

1. **Ben-Yehuda, Y., Attar-Schwartz, S., Ziv, A., Jedwab, M., & Benbenishty, R. (2010). Child abuse and neglect: Reporting by health professionals and their need for training. *Israel Medical Association Journal- IMAJ*, 12, 596-602. PMID: 21090514**

### **Abstract**

Background: For health professionals who interact professionally with children, adequate awareness and training regarding the clinical indicators of child abuse and neglect, as well as subsequent reporting and procedures, are essential. Objectives: To study Israeli health professionals experiences with identification and reporting of suspected cases of child abuse and neglect, and their perceived training needs in this ar Methods: The study group was a convenience sample comprising 95 Israeli health professionals (physicians, nurses, social workers, psychologists, etc.) attending workshops on medical aspects at a national conference on child abuse and neglect. In this cross-sectional survey, the health professionals were asked to complete an anonymous structured questionnaire on their experience with child abuse and neglect and on their training needs. Results: The participants in the survey had relatively high levels of involvement with child protection. Nevertheless, they strongly expressed their need for training, especially in mastering practice skills. The need for training was greater for professionals with less experience in child protection, and there were different needs according to profession. Conclusions: Despite their prior extensive experience in dealing with child abuse and neglect, most of the health professionals participating in the conference reported the need for training in certain areas.

2. **Jedwab, M., & Benbenishty, R. (2017). Israeli pediatricians' attitudes and experience of reporting child maltreatment and related training needs. *Child Abuse Review*, 26, 439-450. <https://doi.org/10.1002/car.2468>**

### **Abstract**

Healthcare professionals and particularly paediatricians have a significant responsibility to diagnose and report child maltreatment. In situations where there is a suspicion of maltreatment, the professionals have to report the case to the authorities. Even though reporting is mandatory, previous research indicates that health professionals tend to report only a few of their suspected cases. The aims of the current study are to: (1) examine paediatricians' attitudes and experiences concerning the identification and reporting of suspected child abuse and neglect cases; (2) assess paediatricians' training needs; and (3) examine the associations between paediatricians' attitudes and years of experience with suspected maltreatment handling and their training needs. A sample

of 200 Israeli paediatricians, all members of the Israeli Paediatric Association, completed telephone interviews regarding their attitudes, experiences and training needs. The findings indicate high rates of reporting and a need for additional training. Paediatricians who had less experience with such cases or those with minimal training were more likely to ask for training. There was no significant correlation between the paediatricians' attitudes and years of experience. The authors suggest the development of specialised training programmes that will provide paediatricians with theoretical knowledge and practical skills related to child abuse and neglect.

- 3. Jedwab, M., Harrington, D., & Dubowitz, H. (2017). Predictors of substantiated re-reports in a sample of children with initial unsubstantiated reports. *Child Abuse & Neglect*, 69, 232-241.**

<https://doi.org/10.1016/j.chiabu.2017.04.031>

### **Abstract**

Many children with unsubstantiated reports of child abuse and neglect repeatedly return to the child protection system, indicating that unsubstantiated reports may represent actual child maltreatment or risk for future maltreatment. Identifying patterns of re-reporting and predictors that may be associated with later substantiated re-reporting could help to identify children who are very likely to be maltreated. This knowledge may guide the development of policies and interventions to prevent further maltreatment and the risk for re-reports. The aims of this study were to: (1) measure the period between the time of the initial reports that were not substantiated and the time of first substantiated re-reports; and (2) identify factors associated with the risk of later substantiated re-reporting. The study analyzed secondary data from the Longitudinal Studies on Child Abuse and Neglect (LONGSCAN) through survival analysis. Of the 378 children with initially unsubstantiated reports, 81% were re-reported, of which almost two-thirds were substantiated. Children who were younger, non-white, and had caregivers with more depressive symptoms were at increased risk of a substantiated re-report. Among those that were later substantiated, 20% were substantiated within one year. Findings suggest that targeted preventative services should be developed and provided for families who are reported for the first time, even if not substantiated.

4. **Jedwab, M. & Shaw, T. V. (2017). Predictors of reentry into the foster care system: Comparison of children with and without previous reentry experience. *Children and Youth Services Review, 82, 177-184.***  
<https://doi.org/10.1016/j.childyouth.2017.09.027>

