance can take the form of revised CERAP training, periodic "retraining", and support for supervisors in the use of good decision making practices. Training would teach good decision making skills, how to avoid heuristics and emphasize the necessity of using the risk assessment instrument. Improvements in decision making would result and could favorably affect the safety of child reported for maltreatment.	Child Endangerment and Risk Assessment Protocol (CERAP) Doktoravhandling
White S, Hall C, Peckover S. (2009) The Descriptive Tyranny of the Common Assessment Framework: Technologies of Categorization and Professional Practice in Child Welfare. British Journal of Social	The Common Assessment Framework is a standard assessment tool to be used by all professionals working with children for assessment and referral. The CAF is hailed as a needs-led, evidence-based tool which will promote uniformity, ensure appropriate 'early intervention', reduce referral rates to local authority children's services and lead to the evolution of 'a common language' amongst child welfare professionals. This paper presents findings from a study, funded under the Economic and Social Research Council's e-Society Programme. Our purpose in is not primarily evaluative, rather we illustrate the impacts of CAF as a technology on the everyday professional practices in child welfare. We analyse the descriptive, stylistic and interpretive demands it places on practitioners in child welfare and argue that practitioners make strategic and moral decisions about whether and when to complete a CAF and how to do so. These are based on assessments of their accountabilities, their level of child welfare competence and their domain-specific knowledge, moral judgements and the institutional contexts in which these are played out.	Common Assessment Framework (CAF) Tidsskriftsartikkel

Referanse	Sammendrag	Innhold & type
Work **39** (7): 1197-1217.		
Firth H, Spanswick M, Rutherford L. (2009) Managing Multiple Risks: Use of a Concise Risk Assessment Format. Child and Adolescent Mental Health 14(1):48-52.	Risk management requires detailed understanding of circumstances affecting risk. Management of multiple risks necessitates different strategies to minimise different risks. Multi-agency work requires presentation in accessible formats. Limitations of existing procedures are discussed. The Concise Risk Assessment Format summarises key information, differentiating history, risk and protective circumstances, and management recommendations/requirements for a number of either disparate or related types of risk. Standardised risk assessment information can be incorporated. The Format allows information to be readily contributed, shared, and updated between parents, young people and multiple agencies.	Concise Risk Assessment Format Tidsskrifts-artikkel
Mudd HK. (2004) Child Maltreatment Assessment and Recidivism: A Study of Kentucky Child Protective Services. p. 1966-A.	This quantitative dissertation examines risk assessment and recidivism of child maltreatment to determine the relationship between child protective services provided by the Kentucky Department of Protection and Permanency and risk of harm. A chart review of existing data on 3,235 closed Kentucky child protective services cases provides information about the quality of service provided to families, the reduction of risk of maltreatment assessed in the family, and the rate of recidivism following case closure. This dissertation examines the usefulness of the Continuous Quality Assessment tool (CQA) and its effectiveness in assessing risk. The CQA is an assessment tool that is designed to guide child protective workers in making case decisions throughout the life of the case. This dissertation on risk assessment and recurrence of maltreatment adds to the measurable outcomes of effectiveness for child protection services and enhances a public child welfare agency's ability to improve service delivery to families. A modified one-group pretest posttest design was utilized to assess the dependent variables, risk of maltreatment and recurrence of maltreatment, before and after casework services were provided. Changes in risk of maltreatment were measured by the cumulative rating on the assessment tool, as well as by scores in the specific risk domains: maltreatment, sequence of events (how well the family is managing their high-risk situations), family development stages, family choice of discipline, adult patterns of behavior, child/youth development, and family support. The second dependent variable, recurrence of maltreatment, was measured by the number of reports of maltreatment investigated in the year following case closure. Findings highlight the success of solution-based casework in creating change. Variables found to be significantly related to reduction in risk include (a) the length of time a case was open for the current treatment episode, (b) region of service, (c) supervisor gender, (d) CQA individual risk domains, and (e) expertise of worker. Variables found to be significantly related to recurrence of maltreatment include (a) CQA safety rating and individual risk domains, (b) worker's level of skill, (c) type of abuse, (d) number of substantiated referrals in case at closure, (e) a prior episode of treatment, and (f) geographic region of service.	Continuous Quality Assessment tool (CQA) Doktoravhandling

Referanse	Sammendrag	Innhold & type
Maguire-Jack K, Font SA. (2014) Predicting recurrent maltreatment among high-risk families: Applying the Decision-Making Ecology Framework. Children and Youth Services Review 43:29-39.	Recurrent maltreatment is an easily measured indicator of the extent to which CPS agencies have met their primary objective; achieving safety for children reported as suspected victims of maltreatment. The familial and community factors that are important to the risk of maltreatment generally are likely to also affect the probability of recurrent maltreatment. However, recurrent maltreatment adds an important new dimension-specifically; an initial maltreatment report requires some interaction with a CPS system. That is, many families encounter CPS, but, even among higher risk cases, only a portion of those experience recurrent involvement. It may be the case that the families who experience recurrent involvement have different initial risk factors, but the interaction between the family and the CPS system may also affect the probability that subsequent maltreatment will occur. The current study used hierarchical linear modeling to analyze data from the National Study of Child and Adolescent Well-being II. Specifically, in an application of the Decision-Making Ecology Framework (Baumann, Dalgeish, Fluke, & Kern, 2011), this study sought to understand what family, caseworker, agency, and community factors contribute to the risk of recurrent maltreatment among high-risk families.	Decision-Making Ecology Framework Tidsskrifts-artikkel
Baynes P. (2007) Adapting the framework for assessment for uses in cases of physical harm. Practice: Social Work in Action 19(4):271-284.	This paper describes how my work as a children's guardian in a case of physical harm prompted me to attempt to adapt the existing generic 'Framework for the Assessment of Children in Need' (Department of Health 2000) to create a specialist tool for work in such circumstances. The paper begins by outlining the case, and the role of the guardian, before going on to describe the existing framework, its historical context and its strengths and weaknesses. There is some discussion of the available research within the field of physical harm, and how this can be used within the three domains of the existing framework. It is then argued that there is a need for a fourth domain of 'process and organisational context'. In the second part of this paper an account is given of how the implementation of the resulting tool supported my assessment of the case.	Framework for the Assessment of Children in Need Tidsskrifts-artikkel
Kang HA, Poertner J. (2006) Inter-rater reliability of the Illinois Structured Decision Support Protocol. Child Abuse & Neglect 30(6):679-689.	OBJECTIVE: The purpose of this study was to determine the level of inter-rater reliability of the Illinois Structured Decision Support Protocol by examining the level of Child Protective Services (CPS) caseworkers' agreement regarding state interventions. The Protocol was designed to guide CPS workers to consistent decisions related to the level of state intervention in child maltreatment cases. METHOD: Forty-one workers recruited from three CPS field offices in Illinois participated in this study by assessing three cases using the Illinois Structured Decision Support Protocol. The three cases were developed based on actual cases investigated by the agency. The kappa statistic was used to calculate the level of workers' agreement. RESULTS: The result showed a weak reliability (kappa=.29). Further analysis showed that workers identified a wide range of risk factors and differing levels of intervention for each identified risk factor even among the workers who made the same final decisions. CONCLUSIONS: Decision support protocols are developed to provide systematic structures for workers' decision-making. However, this study suggested that workers demonstrated a low level of agreement on such a protocol. Several suggestions for developing more reliable computerized protocols include: more specified inquiries with criteria to assess the range of risk for a factor, consideration of interactions among risk factors, assessment of family strengths, and having the	Illinois Structured Decision Support Protocol Tidsskrifts-artikkel

