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Comparing the Effects of Judicial Versus Child Protective Service Relationships on Parental Attitudes in the Juvenile Dependency Process

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This pilot study examined the attitudes of parents in the child dependency process to determine whether their perceptions of fairness, trustworthiness, and satisfaction with the juvenile dependency system differed across types of relationships: relationships with judges or child protective service (CPS) workers. Method: The study relied on a convenience sample of (N = 40) parents who were administered structured interviews with Likert-type items after being in relationships with the authorities for 6 months. Results: The findings supported the study's hypotheses about the nature of the relationships in the family drug court process and the relative contributions of relational versus self-interest factors in explaining variations in parental attitudes. Discussion and Applications to Practice: The implications of the study's findings were examined regarding the roles played by CPS case managers in improving compliance with substance abuse treatment in the dependency process.

Keywords: family drug courts; procedural justice; child dependency; substance-abusing parents

The family drug court (FDC) approach is a procedural innovation in child welfare that is used in many jurisdictions to address parental alcohol and other drug abuse problems (Ashford, 2004; Young, 2003; Young, Gardner, & Dennis, 1998). A national survey of professionals employed in child welfare found that nearly 80% of the respondents said that "substance abuse causes or exacerbates most cases of child abuse that they face" (National Center on Addiction and Substance Abuse [CASA], 1999, p. ii). Other anecdotal evidence suggests that more than 90% of cases in our dependency courts involve parents using alcohol and/or other drugs (Children and Family Futures, 2000). Yet most jurisdictions did not meet their legal obligation to make a reasonable effort at providing treatment for these parents prior to the emer-

gence of the FDC movement (CASA, 1999; Edwards, 2003; McGee, 1997).

The first FDC was started in 1994 by Judge Charles McGee in response to the rising numbers of parents with substance abuse problems entering his dependency court system. Between 1991 and 1994, Judge McGee observed a marked increase in the percentage of cases caused by substance abuse in his community's abuse and neglect petitions—from 66% in 1991 to 97% in 1994. Other jurisdictions were witnessing comparable increases (CASA, 1999). In response to this problem, Judge McGee established a court that used weekly appearances by parents to review the progress of their case. This judicial case management intervention was similar to the approach employed in criminal drug courts. Parents in Judge McGee's court were subject to special sanctions for non-compliance with treatment, including possible jail time. Judge McGee's program targeted not only parents who were cited for maltreatment but also parents who were facing criminal charges for drug possession (McGee, 1997).

Many other jurisdictions began exploring the use of FDCs after the passage of the Adoption and Safe Families Act (ASFA) of 1997 (P.L. 105-89). ASFA (1997) introduced changes in time lines for permanency decisions from 18 months to 12 months. These changes in policy can be "an insurmountable barrier for addicted parents unable to enter treatment due to waiting lists, or for parents in treatment who relapse" (National Drug Court Institute, 1999,

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p. 1). As of November 2003, 31 states had implemented some form of FDC to respond to these concerns (Office of Justice Programs Drug Court Clearinghouse and Technical Assistance Project, 2003). FDCs provide timely and coordinated access to treatment and other relevant support services for families involved in the dependency process, not previously available in the traditional dependency process (Lovato & Mack, 2003).

Although many jurisdictions have created FDCs, the elements required to validly implement this approach have been subjected to minimal empirical scrutiny (Ashford, 2004). A key assumption in most FDCs is that compliance with court orders for substance abuse treatment will increase because parents have to appear weekly before a judge (Edwards, 2003). Indeed, judicial oversight is seen as a key factor in enhancing treatment compliance. The role of judges in FDCs differs from ordinary courts of law. In these therapeutic courts, judges serve as case managers—a role not considered by some critics as a traditional judicial function (Edwards, 2003; Winick & Wexler, 2003). For this reason, some concerns have been raised in legal and child welfare circles about whether judges are properly trained to perform this type of therapeutic function (CASA, 1999). Why do we assume that they can do a better job of motivating clients to comply with required treatment services than trained social workers who can also manipulate judicial authority in motivating their clients? Similar questions have also been raised regarding probation officers who are responsible for supervising substance-abusing offenders in the community. In other words, why do we assume that the judge will be more effective than professionals with more training in providing social services in motivating clients to comply with substance abuse treatment?

