

Introduction to

NSCAW II

NSCAW II BASELINE REPORT: INTRODUCTION TO NSCAW II

FINAL REPORT

OPRE Report 2011-27a

August 2011

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Submitted to:

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Contract Number: HHS P2320062930YC

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Introduction to NSCAW II

The second National Survey of Child and Adolescent Well-Being (NSCAW II) is a longitudinal study intended to answer a range of fundamental questions about the functioning, service needs, and service use of children who come in contact with the child welfare system. The study is sponsored by the Office of Planning, Research and Evaluation, Administration for Children and Families (ACF), U.S. Department of Health and Human Services (DHHS). It examines the well-being of children involved with child welfare agencies; captures information about the investigation of abuse or neglect that brought the child into the study; collects information about the child's family; provides information about child welfare interventions and other services; and describes key characteristics of child development. Of particular interest to the study are children's health, mental health, and developmental risks, especially for those children who experienced the most severe abuse and exposure to violence.

The study includes 5,873 children ranging from birth to 17.5 years old at the time of sampling. Children were sampled from child welfare investigations closed between February 2008 and April 2009 in 83 counties nationwide. The cohort includes substantiated and unsubstantiated investigations of abuse or neglect, as well as children and families who were and were not receiving services. Infants and children in out-of-home placement were oversampled to ensure adequate representation of high-risk groups.

Guide to the NSCAW II Baseline Report Series

This report is the first in a series of reports describing findings from the NSCAW II baseline data. It provides an overview of the history and progression of the NSCAW study, a detailed discussion of the sample design, methods, and instrumentation implemented for NSCAW II, and a summary of the characteristics of children and caregivers who participated in the baseline data collection effort.

The topics covered in other NSCAW II baseline reports in this series include:

- Child Well-Being (physical health and special health care needs, cognitive functioning and academic achievement, social, emotional, and behavioral health, developmental assessments of young children, and risky behavior in adolescents)
- Maltreatment (nature of alleged abuse, risk assessment, substantiation status, exposure to violence, aggression, and conflict)
- Children's Services (insurance status, health and mental health services, and special education)
- Caregiver Characteristics and Services (caregiver physical and mental health, substance use, intimate partner violence, involvement with the law, and services received by in-home parents)
- Caseworker Characteristics, Child Welfare Services, and Disruptions in Child's Living Environment (investigative caseworker characteristics, child and family

service needs, satisfaction with caseworkers and the child welfare system, children in out-of-home placement)

• Overview of local agencies that participated in the study, the policy environment of the agencies, and their work with other agencies and services providers

The data analyzed in this report have been released through the National Data Archive on Child Abuse and Neglect (NDACAN) in NSCAW II data version 1-1.

History of NSCAW

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PL 104-193) authorized DHHS/ACF to conduct a national, longitudinal study of children involved with the child welfare system. The resulting landmark study, the National Survey of Child and Adolescent Well-Being, or NSCAW (now referred to as NSCAW I), was designed by a DHHS steering committee in consultation with a wide range of child development and child welfare experts to address program, policy, and practice issues of concern to federal, state, and local governments, and child welfare agencies

Beginning in 1999, NSCAW I gathered data on children's safety, permanency of living situation, well-being, and services at 4 months (Baseline), 12 months (Wave 2), 18 months (Wave 3), and 36 months (Wave 4) after the close of the index child welfare investigation. The final follow-up (Wave 5) was fielded by age cohort, at 52 to 96 months after the close of the index investigation. The NSCAW I study was completed in 2007. In 2008, longitudinal data collection with a new cohort of at-risk children, NSCAW II, was launched. This report is the first in a series that provides an analysis of data on children, caregivers, and investigative caseworkers collected during the baseline wave of NSCAW II.

