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Emergency Shelter Placement of Rural Children: Placement and Discharge Patterns

Mary Van Hook
University of Michigan

The crisis in social work services to families and children, is reflected in the growing numbers of children being placed out of their homes (Allen, 1991), adolescents running away from home (Simons & Whitbeck, 1991), and homeless youth (Bass, 1992). In this context, identifying children likely to be referred for emergency services is especially crucial because these children are at heightened risk for out of home placement. This paper thus examines some of the patterns associated with placement and subsequent discharge of rural children in emergency shelter care.

Out of home placement of children has been linked with family poverty; single parenthood; family conflict; emotional problems of parents; neglect, abuse, and abandonment of children; and severe behavior and emotional problems of children (Bass, 1992; Beggington & Miles, 1989; Britbitzer & Verdieck, 1988; Feitel, Margetson, Chamas, & Lipman, 1992; Lindsey, 1991; Pelton, 1989; Rothman, 1991; Sarri, Morrow, Tessier, & Sharma, 1989; Teare, Furst, Peterson, Autheir, 1992). Runaway behavior by teenagers is primarily associated with family conflict, with girls facing particularly difficult situations. Incest figured prominently as a partial reason for running away by girls when extensive personal interviews were used but only minimally (1%) when data were obtained from agency records (Rothman, 1991). Poverty can contribute to placement directly by increasing the stress experienced by families and limiting the resources available to them (Halpern, 1990) and indirectly by influencing the placement decision process of child welfare staff (Katz, Hamptom, Newberger Bowles, & Snyder, 1986). For many children emergency shelter placement is part of an ongoing cycle of placement in foster homes,

379

group homes, and other emergency shelters. Only half of the children in emergency shelters return home (Bass, 1992). The living arrangement prior to placement in emergency shelters influences discharge plans: children living in their natural homes tend to return home while those from foster homes and residential facilities tend to be placed in residential settings (Segal & Schwartz, 1987).

These studies, however, have typically focused primarily on urban children or have included children from rural areas only within a much larger urban population. Yet the presence of major problems in rural areas, including mental health difficulties (Berger & Dixon, 1990), homelessness (Children's Defense Fund, 1991; Rife, First, Toomey, & Royalty, 1992; Segal, 1989), family problems and poverty (Berger & Dixon, 1990; Edelson & Frank, 1991; Martoz-Baden, Hennon, Brubaker, 1989), and serious youth substance abuse (Sarvela & McClendon, 1990) with limited available services (Berger & Dixon, 1990) suggests the need to examine placement patterns of rural youth. A recent study of teenagers in a runaway shelter in Iowa further indicated the high risk faced by these youth of failing to learn the skills required to live competently in the mainstream of society and of joining the ranks of the homeless (Simons & Whitbeck, 1991).

Shelter care in the context of this discussion refers to care provided by programs offering temporary care for children on an emergency basis when family members or other adults are unable to provide this care.

Study

To help understand which rural youth are at risk for emergency placement, the placement process and discharge patterns of an emergency shelter serving children from an area including numerous farms and small rural communities, several primarily rural Native American reservations, as well as an urban trade center of 80,000 were analyzed.

Subjects: A random sample of 91 rural youth was selected from the children placed in the Florence Crittenton Home in Sioux City, Iowa from mid 1985 to mid 1990. The sample was part of a larger study in which a sample of 455 children was randomly selected from the total shelter population. Rural youth represented 20% of the children placed. Rural children were also compared with the 328 children from the urban trade center (70% of the children placed). The importance of the agricultural sector created similar economic trends in the urban and rural communities which facilitated these comparisons. The small number of children (2.3%, 9 in the sample) from the Native American reservations made meaningful comparisons including this group difficult. Since this group lives about

the same distance from the center as many of the rural communities, a few comparisons are included to indicate whether these differences between rural and urban areas were due solely to distance. Children just passing through the area (1.5%), those living in the large cities at the fringe of the catchment area (4.5%), and where residence was unknown were not included in the analysis.