Compliance with the wishes of authorities is a longstanding subject of scientific inquiry in the field of social psychology. There are competing models in this field of study that guide research on investigations of compliance: self-interest (rational choice) models and social or relational models (Tyler, 1998; Tyler & Blader, 2000). The self-interest models assume that individuals are motivated by the perceived outcomes or benefits of complying with the request of the authorities.

This model argues that people are motivated to maximize their personal gains and minimize their personal losses in social interactions (i.e., by self-interest) and react to other individuals, organizations, authorities and rules from a self-interested, instrumental perspective. (Tyler & Kramer, 1996, p. 1)

However, Tyler (1998) developed a social or relational theory of why people cooperate with authorities. His theory contends that relational or social measures of justice

and trust are more predictive than self-interest measures when relationships between people and authorities are central (Ashford & Holschuh, 2006). One widely espoused explanation for the success of FDCs is “the motivating effects of the personal interest of the judge” (Harrell, 2003, p. 211). Yet there are no studies that have examined any of the dimensions of the relationships between judges and parents that could explain the positive outcomes observed in many of the already studied FDC programs (see Belenko, 2001; Young, 2003).

Studies of the FDC model in the criminal justice process have shown that participants in FDC programs have better outcomes than participants who receive traditional oversight by a probation officer (Belenko, 2001). Young (2003) also found similar results in her retrospective cross-site evaluation of FDCs—the FDCs were more effective than the standard approaches to services in engaging parents in substance abuse treatment. Because of these promising outcomes, we need more information about how different types of relationships influence the responses of parents to various authorities involved in the dependency court process.

The purpose of the current study was to interview parents in the child dependency process to determine whether fairness, trustworthiness, and satisfaction with the juvenile court process differed across types of relationships: judicial versus traditional child protective service (CPS) relationships. Perceptions of fairness and trustworthiness are recognized variables in the social psychology literature for motivating compliance with various types of court orders, including compliance with substance abuse treatment in the dependency process (Ashford & Faith, 2004; Beck & Sales, 2001; Tyler & Blader, 2000). Satisfaction is also considered an important intermediary outcome for explaining compliance in legal decision-making processes because satisfaction is an attitude that can influence how people react to the orders of legal authorities (Beck & Sales, 2001; Brockner & Siegel, 1996; Tyler & Blader, 2000). Satisfaction has been widely studied in examining the effectiveness of alternative dispute resolution processes in divorce, custody, and other family court-related matters (Beck & Sales, 2001). This outcome is also gaining the attention of researchers in studies of mental health interventions (Awad, 1999, 2004). Parents in the dependency process must adhere to service plans to effect the child’s return to the home (Azar & Benjet, 1994; Jellinek et al., 1992). For this reason, satisfaction is considered an important outcome in this process because it helps child welfare authorities achieve voluntary compliance with the treatment requirements in the parent’s service plan (Ashford & Faith, 2004). Namely, if people are satisfied with the

legal procedures and perceive the decision maker as fair and trustworthy, then they are more likely to comply with the orders of these court authorities (Tyler, 1998). Although this assumption has been proven in many legal contexts, this reasoning about issues of fairness, trust, and satisfaction have not been extended to investigations of therapeutic courts as a possible explanation for why these courts are more effective in retaining individuals in treatment than traditional supervisory models involving either probation officers or social workers.

In the current study, we hypothesized that relationships with judges and case managers would account for more of the explained variance in our dependent measures (relational justice, trustworthiness, and satisfaction), than the self-interest benefits obtained from the successful completion of any type of substance abuse treatment. This hypothesis is derived from social or relational models of justice and trust. This model assumes that when relationships are central that relational variables will account for more of the variance than will instrumental or self-interest variables.

Many social service programs in child welfare assume that parents will be motivated to complete treatment because of the instrumental benefits obtained from the successful completion of substance abuse treatment (Brockner & Siegel, 1996). However, we do not know the relative contributions of instrumental and relational variables in predicting responses to authorities in the child dependency process. Namely, do relational or instrumental considerations account for more of the variation in attitudes of parents in the juvenile dependency process? Inasmuch as FDCs are better at engaging and retaining parents in treatment (Ashford, 2004; Young, 2003; Ashford & Holschuh, 2006), we also hypothesized that judicial rather than CPS relationships would account for most of the relational contributions to variation in parental perceptions of fairness, trustworthiness, and satisfaction with the juvenile dependency court system.