NSCAW I was the first study to make available nationally representative longitudinal data drawn from first-hand reports from children, parents, and other caregivers, as well as reports from caseworkers and teachers and data from administrative records. It was also the first national study to examine child and family well-being outcomes in detail and to relate those outcomes to family characteristics, experiences with the child welfare system, community environment, and other factors. The study data describe the child welfare system and the experiences of children and families who come into contact with the system.

NSCAW I involved 5,501 children aged birth to 14 years old (at the time of sampling), who had contact with the child welfare system within a 15-month period beginning in October 1999. These children were selected from 92 primary sampling units in 97 counties nationwide. The sample of investigated or assessed cases included both cases that received ongoing services and cases that did not receive services, either because allegations were not substantiated, or because it was determined that services were not required. Sampling groups were defined by age, type of abuse/neglect, placement outside the home, and receipt of services, if any. The NSCAW I design also included a supplemental sample of children who had already been in foster care for 1 year at the time of sampling

The study collected child- and family-level data from children in the child welfare system, their caregivers, their caseworkers, agency directors, and teachers. Computer-assisted personal interviewing (CAPI) and audio computer-assisted self-interviewing (ACASI) methods were used with adult caregivers and with children over 11 years old; CAPI and a modified version of ACASI were used with children younger than 11 years old. Telephone interviews were used to collect interim services data at 12 months after close of investigation, with inperson follow-up of families who could not be reached by phone. For service- and system-level variables, data were collected from caseworkers and agency administrators via CAPI. The teacher survey was conducted by mail. The longitudinal nature of the study required effective panel maintenance procedures.

NSCAW I data collection was completed December 2007. General and Restricted Release data for Waves 1–5 are available to qualified researchers through licensing agreements with the NDACAN at Cornell University (see www.ndacan.cornell.edu). Numerous book chapters and journal articles using NSCAW I data have been published. The NDACAN website includes a searchable database that lists all NSCAW publications. Additional detailed explanations of NSCAW I methods are presented in several available documents (Administration for Children and Families, 2005; Biemer, Dowd, & Webb, 2010; Christ & Biemer, 2005)

Establishment of a Second Cohort—NSCAW II

The NSCAW II responds to a continuing need for better understanding of the child welfare system, the children and families who come in contact with it, and the services they receive. Child maltreatment continues to be a significant public health concern. According to the National Child Abuse and Neglect Data System's most current report, *Child Maltreatment 2009*, 3.3 million children were involved in an investigation in the 50 states, the District of Columbia, and Puerto Rico (U.S. Department of Health and Human Services, 2010). The reporting period for *Child Maltreatment 2009* was October 1, 2008 through September 30, 2009. From these investigations, 22.1% identified at least one child who was found to be the victim of abuse or neglect (substantiated). Children in the birth-to-1-year age range had the highest rate of victimization (20.6 per 1,000 children of the same age group in the national population). Slightly more than half (51.1%) of the child victims were female. Approximately 44% were White, 22.3% were African-American, and 20.7% were Hispanic.

Since the beginning of NSCAW I in 1999, the context within which state and local child welfare agencies operate has changed, with increasing demands and fewer resources (e.g., Lindsey, 2003). The average number of completed investigations per caseworker increased to 69.7 per year in 2009, as compared to 68.3 per year in 2008. In 2009, nearly three-fifths (59.9%) of victims and 25.8% of nonvictims received post-investigation services, while 20.8% of victims and 3.6% of nonvictims were placed in foster care (U.S. Department of Health and Human Services, 2010). Additionally, since the original NSCAW began, formal federal assessment of local agency practice was initiated with the Child and Family Services Reviews. The legislation that authorized the Child and Family Services Reviews imposes greater accountability on agencies, and the federal government can levy penalties if states are not making a statistically significant amount of progress in improving performance during their Program Improvement Plans. While agencies are reacting to these demands, state budget cuts have diminished the resources available to meet these and other challenges.

NSCAW II attempts to examine child and family outcomes within the current context as a means of guiding future policymaking, child welfare practice, and effective resource allocation.