The shelter admits children from infancy through age seventeen who are not currently under the influence of alcohol and drugs or do not have an extensive history of serious violence toward others. Agency admission policies were stable during this period. The primary referral sources are the legal system and the Department of Human Services which also has primary responsibility for discharge planning. Older children were under represented in this study during the early years due to the policy of deleting records when children reach eighteen

Social and Policy Context: Since trends in child welfare programs do not occur in an economic and policy vacuum, it is important to describe the social context of this study. The farm crisis of the early to mid 1980's created economic and personal distress for many living in this and other rural areas and urban centers dependent on the agricultural economy (Berger & Dixon, 1990; Marotz-Baden et al., 1989; Merz, 1988; Van Hook, 1990). Minority groups were especially hard hit; for example, unemployment rates for minority groups equalled the Great Depression (26% in 1985 and 1986 for African-Americans in the Sioux City area (Horton & Lundy-Allen, 1990). Although the area economy began improving in the late 1980's, rural areas continue to face long term economic and social restructuring that place them especially vulnerable to poverty (Rural Sociological Society, 1993). In response to these hard times, many people moved out of the area with a subsequent decline in the population of children in the state of Iowa by 8% (Thieman, Fuqua, & Linna, 1990).

Outside of the Native American reservations, minority group membership in the rural areas is extremely low (less than 1% for each group in the 1990 U.S. Census). Urban minority group membership was also low (1.2% African Americans, 2% Native American, 1.4% Asian Americans, and 1.6% other groups, U.S. Census) despite recent recruitment of Hispanics to hold relatively low paying jobs in the meat packing industry (Erb, 1991), and resettlement of refugees from South East Asia (Pins, 1991).

As in other areas, families headed by women and those belonging to minority groups were more likely to be poor. In rural areas, female headed households with children under the age of eighteen had median family incomes ranging from 25 to 50% of families with two parents (U.S. Census, 1980). Per capita income of minority group members were generally no more than one-half that of whites (U.S. Census, 1990). Native

Americans, African-Americans and Hispanics have higher rates of unem-
ployment and are unemployed for longer periods of time than whites
(Horton & Lundy-Allen, 1990; Iowa Employment Commission, 1990).
Minority membership, poverty, and family composition were further com-
pounded. In the urban trade center, black and Native American children
were more likely to be living in a female-headed family than a two-parent
family: at least half of the children from African-American and Native
American families were living in a female-headed family with only one-
third living in a two-parent family compared to 20% and 70% respectively
in white families (U.S. Census, 1990--numbers of minority groups in the
rural communities were too small for these comparisons). Poverty rates on
the Native American reservation were very high (median family income of
$9,233 compared to $30,743 in Sioux City and ranging from $24,000 to
28,000 in rural counties) (U.S. Census, 1990). Children tend to live in
female-headed households (51%, 1980 Census, 75%, 1990 Census).

State funding in Iowa for community and children's services during
the period from 1984 to 1990 failed to keep up with rising costs (15.8%
increase in funding while costs increased by 32.3%) (Iowa Association of
Rehabilitation and Residential Facilities). The Department of Human Ser-
vices experienced several hiring freezes. Levels of reimbursement for
residential care facilities were set that required programs to maintain at
least a 90% occupancy rate to survive (J. Hackett, personal conversation,
1991). Foster home placements increased by 33% in the state despite
fewer children (Thieman et al., 1990). Family preservations services were
established in November 1987 in the area. Despite success with individual
families, this program had not reduced the general rate of foster home
placement in the area (Thieman et al., 1990).

Procedures: Agency records of the sample were content analyzed by
a research team of two with ongoing consultation between team members
to resolve any coding differences. Placement patterns were analyzed to
answer the following questions. How were age, gender, race, family com-
position, family economic situation, and religious ties associated with
heightened risk for placement? What were the primary reasons for place-
ment? What was the pattern of services prior to shelter care placement?
Which children were likely to return home or remain in some type of out
of home placement?

To answer these questions data were analyzed using descriptive and
inferential statistics. The small numbers of rural children made multi-
variate analysis difficult. Data are presented as an average of the five
years unless statistically significant trends emerged.

Step-families were defined to include families where a parent had remarried or was living regularly with another adult because this seemed to most accurately mirror the daily lives of the children.

Rural families could not be categorized reliably into specific socio-economic levels. Urban families were categorized by their addresses using detailed socioeconomic information about each neighborhood (based on the 1980 census, Siouxland Interstate Metropolitan Planning Council, 1980). The extremely high poverty rates on the Native American reservations suggest that these families were likely to be poor.