Referanse	Sammendrag	Innhold & type
	final decision made by a computerized program.	
Pithouse A, Broadhurst K, Hall C, Peckover S, Wastell D, White S. (2012) Trust, risk and the (mis)management of contingency and discretion through new information technologies in children's services. Journal of Social Work 12(2):158-178.	(fra sammendraget) Findings: The article exposes a gap between core values and risk management by examining the erosion of trust in professional social work and consequent shift towards new information technologies which intend to generate system confidence, such as the Integrated Children's System (ICS) which seeks to provide a more accountable management of contingency. Drawing on data from our recent multi-method research of frontline practice funded by the UK Economic and Social Research Council, we challenge the view that the uncertainty and ambiguity of risk-immersed social work can be more safely moderated by computer-based technologies for reporting and decision-making. Applications: The findings of this study suggest the need for significant reform of the ICS system. Our explorations in front line decision-making suggests that the IT workflow systems that channel and shape the way need is responded to in order to make actions and their often distributed ownership transparent and justifiable, have the unintended potential to obscure risk. We outline ways in which risk in its institutional and personal contexts in children's services may become less evident and tractable to moderation by the ICS systems that seek this very purpose. In doing so we consider the balance between professional trust and system confidence and consider whether the time has come to shift the balance back to the former if we are to re-engage more fully with the occupation's humane mission.	Integrated Children's System (ICS) Tidsskrifts-artikkel
Cleaver H. (2009) Carrying out or contributing to an assessment. Cleaver H Cawson P, Gorin S, Walker S (eds). (2009) Safeguarding children: A shared responsibility (pp 179-199) xvi, 284 pp Wiley-Blackwell.	(from the chapter) This chapter details the process of assessment when there are concerns about children's welfare, such that their health or development may be impaired. The Common Assessment Framework (HM Government, 2006a, 2006b) and the Assessment Framework (Department of Health et al, 2000), which underpins the Integrated Children's System (http://www.everychildmatters.gov.uk/socialcare/ics), are described, and important issues to consider when carrying out an assessment are highlighted. The process of assessment is explored, including planning the assessment, information gathering, analysis, judgements, and decision making. Involving children and families is essential, and possible pitfalls and how to overcome these are discussed. Finally, the chapter discusses the importance of inter-agency collaboration and considers the legal basis for information sharing.	Integrated Children's System (ICS) (Common Assessment Framework, Assessment Framework) Bokkapittel
Benbenishty R, Davidson-Arad B, Lopez M, Devaney J, Spratt T, Koopmans C, et al.	Child welfare professionals regularly make crucial decisions that have a significant impact on children and their families. The present study presents the Judgments and Decision Processes in Context model (JUDPIC) and uses it to examine the relationships between three independent domains: case characteristic (mother's wish with regard to removal), practitioner characteristic (child welfare attitudes), and protective system context (four countries: Israel, the Netherlands, Northern Ireland and Spain); and three dependent factors:	Judgments and Decision Processes in Context model

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(2015) Decision making in child protection: An international comparative study on maltreatment substantiation, risk assessment and interventions recommendations, and the role of professionals' child welfare attitudes. Child Abuse Negl. 49: 63–75.	substantiation of maltreatment, risk assessment, and intervention recommendation. The sample consisted of 828 practitioners from four countries. Participants were presented with a vignette of a case of alleged child maltreatment and were asked to determine whether maltreatment was substantiated, assess risk and recommend an intervention using structured instruments. Participants' child welfare attitudes were assessed. The case characteristic of mother's wish with regard to removal had no impact on judgments and decisions. In contrast, practitioners' child welfare attitudes were associated with substantiation, risk assessments and recommendations. There were significant country differences on most measures. The findings support most of the predictions derived from the JUDPIC model. The significant differences between practitioners from different countries underscore the importance of context in child protection decision making. Training should enhance practitioners' awareness of the impact that their attitudes and the context in which they are embedded have on their judgments and decisions.	(JUDPIC) Tidsskrifts-artikkel
Parada HU. The Restructuring of the Child Welfare System in Ontario: A Study in the Social Organization of Knowledge. University of Toronto.	This study describes the social organization of the child protection system in Ontario after the introduction of the "Child Welfare Reform." The study explores and describes the new "regimes of practices" that bind the child welfare social worker into producing institutional outcomes. There have been significant changes to social work practices as a result of this restructuring. Of particular concern is the considerable reduction in the professional autonomy of social workers and a removal of major decision-making powers from front-line social workers and supervisors. The study explores the increase in the emphasis on social workers' accountability to the system itself and a corresponding decrease in professional autonomy and the commitment to the clients' needs. Procedures and the documentation of social workers' actions and decisions become more important than their relationships with clients and community. The study uses Institutional Ethnography, a method of inquiry developed by Canadian sociologist Dorothy Smith, complemented with the literature on governmentality. I draw on my knowledge and experience of the routine every day work of child protection and how new "technologies of government" such as the New Funding Formula and the Ontario Risk Assessment Model (ORAM) have affected the practices of the restructured child protection system.	Ontario Risk Assessment Model (ORAM) Doktoravhandling
de Kwaadsteniet L, Bartelink C, Witteman C, ten Berge I, van Yperen T. (2013) Improved decision making about suspected	ORBA is a method that aims to improve decision making about suspected child maltreatment in Advice and Reporting Centres of Child Abuse and Neglect (ARCCAN). It structures the process of judging and deciding and makes it explicit by distinguishing separate steps, and by identifying the necessary information to consider and the judgments and decisions to be made in each step. In this study it was investigated whether decision making in ARCANNs has become more systematic and transparent, since the implementation of ORBA. The contents of 100 case records from 2010 were analyzed, after ORBA had been implemented in all agencies, to see to what extent these records contained relevant information, and to what extent process steps and rationales for decisions could be identified. This was	ORBA Tidsskrifts-artikkel

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child maltreatment: Results of structuring the decision process. <u>Children and Youth Services Review</u> 35(2):347-352.	compared with the contents of 60 records of three agencies from 2005, before ORBA was implemented. Analyses showed that in 2010 records more often contained relevant information and process steps that ORBA prescribes than in 2005. It was salient however that rationales for judgments and decisions were still often absent in 2010. While after ORBA's introduction the process has clearly become more systematic and more transparent, compared to 2005, more improvements are still called for, specifically in explicitly motivating decisions. Explanations and implications of our results are discussed.	
Bartelink C, van Yperen T, ten Berge I, de Kwaadsteniet L, Witteman C. (2014) Agreement on child maltreatment decisions: A non-randomized study on the effects of structured decision-making. <u>Child & Youth Care Forum</u> 43(5):639-654.	Background Practitioners investigating cases of suspected child maltreatment often disagree whether a child is subject to or at risk of abuse or neglect in the family and, if so, what to do about such abuse or neglect. Structured decision-making is considered to be a solution to the problem of subjective judgments and decisions. Objective This study investigates the effects of ORBA, a method for structured decision-making in Advice and Reporting Centres for Child Abuse and Neglect (ARCCAN), on interrater agreement of judgments and decisions. Methods Two groups of ARCCAN practitioners, one trained in using ORBA and one untrained, used a questionnaire to make judgments and decisions on the same case vignettes. Interrater agreement on the judgments was obtained by calculating the percentage of agreement, intra class correlation, and the Kappa coefficient. Results Both ORBA trained and untrained practitioners showed little agreement on judgments and decisions, except for the judgment on child maltreatment substantiation, for which trained practitioners showed fair agreement. Agreement among trained and untrained practitioners only differed for some judgments and decisions, and differences were not always in the same direction. Conclusions This result indicates no convincing evidence that structured decision-making leads to better agreement on decisions concerning child abuse and neglect. Recommendations for improvements in uniform decision-making and further research are given.	ORBA Tidsskriftsartikkel
Macdonald G, Lewis J, Macdonald K, Gardner E, Murphy L, Adams C, et al. (2014) THE SAAF STUDY: evaluation of the Safeguarding Children Assessment and Analysis Framework (SAAF), compared with management as usual, for improving outcomes for	BACKGROUND: Serious case reviews and research studies have indicated weaknesses in risk assessments conducted by child protection social workers. Social workers are adept at gathering information but struggle with analysis and assessment of risk. The Department for Education wants to know if the use of a structured decision-making tool can improve child protection assessments of risk. METHODS/DESIGN: This multi-site, cluster-randomised trial will assess the effectiveness of the Safeguarding Children Assessment and Analysis Framework (SAAF). This structured decision-making tool aims to improve social workers' assessments of harm, of future risk and parents' capacity to change. The comparison is management as usual. INCLUSION CRITERIA: Children's Services Departments (CSDs) in England willing to make relevant teams available to be randomised, and willing to meet the trial's training and data collection requirements. EXCLUSION CRITERIA: CSDs where there were concerns about performance; where a major organisational restructuring was planned or under way; or where other risk assessment tools were in use.Six CSDs are participating in this study. Social workers in the experimental arm will receive 2 days training in SAAF together with a range of support materials, and access to lim-	Safeguarding Children Assessment and Analysis Framework (SAAF) Protokoll (plan) for systematisk oversikt