Sample Design and Methods

The NSCAW II study design essentially mirrors that of NSCAW I. The NSCAW II cohort includes 5,873 children, aged birth to 17.5 years old, who had contact with the child welfare system within a 15-month period that began in February 2008. These children were sampled from investigations closed during the reference period.

These 5,873 children were selected from 81 of the original NSCAW 92 Primary Sampling Units (PSUs) in 83 counties nationwide that agreed to participate in NSCAW II. Retaining most of the NSCAW I PSUs will allow researchers to assess the change in context from the late 1990s, and enable longitudinal analysis of organizational measures such as staff turnover, climate, and work environment The sample of investigated/assessed cases includes both cases that receive ongoing services and cases that are not receiving services, either because they were not substantiated or because it was determined that services were not required.

This sample design—with oversampling of infants and children in out-of-home placement, and undersampling of cases not receiving services to ensure appropriate representation among subgroups—allows in-depth analysis of subgroups of special interest (e.g., young children, adolescents in foster care) while providing national estimates for the full population of children and families entering the system. Children in out-of-home placement are especially important to our analyses to examine the process and outcomes of early permanency planning. Infants are oversampled to ensure sufficient numbers of cases to assess the outcomes of child maltreatment and services, including out-of-home placements, on early childhood development.

Like NSCAW I, NSCAW II is a longitudinal study with multiple informants associated with each sampled child, to get the fullest possible depiction of that child. Face-to-face interviews or assessments were conducted with children, parents, and nonparent adult caregivers (e.g., foster caregivers, kin caregivers, group home caregivers), and investigative caseworkers. Baseline data collection began in March 2008 and was completed in September 2009. The overall weighted response rate at NSCAW II baseline was 55.8%. This response rate is lower than the 64.2% weighted response rate obtained for the NSCAW I baseline study. Various factors may have contributed to the response rate difference, including the 9-year interval between studies combined with higher rates of nonresponse observed for household surveys over time (Groves, 2006), increased state and county restrictions dictating access to sampled respondents, and the addition of "case expiration" criteria to tighten the length of time between close of investigation and interview completion among respondents in the cohort.

Data collection for the second wave of the study, 18 months after the close of the NSCAW II index investigation, began in October 2009 and was completed in January 2011. Additional rounds of follow-up data collection may be conducted, depending on the availability of resources in future years. Both children who remain in the system and those who leave the system will be followed for the full study period. Comparisons between NSCAW I and NSCAW II estimates

require statistical testing. Analyses for comparison purposes require a different set of weights; these will be released with the 18-month follow-up of NSCAW II (Wave 2).

The study design of NSCAW II has the following notable differences compared to NSCAW I:

- Although the same counties were approached for participation in NSCAW II, 76% of the NSCAW I counties agreed to continue. The most prevalent reason for not continuing was passage or new interpretation of legislation or policy that requires the child welfare agency to obtain the consent of clients before sharing their case information with research studies. Of the 14 NSCAW I counties that chose not to continue in NSCAW II, 12 were replaced with counties similar in agency characteristics, one could not be replaced (three replacement attempts were made), and one decided to refuse several months after the start of data collection and was not replaced. The study is operating in 81 counties in 30 states.
- The sample design includes only Child Protective Services (CPS) cases and there is no longer-term foster care sample component. The data from that component were not often used in analyses of NSCAW I.
- The sample is distributed to support only national estimates. The sample was not designed to support the calculation of state-level estimates for the states with the largest numbers of CPS cases because the NSCAW I data have rarely been used for state estimates.
- The allocation of the child sample to domains of analytic interest was updated to focus more on infants, children receiving services and children in out-of-home placement, thus eliminating sampling domains concerning abuse (e.g., sexual abuse).
- The upper bound of the eligible age range was extended from 14 to 17.5 years old because of increasing interest in adolescents and young adults in the child welfare system.
- Measures were reassessed based on feedback from analysts and on other studies with children completed in the intervening years. Several standardized child assessments were updated to the latest versions.
- The first follow-up is 18 months after the close of the index maltreatment investigation, as opposed to the 12-month telephone follow-up in NSCAW I.

