

# ILLINOIS CHILD WELFARE CONTINUING EDUCATION QUIZZES

## Chaos on the Campus: Recognizing the Early Warning Signs: A Guide for Administrators of Residential Centers<sup>1</sup>

1. What do the national data suggest regarding residential treatment centers?
2. What mistakes do many residential treatment centers make that often result in chaos?
  - A. oversimplify the complexity of residential care
  - B. adhere to specific theory and procedure while neglecting other possibilities
  - C. maintain destructive relationships between staff and administration
  - D. lack appropriate boundaries between staff and residents
  - E. a & b
  - F. c & d
  - G. all of the above
  - H. none of the above
3. According to the author, campuses that lose control have failed at what?
4. Briefly describe how research taken from residential treatment centers in England and Wales supports the author's hypothesis of chaos on residential treatment programs in America.
5. According to the author, effective residential treatment centers have what in common?
  - A. carefully designed treatment plans
  - B. carefully designed programs
  - C. have formed constructive relationships with staff, residents, and administrators
  - D. a & c
  - E. all of the above
  - F. none of the above
6. What did the UK studies identify as common themes among chaotic campuses?
7. What may a high utilization of psychotropic medication indicate within a residential treatment center?
  - A. inadequate milieu activities
  - B. improper psychotherapy plan
  - C. children acting out due to program inadequacies
  - D. all of the above
8. The best theoretical model to use for a residential treatment program is:
  - A. psychodynamic
  - B. behavioral
  - C. peer culture
  - D. all of the above
  - E. none of the above

<sup>1</sup>The following questions were developed by the *Illinois Child Welfare Journal's* Editorial Staff and may not be associated with the article's author.

9. According to Fritz Redl, what must personnel do?
  - A. be college educated
  - B. have experience in working with troubled youth
  - C. deeply care about the clients they serve
  - D. c & d
  - E. all of the above
  
10. What must professionals working in residential treatment settings be aware of in using theory to treat youth?
  
  
  
  
  
  
  
  
  
  
11. Directors of residential treatment centers are responsible for deciding:
  - A. which treatment methods to impose
  - B. rules and regulations for residents and staff
  - C. program implementation
  - D. all of the above
  - E. none of the above
  
12. According to Fritz Redl, what does the term “feeding them” mean?
  
  
  
  
  
  
  
  
  
  
13. When personnel costs are dramatically exceeding the budget, what is likely occurring?  
Check all that apply
  - A. high turnover of staff
  - B. staff working overtime
  - C. employing too many staff members
  - D. excessive absenteeism among staff members
  - E. providing excessive benefits to staff members
  
14. Briefly describe the “Rule of Three Kids” principle.
  
  
  
  
  
  
  
  
  
  
15. As a social worker, how would you consult with staff of a residential treatment center using the above principle in relation to the unit’s problem of nightly riots?
  
  
  
  
  
  
  
  
  
  
16. Unclear objectives, inadequate staff training and social isolation of unit were all problems associated with what common theme among the United Kingdom’s chaotic campuses?
  - A. management
  - B. policy
  - C. practice
  - D. staff and administration

17. According to Oberholzer, what are the core critical elements of a therapeutically contained environment?
  
18. Why is so little written about the seriousness associated with work in residential settings?
  - A. difficult to disguise institutions in the written literature
  - B. impossible to identify specific problems
  - C. uncooperative staff and administration
  - D. all of the above
  
19. The author stressed the need for a residential treatment center to conduct and organize it's programs to be what?
  - A. appropriately funded
  - B. structured
  - C. well-managed during evening hours
  - D. all of the above
  - E. none of the above
  
20. According to Durkin's research, why would staff members of chaotic campuses feel the need to cover up institutional problems such as sexual abuse?