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children and young people who have experienced, or are at risk of, maltreatment: study protocol for a randomised controlled trial.	ited telephone consultation post-training. The primary outcome is child maltreatment. This will be assessed using data collected nationally on two key performance indicators: the first is the number of children in a year who have been subject to a second Child Protection Plan (CPP); the second is the number of re-referrals of children because of related concerns about maltreatment. Secondary outcomes are: i) the quality of assessments judged against a schedule of quality criteria and ii) the relationship between the three assessments required by the structured decision-making tool (level of harm, risk of (re)abuse and prospects for successful intervention). DISCUSSION: This is the first study to examine the effectiveness of SAAF. It will contribute to a very limited literature on the contribution that structured decision-making tools can make to improving risk assessment and case planning in child protection and on what is involved in their effective implementation.	
Turnell A, Edwards S. (1999) Signs of safety: A solution and safety oriented approach to child protection casework. New York: W W Norton & Co.	(from the jacket) Presents an approach to child protection work. The book focuses on the question, "How can child protection professionals actually build partnerships with parents where there is suspected or substantiated child abuse or neglect?" The authors bring the solution orientation to child protection risk, expanding the investigation of risk to encompass signs of safety that can be built upon to stabilize and strengthen the child's and family's situation. The philosophy behind this approach is articulated through 12 practice principles for child protection workers for abuse and neglect investigation. The book offers a child protection assessment and planning protocol that allows for comprehensive risk assessment incorporating both danger and safety and the perspectives of both professionals and service recipients (parents). The authors provide practical, hands-on strategies for building a partnership with parents, which may, in the long run, prevent abuse and family dissolution. They illustrate this in cases showing the subtle process of integrating the seemingly opposite notions of coercion and cooperation.	Signs of Safety Bok
Stanley T, Mills R. (2014) 'Signs of Safety' Practice at the Health and Children's Social Care Interface. Practice: Social Work in Action 26(1):23-36	Good practice for safeguarding children by health and social care means having the individual confidence to take considered risks in practice and the institutional support that encourages it. Yet, this is not easy to achieve or widely promoted across health and social care organisations. The pressure to 'get things right' very much dominates health and social care and this perpetuates a risk aversive culture. Risk measurement regimes based on actuarial methods influences the 'get things right' emphasis, with a focus on certainty and knowing 'for sure', leaving socially determined or socially constructed notions of risk at the practice margins. In an everyday practical sense, this can mean families being subjected to professional definitions about risk and need, rather than them being part of a working relationship where risk definitions are worked out together. In this paper, we argue that definitions of risk are best conceptually and practically mapped at the interface of health and social care practice, with families, to strengthen the case analysis and social work plans about what needs to happen next. We show how we have adopted the 'signs of safety' approach at Tower Hamlets to do just that.	Signs of Safety Tidsskrifts-artikkel

Referanse	Sammendrag	Innhold & type
Keddell E. (2014) Theorising the signs of safety approach to child protection social work: Positioning, codes and power. Children and Youth Services Review 47(Part 1):70-77.	Many countries are struggling to reconcile the conflicting demands of heightened risk aversion cultivated by a reactionary public and media, and recognition of the rights of parents and children to family maintenance where possible. One approach that seeks to grapple with these demands is the signs of safety (SoS) approach (Turnell & Edwards, 1999). This article is a theoretical paper discussing the SoS approach, drawing on a qualitative empirical study of decision-making in a context where the SoS was used. As practice tools affect knowledge production, the SoS approach is analysed using the social constructionist concepts of positioning and investment, Bernstein's codes, and Foucault's knowledge/power and discretion/surveillance ideas. It is argued that the SoS approach offers morally attractive subject positions to parents which may contribute to client engagement and personal change. This is achieved by focussing on future safety, implying future parental competence, and including parents in decision-making processes. The SoS approach uses both corrective and appreciative 'codes' in its approach to knowledge production. That is, it allows clients some input into constructing problems and finding solutions and thus de-privileges the social worker's 'expert' view, reflecting an appreciative code. However, this does not extend to 'bottom-line' concerns that the social worker defines as essential for the case to close, thus reflecting corrective elements. In terms of knowledge/power and discretion/surveillance, the approach helps social workers to differentiate between when to lend discretionary power to clients and include them in knowledge production, and when to retain control over knowledge production. Importantly, it is underpinned by a traditional 'respect for persons' ethic that assumes the potential for parental functioning, and parental right to autonomy, in an environment that has traditionally begun from the opposite premise. However, while it holds much potential for humanising responses to risk that are productive in terms of personal change, client engagement and child safety, its focus on the micro context of client's lives only may omit significant structural causes of risks to children, or overstate social worker's power within organisational and wider political policy contexts	Signs of Safety Tidsskriftsartikkel
Shlonsky A, Wagner D. (2005) The next step: Integrating actuarial risk assessment and clinical judgment into an evidence-based practice framework in CPS case management. Children and Youth Services Review 27(4):409-427.	Assessment in child welfare involves at least two distinct processes: an assessment of risk (prediction of future harm) and a contextual assessment of child and family functioning used to develop case plans. Both types of assessment are critical decision aids, yet there has been confusion in the field about their respective uses. Actuarial risk assessment instruments clearly have the greatest potential to reliably and accurately estimate the recurrence of child maltreatment. This type of risk assessment, however, does not indicate which clinical factors are most important to address and certainly does not indicate which services are most likely to be effective. The structured decision making (SDM) approach is an example of an effort to integrate predictive and contextual assessment strategies into child welfare practice. Clinical decision makers complete both an actuarial risk assessment and an objective assessment of family strengths and needs. Both assessments incorporate clinical input in their design and completion. Yet this is still not enough. Clinicians must translate information from both forms of assessment into the choice of a set of effective service interventions. The process of evidence-based practice and the establishment of structural supports for this practice model may be the next step in the evolution of child protective services.	Structured decision making (SDM) approach Tidsskriftsartikkel

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Gillingham P. (2009) Practitioner perspectives on the family risk evaluation tool: an aide to decision making or 'just another form to fill in'? Developing Practice 23:46-54.	The findings of research that explored how child protection practitioners in Queensland used the Structured Decision Making (SDM) tools are presented, focusing on how the Family Risk Evaluation tool (FRET) was used in decision making. The main finding was that the FRET was not used to assist the decision making of practitioners and consequently was ineffective in targeting the children most in need of a service. For practitioners, it was 'just another form to fill in'. As suggested by the participants in this research, a better strategy than the implementation of the SDM tools to improve decision making is the development of practitioner expertise through higher education.	Structured Decision Making (SDM) tools Tidsskriftsartikkel
Miyamoto SW. (2014) Risk Factors for Serious Child Maltreatment in Families Previously Investigated by CPS: A Case-Control Study. University of California, Davis. p. 88 p-88 p 81p.	The purpose of this dissertation research was to identify family and caregiver risk factors associated with serious child maltreatment due to physical abuse (PA) or neglect among families previously investigated by Child Protective Services (CPS).A matched case control study was conducted of children less than 6 years of age who sustained a serious maltreatment 'index event', defined as hospitalization or death due to PA or neglect, and whose mother had a previous 'baseline' CPS investigation between 1999 and 2013. Controls had to have a prior CPS investigation, yet no child in the home could have experienced an index event. Controls were matched on child age at index event and date of the mother's baseline investigation. Potential risk factors such as family composition, caregiver mental health and alcohol or other drug (AOD) utilization, criminal arrests, domestic violence, Structured Decision MakingRTM (SDM) risk assessment score, and prior CPS history were abstracted for both maternal and non-maternal caregivers from three county databases. Differences in demographic characteristics and risk factors between cases and controls were calculated. Multivariable conditional logistic regression was used to arrive at maternal and non-maternal caregiver models to identify risk factors associated with serious child maltreatment.Of the 702 children and families included in the study, 234 were cases which were matched 2:1, resulting in 468 controls. Male children, younger caregivers, having three or more children under the age of five in the home, and families in which a biologic child lives separately from their parents were significantly associated with increased odds of maltreatment. Additionally, scoring moderate or high risk on the current SDM risk tool was associated with four times increased odds of serious maltreatment. Greater numbers of older children in the home and identification of caregiver involvement in IPV are associated with decreased odds of maltreatment.	Structured Decision Making (SDM) risk assessment score Doktoravhandling
California Department of Social Services Children and Family Services Division (2014) Risk Assess-	(fra Executive Summary) The California Department of Social Services (CDSS) Children and Family Services Division Child Welfare Services (CWS) contracted with the Children's Research Center (CRC), a center of the National Council on Crime and Delinquency (NCCD), to conduct a validation study of the risk assessment used to assess the likelihood of future child maltreatment among families investigated by child welfare	Structured Decision Making (SDM) system Rapport

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ment Validation: A Pro-spective Study.	agency staff. Since CDSS CWS adopted the current actuarial risk assessment in 2007, an additional 11 counties in California have implemented the Structured Decision Making® (SDM) system. Currently, child welfare agency staff in 54 of the 58 California counties complete the risk assessment for families at the end of a maltreatment investigation to help inform their case service decisions. (…) http://www.nccdglobal.org/sites/default/files/publication_pdf/risk-assessment-validation.pdf	
Klinman D. (2014) Functioning of standardized self-report measures for caregivers with active child welfare service cases.	The purpose of this dissertation was to assist in the development of an assessment system that supports caseworkers in Child Welfare Service (CWS) in making informed decision regarding the families they are serving. Caseworkers CWS have a difficult job of protecting and promoting the well-being of vulnerable children. To accomplish this task, they need assessment tools that both predict future maltreatment and provide guidance on family functioning, service need, and treatment progress. This dissertation presents two studies that examine the results of seven standardized self-report assessments obtained from 318 caregivers involved with CWS (235 families) whose children are in their care, and attempts to use these data to address some of the assessment needs in CWS. Study 1 examined the standardized assessment results and used survival analysis to determine whether the assessments were independently predictive of future child maltreatment and whether they added predictive value to the Structured Decision Making (SDM) tool used by CWS. Due to the coercive nature of caregivers involvement with CWS, the data were analyzed separately for caregivers who were categorized as reporting non-defensively and defensively on the Parent Stress Index. The assessment results for caregivers who were categorized as non-defensive provided insights into the families' struggles and added predictive value both independently and additionally when included in survival analysis with the SDM. For defensive caregivers, the assessments did not appear to provide insights into their struggles, and scores were not predictive of future child maltreatment. The results indicated no significant difference in survival time between the defensive and non-defensive caregivers. Furthermore, caseworkers appeared to struggle with the assessment of the defensive responders, as indicated by the SDMs lack of predictive value for these families. Study 2 examined how the data from the non-defensive responders could be used to develop a self-report multidimensional assessment of caregivers involved with CWS. Item Response Theory (IRT) was used to examine the functioning of items on two of the administered assessments. The results indicated both adequate item difficulty and item discrimination parameters. IRT was used to reduce the assessment length, resulting in shorter scales with similar predictive validity. Lastly, the study investigated how IRT can assist in the development of assessment tools that address assessment needs of CWS including potentially being resistant to the defensive responding of caregivers.	Structured Decision Making (SDM) tool Doktoravhandling
Schwartz DR, Kaufman AB, Schwartz IM. (2004) Computational intelligence techniques for risk	This study explores the use of artificial neural networks as a tool to assist child welfare and child protective service organizations in making more precise and more accurate risk assessment decisions on behalf of children and their families. An artificial neural network, a popular computational intelligence technique, was trained and tested with a backpropagation algorithm utilizing 1767 cases from the	(ikke navngitt) Tidsskrifts-artikkel