Instrumentation

Before the launch of NSCAW II data collection, items and measures included in the first survey were reexamined in light of experience using the NSCAW I data and in updates to measures that had occurred since the original study began approximately 10 years earlier. Intensive discussions with ACF and the NSCAW II Consultant Group were held to: (1) identify modules or items that should be updated to reflect changes in policy or ACF priorities,

(2) identify modules or items that required modification because of issues identified via data analysis of variables and measures in the Wave 1–5 datasets, and (3) identify measures revised since the original instruments were programmed and, therefore, should be replaced with new editions.

The NSCAW II Data File User's Manual provides the complete set of items and measures included in each survey questionnaire. In brief, the following key modifications to the instruments were made:

- Additional interview items to better capture caregiver relationships to the child including the distinction between informal and formal kin care arrangements, both biological (e.g., grandmother) and functional (e.g., adoptive mother) relationships, and legal guardianship.
- Updated instrument versions including the Battelle Developmental Inventory, 2nd Edition (BDI-2; Newborg, 2005) to replace the BDI, and the revised Child Behavior Checklist (CBCL; Achenbach & Rescorla, 2000) items for children 1.5 to 5 years old (note that the original items were also retained to allow for comparability from NSCAW I-II).
- Additional items to better identify children with special health care needs, chronic health conditions, general health services received, and child insurance status.
- Addition of the Vineland Screener (Sparrow, Carter, & Cicchetti, 1993) Socialization subscale (to accompany the Daily Living subscale that was included in NSCAW I), as well as the expansion of the Vineland Screener age range to include children from 0 to 17 years old.
- Addition of the Brief Infant Toddler Social Emotional Assessment (BITSEA; Briggs-Gowan & Carter, 2002) screener to assess functioning in children 12 to 18 months old.
- Addition of several measures of adolescent functioning including deviant peer affiliation (Capaldi & Patterson, 1989), parental monitoring (Doyle & McCarty, 2000), work for pay, smoking, sexual activity, and the CRAFFT (Knight, Sherritt, Shrier, Harris, & Chang, 2002) to measure potential adolescent substance abuse.
- Exclusion of the Woodcock-Johnson III (WJ-III; Woodcock, McGrew, & Mather, 2001) Computation subscale. Administration of three WJ-III subscales to children under 11 years old (i.e., Letter-Word, Passage Comprehension, Applied Problems) and two subscales to children 11 years and older (i.e., Letter-Word, Applied Problems).
- Refinements to the measurement of child mental health service use to better capture service periods and the new collection of child psychotropic prescription medications taken at the time of interview.

- Improvements to the measurement of caregiver behavioral health including new measures to assess caregiver substance abuse (i.e., Alcohol Use Disorders Identification Test [AUDIT]; Babor, Higgins-Biddle, Saunders, & Monteiro, 2001) and the Drug Abuse Screening Test (DAST-20; Skinner, 1982); additional items to identify depression onset, chronicity, and treatment; revised behavioral health service items to better allow for national comparisons; and caregiver insurance status.
- Refinements to the risk assessment and alleged abuse items asked of investigative caseworkers.
- Refinements to Teacher Survey items asking about the child's special education needs and services.
- Revision of Local Agency Director Interview to address high item-level nonresponse, and to increase salience of items given policy and funding changes over the past 10 years.

Cohort Characteristics

Child Characteristics. Exhibit 1 gives an overview of key characteristics of children in the NSCAW II cohort. Approximately one half of the sample was male (50.8%). Nearly 30% of children (29.5%) were 11 to 17 years old, 27.4% were 6 to 10 years old, 22.6% were 3 to 5 years old, and 20.6% were 0 to 2 years old. Less than half (41.5%) were White, 28.3% were Hispanic, 22.4% were Black, and 7.7% described their race/ethnicity as "Other."