METHOD

Sample

The current pilot study was based on data obtained from a convenience sample of ($n = 21$) FDC participants and ($n = 19$) treatment-as-usual (TAU) participants. We had to employ a convenience sample because many of the FDC participants and the TAU participants lacked telephones and were difficult to track in the community. This convenience sample consisted of persons we were able to locate from an original pool of participants

sampled to evaluate the effectiveness of the Pima County Family Drug Court intervention (see Ashford, 2004). Because the current study was testing theoretical hypotheses rather than evaluating a specific intervention, we were less concerned about not including all of the participants from the original research study.

The FDC participants consisted of all persons volunteering to participate in the FDC from a specified zip code area in Pima County, Arizona. This zip code area was chosen because it had a high percentage of drug-involved CPS referrals. Two additional zip code areas in Pima County were selected to establish the TAU group. These two zip code areas had similar demographics and CPS patterns of referrals as the zip code area chosen for the FDC group. Participants in the standard services group or TAU group attended the traditional dependency court (had no involvement with the FDC) and received the standard dependency services offered by the child welfare system. FDC participants attended court reviews every week until they demonstrated sufficient progress in the program. The program had three levels: weekly attendance on Level 1, biweekly attendance on Level 2, and monthly attendance on Level 3. FDC cases were staffed by the judge on the days that they were to appear in court (see Ashford, 2004). The FDC judge led the staffing and discussed with the parent in court how his or her case was progressing. Parents in the TAU group had CPS case workers but did not attend the FDC. In this intervention, the CPS worker is expected to maintain contact with parents at a minimum of once a month. We obtained our sample from these two groups of participants.

Parents in the FDC group and the TAU group were administered a survey instrument if they received services for at least 6 months in duration. This time period allowed for the participants to be exposed to a sufficient dosage to allow for the establishment of relationships between the judge or the CPS case workers. Namely, the aim of the current study was to assess whether there were differences in the fairness and trust perceptions of parents toward judges and CPS case workers. We chose 6 months to assess the effects of relationships on parental attitudes because research on therapeutic alliances have shown that for psychotic and resistant clients that it often takes longer to establish therapeutic-oriented relationships (Howgego, Yellowlees, Owen, Meldrum, & Dark, 2003).

Participants

Data systematically captured in the child welfare and court information systems were used to describe the study participants. The participants were predominately female (78%), about age 30 years, with a CPS report type of

neglect (62%), an average of slightly above one risk factor in their initial case assessment files ($M = 1.15$), and very few protective factors ($M = .40$). These participants were compared on eight variables: gender, age, ethnicity (minority or nonminority group status), average number of children, previous court history (reactivated, supplemental, or new case), initial CPS allegation type (neglect, physical abuse, or sexual abuse), sum of risk factors, and sum of protective factors. For these descriptive variables, there were two variables that achieved statistical significance: minority/nonminority ethnic status ($F = .32, p = .04$) and sum of protective factors ($F = 8.8, p = .01$). Because of these group differences, these two variables were initially included as covariates in subsequent data analyses but were eventually eliminated because they were not statistically significant across the study's dependent measures when we computed a Palli's Trace test (as recommended by Cramer, 2003) to reduce the commitment of Type I errors in multivariate analyses.

Measures

Each participant was administered a survey instrument with 23 Likert-type items derived from previously researched items of justice, trust, and satisfaction (Ashford & Faith, 2004; Brockner & Siegel, 1996; Deutsch, 1985; Lind & Tyler, 1988; Thibaut & Walker, 1975; Tyler, 1989; Tyler & Degoey, 1996). An interviewer administered the instrument to the participants at either the court or at the parent's CPS office. The participants from each of the groups responded to each item using one of two Likert-type scales (5 = *strongly agree* to 1 = *strongly disagree* or *always* = 4 to *seldom/never* = 1).