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assessment and decision support. <u>Children and Youth Services Review</u> 26(11):1081-1095.	United States' Third National Incidence Study of Child Abuse and Neglect. The network was challenged to predict those children meeting the Harm Standard for abuse--the most severe classification of demonstrable harm from the case file data. Overall, the trained network was approximately 90% accurate in predicting children meeting, and not meeting the Harm Standard with relatively few false positives and false negatives. Neural networks along with other complimentary computing methodologies (e.g., fuzzy logic and evolutionary algorithms) are tools that could help to increase accuracy, reduce errors, and facilitate more effective decisions in child welfare and child protective service organizations.	
Queensland Government (Australia), Department of Communities, Child Safety and Disability Services (2015) <u>Practice guide: Assessing harm and risk of harm</u>.	(fra dokumentet) Use of the practice guide The practice guide can be used to support the assessment of harm and risk of harm during all contacts with the child and family at all phases of child protection work. The following components are contained in the guide: 1. Key concepts and definitions 2. Decision-making framework for the assessment of harm and risk of harm (including Appendix 1) 3. Information gathering prompts when undertaking risk assessments (Appendix 2) 4. Risk and protective factor tables to consider in assessments (Appendix 3 and 4). https://www.communities.qld.gov.au/resources/childsafety/practice-manual/pg-assess-risk-of-harm.pdf	(ikke navngitt) Retningslinjer for praksis
Winkworth G, McArthur M. (2009) A practice framework to guide screening and assessment in the Australian Family Relationship Centres and advice line. <u>Child & Family Social Work</u> 14(4):410-419.	In recent years, there has been a growing recognition of the reactive way in which policy is translated into practice on the front lines of child and family welfare organizations, particularly in how risk is assessed and responded to by staff at all levels in these organizations. Major reforms to family law in Australia and programmes set up to complement the existing Commonwealth-Funded Family Relationship Services Program provide an opportunity to rethink how staff can be provided with a systematic and research-based set of guidelines for screening and assessment. This paper examines the role of practice frameworks in general and the Australian family relationships screening and assessment practice framework in particular to demonstrate not only how this broader evidence-based approach encourages well-informed, professional and ethical practice but also how it leaves room for creativity and local, place-based responsiveness.	(ikke navngitt) Tidsskrifts-artikkel
Gambrill E, Shlonsky A.	Risk assessment studies in child welfare have largely focused on identifying individual or family risk factors associated with future harm	(ikke navngitt)

Referanse	Sammendrag	Innhold & type
(2001) The need for comprehensive risk management systems in child welfare. <u>Children and Youth Services Review</u> 23(1):79-107.	or on the value of various assessment tools constructed of such factors, paying scant attention to the risks posed by the system and its larger context. These risks include services provided to children and families that have little or no evidence of effectiveness, lack of proper assessment of service needs, inadequate linkage of available services to desired outcomes, and an agency culture that is reactive rather than proactive in its pursuit of risk reduction. Drawing on related literature, this article introduces guidelines for the development and implementation of a comprehensive risk management system in child welfare.	Tidsskrifts-artikkel
Foster KA, Stiffman AR. (2009) Child welfare workers' adoption of decision support technology. <u>Journal of Technology in Human Services</u> 27(2):106-126.	Child welfare workers must process complex information in deciding to refer clients to appropriate mental health services. Decision support systems have been demonstrated in other fields to be an important tool, yet little research has been done in child welfare. This study focused on the adoption of a specific decision support system into child welfare practice. Quantitative analysis was used to demonstrate the diffusion of innovation process among a sample of state child welfare workers, while qualitative analysis was used to explain the facilitators and barriers to decision support systems adoption. Results indicate that for decision support systems to be widely adopted in child welfare practice, they should be integrated into the referral system and include workers' knowledge and experiences with referral resources. For successful adoption, decision support systems need to respect the natural logic and flow of worker interaction as well as organizational constraints.	(ikke navngitt) Tidsskrifts-artikkel
Shlonsky A, Friend C. (2007) Double jeopardy: Risk assessment in the context of child maltreatment and domestic violence. <u>Brief Treatment and Crisis Intervention</u> 7(4):253-274.	Investigations of child maltreatment often involve domestic violence, but there is little guidance about how to properly assess risk in such cases. Empirically validated risk assessment tools have been used successfully in child welfare and, to a lesser extent, in cases involving domestic violence, but these have generally not been utilized in tandem. Using the allegation of child maltreatment as the entry point for services, this paper proposes a nested risk assessment framework whereby risk of both child maltreatment and domestic violence are considered simultaneously using two different standardized instruments.	(ikke navngitt) Tidsskrifts-artikkel
Keddell E. (2015) The ethics of predictive risk modelling in the Aotearoa/New Zealand child welfare context: Child	The White Paper on Vulnerable Children before the Aotearoa/New Zealand parliament proposes changes that will significantly reconstruct the child welfare systems in this country, including the use of a predictive risk model (PRM). This article explores the ethics of this strategy in a child welfare context. Tensions exist, including significant ethical problems such as use of information without consent, breaches of privacy and stigmatisation, without clear evidence of the benefits outweighing these costs. Broader implicit assumptions	(ikke navngitt) Tidsskrifts-artikkel

Referanse	Sammendrag	Innhold & type
abuse prevention or neo-liberal tool? <u>Critical Social Policy</u> 35(1):69-88.	about the causes of child abuse and risk and their intersections with wider discursive, political and systems design contexts are discussed. Drawing on Houston et al. (2010) this paper highlights the potential for a PRM to contribute to a neo-liberal agenda that individualises social problems, reifies risk and abuse, and narrowly prescribes service provision. However, with reference to child welfare and child protection orientations, the paper suggests more ethical ways of using the model.	
Partridge CR. (2008) Concurrent validity of parent reports regarding the family/parenting dimension of a global risk assessment device for court-involved adolescents and their families. p. 5221.	This study advances recent efforts to validate the use of a global risk assessment device, hereafter referred to as the "GRAD," an actuarial measure intended to assess levels of risk/need for adolescents who have had contact with the juvenile justice and other social service systems (e.g., mental health, substance abuse, educational, and family services). The GRAD is intended to do two things: (1)identify the most "causal" factors related to adolescents' risk of not making an age-appropriate transition to adulthood, and (2)provide key information to social service professionals who will, in turn, design strategic interventions and/or make appropriate referrals for services. The present effort provides concurrent validity evidence of parent reports of the family/parenting domain of the GRAD by illustrating how levels of risk within this dimension are related to other established family measures, including parent and adolescent perspectives of: (1)the "unpleasant family events" subscale of the Family Events Checklist, (2)the Family Intrusiveness Scale and (3)the Perceived Social Support from the Family scale. Data gathered from a sample of N=102 court-involved adolescents and adult family members who attended a family-based diversion program were analyzed to evaluate the dimensionality of parent reports of the family/parenting domain of the GRAD. Confirmatory factor analyses were conducted, testing the relative fit of unidimensional vs. multidimensional models of the GRAD family/parenting domain. The results of the confirmatory factor analyses supported the use of a tridimensional model composed of items measuring disruptive "responses to parental monitoring," the extent to which parent/caretakers "tip-toe" and fail to discipline their young person for fear of reprisal, and parent/caretakers' concerns that their young person will "retaliate" when disciplined and victimize siblings or other family members. Further multivariate tests of the GRAD family/parenting domain were conducted utilizing this tridimensional model. Concurrent validity was evaluated by comparing the fit of structural equation models hypothesized to confirm specified relationships between the GRAD family/parenting domain and the other established family measures. Statistically controlling for demographic differences, adult reports of the Unpleasant Family Events Checklist and the Perceived Social Support from the Family Scale were significantly and positively related to the GRAD family/parenting domain. The results of this study confirm the findings of an earlier concurrent validity study on the positive relationship between adult reports of the GRAD family/parenting domain and adult reports of unpleasant family events. In addition, adult reports of perceived social support also were related to GRAD scores, providing further concurrent validity evidence. However, youth reports of both unpleasant family events and perceived social support from the family were unrelated to adult GRAD scores, suggesting that GRAD scores may represent adult perceptions of family/parenting factors, yet may not represent youth perceptions of the same family functioning issues. Finally, significant measurement issues warrant further research that is more precise, which will answer many of the questions that this study raised.	(ikke navngitt) Doktoravhandling

