**Theoretical Framework: Brief Overview of Theories**

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| **Theory** | **How it explains maltreatment** | **Implications for child welfare practice** |
| **ORIENTING THEORIES** | | |
| **Conflict Theories** | Explains why families, particularly those who are poor, minority, or over-represented in child welfare struggle as a result of historical and present oppression and traumatization. | Stresses the importance of   1. Empathy and compassion for families 2. Infusion of culturally sensitive engagement strategies and tools that include extended family and community 3. Advocacy |
| **Humanistic Theory (e.g. Maslow’s Hierarchy of Needs)** | Explains that parents who do not have their own physiological, safety or belonging needs met have a difficult time meeting these needs in their children. Further explains that parents who did not receive unconditional positive regard from their own families may have difficulty giving that to their children. | Stresses the importance of   1. Meeting the primary needs of children and families before assisting them in higher level of needs 2. Honoring self -determination and seeing people as experts in own lives, joining with them with respect, genuineness, empathy so they can be their best selves 3. Building on strengths, tracking solutions, reinforcing times the problem is absent, and celebrating small changes 4. Using person-centered, strength-based, solution-focused practices such as motivational interviewing |
| **BIO/DEVELOPMENTAL THEORIES** | | |
| **Family Life Cycle Theory** | Explains that the task of parenting is complex, challenging and difficult for all families who struggle from time to time- especially with certain aspects of family life. | Stresses the importance of   1. Normalizing issues in the context of everyday life events 2. Understanding that maltreatment is often focused on key milestones and transitions 3. Recognizing that maltreatment can be multigenerational |
| **Trauma Theory** | Explains that being traumatized can create the context for neglect or harsher punishment of children. Child maltreatment is a traumatic event for a child. Trauma is both a cause and an effect of child maltreatment. Stress/traumatic events affect brain and coping but are mediated by protective and risk factors | Stresses the importance of   1. Empathy 2. Preventing re-traumatization through trauma-informed interactions 3. Identifying risk and protective factors, using natural supports and resources to surround family 4. Intervening with evidence-based practices focused on trauma |
| **Attachment Theory** | Focuses on the nature and impact of child maltreatment and how to intervene (not why child maltreatment occurs). Stresses that children need consistent nurturance and protection. | Stresses the importance of   1. Engaging parents and other family to keep families together 2. Potential harm to children through removal and placement 3. Working to minimize disruptions in attachment 4. Placing children in situations that allow them to have healthy attachment |
| **INTERVENTION THEORIES** | | |
| **Behaviorism**  **Social Learning Theory**  **tied with Cognitive Processes** | Maltreatment is a result of parents’ own conditioning and social learning.  Cognitive distortions and emotions can exacerbate the problem. | Stresses the importance of   1. Bringing focus to the sequence of events that lead to maltreatment so it can be avoided and we can interrupt the pattern and reinforce new behaviors to prevent relapse. 2. Understanding and addressing triggers. 3. Using of Cognitive Behavioral Therapy, Cognitive Behavioral Family Therapy, Relapse Prevention, empowerment and other strategies to interrupt the cycle. |

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| **CASE APPLICATION** |
| Consider the case of Victoria Nunez, a 20 year old mother who has been reported to child welfare by concerned family members. The family reports that Victoria has been neglectful in that she allowed someone around her two year old son Bryton who purposefully burned him with a cigarette. The family also noted that Victoria had a previous child who died as a result of SIDS three years ago. Since the death of her first child, Victoria became involved with a bad crowd and started abusing alcohol and drugs. Victoria is Latina and lives in the Central Valley.  Let’s first apply the ***Bio-Developmental theories*** to Victoria’s situation and see how they inform our thinking.  ***Family life cycle theory*** applies in that at 20 years old, Victoria is a young parent who is parenting a toddler who is going through a challenging developmental stage. Parenting a toddler is challenging under any circumstances, but a young single mother who is still completing her own brain development may have limited coping strategies to use and limited understanding of Bryton’s developmental needs. It is a developmentally challenging time for them both.  ***Contemporary trauma theory*** leads us to consider the importance of the infant death Victoria experienced. She was very traumatized and is still reeling from this event. She really deteriorated after her baby died and has been using drugs and alcohol to self-medicate in reaction to the trauma of losing her baby.    ***Attachment theory*** informs our thinking in that we recognize the impact of her drug and alcohol abuse on Bryton. She is numbing herself from her own pain, but the result of this is that she is not there for Bryton. This lack of attachment may also be related to her withdrawing herself from Bryton to protect herself from future grief and pain if something should happen to him.  These ***Bio-Developmental theories*** help us understand Victoria in terms of what is happening in her life and how that contributes to the neglect of Bryton.  The ***Orientation theories*** provide further perspective on the situation.  ***Conflict theory*** helps us recognize that Victoria’s ability to trust in the system, access resources and reach out for help is affected by the experience of her family being Latino and poor. Her ability to trust in the system is compromised. Poverty issues affect her ability to get the resources she needs during this challenging time in her child’s development. It is hard for her to see past the circumstances she finds herself in and this shapes her ability to reach out and access services.  ***Humanistic theory*** leads us to consider Maslow’s hierarchy of needs and where Victoria is in the hierarchy of human needs. We can see that she is expending all her energy on meeting the very basic needs of food and shelter. It is a struggle for her to get past basic needs and address the trauma she experienced so she can begin recovery. This shapes our lens and helps us identify that we need to start our interventions with helping ensure basic needs are met.  ***The Orientation theories*** help us respond to Victoria with understanding and compassion as we consider how this two person family is functioning within the system of conflict and trauma. These theories inform the approach we take with the family as we reach out with respect, dignity and empathy.  The ***Intervention theories*** inform oureffort to engage Victoria in very specific trauma-focused, cognitive behavioral, evidence-based interventions for a young mother struggling with grief and loss, substance abuse, and poverty. These theories help us identify the value of solution-focused interviewing and strength-based services to help Victoria address her grief and despair while simultaneously understanding the circumstances that led to the abuse of Bryton so that Victoria can be aware of how to protect Bryton in the future. |