## **ILLINOIS CHILD WELFARE CONTINUING EDUCATION QUIZZES**

### Helping Foster Parents Manage the Addiction to Unhappiness in their Foster Children: A New Approach to Preventing Placement Failures in Foster Care and Adoption Settings<sup>1</sup>

1. What are some popular explanations for the perplexing and self-destructive behavior some foster children manifest after being placed in good foster homes?
  - a. Identification with the aggressor
  - b. Testing the foster parents' limits
  - c. The child has a genetically bad temperament
  - d. The child has little capacity for intimacy
  - e. All of the above
  
2. When young children are treated abusively or neglectfully, they usually:
  - a. Recognize that something is very wrong and retreat from that relationship.
  - b. Identify whatever treatment they receive as ideal caregiving and seek more of that kind of treatment.
  
3. Understanding the child's learned need for unhappiness is very important for caregivers because:
  - a. Understanding the child will help the caregivers to avoid taking the child's negativity personally.
  - b. Understanding the child will help caregivers avoid responding negatively as the child expects them to.
  - c. Understanding the child will help caregivers to help the child increase her tolerance of intimacy.
  - d. All of the above.
  
4. Regardless of how antisocial or self-destructive they may have become, all children have some part of them that still wants love and affection.
  - a. true
  - b. false
  
5. Babies and young children believe that whatever they experience (good or bad) is always intended by their caregivers, and is exactly what they deserve.
  - a. true
  - b. false
  
6. Babies and young children "throw their hearts" into recreating what they experience when they are with their first caregivers.
  - a. true
  - b. false

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7. Confusing the state of unhappiness with happiness occurs at a developmental stage that precedes:
  - a. language development
  - b. the onset of cognition
  - c. social interaction that would offer alternative caregiving experiences
  - d. all of the above
8. The emotional and behavioral symptoms babies and young children develop represent:
  - a. children's willful desire to be oppositional
  - b. children's unrecognized need to cause themselves and others extreme forms of unhappiness
9. When foster children throw temper tantrums the most helpful response the foster parent can offer is:
  - a. Send the child to her room for a timeout.
  - b. Understand what loss has contributed to the tantrum and offer the child comfort for that loss.
  - c. Deny the child's privileges until she learns not to throw tantrums anymore.
10. An aversive reaction to pleasure is:
  - a. The child's driven need to sabotage success by creating unhappy experiences when things are going well.
  - b. The child's desire to have the parent give her endless rewards when she behaves.
11. It is important for foster parents to recognize and understand the child's aversive reactions to pleasure because:
  - a. It will help them to avoid taking the child's behavior personally.
  - b. It will help them to understand that punishing the child will actually make a painful situation worse for everyone.
  - c. It will help them to recognize that the child is actually in pain in that moment and needs their help.
  - d. All of the above.
12. Use of discipline to curb children's acting out behaviors is counterproductive because:
  - a. Foster children unconsciously seek unhappiness, and punishment only serves to strengthen their motives to seek unhappiness.
  - b. It teaches children that the person with the power will usually use it to make them feel guilty and bad.
  - c. It teaches children to treat themselves harshly when they make a mistake
  - d. It teaches children to use whatever power they have to force others to do what they want.
  - e. All of the above
13. Loving regulation is a more effective way to respond to children's symptomatic behaviors because:
  - a. It does not gratify children's motives to make themselves unhappy.
  - b. It disconnects the punitive and manipulative components from discipline, leaving the parent with the choice to regulate the child's behavior.
  - c. Children learn that they are free to disagree with their parents while still remaining close to them.

14. Children learn to govern themselves effectively by:
  - a. Identifying with their parents' helpfulness and kindness toward them.
  - b. Identifying with their parents' stern disciplinary choices and harshness.
  
15. In what ways do rewards resemble punishment?
  - a. They both use coercion.
  - b. Their effects are similar in that children feel deprived and resentful when they do not receive a promised reward.
  - c. They both have the effect of alienating children from their parents.
  - d. They both gratify children's needs for unhappiness.
  - e. All of the above.
  