At the time of the baseline interview, the majority of children were living in-home with a parent (87.3%), while 8.5% were living with a kin caregiver. A kin caregiver may be a grandparent, aunt or uncle, sibling, or other relative; 6.1% were in an informal kin care arrangement and 2.4% were in formal kin care. A kin care living arrangement is considered formal if the caregiver reported receiving payments for being the child's foster parent. A smaller proportion of children were living in foster care (3.4%) and in group homes (0.5%).

Nearly three-quarters (72%) of children in the cohort were covered primarily by public health insurance (Medicaid and/or a State Children's Health Insurance Program [SCHIP]). Approximately 15% reported private insurance coverage, while 9.6% reported no health insurance.

Caregiver and Household Characteristics. Exhibit 2 provides an overview of the primary caregivers and households in the cohort. The majority of caregivers were female (90.7%). Over half of the caregivers were 30 to 49 years old (54.4%), with many fewer caregivers in the youngest and oldest age groups of 19 years old and under (1.5%) and 60 years and older (2.4%). Nearly one half of caregivers were White (48.5%), 24.8% were Hispanic, 20.2% were Black, and 6.5% described their race/ethnicity as "Other."

The majority of caregivers (44.9%) reported having a high school education, while 27.8% reported educational attainment beyond high school. Many caregivers (57.3%) reported living beneath the federal poverty level. Nearly one half of caregivers had full-time or part-time

employment (47.2%), while 17.7% reported being unemployed and looking for work. Approximately one third of caregivers reported being currently married (33.2%) or never married (32.2), respectively. Regardless of marital status, more than half of caregivers reported living with other adults in the home (70.6%). More than one fifth (23.4%) had four or more children living in the home.

Exhibit 2 also describes these characteristics by type of caregiver (in-home parent, informal kin caregiver, formal kin caregiver, and foster caregiver.) Pairwise comparisons were conducted to identify significant differences between foster caregivers (reference group) and all other caregiver types. Comparisons revealed significant differences for age, education, poverty level, employment status, marital status, number of children in the home, and number of adults in the home. For example, in-home parents were more likely to be young than foster caregivers. Additionally, in-home parents, as well as informal kin caregivers, were more likely to live below the federal poverty level than foster caregivers. All other caregiver types (i.e., in-home parents, informal kin, formal kin) were less likely to have a high school education than foster caregivers. Foster caregivers were more likely than other caregiver types to report having five or more children in the household. Significant differences are detailed in the exhibit footnotes.

EXHIBITS

Exhibit 1. Child Characteristics

		Total N = 5,873			
	N	%	SE		
Total	5,873	100.0	0.0		
Gender					
Male	3,017	50.8	1.4		
Female	2,856	49.2	1.4		
Age (years)					
0–2	2,937	20.6	1.0		
3–5	829	22.6	1.2		
6–10	1,053	27.4	0.9		
11–17	1,054	29.5	1.3		
Race/ethnicity					
Black	1,827	22.4	2.6		
White	2,004	41.5	3.9		
Hispanic	1,614	28.3	3.5		
Other	407	7.7	1.0		
Setting					
In-home	3,636	87.3	1.1		
Formal kin care	495	2.4	0.4		
Informal kin care	540	6.1	0.7		
Foster care	1,105	3.4	0.3		
Group home or residential program	68	0.5	0.1		
Other out of home ^a	29	0.3	0.1		
Insurance status ^b					
Private	549	15.3	1.5		
Public	4,834	72.0	1.8		
Other	130	3.1	0.7		
Uninsured	324	9.6	0.9		

Note: All analyses were on weighted NSCAW II baseline data; *Ns* are unweighted and, therefore, direct percentages cannot be calculated from the *Ns*. Reported *Ns* vary slightly across analyses because of missing data in some variable categories.