Findings

General Placement Trends: Admissions from 1985 to 1990 show an area wide pattern of steady increase followed by a very recent decline with some upsurge in rural communities: 1985--339 (rural-15.6%, N = 53), 1986--387 (rural--13.6%, N = 53), 1987--404 (rural--28.1%, N = 114), 1988--499 (rural--22.2%, N = 111), 1989--482 (rural--15.4%, N = 74), and 1990--419 (rural--21.8%, N = 91). About one-third of the children were being placed for at least the second time (rural 37%, urban 31%--no statistical difference between the groups).

Placements tended to be brief for most children as indicated by the percentage of children placed from one to seven days: rural children (46.4%), Native American reservations (88%), and urban center (62.5%). Differences between these groups were not statistically significant.

Age of Children: Rural children were at greatest risk for placement during their teen years and tended to be somewhat older than urban children: rural children, mean = 12.1 years (SD = 4.7, 15.4% below the age of 6); urban, mean = 10.2 (SD = 5.54--22.8% below the age of 6), p < .01 level, ($ANOVA$, F= 11.7, df = 1). Children from the Native American reservations were generally in preschool: mean = 4.59 (SD = 5.11--77.8% below the age of 6).

Gender: The relative risk for placement associated with gender varied by age. Preschool boys were slightly more likely to be placed than girls and this difference became marked during the elementary school years. Teenage girls (especially before the age of 16) were more likely than teen-age boys to be placed in shelters. Urban youth showed somewhat similar trends. Young girls from the Native American reservations were over-whelmingly at greater risk for placement than were boys.

Emergency shelter placement must be examined in the context of the wider placement patterns in the community (Lerman, 1991). In contrast to the emergency shelter, teenage boys were substantially over represented in

Table 1
Gender of Children in Placement By Age and Community

	Rural		Urban		Native American	
	N	%	N	%	N	%
Ages 0-5	14	15.4	75	23.0	7	77.8
Males	8	57.2	43	57.4	1	14.2
Females	6	42.8	32	42.6	6	85.8
Ages 6-12	13	14.3	99	30.8	1	11.1
Males	9	69.3	56	56.9	0	0
Females	4	30.7	43	43.4	1	100
Ages 13-17	64	70.3	155	47.1	1	11.1
Males	20	31.2	73	47.1	1	100
Females	44	68.8	82	52.9	0	0
Total	91	100	329	100	9	100

Note: % of males and females are the % in each age group.

Juvenile Detention Center--71% of the referrals and 80% of the admissions.

Race: The racial characteristics of rural children in placement were generally similar to the community as a whole, although Native American children and those from mixed racial groups were somewhat over represented.

Racial patterns for urban youth were similar except that African-American children were over represented. Mason and Gibbs (1992) indicate that the association between race and placement must be set within the context of the greater poverty rates for minority groups. In this study poverty and minority group membership emerged in two ways. Families belonging to minority groups were more likely to be poor than white families in the area. Urban children in placement from minority families were more likely to come from poor families than were white children in placement: for African Americans, 63% came from families below $13,000 income; Native American, 69%; Hispanics, 60%, and whites, 45%.

Family composition: Most of the children placed belonged to either female headed families, (N = 31, 34%), step-families (N = 24, 26%), or two parent families (N = 25, 27%). Further comparisons based on family composition will thus be limited to these groups.

Table 2
Race of Children in Placement By Community

	Rural		Urban	
	N	%	N	%
White	85	93.4	226	68.9
African-American	1	1.1	20	6.20
Native American	3	3.3	43	13.3
Hispanic	0	0	5	1.6
Asian- American	0	0	2	.7
Mixed	2	2.2	30	9.3
Total	91	100	326	100

From infancy through the preteen years, rural children in placement tended to be living in a female headed family. While teenagers were as likely to be living in a two-parent family (33.3%) or a step family (30.25%) as they were in a female headed family (23.8%); these rates exceed the community as a whole where only 5-15% of the children in rural counties were living in female headed families (U.S. Census, 1990). Young children from the urban center and the Native American reservations also tended to be living in female headed households.