16. Caseworkers can help foster parents to understand foster children's reactive behaviors after a parental visit by:
  - a. Explaining to the foster parents that the child will try to comfort himself by recreating the way he feels when with the natural parent.
  - b. Suggesting that the foster parents not allow the child to isolate himself after a visit.
  - c. Helping the foster parents understand that the child has idealized the natural parents' caregiving.
  - d. Explaining to the child his learned needs for unhappiness.
  - e. All of the above
  
17. Caseworkers can play a vital role in reducing placement disruption by:
  - a. Helping foster parents understand children's aversive reactions to pleasure.
  - b. Helping foster parents anticipate when children's aversive reactions are likely to occur.
  - c. Helping foster parents to recognize the child's progress in the face of ongoing aversive reactions.
  - d. Helping the child to understand his aversive reactions.
  - e. Listening carefully to the foster parents' concerns and expressing appreciation for the parents' openness.
  - f. Helping the foster parents to recognize and anticipate their own aversive reactions.
  - g. All of the above

## ILLINOIS CHILD WELFARE CONTINUING EDUCATION QUIZZES

### From Epiphany to Culture Change: Reflections on the Promise of Prevention<sup>1</sup>

1. For prevention efforts to be successful families must be reached because:
  - a.) families provide the first and most influential environment for each child.
  - b.) key developmental processes take place before the age when most children can be placed in programs that support learning and healthy socialization.
  - c.) the latest research on brain development shows that "windows of opportunity" must be capitalized upon at a time when children are still primarily with family members.
  - d.) the way children are treated impacts their interpersonal choices throughout life, meaning the effects of this treatment make their way into the social ecology shared by all.
  - e.) all of the above
  
2. The author discusses physical brain development and the "window of opportunity". What is meant by the "window of opportunity"?
  
3. Research on child abuse shows that it impacts
  - a.) the odds of future delinquency
  - b.) the likelihood of arrest as a juvenile
  - c.) adult criminality
  - d.) the likelihood that an individual will commit a violent crime
  - e.) all of the above
  
4. Early family support programs offered which of the following services to clients?
  - a.) child development information
  - b.) parent discussion groups
  - c.) social service resources for parents
  - d.) all of the above
  
5. Early family support programs shared which of the following assumptions:
  - a.) primary responsibility for child development lies within the family, and families need community support to raise their children.
  - b.) the cornerstone of a healthy society is assuring the well being of all families.
  - c.) children and families are part of an ecological system.
  - d.) families are empowered when they have access to information and resources, and when they take action to improve the well being of children and the community.
  - e.) all of the above
  
6. Recent research demonstrates that abuse and neglect early in life result in a host of problems in adulthood.
  - a.) true
  - b.) false

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7. Early family support programs adopted which of the following practice principles:
  - a.) build relationships based on equality and respect
  - b.) improve client access to needed resources
  - c.) involve families in all aspects of programming
  - d.) build on strengths to effect change
  - e.) celebrate diversity and affirm the cultural, racial and linguistic identity of families
  - f.) all of the above
8. Describe the reasoning behind changing the language used by family support groups from calling parents “clients” to “participants”.
9. The conceptual shift in approach adopted by child welfare systems from child-focused to family-centered resulted in the adoption of family-centered strategies. Identify two of the strategies used.
10. Early childhood intervention programs, such as Early Childhood Family Education, have been found to positively impact which domains of children's functioning:
  - a.) cognitive development
  - b.) emotional development
  - c.) academic achievement
  - d.) economic self-sufficiency
  - e.) all of the above
11. The findings of Drs. Len Duhl and Trevor Hancock’s report contributed to the legislation which resulted in Head Start being expanded to reach low-income pregnant mothers.
  - a.) true
  - b.) false
12. Early childhood programs also demonstrated direct cost savings for society through:
  - a.) children spending fewer years in special education programs
  - b.) individuals reaching higher earning potential
  - c.) fewer individuals on public welfare
  - d.) increased tax revenues from better paying jobs
  - e.) all of the above
13. Match the following prevention terms with their definitions:

Primary prevention

Treatment offered to those with problems to prevent future problem recurrence

Secondary Prevention

Services offered before problems arise

Tertiary Prevention

Services targeted to reach those assessed as at high risk for the development of a problem in the future



14. Which of the following values must be espoused to shift the culture from a prevention approach to family and child health to a promotion approach?
  - a.) rugged individualism
  - b.) the interconnectedness of all beings
  - c.) individual responsibility
  - d.) collective responsibility
  
15. According to the author, what type of approach have States recognized as more effective at helping abused and neglected children?
  
  
  
  
  
  
  
  
  
  
16. Problems in children and families arise from a complex interaction of psychological, social and biological factors.
  - a.) true
  - b.) false
  
  
  
  
  
  
  
  
  
  
17. What is one of the imperatives for sustaining government funding for early childhood intervention programs?
  
  
  
  
  
  
  
  
  
  
18. Which of the following choices supported programs that favored prevention rather than treatment?
  - A. The healthy communities movement
  - B. The American Psychological Association
  - C. The General Assembly of North Carolina
  - D. A & C
  - E. None of the above
  - F. All of the above
  
  
  
  
  
  
  
  
  
  
19. Child welfare systems have changed their approach to helping abused and neglected children by embracing the belief that the best approach to protecting children is to strengthen their families.
  - a.) true
  - b.) false
  
  
  
  
  
  
  
  
  
  
20. A \_\_\_\_\_ approach bolsters self-esteem and creates a supportive dynamic which helps the individual experience success in meeting immediate needs.

## ILLINOIS CHILD WELFARE CONTINUING EDUCATION QUIZZES

### Reporting Child Abuse and Neglect: Good Faith Immunity for Health Care Providers<sup>1</sup>

1. Under the Illinois Abused and Neglected Child Reporting Act, good faith immunity was instituted to:
  - a. Give health care providers carte blanche in their decision to make reports of child abuse and neglect to protective services.
  - b. Overcome concern about potential liability in connection with making reports as required by law, and to encourage reporting.
2. Good faith immunity under this act is:
  - a. Immunity from any civil or criminal liability that might otherwise result from a report of child abuse by any person, institution or agency participating in good faith in the making of such a report, referral, or investigation of abuse/neglect.
  - b. Immunity afforded caregivers or other persons who inadvertently abuse or neglect children while doing their best to care for those children.
3. A case that is frequently cited as evidence of the usefulness of this provision under the Act is:
  - a. Lehman v. Stephens
  - b. Moore v. Sims, 442 U.S. 415
4. On appeal the plaintiffs in Lehman challenged the immunity provisions of the Reporting Act. The court then reviewed the nature and scope of the immunity provided by the act and clarified that the act does not afford absolute immunity but rather good faith immunity, and that the good faith of reporters is to be presumed. The fact that the act does not afford absolute immunity to reporters means that:
  - a. Plaintiffs may question and challenge in court whether reporters acted in good faith in making a report.
  - b. Since good faith on the part of reporters is presumed, it is impossible to challenge the legitimacy of the reporters' intentions.
5. Rebutting the presumption of good faith can be accomplished by:
  - a. Pointing out that those making the report have a grudge against the abused child's parents.
  - b. Providing evidence of palpable, wrongful conduct.
6. A case that successfully rebutted the presumption of good faith was:
  - a. Lipscomb v. Sisters of St. Francis Health Services.
  - b. Alsager v. Iowa, 406 F. Supp. 10.
7. On appeal, in Lipscomb v. Sisters of St. Francis the plaintiff argued that:
  - a. The child's being subjected to questioning about child abuse and multiple vaginal examinations despite the receipt of information that the initial urinalysis had been misidentified, and that there was no evidence of sexual abuse, constituted sufficient evidence to question the good faith of the defendant.
  - b. It was unreasonable and cruel for the hospital to keep her daughter on Christmas day