^a "Other out of home" includes situations where the primary caregiver was identified as "other nonrelative" and where the primary caregiver was not receiving foster parent payments.

b "Private" includes children who had any private insurance plan at the time of interview either obtained through an employer or purchased directly. "Public" includes children who did not have private coverage at the time of interview, but who had Medicaid and/or a State Children's Health Insurance Plan (SCHIP). "Other" includes children who did not have private insurance or Medicaid (or other public coverage) at the time of interview, but who have any other type of insurance, including coverage through a military health plan. "Uninsured" includes children not covered at the time of interview under private, public, or other insurance. "Uninsured" also includes children only covered through the Indian Health Service.

Exhibit 2. Caregiver and Household Characteristics

		Total N = 5,776		In-home parents n = 3,636		Informal kin caregivers $n = 540$		Formal kin caregivers n = 495		Foster caregivers n = 1,105	
Caregiver Characteristic	N	%	SE	%	SE	%	SE	%	SE	%	SE
Total	5,776	100	0	87.9	1.0	6.2	0.8	2.4	0.4	3.5	0.3
Gender											
Male	461	9.3	0.8	9.2	0.8	11.5	3.5	8.7	2.7	7.0	1.5
Female	5,291	90.7	0.8	90.8	0.8	88.5	3.5	91.3	2.7	93.0	1.5
Age (years)***											
19 and under	200	1.5	0.3	1.7^{a}	0.3	0.1	0.0	0.0	0.0	0.0	0.0
20–29	1,795	36.0	1.4	39.9	1.6	6.0	2.1	7.6	2.3	8.2	3.4
30–49	2,828	54.4	1.4	55.6	1.6	39.6 ^b	4.3	48.5	6.5	53.0	4.4
50–59	609	5.7	0.5	2.4	0.4	31.2	2.9	31.8	6.3	27.4°	3.5
60 and older	297	2.4	0.4	0.4	0.1	23.1	4.1	12.1	2.7	11.4	3.1
Race/ethnicity											
Black	1,623	20.2	2.7	19.8	2.7	20.6	4.0	27.4	6.2	25.0	5.0
White	2,490	48.5	3.9	48.0	4.0	57.1	6.0	39.6	7.8	51.2	5.0
Hispanic	1,294	24.8	3.2	25.4	3.3	19.7	5.4	27.6	9.8	19.0	3.8
Other	333	6.5	0.9	6.8	1.0	2.6	1.2	5.5	1.9	2.6	1.2
Education***											
Less than high school	1,383	27.3	1.7	28.5^{d}	1.7	24.1 ^e	5.1	17.4^{f}	3.8	10.0	2.8
High school	2,469	44.9	1.8	44.8	1.9	45.2	6.8	46.4	6.5	44.8	4.3
More than high school	1,892	27.8	1.5	26.7	1.6	30.7	3.5	36.3	5.5	45.2^{g}	3.9
Percentage of federal poverty level***											
<50	1,189	24.7	1.6	26.7^{h}	1.7	13.7^{i}	2.7	5.6	1.8	5.2	1.3
50–99	1,442	32.6	1.3	33.7	1.3	28.6	4.5	27.9	7.4	13.2	3.3
100–200	1,416	25.7	1.3	24.8	1.3	27.1	5.3	39.1	8.1	39.4	4.7
>200	1,253	17.0	1.3	14.9	1.4	30.6	5.6	27.4	5.0	42.3^{j}	4.1

(continued)

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Exhibit 2. Caregiver and Household Characteristics (continued)