Data from the Native American reservations and the urban sample suggest the need to consider family composition and placement patterns within a broader social economic context. On the Native American reservations where families in general tended to be poor, family patterns of children in placement were similar to the community as a whole. Among urban poor families, rates of children living in female headed families being placed were similar to the community as a whole. As family income reached the average of the community as a whole, the rates of children in placement from female headed families began to double in comparison to their proportion in the general population at this income level. When the income reached 150% of the median community income, children in placement from female headed parent families were represented at a rate five times their portion in the neighborhood as a whole.

Economic Status: While individual rural families could not be categorized into specific economic groups, qualitative data regarding many

Table 3
Family Composition by Community and Age

| | Rural | | Urban | | Native American | |
	N	%	N	%	N	%
Ages 0-5	14		75		7	
Mother	7	50	44	58.7	4	57.1
Father	0	0	4	5.3	0	0
Step-Family	3	21.4	10	13.3	0	0
Two Parent	4	28.6	14	18.7	3	42.9
Ages 6-12	13		99		1	
Mother	9	69.3	44	44.4	1	100
Father	2	15.4	5	5.0	0	0
Step-Family	2	15.4	25	25.3	0	0
Two Parent	0	0	11	11.0	0	0
Ages 13-17	64		155		1	
Mother	15	23.8	35	23	0	
Father	1	1.6	10	6.6	0	
Step-Family	19	30.2	45	29.6	0	
Two-Parent	21	33.3	36	23.7	0	

Key: Mother = Female headed single parent family
        Father = Male headed single parent family
        Two-Parent = Two parents of child living together
        Step = Step-family situation
Note: % in some categories do not add up to 100% because only four major types of family
situations are included.

rural families revealed problems associated with poverty (including lack of
adequate housing, child care arrangements, a telephone, and general finan-
cial inadequacy to meet daily needs) which often lead directly to the
placement of the child. As in other studies (Lindsey, 1991) poverty was
clearly associated with increased risk of placement for urban children. For
example, 17.5% of the children came from families with incomes below
$9000, 52.1% below $12,000, and 83.3% below $15,000 (1980 income
figures).

Religious affiliation: Data regarding religious affiliation indicated that families with children in shelter care tended not to be linked to one of the key support networks in rural communities, the church. Only 39.8% of the rural families with children in placement had any type of even minimal religious connection in contrast to the vast majority of rural families which are affiliated with the church. Urban families evidenced a similar lack of connection with the church: 37.6% of shelter families compared to 65% in the community as a whole (Skinner, personal conversation May 1991).

Reason for placement: As in other studies, emotional and family problems of both children and parents contributed to placement. Family problems (including general problems as well as abuse) and acting out behavior by children in the form of ungovernable behavior, alcohol and drug use were the most important reasons for rural youth. A qualitative analysis of the records indicates that some of these family problems are exacerbated by poverty but entrenched, severe interpersonal problems are also present in situations involving abuse and severe behavioral problems of young people. The results reported in Table 4 must be understood within the context of the under representation of older children in the study and the likely under reporting of issues of family violence, sexual abuse, and substance abuse. Previous studies, for example, indicated that the extent of sexual abuse experienced from teenage girls running away increased from 1% when agency records were used to virtually all the girls when they were personally interviewed at length (Rothman, 1991).

Only four reasons differentiated between rural and urban children. Rural youth were more likely to be placed due to their ungovernable behavior and because they were awaiting group home placement. Children from urban center were more likely to have run away and to have needed protective custody. Children from the Native American reservations were placed in shelter care primarily because their mothers had been arrested for shoplifting in the area mall.

Although the numbers too small to draw firm conclusions, gender and family composition was associated with different reasons for placement of rural children. Children placed because they had run away and exhibited ungovernable behavior tended to be girls--ran away [females (5) 71.4%/-males (2) 28.6%], exhibited ungovernable behavior [females (16) 72.7%/-males (6) 27.3%]. Children placed for neglect and abandonment were especially likely to be living with a single parent: Neglect--single mother (5) 16.1%, step-families (1) 4.2%, and two-parent families (0%); Abandonment--single mother (4) 12.9%, step and two-parent families (0%). Controlling for age, family composition did not emerge as a significant variable for other reasons for placement.