Dependent Variables

Thibaut and Walker (1975) found in their early research on procedural justice that structural considerations provided independent explanations of variation in justice from distributive measures of justice. In their conceptualization of *procedural justice*, it is assumed that humans seek to maximize their outcomes in decision-making situations by authorities by substituting their direct control over the outcomes with a form of indirect control over how evidence is presented in dispute processes. Structural items include: "I get an opportunity to express my point of view before the (drug court judge/CPS caseworker) will make a decision" and "I believe that I no longer have any say in what happens to me and my family." However, Lind and Tyler (1988) expanded on our understanding of procedural justice by specifying what they have termed *relational* or *social*

contributions to justice based on how people perceive they are being treated by authorities in terms of principles of respect, neutrality, or their social standing. Our instrument included mostly relational items: "The (drug court judge/CPS caseworker) respected my rights when making decisions about my case; the (drug court judge/CPS caseworker) takes very seriously my personal concerns; the (drug court judge/CPS case worker) takes into account my needs when making a decision; and how often does the (drug court judge/CPS worker make decisions based on the facts and not personal biases."

Favorable outcomes are recognized in the social psychology literature on justice as key measures of self-interest. We included two items in our survey that measured favorable outcomes: "For me, (drug court/my CPS case plan) is the best of all my options for remaining free of alcohol and other drugs"; I am getting what I wanted from my involvement with (drug court/my CPS case worker)." Items that focused on the fairness of the actual decisions made by the authorities were considered measures of distributive justice, for example, the (drug court judge's/CPS caseworker's) decisions about my case have been fair; How often does the (drug court judge/CPS case worker) make decisions in fair ways (always to never).

The survey instrument also included items measuring various dimensions of instrumental and relational trust. The instrumental model of trust focuses on subjective expectations about the risks of receiving rewards or positive outcomes from interactions with authorities (Tyler & Degoey, 1996). Our instrumental items included: I will get my child/children back if I do what the (drug court judge/CPS caseworker) is asking me to do and "How often does the drug court judge/CPS caseworker follow through on the promises that he or she makes" (*always* = 4 to *seldom/never* = 1). This item assesses the risks of promises being fulfilled.

Relational dimensions of trust focus instead on the motivation or intent of the authority to act in a trustworthy fashion (Tyler, 1998; Tyler & Blader, 2000). For this reason, we included the item "The Family Drug Court Judge/CPS worker is only interested in knowing when I do something wrong." The survey instrument also took into account trust based on ability. Inasmuch as the ability and the intent to be trustworthy overlap, Brockner and Siegel (1996) recommend that research on issues of trust should include measures of ability trust in addition to relational trust, for example, "I don't think the drug court judge/CPS caseworker has the power to really help me."

Satisfaction is a major outcome affecting the motivation of parents in responding to the demands of the juvenile dependency system. Our survey instrument included several items measuring satisfaction with the juvenile

dependency system: "I am satisfied with how I am being treated by the juvenile dependency system," "The Juvenile Dependency System is doing a good job protecting the welfare of children," and "I enjoy describing my involvement with (the drug court/my CPS case plan with my friends and family.)"

Independent Variables

Because we are interested in assessing the effects of judicial versus CPS relationships on our three dependent measures, a key independent variable is the relationships variable: (0) judicial case manager from the FDC; (1) the social work CPS case manager from the child welfare system. Besides our relationships variable, we computed an interaction variable that controlled for the potential within-group error variance caused by initial differences between the case management groups on our minority measure. Namely, we computed a variable examining the interaction between the relationship variable and our minority/nonminority measure.

We also included two covariates: (a) the variable measuring the sum of protective factors that differed between the two groups and (b) a variable measuring the successful completion of any type of drug treatment. The sum of protective factors is the information gathered for the long-term plans developed by CPS workers when establishing the initial case plan. The other covariate is our instrumental measure of whether individuals successfully completed drug treatment while in the juvenile dependency process. This variable is deemed our instrumental variable because the successful completion of treatment is an instrumental benefit that offers an alternative explanation for parental satisfaction with the juvenile dependency system from our relationship variable. We also developed interaction terms for these variables that included our relationship variable (judicial vs. CPS case management).