		Total N = 5,776		In-home parents <i>n</i> = 3,636		Informal kin caregivers $n=540$		Formal kin caregivers $n = 495$		Foster caregivers n = 1,105	
Caregiver Characteristic	N	%	SE	%	SE	%	SE	%	SE	%	SE
Employment status***											
Work, full time	1,816	32.2	1.5	31.8	1.6	34.9	5.0	35.3	6.9	36.5	3.2
Work, part time	863	15.0	1.0	15.2	1.0	12.5	2.3	9.7	3.1	16.3	3.1
Unemployed, looking for work	957	17.7	0.9	19.4^{k}	1.0	6.7^{1}	2.6	4.9	1.9	2.0	0.5
Does not work	1,913	32.5	1.5	31.1	1.6	42.9	4.8	45.8	6.8	40.1	4.4
Other	198	2.6	0.6	2.5	0.7	3.0	1.7	4.4	2.3	5.1	1.4
Marital status***											
Married	2.018	33.2	2.0	30.5	2.1	48.5	5.0	52.1	6.9	63.5 ^m	4.5
Separated	567	13.2	1.1	14.1	1.2	8.9 ⁿ	2.4	5.6	1.5	3.5	1.1
Divorced	913	18.8	1.1	18.5	1.2	23.2	3.2	19.4	5.3	16.8	3.9
Widowed	168	2.6	0.5	1.8	0.5	10.9	2.6	6.5	1.9	5.5	2.6
Never married	2,077	32.2	2.0	35.1°	2.1	8.5	2.4	16.5	3.1	10.7	1.8
Number of children in-home***											
1	1,848	29.8	2.5	29.4	2.5	43.2	5.1	24.9	5.0	19.4	2.8
2	1,303	24.4	1.6	25.2	1.7	21.0	4.0	17.5	3.7	14.7	2.1
3	1,142	22.4	1.3	22.4	1.4	21.0	4.4	34.8	7.9	15.9	1.9
4	720	11.8	11.6	11.8	1.1	4.5	1.3	13.8	4.7	23.9 ^p	3.8
5 or more	739	11.6	1.2	11.3	1.3	10.2	3.1	8.9	2.5	26.0^{q}	3.7
Number of adults in-home***											
1	1,653	29.4	1.8	30.9^{r}	2.0	16.6	2.8	19.6	4.2	20.0	3.2
2	2,758	46.5	1.6	46.5	1.7	35.0	3.6	60.0	5.7	58.7 ^s	3.9
3	911	16.3	1.3	15.2	1.4	32.8	5.5	12.4	2.6	18.1	2.7
4 or more	430	7.8	0.9	7.4	0.9	15.7 ^t	4.2	8.0^{u}	2.8	3.3	0.8

Note: All analyses were on weighted NSCAW II baseline data; Ns are unweighted and, therefore, direct percentages cannot be calculated by hand. Reported Ns vary slightly across analyses because of missing data in some variable categories. Pearson χ^2 tests for cluster samples were used for significance tests. Asterisks indicate statistical significance (***p < .001) for the covariate. Follow-up pairwise tests were limited to comparisons of foster caregivers to in-home parents, informal kin caregivers, and formal kin caregivers.