Table 4
Major Reasons for Placement by Community

Reason	Rural		Urban		Difference
	N	*%*	*N*	*%*	
Actions by family					
Family problems	40	44	126	39.1	NS
Sex abuse	4	3.2	18	5.6	NS
Abandoned	5	5.4	29	9.0	NS
Neglect	9	7.8	45	14.0	NS
Protective custody	4	3.2	35	10.8	$x^2 = 4.7$ $df = 1, p < .04$
Actions by child					
Ungovernable behavior	22	23.9	47	14.6	$x^2 = 3.9$ $df = 1, p < .05$
Ran away	8	6.7	53	16.9	$x^2 = 4.8$ $df = 1, p < .03$
Current alcohol/ drug use	9	9.8	27	8.7	NS
Past alcohol/ drug use	10	11.0	28	9.2	NS
Social system needs					
Awaiting group home	9	9.8	9	2.8	$x^2 = 9.9$ $df = 1, p < .01$

Note: Children may be placed for multiple reasons

Previous services: Many of the rural children, especially the older ones, had received a variety of services prior to emergency shelter placement. A qualitative analysis of the records indicated that these services were often short and fragmented. Despite a general pattern of fewer services in rural areas combined with barriers due to social codes of stigma and geographic distance, rural children were more likely to have received counseling (especially individual and family) and services associated with out of home placement (inpatient mental health, group homes, foster homes) than were urban children. The pattern of previous services combined with the limitations of the service delivery system suggest that many rural children in shelter care are characterized by severe, entrenched personal and family problems. Few children from the

Table 5
Previous Services and Community

| | Previous Services | | | | Community |
	Rural $N = 91$		Urban $N = 326$		Difference
	N	*%*	*N*	*%*	
Indiv. Counseling	46	50.5	98	30.6	$x^2 = 13.4$ $df = 1, p < .01$
Family Counseling	37	40.8	84	26.2	$x^2 = 6.69$ $df = 1, p < .01$
Group Counseling	13	14.7	36	11.2	NS
Shelter Care	34	37.0	90	31.0	NS
Court Placements	21	22.8	89	27.7	NS
Foster Homes	24	26.1	55	17.2	$x^2 = 8$ $df = 1, p < .01$
Impt. Mental Health	28	30.8	54	16.7	$x^2 = 8$ $df = 1, p < .01$
Group Homes	13	14.8	18	5.7	$x^2 = 7.3$ $df = 1, p < .01$

Note: Child may have received more than one service.

Native American reservations had received previous services and shelter care placement played an extremely limited role for older children from these areas.

Discharge Plans: Patterns of discharge varied considerably depending on age, family composition, previous living arrangements, and reason for placement. Primary discharge outcomes for rural children in general included return to their home ($N = 35$, 38.4%), foster care placement ($N = 21$, 23%), various types of residential care placement ($N = 19$, 20.8%), and running away ($N = 10$, 10.9%). They were thus less likely to return home than the national pattern (Bass, 1992).

Age: While most rural preschool returned home (78.6%), less than one-third of school age children did so.

Family composition: Children living in female headed households were less likely to return home: returned home--female headed family (10) 33.3%; step family--(19) 41.7%), and two-parent home (12) 48% ($x^2 = 5.21$, $df = 2$, $p < .07$). This was particularly true for young children. Since families headed by women are more likely to poor and poverty is associated with increased risk for placement (Katz et al., 1986; Lindsey, 1991),

Table 6
Primary Discharge Plans by Age and Community

	Rural		Urban		Native American	
	N	%	*N*	%	*N*	%
Ages 0-5	14	15.4	75	22.8	7	77.8
Own Home	11	78.0	34	45.3	5	7.4
Foster Home	3	21.4	28	37.3	1	14.3
Residential	0	0	3	4	0	0
Ran Away	0	0	0	0	0	0
Ages 6-12	13	14.3	99	30.9	1	11.1
Own Home	4	30.8	40	40.4		
Foster Home	5	38.5	36	36.4	*	
Residential	3	23.1	6	6.1		
Ran Away	0	0	3	30.0		
Ages 13-17	64	70	155	47.1	1	11.1
Own Home	20	31.7	52	33.5		
Foster Home	13	20.3	21	13.5		
Residential	16	25	28	18.1	*	
Ran Away	10	15.6	32	20.6		

Note: % do not add up to 100% because only 4 types of discharge plans are included.

it is difficult to determine how much family composition itself influences placement decisions.