Referanse	Sammendrag	Innhold & type
Galasso LB. (2003) Toward the prevention of child maltreatment through risk assessment: Evaluation of an ecological, prospective model of risk for child abuse potential. <u>Dissertation Abstracts International: Section B: The Sciences and Engineering</u> 63(9-B):4369.	Secondary prevention, the predominant model of prevention of child abuse and neglect, involves identification of individuals considered to be "at risk" for engaging in child maltreatment. While theories of child maltreatment etiology recognize the complex interplay of factors at numerous ecological levels, most risk assessment practices primarily assess risk at the level of the mother-infant dyad. This strategy neglects the influence of broader ecological forces on parental functioning, and has led to narrow and incomplete conceptions of risk. New methodologies need to be created that apply an ecologically based integrative understanding of the etiology of child maltreatment. The current investigation tested a risk assessment strategy that was intended to improve upon current methods by employing a theoretically-based ecological approach, and by predicting risk across a twelve month span of time. Structural equation modeling methods were applied to 12-month longitudinal data from 125 new parents labeled "at risk" for inadequate parenting. Results indicate that person-level risk in the current model, as measured by a traditional, unidimensional checklist approach to risk assessment, was unrelated to parenting outcome as measured by parental attitudes, but significantly predicted child development. Findings further reveal that community-level factors had a significant direct and stress-mediated effect upon potentially abusive parenting attitudes, notably, these are factors which tend to be overlooked by most current risk assessment practices. Despite the significant relationships between community-level risk, stress, and parenting outcome, this model of multiple influences of risk still only accounted for 10 percent of the variance in child abuse potential. Results are discussed in terms of their impact on the prevalent secondary prevention paradigm, and suggestions are made for developing more complete assessment strategies on which to base intervention decisions.	(ikke navngitt) Doktoravhandling

Tabell 6. Sammenlikning/vurdering av *flere* (ikke nødvendigvis navngitte) modeller (n=18)

Referanse	Sammendrag	Innhold & type
Baird C, Wagner D, Healy T, Johnson K. (1999) Risk assessment in child protective services: consensus and actuarial model reliability. <u>Child Welfare</u> 78(6):723-748.	Three widely used child protective service risk assessment models (two consensus based, one actuarial) were examined to determine their reliability. Although no system approached 100% interrater reliability, raters employing the actuarial model made consistent estimates of risk for a high percentage of the cases they assessed, and interrater reliability for the actuarial model was much higher than that of the other systems.	Sammenligning av tre modeller Tidsskriftsartikkel
Baird C, Wagner D. (2000) The relative validity of actuarial- and consensus-based risk assessment systems. <u>Children and Youth Services Review</u> 22(11-12):839-871.	Compared the relative validity of consensus- vs actuarial-based risk assessment systems for use in decision-making in child protective services (CPS). Three risk assessment instruments, 2 consensus-based and 1 actuarial, were completed on 80 cases from 4 jurisdictions, and outcome information was collected on cohorts of cases over an 18-mo follow-up period. The number of cases for which each risk assessment was completed ranged from 1,335 to 1,396. Rates of subsequent investigations, substantiations, and placements were computed for cases classified at low, moderate, and high risk levels in each model. The actuarial approach more accurately classified cases to different risk levels. These actuarial models, therefore, have the greater potential to improve CPS decision making and better protect at-risk children.	Sammenligning av tre modeller Tidsskriftsartikkel
Baumann DJ, Law J, Sheets J, Reid G, Graham J. (2005) Evaluating the effectiveness of actuarial risk assessment models. <u>Children and Youth Services Review</u> 27(5):465-490.	A series of studies provides evaluative evidence on actuarial models of risk assessment in child welfare using both scientific and practical criteria. Two true experiments with random assignment explore the effects of relatively successful and unsuccessful models. Results of the first indicate that valid models influenced caseworker risk estimates, yet the models were not superior to the judgments made by caseworkers not exposed to the models. In the second, three failed models and one successful model influenced caseworker risk estimates, yet even the one successful model was not found to be superior to caseworker judgment. The relationship between model predictability, influence, comprehension and efficiency is underscored in these studies. The final study provided some caseworkers with feedback from an actuarial model in the form of an "alert" that required them to take action on an actual case in the field. Some workers were not exposed to the feedback. Results indicated that although the alert status of a case affected caseworks judgments and case-related behavior in expected directions, the effect of knowledge of the actuarial feedback on actual case-related behavior was small.	Evaluerer statistikk-baserte modeller Tidsskriftsartikkel
Begle AM, Dumas JE,	This study investigated two theoretical risk models predicting child maltreatment potential: (a) Belsky's (1993) developmental-ecological	Sammenligner

Referanse	Sammendrag	Innhold & type
Hanson RF. (2010) Predicting child abuse potential: an empirical investigation of two theoretical frameworks. <u>Journal of Clinical Child & Adolescent Psychology</u> 39(2):208-219.	model and (b) the cumulative risk model in a sample of 610 caregivers (49% African American, 46% European American; 53% single) with a child between 3 and 6 years old. Results extend the literature by using a widely accepted and valid risk instrument rather than occurrence rates (e.g., reports to child protective services, observations). Results indicated Belsky's developmental-ecological model, in which risk markers were organized into three separate conceptual domains, provided a poor fit to the data. In contrast, the cumulative risk model, which included the accumulation of risk markers, was significant in predicting child abuse potential.	to (teoretiske) modeller Tidsskrifts-artikkel
Bolton A, Lennings C. (2010) Clinical opinions of structured risk assessments for forensic child protection: The development of a clinically relevant device. <u>Children and Youth Services Review</u> 32(10): 1300–1310.	Structured risk assessments are well established and outperform unaided judgement in most forensic fields, yet there has been little uptake of structured assessments in Australian forensic child protection. The reasons for such limited uptake are unknown. To address this, this study trained five independent senior clinicians contracted by the Children's Court to use three structured approaches: 1) an Actuarial approach measuring static factors, 2) a Contextual/Dynamic approach measuring dynamic factors and, 3) a combination of the two measures via a proposed risk matrix model. Following training, clinicians applied the approaches to 30 vignettes (based upon actual restoration cases), and their perceptions of the clinical utility of the approaches were measured via questionnaires. Clinician's opinions of the three approaches were generally positive, suggesting that structured risk assessments have clinical utility for forensic child protection cases. Alternative explanations for the limited uptake are discussed. Of the three approaches the Combined was viewed most favourably, followed by the Contextual/Dynamic, and finally Actuarial. ; Risk assessment Child abuse Decision making URL: http://www.sciencedirect.com/science/article/pii/S0190-7409(10)00131-3	Tester tre tilnærminger: statistisk, konsensus og kombinasjon Tidsskrifts-artikkel
Chor KH, McClelland GM, Weiner DA, Jordan N, Lyons JS. (2015) Out-of-home placement decision-making and outcomes in child welfare: a longitudinal study. <u>Administration & Policy in Mental Health</u> 42(1):70-86.	After children enter the child welfare system, subsequent out-of-home placement decisions and their impact on children's well-being are complex and under-researched. This study examined two placement decision-making models: a multidisciplinary team approach, and a decision support algorithm using a standardized assessment. Based on 3,911 placement records in the Illinois child welfare system over 4 years, concordant (agreement) and discordant (disagreement) decisions between the two models were compared. Concordant decisions consistently predicted improvement in children's well-being regardless of placement type. Discordant decisions showed greater variability. In general, placing children in settings less restrictive than the algorithm suggested ("under-placing") was associated with less severe baseline functioning but also less improvement over time than placing children according to the algorithm. "Over-placing" children in settings more restrictive than the algorithm recommended was associated with more severe baseline functioning but fewer significant results in rate of improvement than predicted by concordant decisions. The importance of placement decision-making on policy, restrictiveness of placement, and delivery of treatments and services in child welfare are discussed.	Sammenligning av to modeller Tidsskrifts-artikkel