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8. In Lipscomb the court held that:
  - a. the allegations in the complaint, along with the plaintiff's affidavit, raised questions of fact sufficient to rebut the presumption of good faith on the part of hospital staff.
  - b. The presumption of good faith may be rebutted under the "bursting bubble" theory.
  - c. A and B
9. If there is a medical misdiagnosis of child abuse the medical professional making the wrongful diagnosis would be denied section 9 immunity under the Reporting Act.
  - a. true
  - b. false
10. If there is negligent conduct on the part of a health care provider separate and distinct from actions necessary to make a diagnosis or report of child abuse, the provider would be denied immunity under the Reporting Act.
  - a. true
  - b. false
11. The mandate to report suspected child abuse is part of a comprehensive state plan to:
  - a. Identify parents in need of counseling or other services that would improve their parenting skills.
  - b. Protect the safety, health and best interests of children
  - c. Identify children who are living under very marginal conditions
  - d. Identify suspected abuse and neglect of children
12. Good faith immunity is limited to physicians, hospitals, and other health care providers.
  - a. true
  - b. false
13. According to the article, the act of diagnosing child abuse is immunized under the Act.
  - a. true
  - b. false
14. In Franciski v. the University of Chicago Hospitals the doctor's decision to cause a report to be made was based on:
  - a. complaints from the hospital staff about the parents' behavior
  - b. the seriousness of the baby's injury
  - c. the nature of the parents' outburst in the intensive care unit
  - d. all of the above
15. In legal cases where the good faith immunity of a mandated reporter is being questioned, the burden of proof is on:
  - a. the defendant
  - b. the plaintiff
16. In Franciski v. the University of Chicago Hospitals the court took seriously the doctor's concern about the parents' capacity to care for the baby because:
  - a. The court prefers to err on the side of believing professionals.
  - b. The Illinois law considers the possibility of future abuse as a basis for reporting.



## ILLINOIS CHILD WELFARE CONTINUING EDUCATION QUIZZES

### Sudden Infant Death Syndrome and Sudden Infant Death<sup>1</sup>

1. A diagnosis of SIDS is made when:
  - a.) there are no satisfactory explanations for an infant's death
  - b.) a baby under the age of 12 months is accidentally asphyxiated by being overwrapped for sleep, or from sleeping too close to others
  - c.) when the post mortem examination cannot determine the cause of death
  - d.) all of the above
  
2. International acceptance of a definition for SIDS is critical because:
  - a.) research on other causes of sudden infant deaths may not pertain to SIDS or to SIDS research
  - b.) investigators and pathologists need a clear way to discern SIDS deaths from sudden infant deaths by other causes
  - c.) families who lose an infant to SIDS need clear information about SIDS and how to prevent its recurrence
  - d.) all of the above
  
3. Infants are at higher risk of SIDS when:
  - a.) they come from families with a lower socioeconomic status
  - b.) they are born to mothers who did not seek full term prenatal care
  - c.) they are born to mothers who smoke or use drugs
  - d.) they are born premature and have low birth weight
  - e.) all of the above
  
4. SIDS deaths have been found to be unrelated to race or ethnicity
  - a.) true
  - b.) false
  
5. A baby's sleeping position has been determined to be one of the most important risk factors in prevention of SIDS deaths. The most dangerous sleeping position is:
  - a.) face down
  - b.) on the baby's side
  - c.) on the baby's back
  
6. A SIDS diagnosis can be distinguished from suffocation via post mortem examination
  - a.) true
  - b.) false
  
7. Despite the plethora of research seeking causes of SIDS deaths, the diagnosis of SIDS remains a diagnosis of exclusion. This means that:
  - a.) there must be an absence of significant pathology
  - b.) the baby's death remains unexplained after a thorough case examination, including a complete autopsy, a thorough death scene examination, and a review of the clinical history
  - c.) both of the above
  - d.) there must be a finding of significant pathology