Controlling for age, children living in female headed families were more likely to be placed in foster care while children from two parent families were more likely to be placed in residential care. This suggests that problems of children living in single parent families tend to be identified as residing within the family unit while those living in other family settings are identified as belonging to the child as well as the family.

Living Arrangement: As with urban youth, (Segal & Schwartz, 1987), children living with their own parents were more likely to return home however, markedly less true for those living in either a female headed household or where some family separation had occurred (returned home- -both parents: 61%, mother only 38.8%, mother/step father 46%, and father/step mother 42%), compared to children living in foster homes (18%), and residential care (12.5%).

Table 7
Discharge Plans by Family Composition, Age, and Community

	Rural		Urban	
	N	*%*	*N*	*%*
Ages 0-5		14		75
Mother only	7		44	
Own Home	4	57.1	24	52.9
Foster Homes	3	42.9	20	48.8
Residential Care	0	0	0	0
Step Families	3		10	
Own Home	3	100	7	70
Foster Homes	0	0	2	20
Residential Care	0	0	0	0
Two Parents	4		14	
Own Home	4	100	6	42.9
Foster Home	0	0	4	28.6
Residential	0	0	0	0
Ages 6-12	13		99	
Mother only	9		44	
Own Home	2	22	16	36.5
Foster Home	4	44	18	41.5
Residential	2	22.3	10	22.7
Step Families	2		25	
Own Home	2	100	12	48
Foster Home	0	0	10	40
Residential	0	0	0	0
Two Parents	0		11	
Own Home	0		6	64.6
Foster Home	0		0	0
Residential Care	0		1	9.1
Ages 13-17	64		155	
Mother Only	15		35	
Own Home	4	26.6	8	22.9
Foster Home	5	33.3	10	28.6
Residential	2	13.3	4	11.4
Step Families	19		21	
Own Home	5	26.3	8	38.0
Foster Home	6	31.6	2	9.5
Residential Care	4	21.1	4	19.1
Two Parent Families	21		36	
Own Home	8	38	17	47.2
Foster Home	2	9.4	2	5.7
Residential	6	20.6	6	16.0

Note: % do not add up to 100% because only 3 family types and discharge plans are included. Residential care include group homes, mental health facilities, alcohol and drug abuse programs.

Reason for Placement: Although the numbers are rather small to draw firm conclusions, children placed for certain reasons were unlikely to return home: difficulty with the child involving ungovernable behavior, running away, loss of a foster home or group home placement due to the behavior of the child or serious family problems--less than 20% returnedhome. Children placed due to neglect, denial of critical care, or abandonment by their family were at a high risk for placement in foster care (45% were placed). Similar patterns were true for urban children.

Discussion of Results and Implications for Practice

Patterns of placement and discharge of rural youth in emergency shelter add further confirmation to other studies linking risk for initial and ongoing placement with family poverty and disruption as well as social policies which decrease continuity of community services to families. These results suggest the high risk faced by these children, especially older children, for the disruptions associated with ongoing out of home place-ment.

Rural children in shelter care were generally older than urban youth and demonstrated more long term problems. Since rural youth were under represented in the shelter population compared to urban youth, this trend is probably due more to the role of shelter care as a last resort placement for rural youth rather than to the existence of more serious problems generally in rural areas. Because these children face an extremely high risk of not returning home when they reach school age as well as when their problems are manifested in ungovernable behavior, drug use, or running away; it is especially important to provide community services designed to address conflicts and dysfunctional patterns within the family. Success with indi-vidual families served by family preservation are encouraging, yet these programs represent crisis efforts expended when children are already in imminent danger of placement rather than building in social responses directed toward prevention and providing ongoing community support. Prior studies and these findings suggest several directions for augmenting the resources of families to reduce the crises which result in children being placed in emergency shelters and subsequently in further out of home arrangements.