Referanse	Sammendrag	Innhold & type
Chor KHB. (2011) Placement decision-making and outcomes among children and youth in Illinois child welfare: a comparison of a decision support algorithm and a team consensus approach. p. 7276.	Children and youth in custodial care are characterized by uncertain clinical outcomes and placement instability. Finding the best out-of-home placement is a priority for state child welfare systems. However, placement decisions have traditionally been idiosyncratic and difficult to standardize, in ensuring the custodial population receive appropriate placements. Guided by the principle of least restrictive setting and the lack of standardized decision-making, matching children's needs to placements is a catalyst to improving placement decisions. Two comparative decision-making models have emerged: a decision support algorithm and a team consensus approach. This study evaluated the Child and Adolescent Needs and Strengths (CANS) Algorithm, which aids standard placement decision-making by multidisciplinary Child and Youth Investment Teams (CAYIT) in the Illinois child welfare system. Comparing the algorithm and team decisions, the analysis of distal outcomes directly tested the hypothesis that concordant (following the algorithm) and discordant (deviating from the algorithm) placement decisions would lead to differential outcomes, favoring the concordant decisions. Three outcome indicators were used, including clinical changes based on repeated CANS assessments, length of stay in the CAYIT-recommended placements, and subsequent placement changes. To model these outcome indicators, we used hierarchical linear modeling, survival analysis, and zero-inflated negative binomial regression, respectively. We further applied log-linear modeling to delineate the distribution of placement decisions produced by the two models. In a sample of 7,827 children and youth in Illinois custodial care, concordant decisions were prominent among children younger than 16. The degree of discordant deviation was generally small. Concordant decisions, overall, predicted favorable clinical changes and to some extent, placement stability. Some discordant decisions predicted less improvement and instability, though others predicted better outcomes. Interpretations and discussions of specific discordant decisions were presented. Policy implications of applying an empirically-based algorithm, integrating placement and service decision-making, and increasing decision-sensitivity to age, were described. We further concluded that placement decision-making and how it relates to child welfare outcomes are complex and unique to each child welfare system. We recommended future research to explore other empirically-based algorithms in informing placement decisions, in order to enlighten the diverse constructs of clinical outcome and placement stability over time.	Sammenligning av to modeller (som over) Doktoravhandling
De Bortoli L, Dolan M (2015) Decision Making in Social Work with Families and Children: Developing Decision-Aids Compatible with Cognition. British Journal of Social Work 45(7):2142-	Social work practice occurs under difficult circumstances and often involves using incomplete, conflicting and inaccurate information to carry out complex assessments. Personal and organisational factors impact upon practitioner perceptions and work practices may contribute to errors associated with biased judgement. In the field of social work with families and children, poor decisions have been associated with child injuries and deaths. To assist with decision making, most practitioners adopt either consensus decision-aids, which focus upon the practitioner's intuitive cognitive mode, or actuarial decision-aids, which focus upon the analytical cognitive mode. Modern cognitive theory suggests that these cognitive modes function in tandem--a finding that has led to the development of a third aid, Structured Professional Judgement (SPJ). We discuss the advantages associated with SPJ such as the increased transparency of decision making, the ability of practitioners to identify and manage uncertainty and use emotions in clinical judgement. Given the success of SPJ	Vurderer to typer modeller samt foreslår og beskriver en tredje type Tidsskriftsartikkel

Referanse	Sammendrag	Innhold & type
2160	in forensic psychology, we believe SPJ is more likely to optimise decision making in social work practice with families and children and produce superior outcomes.	
Della Knoke & Nico Trocmé. (2005) Reviewing the Evidence on Assessing Risk for Child Abuse and Neglect. Brief <u>Treatment and Crisis Intervention</u> 5:310–327	Risk assessment is a central component of crisis intervention in all aspects of practice. Nowhere is this more pronounced however, than in the assessment of families in crisis and children at risk of abuse. Structured risk assessment instruments are promoted to manage increasing demands for child welfare services by providing a mechanism to guide decision making regarding the type and intensity of services required to protect children from subsequent harm. The value of the structured risk assessment instruments is hypothesized to lie in improved consistency and accuracy of workers' judgments. However, risk assessment models were frequently implemented with little empirical evaluation. Postimplementation studies indicate that many commonly used risk assessment tools fail to attain adequate levels of reliability and validity. A number of challenges to validation have been identified. A more systematic approach to the development and testing of risk assessment instruments is required to support child welfare practice.	Gjennomgang av forskning på modeller Tidsskriftsartikkel
Griffis NG. (1995) <u>Factors Influencing the Implementation of Risk-Assessment Technology in Child Protective Services</u>.	(fra Google om boken) Undersøger i hvilken udstrækning nye risikovurderingsmodeller er blevet anvendt af børneværnsmedarbejdere i udarbejdelsen af en endelig risikovurdering. Undersøger endvidere, hvorledes den enkelte børneværnsmedarbejder opfattede processen omkring implementeringen af modellerne, samt hvorledes dette har indvirket på den pågældende medarbejders anvendelse af modellerne.	Erfaringer med ulike modeller Bok
Hollinshead D, Fluke J. (2000) What works in safety and risk assessment for child protective services. What works in child welfare. Washington, DC: Child Welfare League of America; US; pp. 67-74.	(from the chapter) Examines safety and risk assessments as part of child protective services' decision-making practices concerning the safety of children. The following topics are discussed: goals of risk assessments, models of safety and risk assessment, development and support of risk assessment, and the issue of predictive validity.	Diskusjon av ikke navngitte modeller Bokkapittel

Referanse	Sammendrag	Innhold & type
Hughes RC, Rycus JS. (2007) Issues in Risk Assessment in Child Protective Services. Journal of Public Child Welfare 1(1):85-116.	Child welfare organizations throughout North America have expended millions of dollars to develop, implement, and institutionalize formal risk assessment models to improve decision making for maltreated children and their families. This article summarizes findings of the risk assessment literature and concludes that many risk assessment protocols currently in use may not improve either the consistency or the accuracy of protective service decisions for maltreated children. The article recommends strategies to improve decisions that promote child safety by utilizing a continuum of empirically supported decision making tools, each designed for a specific purpose during the life of the case.	Gjennomgang av ikke navngitte modeller Tidsskrifts-artikkel
Lyons P, Doueck HJ, Wodarski JS. (1996) Risk assessment for child protective services: A review of the empirical literature on instrument performance. Social Work Research 20(3): 143-155.	The development and use of systematic risk assessment models by child protective services agencies can be seen in part as a response to the dramatic increase in maltreatment referrals during the past two decades. However, despite the increasing popularity of such models, relatively few are empirically based. The authors reviewed the empirical literature on 10 risk assessment models and conclude that although each model contains generally sound psychometric properties, there is still a need for further model development and for process and outcome evaluation of model implementation.	Sammenligning av ti modeller Tidsskrifts-artikkel
Pecora PJ, Chahine Z, Graham JC. (2013) Safety and risk assessment frameworks: overview and implications for child maltreatment fatalities. Child Welfare 92(2):143-160.	This article highlights current models used in child protection to assess safety and risk, and discusses implications for child maltreatment fatalities. The authors advance that current risk and safety practice approaches were not designed to accurately estimate the likelihood of low base-rate phenomena and have not been empirically tested in their ability to predict or prevent severe or fatal child maltreatment. They advance that, regardless of the ultimate effectiveness of safety and risk tools, competent assessment and decision-making in child protection depend on sound professional judgment and a comprehensive systemic approach that transcends the use of specific tools.	Sammen-ligning av modeller Tidsskrifts-artikkel
Price-Robertson R, Bromfield L (2011) Risk assessment in child protection. NCPC Resource Sheet No. 24 — March	The purpose of this Resource Sheet is to outline the different approaches used to assess whether children are at risk of maltreatment, as well as to explore some of the issues and criticisms surrounding the use of standardised risk assessment instruments in child protection. (Australian Government, Australian Institute of Family Studies) https://aifs.gov.au/cfca/publications/ risk-assessment-child-protection	Gjennomgang av ulike model-ler Webside

Referanse	Sammendrag	Innhold & type
Ruscio J. (1998) Information integration in child welfare cases: An introduction to statistical decision making. Child Maltreatment 3(2):143-156.	Presents 2 general methods for formulating decision-making policies in child maltreatment cases, the clinical and the statistical approaches. The author discusses the considerable research literature demonstrating the superior predictive validity of statistical decision models over clinical prediction and presents a series of illustrative contrasts between the 2 approaches which highlight the desirable mathematical properties of statistical equations as well as the cognitive biases and limitations inherent in unaided human judgment. Reasons for practitioners' adherence to the clinical approach are explored, with specific reference to child welfare decision making. Finally, recommendations are provided for enhancing the efficiency, validity, and ethical defensibility of decision making that seriously impacts the lives of children and their families.	Sammenligner to typer modeller Tidsskrifts-artikkel
Rycus JS, Hughes RC. (2003) Issues in risk assessment in child protective service. Policy White Paper. North American Resource Center for Child Welfare Policy.	Issues in risk assessment in child protective service. http://www.ihs-trainet.com/assets/RApdf.pdf	Stortingsmelding med gjennomgang av ulike modeller Stortingsmelding
U.S. Department of Health & Human Services, Administration for Children & Families, Children's Bureau	Websiden til U.S. Department of Health & Human Services, Administration for Children & Families, Children's Bureau – oversikt over ulike instrumenter og modeller https://www.childwelfare.gov/topics/ systemwide/assessment/family-assess/safety/	Presentasjon av ulike modeller Webside