Statistical Analysis

The goal of the current study is to determine if there are mean differences on multiple dependent measures, while controlling for the instrumental variable measuring the successful completion of substance abuse treatment by parents participating in the dependency process. We employed a multiple-measures design of MANCOVA because we were interested in examining the differences in more than one dependent or criterion variable (Bryman & Cramer, 2001). This procedure is also preferable because it helps reduce the probability of committing Type I errors. Namely, we did not want to perform multiple comparisons

using other multivariate techniques that required independent comparisons across our three dependent variables (e.g., logistic regression analysis). To overcome these risks for Type I errors, Cramer (2003) recommended using a multiple-measures design of MANCOVA. This procedure also allows for an examination of the relative influence of the study's independent variables by examining the results of the partial η^2 statistics.

As part of the SPSS Release 11.5 program for Windows (SPSS, 2002), Pillai's Trace tests are computed in the multiple-measures procedure of MANCOVA to assess the relations between the covariates and the three dependent measures. This procedure is integrated into the program because it is designed to reduce the number of statistical comparisons in studies. This multivariate procedure also computes Box's M, Levene's Tests, and Bartlett's Test of Sphericity. We computed these statistical tests to determine whether we could proceed with our multiple-measures design of MANCOVA without violating key statistical assumptions.

We also employed principal component factor analysis in the current pilot study as an initial data reduction method for examining the 23 items from the survey instrument administered to the current study's parents. We are able to perform this type of factor analysis because the number of items in our instrument did not exceed the number of participants (Gorsuch, 1983). Inasmuch as principal component factor analysis can establish relationships among the variables examined in this exploratory study, it is important to note that the small sample size does introduce a risk in our confidence that these same factors will not emerge in other samples.

RESULTS

Measurement Findings

The results of our initial principal component factor analysis called for the elimination of nine items because of the presence of communalities of less than .2 (see Gorsuch, 1983). When we reanalyzed the remaining 14 items, we employed the scree test to identify our final factor solution that accounted for 70% of the variance. Then, we used this three-factor solution to construct three indices (or scales) that represented the dependent variables used in the current study. Alphas computed for each of these factors are displayed in Table 1.

The first factor accounted for 51% of the variance and was labeled the relational fairness/justice factor based on the two items with the highest factor loadings. We defined our first factor as our *relational fairness measure* because

TABLE 1: Attitude Scales

Relational Fairness: alpha = .9133

Items:

- The (drug court judge/CPS caseworker) respected my rights when making decisions about my case.
- The (drug court judge/CPS caseworker) takes very seriously my personal concerns.
- The (judge/CPS caseworker) decisions about my case have been fair.
- The (drug court judge/CPS caseworker) takes into account my needs when making a decision.
- I get an opportunity to express my point of view before the (drug court judge/CPS caseworker) will make a decision.
- The (drug court judge/CPS caseworker) is only interested in knowing when I do something wrong.
- I am getting what I wanted from my involvement with my (drug court judge/CPS worker).
- I don't think (the drug court judge/CPS worker) has the power to really help me.

Trust: alpha = .8116

Items:

- How often does the (drug court judge/CPS caseworker) follow through on the promises that he or she makes?
- How often does the (drug court judge/CPS caseworker) make decision based on facts and not personal biases?
- How often does the (drug court judge/CPS caseworker) make decision in fair ways?

Satisfaction with the juvenile dependency court system: alpha = .7633.

Items:

- I am satisfied by how I am being treated by the juvenile court system.
- I wish I could change my drug court judge/CPS caseworker.
- I believe that I no longer have any say in what happens to me and my family.
- The juvenile court system is doing a good job protecting the welfare of children.
- I enjoy describing my involvement with (the drug court/my CPS case plan) with my friends and family.

NOTE: CPS = child protective service.

this factor was defined by items measuring perceived respect, and other social standing concerns. These items are consistent with social or relational models of procedural justice developed by Lind and Tyler (1988). Namely, when people are treated with respect, it conveys information about the person's status in the situation. Our second factor accounted for 11% of the variance and was labeled our *trust* measure because the item with the highest loading was the instrumental trust variable, "How often does the (drug court judge/CPS caseworker) follow through on the promises that he/she makes." Instrumental conceptualizations focus on perceived expectations about the risks of obtaining future rewards (Williamson, 1993).