Families headed by women are particularly in need of help given the high risk of both shelter care placement as well as ongoing out of home placement. The strong association between placement and poverty and the greater likelihood that these families will be poor makes them especially vulnerable. This combination may contribute to the tendency of workers

to view the nature of the problem as residing within the family and the solution to the problem of children from these families as placement in foster homes. The higher activity and aggressive behavior levels of some young boys may be particularly taxing for these overwhelmed mothers and contribute to the high placement levels of young male children. With their young children especially at risk for placement due to neglect and abandonment, these families need multiple supportive services including education, adequate child care, emotional support for the mothers, and financial support for the family. Lisbeth's Shorr's (1988) *Within Our Reach* provides a vision of the services needed by these families. Since single parent families tend to be a relatively small minority in rural communities, special efforts may be needed to connect these parents with the natural supportive networks within the community.

Data from the rural and urban families indicate the importance of addressing poverty issues as well as family composition. Although the general economy in the area was improving, economic development efforts can leave families behind due to barriers associated with lack of vocational training and experience, discrimination, problems in transportation and childcare. When these families face a crisis time, they lack the backup resources that middle class families take for granted and potentially small crises can escalate into emergency shelter care placement. Lack of a telephone, for example, can make it very difficult for parents to be reached at critical times or for parents to assess other community resources. The placement may finally be precipitated because parents cannot be reached at a critical time (for example, a child misbehaving and in trouble), parents lack access to adequate child care, or parents finally become overwhelmed by the multiple demands placed on them.

Yet serious family conflicts and problems confront young people and their families from all economic groups and family compositions. These young people's behaviors prior to and during placement, as well as their history of placement, reflect the internalization of these problems and contribute to their pattern of ongoing placements. As is true nationally, emergency shelter care becomes only a stop gap measure as these young people go on to other forms of placement or runaway. These patterns indicate the need for increasing the extent and coordination of community help, especially counseling for young people and their families, training in independent living skills, and substance abuse services for youth and families.

In response, some shelters are establishing transition living programs which teach young people the vocational, daily living, and problem solving skills needed to survive independently (Bass, 1992). Given the large geographic distances served by rural shelters and the wide range of children served, these programs need to find ways by which groups within the

regional communities can provide these services. A program in West Virginia does this by building in a buddy system with community volunteers and educational meetings at a local recreational facility in addition to counseling (Bass, 1992). These models can be adapted to use some of the already existing natural support systems in rural communities.

Since school counselors play such an important role in the lives of young people and many young people entering shelters have problems in school (Bass, 1992), school counselors and the support staff of school social workers and counselors can play a key role in identifying children whose disruptive behavior might potentially escalate into placement. Because persons in rural communities can quickly become stereotyped by peers and adults, early identification can be especially important.

Unfortunately, the mental health services in rural areas tend to be very dependent upon federal funds and other community services are limited (U.S. Congress, 1990). As a result, federal policies limiting mental health services to the severely mentally ill place these young people at increased risk for ongoing problems by limiting broad community services and decreasing coordination of services.

Shelter care families lack of church ties represent isolation from one of the crucial sources of support during times of crisis in rural communities probably reflects their marginalization from the mainstream of the community. Social workers can educate local churches about community needs, work with them to encourage and facilitate outreach efforts, and arrange linkages between families who are interested and these volunteers. This help may be particularly useful for the mothers of young children who need ongoing emotional support, concrete services, and parenting guidance. These efforts must seek to transcend the barriers which often make rural poor people feel isolated from, suspicious of, and demeaned by others within the community (Fitchen, 1981)

The major gap between the sexual abuse patterns reflected in agency records and interviews with young girls suggests the importance of shelter care staff exploring this issue with the teenage girls. While their short term in shelter care may preclude total honesty in this area, it does provide girls the opportunity to reveal this problem.

Limitations and need for future research

As indicated, this study is limited by its reliance upon agency records. The pattern of family problems reported here probably under estimates the extent of substance abuse, violence, and other serious problems. It is also important to examine shelter care placement trends in terms of the broad pattern of placement in other programs. Such an examination would indi-

cate whether children of different gender, racial compositions, family backgrounds are being treated differently for similar behaviors. The association between family composition and types of problems and discharge plans need to be examined further with a larger sample to confirm the patterns which emerge in this study.

Conclusion

Preventing emergency shelter care and ongoing placement of rural as well as urban children thus requires a broad approach providing sustained community services to families and addressing the social factors which continue to place families at risk for poverty.

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