Tabell 7. Annet / mer generelle, praktiske eller teoretiske diskusjoner (n=18)

Referanse	Sammendrag	Innhold & type
Berrick JD, Peckover S, Poso T, Skivenes M. (2015) The formalized framework for decision-making in child protection care orders: A cross-country analysis. <u>Journal of European Social Policy</u> 25(4):366-378.	Care orders within the child protection system are some of the most invasive interventions a state can make. This article examines the discretionary space governments set out for child protection workers when they prepare care orders. We analyse the formalized framework for these decisions in England, Finland, Norway and the United States. We focus on knowledge, timelines, how children and parents are involved and accountability. We find that Norway and Finland have highly de-regulated systems with wide discretionary space, whereas England and the United States are highly regulated systems with narrow discretionary space. The United States differentiates itself with relatively little parent and/or child involvement in decision-making. England and Finland do not have defined deadlines for terminating the process, and Norway has few directives on what information to collect. Such differences will influence the quality of decisions as well as the principles of the rule of law.	Sammenlikning av beslutnings-rammeverk i fire land Tidsskrifts-artikkel
Camasso MJ, Jagannathan R. (2013) Decision making in child protective services: a risky business? <u>Risk Analysis</u> 33(9):1636-1649.	Child Protective Services (CPS) in the United States has received a torrent of criticism from politicians, the media, child advocate groups, and the general public for a perceived propensity to make decisions that are detrimental to children and families. This perception has resulted in numerous lawsuits and court takeovers of CPS in 35 states, and calls for profound restructuring in other states. A widely prescribed remedy for decision errors and faulty judgments is an improvement of risk assessment strategies that enhance hazard evaluation through an improved understanding of threat potentials and exposure likelihoods. We examine the reliability and validity problems that continue to plague current CPS risk assessment and discuss actions that can be taken in the field, including the use of receiver operating characteristic (ROC) curve technology to improve the predictive validity of risk assessment strategies.	Reliabilitet og validitet mht risikovurdering Tidsskrifts-artikkel
Cash SJ (2001) Risk assessment in child welfare: the art and science. <u>Children and Youth Services Review</u> 23(11):811–830	This paper is an analysis of the current state of risk assessment in child welfare practice. The art (practice wisdom) and science (empirically based instruments) of risk assessment are highlighted and provide a unique focus on risk assessment than has previously been presented in the literature. Factors predicting the occurrence and the recurrence of child maltreatment are discussed, prior research is examined, and methodological problems and limitations are provided. Recommendations are offered on the integration of art and science in risk assessment to formulate the most effective and holistic assessment of the family.	Status quo for risikovurdering Tidsskrifts-artikkel
Crea TM. (2010) Balanced decision making in child welfare: Structured	Child welfare workers face considerable challenges in making consistent and effective placement decisions for children and families. The purpose of this article is to review literature regarding the benefits and pitfalls inherent in individual and group decision-making processes, specifically applied to the child welfare context. The article proposes a conceptual framework that draws from the strengths of	Rammeverk for beslutninger (individuelle vs

Referanse	Sammendrag	Innhold & type
processes informed by multiple perspectives. <u>Administration in Social Work</u> 34(2):196-212.	both types of decision-making processes to balance consideration of risk factors with available protective factors. Drawing from multiple sources of information and opinion and using structured assessment tools should help promote placement decisions that are consistent across cases and workers and most appropriate to the family's level of need.	gruppebaserte) Tidsskrifts-artikkel
Dawson R, Callahan M (2001) Debate: Risk Assessment in Child Protection Services. Canadian <u>Social Work Review/Revue canadienne de service social</u> 18(1):151-164.	Presents a debate about risk assessment in child protection services. In Yes: An Integral Part of Casework Practice, Ross Dawson argues that most decisions about the safety of children require an assessment of risk; that good clinical practice must be informed by theory/research; & formalized risk assessment not only provides a uniform structure/criteria for determining risk, but promotes accountability & sound decision making. Marilyn Callahan refutes Dawson's argument, claiming that risk assessments are poor substitutes for experience/training, & useless if the resources to help those at risk are not available. In No: These Tools do not Reduce Risk for Children, Callahan insists risk assessments may actually increase the risk to children because their use during investigations encourages parents to hide their problems. Further, assessment instruments, which have not been scientifically shown to actually predict risk, are based upon middle-class White perspectives that are disadvantageous to most clients. Dawson retorts that risk assessments are not used to investigate but are useful tools for collecting/analyzing vital information to help in determining risk.	Diskusjon for og imot bruk av formaliserte verktøy for å vurdere risiko Tidsskrifts-artikkel
Gambrill E, Shlonsky A (2000) Risk assessment in context. <u>Children and Youth Services Review</u> 22(11–12):813–837.	This article provides an overview of the context in which decisions about risk are made in child welfare including personal, task, and environmental factors that may contribute to uncertainty and less-than-optimal decision making, as well as some of the methodological challenges posed by the use of current risk assessment instruments. Actuarial, consensus-based, and clinical instruments are discussed and the more successful track record of actuarial decision-making in child welfare and related fields is highlighted. Methodological challenges to assessing risk are also presented including lack of reliability and validity of measures, definitional dilemmas, temporal issues such as changes in risk over time, absence of base rate data, predicting for individuals and sensitivity and specificity of measures. Implications for the design and implementation of risk assessment tools are considered in light of contextual influences and methodological limitations. Lastly, an overview of the contents of Part One of this special issue on risk assessment is provided.	Diskusjon av instrumenter sett i kontekst Tidsskrifts-artikkel
Goddard CR, Saunders BJ, Stanley JR, Tucci J. (1999) Structured risk assessment procedures: Instruments of abuse? <u>Child Abuse Review</u>	Child protection services in Australia and elsewhere face increasing internal and external demands. As a response to these pressures, in part at least, services are increasingly implementing some form of risk assessment procedures. This article examines the practice implications of the increasing use of risk assessment instruments in child protection services. It highlights the complexity of the concept of risk as the basis for a future-oriented assessment activity. The authors suggest that this change of time frame (from what has happened to what might happen) may be detrimental to children. Through a critical review of the literature, the authors question whether risk	Praktiske konsekvenser av instrumenter for risikovurdering

Referanse	Sammendrag	Innhold & type
8(4):251-263.	prediction is possible and discuss the limitations of risk assessment instruments which omit some risk factors and may ignore the perspective of the child. The authors challenge the validity of risk assessment instruments in statutory settings and suggest that the protection of the organization may be a major objective in their implementation.	Tidsskrifts-artikkel
Harris N. (2011) Does responsive regulation offer an alternative? Questioning the role of formalistic assessment in child protection investigations. British Journal of Social Work 41(7):1383-1403.	The interface between parents and child protection agencies has long been a cause of concern. This paper examines the challenge that the child protection system faces from the perspective of responsive regulation theory (Braithwaite, 2002). The analysis suggests that management of compliance, though rarely discussed in the literature, has a significant impact on investigations. An emphasis on assessment, especially formal risk assessment, places an emphasis on a particular type of compliance: 'assessment compliance'. Research on the experiences of parents suggests that overemphasis on assessment compliance has a number of disadvantages: it risks alienating families, it focuses attention on a questionable indicator of parents' willingness to make changes, increases the degree of coercion used in interventions and disempowers families and their communities. It is argued that formalistic use of assessment undermines the effectiveness of investigations because managing compliance within assessment procedures comes to dominate the response of workers. More families could be successfully engaged if the principles of responsive regulation were applied to assessment within investigation processes. A family engagement pyramid, based on responsive regulation theory, is proposed as one way of achieving this.	Diskusjon av formelle kartlegginger og mulige negative konsekvenser Tidsskrifts-artikkel
Holosko MJ, Ojo J. (2015) Risk assessment: Issues and implementation in child protective services. Evidence-informed assessment and practice in child welfare. Cham, Switzerland: Springer International Publishing; pp. 85-97.	(from the chapter) The primary goal of child welfare is "to protect children from harm". In order to fulfill this goal the child protective services (CPS) use assessments of risk as an essential part of service. Historically, assessment of risk and investigation are what workers use to determine the likelihood of maltreatment. Therefore, the assessment of risk is a key aspect of child protective agencies. In this chapter, the history, goal, issues, and implementation of formal risk assessments in CPS will be discussed.	Gjennomgang av formell risikovurdering Bokkapittel
Calder MC, Hackett S (eds) (2013) Review of Assessment in child	CONTENTS AND CHAPTER AUTHORS Introduction Martin C. Calder. Risk and child protection: triangulation, trials and templates Martin C. Calder. Supervising and managing staff undertaking assessments Jane Wonnacott. Assessment of child physical abuse: towards a framework for assessment Martin C. Calder. Assessing neglect Duncan Helm and Brigid Daniel. A framework for assessing emotional	Gjennomgang av rammeverk for vurdering