- ^a In-home parents were significantly more likely to be 19 years old and younger or 20 to 29 years old than foster caregivers who were more likely to be 30 years old or older (p < .001).
- ^b Informal kin caregivers were significantly more likely to be 60 years old and older than to be 30 to 49 years old when compared to foster caregivers (p < .05).
- ^c Foster caregivers were significantly more likely to be 50 to 59 or 60 years old and older than to be 30 to 49 years old when compared to in-home parents (*p* < . 01).
- ^d In-home parents were significantly more likely to have less than a high school education than to have a high school education (p < .05) or more than a high school education (p < .01) when compared to foster caregivers.
- ^e Informal kin caregivers were significantly more likely to have less than a high school education than to have more than a high school education (p < .01) when compared to foster caregivers.
- ^f Formal kin caregivers were significantly more likely to have less than a high school education than to have more than a high school education (p < .01) when compared to foster caregivers.
- ^g Foster caregivers were significantly more likely to have more than a high school education than to have a high school education (p < .01) when compared to inhome parents.
- ^h In-home parents were significantly more likely to have incomes below the poverty level than incomes at or above the poverty level (p < .001) when compared to foster caregivers.
- ⁱ Informal kin caregivers were significantly more likely to have incomes below the poverty level than incomes at or above the poverty level (p < .01) when compared to foster caregivers.
- ^j Foster caregivers were significantly more likely to have incomes >200% of the federal poverty level than to have incomes at 50–99% of the poverty level (p < .05) when compared to formal kin caregivers or at 100–200% of the poverty level (p < .05) and when compared to in-home parents.
- ^k In-home parents were significantly more likely to be unemployed than to work full time (p < .001), part time (p < .001), not work by choice (p < .001), or have "Other" employment status (p < .01) when compared to foster caregivers.
- ¹ Informal kin caregivers were significantly more likely to be unemployed than to report "Other" employment status (p < .05) when compared to foster caregivers.
- ^m Foster caregivers were significantly more likely to be married than to be separated, divorced, or never married (p < .001) when compared to in-home parents.
- ⁿ Informal kin caregivers were significantly more likely to be separated than to be married or never married (p < .05) when compared to foster caregivers.
- $^{\circ}$ In-home parents were significantly more likely to have never married or to be separated than to be divorced (p < .05) when compared to foster caregivers.
- ^p Foster caregivers were more likely to have four children in the household than to have one (p < .01), two (p < .001) or three children (p < .05) in the household when compared to in-home parents, and informal kin caregivers.
- ^q Foster caregivers were significantly more likely to have five or more children in the household than to have one (p < .001), two (p < .001), or three (p < .01) children when compared to in-home parents, informal kin caregivers, and formal kin caregivers.
- ^r In-home parents were more likely to have one adult in the household or four or more adults in the household, than to have two adults (p < .01) or three adults (p < .05) when compared to foster caregivers.
- ^s Foster caregivers were significantly more likely to have two adults in the household than to have three adults (p < .001) when compared to informal kin caregivers.

^t Informal kin caregivers were significantly more likely to have four or more adults in the household than to have one or two adults (p < .001) when compared to foster caregivers.

^u Formal kin caregivers were significantly more likely to have four or more adults in the household than to have three adults (p < .05) when compared to foster caregivers.

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APPENDIX

Derived Variables. Following is a descriptive list of the variables derived for the NSCAW II Introduction baseline report.

- Child Insurance Status. Child insurance status includes four types: private, public, other, and uninsured. Private includes children who have any private insurance plan obtained through an employer or purchased directly. Public includes children covered by Medicaid or any other state-sponsored programs. Other includes children who do not have private insurance or Medicaid (or other public coverage), but who have any other type of insurance, including coverage through a military health plan. Uninsured includes children who were not covered at the time of interview under private, public, or other insurance. This category also includes children only covered through the Indian Health Service.
- Federal Poverty Level. The percentage of federal poverty level variable examines caregiver household income in the context of the 2009 Department of Health and Human Services poverty level guidelines. Household income represents the caregiver's self-reported combined income of all family members from all sources in the previous 12 months. Combined household income was collected directly from the caregiver or computed by examining the income ranges endorsed by the caregiver (e.g., more than \$40,000, but less than \$45,000 resulted in an estimated income of \$42,500). To calculate poverty level, this household income figure was then divided by the total number of household members dependent on that income. Four categories of federal poverty level were created: <50%, 50–99%, 100–199%, and >200%.
- Setting. The setting variable includes six levels: in-home, formal kin care, informal kin care, foster care, group home/residential program, or other out of home. In-home caregivers include living situations where the primary caregiver is either a biological, adoptive, or stepmother/father. Formal kin care includes situations where the primary caregiver has a kin relationship to the child and where the caregiver is receiving payments from the Child Welfare System. Informal kin care indicates that the primary caregiver has a kin relationship to the child, but is not receiving payments from the Child Welfare System. Foster care indicates that the child primary caregiver was identified as a foster parent. Group home/residential program indicates that a child was currently living in a group home or residential facility. Other out of home includes situations where the primary caregiver was identified as "other nonrelative" and where the primary caregiver was not receiving foster parent payments.