Summary of Research on Crisis Nurseries in the United States

Susan A. Cole, M.S.W., L.C.S.W., Ph.D.

Background

Crisis nurseries in the United States evolved from a grassroots movement to develop immediate interventions for stressed caregivers of young children to prevent abuse and neglect and the need for out-of-home placements (De Lapp, Denniston, Kelly, & Vivian, 1998). Because crisis nurseries were established based on the family support needs of local communities, each crisis nursery offers a range of emergency and follow-up services that meet the unique needs of the caregivers and young children they serve.

Services: Crisis nurseries provide initial crisis assessment and intervention services (e.g., respite child care, caregiver counseling), after-crisis interventions such as follow-up care, and/or referral to other community services (Andrews, Bishop, & Sussman, 1999). The services are usually provided with no waiting period and often without charge to the client families.

Funding: The first crisis nurseries were funded by private donations and in-kind support from hospitals or other family service organizations (Clark, 1990). The Temporary Child Care for Children with Disabilities and Crisis Nursery Act of 1986, and the Child Abuse, Domestic Violence, Adoption and Family Services Act and Temporary Child Care for Children with Disabilities and Crisis Nurseries Act Amendments (1992) provided federal funding for establishing crisis nurseries. Forty-seven states in the United States obtained funding to establish a total of 175 crisis nurseries and two respite centers (ARCH National Respite Network and Resource Center, 1994).

Crisis Nurseries in Illinois: Five crisis nurseries were established in Illinois in 1985 with support from federal and state funding. Two of the five are independent 501-C-3, non-profit organizations. Three crisis nurseries are part of the services provided by an umbrella agency. A sixth nursery, established in Chicago in 2005 is also under another umbrella agency.

Evaluation

Aggregate Data Evaluation Studies. For nine years the crisis nurseries in Illinois provided descriptive and outcome data to the Illinois Department of Human Services (IDHS) based on a Crisis Nursery Survey developed by ARCH (ARCH National Respite Network and Resource Center, 2000). The first evaluation study was done in 2005 and analyzed the IDHS aggregate data from FY 2001 - 2004 (Cole et al., 2005). The results of these analyses showed that the demand for crisis nursery services was increasing in Illinois. The number of families served increased from 7,007 in FY 2001 to 10,282 in FY 2003. Although seeking assistance for parental stress remained high throughout the eight years, the complexity and severity of problems of caregivers shifted from school or job related issues to more serious issues such as home crisis, substance abuse, and domestic violence. In addition, caregivers reported that they were very satisfied with the services provided. They perceived that the crisis nurseries were very effective in decreasing stress, lowering the risk of abuse and neglect, and enhancing parenting skills. The upward trend for usage and the perceived positive effects of services continued in subsequent years (Cole & Record, 2010).

Case Level Data Study. Another study based on the ARCH survey and case level data that used logistic regression analysis to identify factors associated with positive changes in caregiver perception of the effects of crisis nursery services on parental stress, risk of abuse and neglect, and parenting skills was conducted (Cole & Hernandez, 2008) for program evaluation and planning purposes. Caucasian single parents, with higher incomes that had children, who were four years of age or older, reported higher levels of stress reduction than caregivers with other characteristics. Those who accessed crisis nursery services because of homelessness, mental health, or family violence problems also reported higher stress reduction than caregivers accessing services for other reasons.

Program Outcomes Survey 2.0 (POS 2.0). In an attempt to obtain more objective data, the Crisis Nursery Coalition with the School of Social Work, UIUC, developed a pre- and post-test evaluation form based on a FRIENDS (Family Resource Information, Education, and Network Development Services) assessment tool. They piloted and implemented the instrument. A 4-item Perceived Stress Scale (PSS-4) (Cohen, Kamarck, & Mermelstein, 1983; Cohen & Williamson, 1988) was embedded in the instrument. The PSS-4 is a pre- and post-test measure for stress that is short and found to be effective in use with a wide range of adults experiencing stressful life events. New items included in the POS 2.0 give a more in depth perspective on how crisis nursery
services support caregivers, decrease stress and the risk of abuse. These include items that query caregivers at post-test about caregivers’ support systems, knowledge of community assistance programs, ability to budget time and resources, and skills for advocating for their children. A Spanish and English version of the POS 2.0 is in use.

Crisis Nurseries and Child Welfare. A California study conducted to ascertain the effects of crisis nursery service on abuse and neglect beyond caregiver self-report used state administrative data to test if counties served by crisis nurseries had lower abuse and neglect rates than counties without crisis nurseries (FRIENDS National Respite Network and Resource Center, 2006). Researchers found that the families in counties served by crisis nurseries actually had higher numbers of reports for abuse and neglect, but fewer substantiated cases of abuse and neglect than families served in counties that did not have crisis nursery services.

An Illinois study (Cole & Hernandez, 2007) compared the results of crisis nursery evaluation outcomes for caregivers who reported receiving crisis nursery services and child welfare services with caregivers who only received crisis nursery services using the ARCH survey. The researchers found that caregivers in the two groups were not different in their perceptions of the role of crisis nurseries in decreasing stress and the risk of abuse. The ratings for the crisis nurseries’ ability to enhance parenting skills was significantly higher for caregivers that only received crisis nursery services as compared to caregivers that received both child welfare and crisis nursery services.

Another Illinois study (Cole & Hernandez, 2011) examined the effects of crisis nursery services on children and families that entered the child welfare system. It found that children whose families had received crisis nursery services and entered out-of-home foster care placements were twice as likely to be reunited with their families when they left foster care as compared to children whose families had never received crisis nursery services. There was no significant difference in the length-of-stay in out-of-home care when the two groups were compared.

Crisis nurseries seem to help families in times of crisis. The lack of evaluation funding has limited the study to the use of secondary data collected by the nurseries and states of Illinois and California.

References