Referanse	Sammendrag	Innhold & type
care: Using and developing frameworks for practice, 2nd ed. Russell House Publishing.	abuse Celia Doyle. A framework for assessing failure-to-thrive Dorota Iwaniec. Sexual abuse assessments: from perpetrator friendly to perpetrator challenging frameworks Martin C. Calder. Serious injuries to infants: key risk assessment considerations Peter Dale. Pre birth assessments: context, content and collaboration considerations Martin C. Calder. Domestic violence: untangling the complexity to inform assessments Martin C. Calder. Assessing the needs of disabled children Jane Wonnacott, Anne Patmore and Margaret Kennedy. Learning disability and parenting improving understanding and interventions: doing the basics well Rikki Sneddon. Parents with mental health problems: assessing and formulating parenting capacity, embedded within a service context Khadj Rouf. Parental alcohol misuse: evidence-informed assessment considerations Martin C. Calder and Anne Peake. The assessment of parental substance misuse and its impact on child wellbeing Michael Murphy and Fiona Harbin. Involving children and young people in assessments Helen Charnley, Grace Roddam, Dave Laverick and Jane Wistow. Re-assessing fatherhood: the absence of the new man in social work practice Lena Dominelli. Assessments and social ecology: the importance of community Gordon Jack. A framework for assessing parenting capacity Simon Hackett.	Bok
Kindler H. (2003) Will This Work Out? How Does the ASD Assess the Risk of Child Abuse and Neglect? DISKURS 13(2):8-18.	When the welfare of a child is endangered, assessing the risk of potential maltreatment & neglect constitutes an integral part of the statutory youth services' work. Embedding risk assessment in a comprehensive model of experts' reviewing tasks in cases involving endangered children, the author defines the concept of risk assessment for this context & explicates it for different forms. He first analyzes the likelihood of unstructured risk assessment to go wrong, & then discusses the international state of research on structured techniques to assess maltreatment &/or neglect risks. Based on nine longitudinal studies involving more than 14,000 families, the author concludes that structured risk assessment techniques could be an empirically based pillar in the case-related differentiation of various risk groups with regard to abuse &/or neglect. As such a differentiation may be decisive for the way, in which the case develops, the demand for risk assessment techniques has also risen in Germany's youth services. The article shows the strengths & weaknesses of the techniques that have been developed in the Federal Republic of Germany & pleads for a stronger link with international research. 1 Table, 18 References.	Empirisk grunnlag for strukturert risikovurdering Tidsskriftsartikkel
Knoke D, Trocme N. (2005) Reviewing the Evidence on Assessing Risk for Child Abuse and Neglect. Brief Treatment and Crisis Intervention 5(3):310-327.	Risk assessment is a central component of crisis intervention in all aspects of practice. Nowhere is this more pronounced however, than in the assessment of families in crisis and children at risk of abuse. Structured risk assessment instruments are promoted to manage increasing demands for child welfare services by providing a mechanism to guide decision making regarding the type and intensity of services required to protect children from subsequent harm. The value of the structured risk assessment instruments is hypothesized to lie in improved consistency and accuracy of workers' judgments. However, risk assessment models were frequently implemented with little empirical evaluation. Postimplementation studies indicate that many commonly used risk assessment tools fail to attain adequate	Gjennomgår studier av reliabilitet og validitet ved ulike instrumenter og modeller

Referanse	Sammendrag	Innhold & type
	levels of reliability and validity. A number of challenges to validation have been identified. A more systematic approach to the development and testing of risk assessment instruments is required to support child welfare practice.	Tidsskrifts-artikkel
Lyons P, Doueck HJ, Wodarski JS. (1996) Risk assessment for child protective services: A review of the empirical literature on instrument performance. <u>Social Work Research </u>20(3):143-155.	Reviewed the empirical literature on 10 risk assessment models (RAMs) to examine the psychometric properties (PMPs), including reliability and validity, and outcomes of implementation as a response to the crisis of growing intakes in child protective services agencies. RAM evaluations were searched based on 2 criteria: (1) the evaluation was published or presented at a conference and (2) the evaluation was conducted by an independent evaluator. The search resulted in studies on 8 different models. Two additional models were used, although they fell short of the independence criterion. The research reported findings on 7 models for predictive validity, 5 for interrater reliability, 6 for internal consistency, 1 for concurrent validity, and 3 for implementation effect. It is concluded that although each model has sound PMPs, further model development and evaluation of process and outcome of model implementation is needed.	Gjennomgang av ulike modeller Tidsskrifts-artikkel
Scherz C. (2011) Protecting Children, Preserving Families: Moral Conflict and Actuarial Science in a Problem of Contemporary Governance. <u>Polar-Political and Legal Anthropology Review </u>34(1):33-50.	The United States Child Protective Services system is shaped by the unresolved tension between the aims of child protection and family preservation. Since the 1980s, child welfare experts have recommended the use of risk assessment tools in the hopes of standardizing the decisions made by social workers and judges. In this article, I show that despite their bureaucratic appearance, the tools implemented lacked a clear directive, allowing unresolved value conflicts to be papered over by the appearance of technocratic regularity. I argue that this case not only exemplifies Max Weber's classic distinction between problems of social science and moral value in the creation of social policy, but also raises questions about the effects and uses of audit technologies in situations of ongoing moral conflict.	Problematisering av standardiserte instrumenter for risikovurdering Tidsskrifts-artikkel
Schwalbe C. (2004) Revisioning risk assessment for human service decision making. <u>Children and Youth Services Review </u>26(6):561-576.	This article examines the usefulness of actuarial risk assessment for high-stakes decision making in child welfare, mental health, criminal justice and juvenile justice. Review of the literature affirms the potential benefits of risk assessment instruments for decision making by human service professionals. However, research also hints at the underutilization of risk assessment in practice. Although a number of explanations may account for this, the needs of decision makers in the real world of day to day practice has received little attention in the literature. This article identifies insights from the Recognition primed decision making theory (RPD) that promise to strengthen the utility of actuarial risk assessment instruments. It argues that an actuarial risk assessment instrument, based on appropriate causal theory, would have a greater likelihood of utilization as compared to the a-theoretical instruments that predominate in current structured decision making systems.	Nytte av statistikkbasert risikovurdering Tidsskrifts-artikkel

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Schwalbe CS. (2008) Strengthening the integration of actuarial risk assessment with clinical judgment in an evidence based practice framework. <u>Children and Youth Services Review</u> 30(12):1458-1464.	Traditional discussions of actuarial risk assessment utility in child welfare and juvenile justice emphasizes its comparative predictive validity with clinical methods of prediction. While important, it ignores how actuarial risk assessment instruments actually influences the clinical deliberations of their users. Recent literature extends the discussion of their clinical utility by invoking evidence based practice principles. Implicit in this discussion is a traditional model of structured decision making, common in child welfare and juvenile justice agencies, whereby actuarial risk assessment is supplemented with contextual needs assessment. This article critiques the traditional model of structured decision making and argues that its limitations are inconsistent with the spirit of evidence based practice. Instead, a revised model of structured decision making, grounded in research on risk and resilience, promises a more complete integration with evidence based practice.	Kritikk av strukturert beslutningstaking Tidsskriftsartikkel
Steib S. (2003) Research to practice. Risk assessment and decisionmaking in child protection. <u>Children's Voice</u> 12(6):34-35 32p.	(fra artikkelen) The development of risk assessment protocols in child protection began in the early 1980s. By 1991, all but a few states were using some type of written instrument to structure CPS decisions. This trend is not unique to child protection--research in other fields has shown that structured protocols can improve clinical decisions. As reasonable as the use of risk assessment tools might be, developing and implementing them has not been easy. Questions and controversy have arisen about definitions of abuse and neglect and the kinds of measures and statistical methods used. Risk itself is variously defined at different points in the decisionmaking process. As in the case illustration that opens this article, the concept may be applied in decisions about accepting a report or, as in the second example, about the disposition of a confirmed report. Child welfare professionals also may rely on risk assessments to distinguish immediate danger from threats of long-term harm, or to guide decisions about specific service needs.	Diskusjon av instrumenter for risikovurdering og beslutningstaking Tidsskriftsartikkel
Wodarski JS, Holosko MJ, Feit MD (eds) (2015) <u>Evidence-informed assessment and practice in child welfare</u>. Cham, Switzerland: Springer International Publishing.	The focus of this book is on evidence-informed social work practice. The chapters are written by practitioners whose central focus is on evidence-informed work. The book has three distinct sections. The first centers on the context for providing evidence-informed assessments. The second centers on actual field-tested evidence-informed assessments, and the third addresses field-tested evidence-informed interventions. Together they provide a backdrop for using research in an effective manner in social work practice. (from the cover) This practice-oriented text presents evidence-based assessment methods and interventions that have been extensively field-tested in child welfare settings. The contributors offer empirical and field insights, comprehensive treatment models, and curricula in key areas such as child maltreatment, substance abuse, parent training, social skills, and youth employment interventions. For the professional reader, the book offers real-world guidance on social work practice, from hiring opportunities within a system to promoting lasting change as families and their issues grow increasingly complex. These chapters also take significant steps toward future improvements in child protection systems as the field evolves toward being more coordinated, effective, and professional.	Presenterer evidensbaserte metoder for vurdering Bok

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