**Abstract**

Foster care reunification is the most common permanency plan for children in care, but it can be a challenging and stressful process for both the child and birth family. In some cases, the family reunification is unsuccessful and requires removal of the child from the home and reentry into care. The current study focuses on two groups: children who have had no previous removal-foster care experience and those who have had previous removal experience. The aims of the present study are to: (1) examine the rate of reentry for children who have no previous removal-foster care experience versus those who have previous removal experience prior to the current episode; (2) measure the period between the time of the reunification and the time of reentry to care for both groups; and (3) identify risk and protective factors correlated with reentry for both groups. The study analyzes secondary data through survival analysis. The sample includes 4642 children exiting from care to reunification between 2010 and 2013, who are followed for 18 months. The rate of reentry for children with previous removal experience was much higher (25% vs. 16%), and the time of highest risk for future reentry was shorter (4 vs. 6 months, after reunification) compared to children without removal experience. Several common risk factors were found for both groups. Child behavior, reunification against agency recommendation, and siblings in care increased the odds of reentry. However, visitation of the family by a case worker post-reunification decreased the risk for reentry. Child welfare administrators and caseworkers should continue to work toward providing care and ensuring that the child and family are fully prepared for reunification. Programs and post reunification services must be targeted and provided to children with previous removal experience.

5. **Jedwab, M., Chatterjee, A., & Shaw, T.V. (2018). Caseworkers' views and experiences with successful reunification. *Children and Youth Services Review, 86*, 56-63.**  
<https://doi.org/10.1016/j.childyouth.2018.01.017>

### **Abstract**

The decision to reunify children with their birth parents is one of the most significant decisions that caseworkers have to make in the child welfare arena. These decisions can dramatically affect the lives of children and families. Therefore, it is essential to understand reunification from the caseworkers' perspectives. The current study presents findings from a survey of child welfare caseworkers' experiences with reunifications and focuses on practices and key factors at the casework practice and at the system-environment level to assist in achieving successful reunification. The survey includes a series of statements related to successful reunification and open-ended questions. A sample of 284 caseworkers completed an online survey about their experience with reunification. Descriptive and thematic analyses were performed to analyze the caseworkers' responses. Almost all the caseworkers believed that the most important factors to ensure successful reunification is child safety, as well providing services and support to the birth family. Thematic analysis reveals several practices and key factors to assist in achieving successful reunification, including: the child's and the parents' willingness and readiness to reunify, successfully addressing the initial issues that led to separation, the child and the parents participation in the process, a quality relationship between the caseworker and the birth family, and the importance of providing services and support. However, caseworkers highlight some barriers regarding their work with substance abuse and mental health families, caseload size and the agency's requirement for lengthy documentation and paperwork. The study suggests supporting the need for caseworkers to find strategies to engage in a collaborative effort with the birth parents to work toward reunification, as well providing and allocating more resources, services, and funding to the child welfare system will help to promote reunification.

6. **Kobulsky, J., & Kepple, J. N., & Jedwab, M. (2018). Abuse characteristics and the concordance of child protection services (CPS) determination and adolescent self-reports of abuse. *Child Maltreatment, 23*, 269-280.**  
<https://doi.org/10.1177%2F1077559518771743>

### **Abstract**

This study examines the concordance of abuse self-reported by adolescents at 18 years and child protective service (CPS) determinations and how abuse characteristics predict concordance. It includes 819 youths participating in 18-year interviews of the Longitudinal Study of Child Abuse and Neglect (LONGSCAN). Cross-tabulations revealed low correspondence between self-reports and CPS determinations of physical, sexual, and emotional abuse. Logistic regression identified that among youths with CPS physical abuse determinations, White race, chronicity, and co-occurring neglect were positively associated with corresponding self-reports. Co-occurring CPS-determined emotional abuse was more concordant with self-reports. More frequent self-reported physical abuse was associated with corresponding CPS determinations. Self-reports of childhood emotional abuse and perpetration by nonparental family/other household members were positively associated with corresponding CPS determinations. CPS determination concordance also varied significantly by LONGSCAN site. Results demonstrate differences in abuse characteristics captured by CPS data and youth self-report, which may impact research findings on abuse correlates.

- Jedwab, M., Chatterjee, A. & Shaw, T.V. (2019). A review of foster home policies and regulations in the United States designed to support foster homes families. *Journal of Public Child Welfare*, 1-22.**

<https://doi.org/10.1080/15548732.2019.1596193>

### **Abstract**

Foster parents are required to learn and to navigate a range of policies and regulations in order to make decisions that are in the best interest of the foster child. This paper reviews four policies and regulations (foster parent handbooks, pre-service and in-service training, respite care, and information on points of contact) intended to support family foster homes and examines whether these policies and regulations are available and accessible to the foster parents. Data were collected using a mixed methods research design, including an online search and a survey for child welfare administrators. Findings and implications for policy and practice are discussed.

8. בנבנישתי, ר. וידוב, מ. (2011) ניסיון, עמדות וצרכי הכשרה של רופאי ילדים בסוגיות של איתור, טיפול ודיווח על ילדים נפגעי הזנחה והתעללות. דוח משותף לחרוב ולמשרד הרווחה והשירותים החברתיים.