Our third factor accounted for 7% of the variance and was labeled our *satisfaction* with the juvenile dependency system variable. The two defining items for this factor were: (a) I am satisfied by how I am being treated by the juvenile dependency court system and (b) I wish I could change my drug court judge/CPS case worker. These defining items addressed satisfaction with the system and also satisfaction with the treatment provided by the representatives from the system that were being investigated in the current study (judge or CPS case manager).

MANCOVA Findings

Our initial statistical analyses examined the statistical assumptions associated with MANCOVA. The results

of the Bartlett's Test of Sphericity indicated that our dependent measures were correlated (Bartlett's = 44.72, $p = .00$). This finding indicates that it is more appropriate to use a multivariate test of significance to determine differences in the relationships across our three dependent measures, for example, Pillai's Trace tests (Bryman & Cramer, 2001). The results of the Box's M test indicated that the covariance matrices of the three dependent measures were similar (Box's M = 33.922, $p = .113$) and our Levene's Tests showed that the variances are equal and that it is appropriate to proceed with MANCOVA: (a) satisfaction with juvenile dependency system ($F = .49$, $p = .69$), (b) trust ($F = 2.10$, $p = .12$), (c) relational fairness ($F = .012$, $p = .99$).

Hypothesis 1: Table 2 presents the MANCOVA results for our examination of between-subject effects controlling for relevant interaction terms, and our instrumental measure of successful completion of drug treatment. The results show that the independent variable measuring type of relationships is significantly influencing each of our dependent measures (Satisfaction $F = 15.42$, $p = .00$; Trust $F = 11.51$, $p = .00$; and Relational Fairness $F = 32.66$, $p = .00$) when we controlled for the other variables, including successful completion of substance abuse treatment (see Table 2). Moreover, the type of relationship variable accounted for more of the explained variance in satisfaction with the juvenile dependency system (partial $\eta^2 = .31$, $p = .00$), than the instrumental variable, success

TABLE 2: Tests of Between-Subjects Effects: Multiple Measures MANCOVA Design

Source	Dependent Variables	Type II Sum of Squares	Mean Square	F	p	Partial Eta ²	Observed Power
Corrected model	Satisfaction	324.18	108.06	11.17	.00	.49	1.00
	Trust	90.39	30.13	7.01	.00	.38	.97
	Relational fairness	1052.76	350.92	19.55	.00	.63	1.00
Intercept	Satisfaction	3148.90	3148.90	325.43	.00	.90	1.00
	Trust	680.01	680.01	158.17	.00	.82	1.00
	Relational fairness	9417.32	9417.32	524.68	.00	.94	1.00
Judicial/CPS worker	Satisfaction	149.21	149.21	15.42	.00	.31	.97
	Trust	49.47	49.47	11.51	.00	.25	.91
	Relational fairness	586.20	586.20	32.66	.00	.48	1.00
Success in any type of TX × type of relationship	Satisfaction	111.32	111.32	11.50	.00	.25	.91
	Trust	13.51	13.51	3.14	.09	.08	.41
	Relational fairness	250.88	250.88	13.98	.00	.29	.95
Success in any type of TX × type of relationship	Satisfaction	114.85	114.85	14.85	.00	.26	.92
	Trust	9.99	9.99	2.32	.14	.06	.31
	Relational fairness	285.86	285.86	15.93	.00	.31	.94
Error	Satisfaction	338.66	9.68				
	Trust	150.47	4.30				
	Relational fairness	628.21	17.95				
Total	Satisfaction	9431.84					
	Trust	2119.33					
	Relational fairness	27662.86					
Corrected total	Satisfaction	662.84					
	Relational trust	240.86					
	Relational fairness	1680.97					

Satisfaction $R^2 = .49$ (Adjusted $R^2 = .45$)

Trust $R^2 = .38$ (Adjusted $R^2 = .33$)

Relational fairness $R^2 = .63$ (Adjusted $R^2 = .59$)

NOTE: CPS = child protective service; TX = treatment.

in any type of substance abuse treatment (partial eta² = .25, $p = .00$). The type of relationship variable also accounted for much more of the variance in our general trust measure than the instrumental variable—25% of the variance in comparison to 8% of the variance (this result for the instrumental variable was not statistically significant). Moreover, the relationship variable accounted for most of the variance in the relational fairness dependent measure (48%) than the instrumental variable (29%).

Hypothesis 2: Because the relational variables accounted for most of the variance, we also wanted to examine whether the relationships of the judges or the CPS case workers were contributing to these observed differences. For this reason, we performed a Bonferroni inequality test to determine where the differences were and whether the differences were statistically significant. The results showed that the observed differences were due to the participants' exposure to the judicial case manager: satisfaction variables (FDC judge, Bonferroni inequality $M = 16.54$; CPS case worker, Bonferroni inequality $M = 14.40$, $p = .05$); trust (FDC judge, Bonferroni inequality $M = 8.19$; CPS case worker, Bonferroni inequality $M = 5.928$, $p = .00$); and relational

fairness (FDC judge, Bonferroni inequality $M = 29.39$; CPS case worker, Bonferroni inequality $M = 23.67$, $p = .00$). These multiple comparisons were based on estimated marginal means.

DISCUSSION AND APPLICATIONS TO PRACTICE

The results of the current study show that substance-abusing parents in the child dependency process have different attitudes toward judges in therapeutic courts from CPS case workers in the child dependency process. Although both serve therapeutic functions, the parents perceived the judges as being more fair and trustworthy than the CPS workers. This finding has important implications for social work practice and future research.

CPS case managers obviously would like to be rated as high as judges on their fairness and trust. For this reason, we need further research on why parents do not perceive CPS case managers as being as trustworthy and fair as judges. Clearly, judges have more power than social workers to sanction parents. In addition, the

symbolic role played by judges might be associated with some preconceived notion of fairness or power that parents would not extend to social workers. However, we have to be cautious in interpreting these findings in this way because of the unique role played by the judges in the Pima County FDC approach.

In Pima County, the FDC judge is not responsible for the jurisdiction of the dependency issues. The judge solely has jurisdiction over the substance abuse treatment. As a consequence, parents might see the judge as being more fair and trustworthy, because unlike the CPS case workers, the judges are not playing dual roles. Namely, the CPS case workers examined in the current study were playing dual roles. They were expected to act as a support to the parent in substance abuse treatment and for making recommendations to the dependency court on permanency issues.

In many other jurisdictions, social workers also perform these dual functions. However, forensic practitioners have often stressed in writings on ethics that practitioners need to differentiate evaluating from treatment professionals (Melton, Petrilia, Poythress, & Slobogin, 1997). Yet many child welfare agencies still require social workers to fulfill these dual functions. For this reason, the results of the current study suggest a need for future research on whether the dual role is what influenced the less positive attitudes parents demonstrated toward the fairness and trustworthiness of the case managers. Without this type of research, CPS case workers performing these dual roles might be at increased risk for not being able to influence parental compliance with court orders for participation in treatment.

Indeed the results of the current study might be indicating that parents have more trust and perceived fairness in the judge because the judge was primarily focusing on providing the parents with support for their success in substance abuse treatment. However, the form of case management relationships evident in the Pima County drug court is unique to the Pima County approach. Other FDCs that also have had better success than standard interventions have judges that perform dual roles. For this reason, future studies should vary the structure of the courts to not only determine if one structure is better than the other but also increase our confidence in the findings of the current study that parents perceived judges differently from case workers.

Although the current study did not properly control for the influence of variations in family court structures, the findings did support the study's hypotheses that our relational variable contributed more to our understanding of our dependent measures than our instrumental variable. This finding indicates that relationships are a significant

component of the child dependency process that must be taken into account in designing appropriate interventions to promote parental compliance with substance abuse treatment. The provision of substance abuse treatment without proper supportive relationships is unlikely to be seen as satisfactory by substance-abusing parents. It also represents an important explanation for why parents in the FDC in Pima County were engaged and retained in treatment better than parents who received the standard CPS services (see Ashford, 2004). For these reasons, practitioners need to refocus attention on the salience of relationships in the child dependency process. In addition, they need to increase scrutiny of whether case workers should continue to combine evaluation and supportive treatment functions in the intervention process.

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