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8. Infant deaths caused by Munchausen's Syndrome by Proxy have been mistaken for SIDS
  - a.) true
  - b.) false
  
9. Which of the following clinical conditions have been found to be associated with sudden infant death?
  - a.) metabolic disorders
  - b.) congenital cardiac anomalies
  - c.) infections (myocarditis, sepsis, pneumonia, meningitis)
  - d.) all of the above
  
10. Evaluation of SIDS cases can be improved by:
  - a.) a universally accepted definition
  - b.) use of standard protocols
  - c.) thorough death scene investigations
  - d.) rigorous post mortem examinations
  - e.) all of the above
  
11. From the article, give two causes that have been proposed to explain SIDS.
  
  
  
  
  
  
  
  
  
  
12. What do the authors mean when they refer to SIDS as a "diagnosis in search of a disease"?
  
  
  
  
  
  
  
  
  
  
13. The NICHD definition for SIDS is widely accepted in the United States, but is less well accepted in other countries. Definitions that conflict with the NICHD definition may differ with respect to an association with \_\_\_\_\_.
  
  
  
  
  
  
  
  
  
  
14. Published research that purports to be relevant to understanding SIDS may actually cause confusion among pathologists, investigators, families and researchers because of the type of information lacking in the research studies. Name two things that published research often fails to provide that make it difficult to determine its applicability to SIDS.
  
  
  
  
  
  
  
  
  
  
15. If a baby's sudden death reveals evidence of possible asphyxia, inflicted injury or natural disease, a diagnosis of SIDS is warranted.
  - a.) true
  - b.) false

16. List some of the advice that the Back to Sleep Risk Reduction Program urges parents to heed in order to reduce the risk of SIDS.
  
17. According to the authors some babies who were diagnosed as having died of SIDS might have survived had they not been exposed to cigarette smoke.
  - a.) true
  - b.) false
  
18. What are some factors that make diagnosing SIDS more difficult among isolated indigenous groups?
  
  
  
  
  
  
  
  
  
  
19. According to the authors, the presence of intrathoracic petechiae is found in more than 80% of SIDS cases, and the distribution of the petechiae raises the possibility that the terminal mechanism in these deaths is  

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20. Explain why it would be counterproductive to use diagnostic terminology such as “sudden infant death syndrome with myocarditis” or “cardiovascular causes of SIDS” such as myocarditis, rhabdomyomas and congenital heart disease.

## **ILLINOIS CHILD WELFARE CONTINUING EDUCATION QUIZZES**

### A Successful Failure: Difficult Questions for the Interface between the Adoption and Safe Families Act and the Therapeutic Process<sup>1</sup>

1. What is the significant difference between the Adoption and Safe Families Act of 1997 and the Adoption Assistance and Child Welfare Act of 1980?
  - A. reunification of the family
  - B. mandated reporting
  - C. safety of the child
  - D. all of the above
  
2. What were the two key provisions of the Adoption and Safe Families Act (ASFA) of 1997?
  
3. As a social worker, how would you begin to explain why adoption rates have increased as a result of enacting ASFA?
  
4. Which heuristic(s) did the author utilize in this article? Place an X next to all that apply.
  - A. psychoanalytic theory
  - B. developmental theory
  - C. cognitive theory
  - D. behavioral theory
  - E. object relations theory
  - F. attachment theory
  - G. interpersonal relationship theory
  
5. Who hypothesized that early infant relationships with caregivers influenced the person throughout their lifespan?
  - A. Stern
  - B. Freud
  - C. Maslow
  - D. Winnicott
  
6. According to Erikson, the identity of the child is established through which three relationships?
  
7. Through which dependence phase does Winnicott propose that assuring an infant support, protection and safety leads to the infant's security of attachment?
  - A. absolute
  - B. relative
  - C. toward independence
  - D. holding environment

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8. Which theorist(s) hypothesized that the infant is an active participant in forming an attachment with the caregiver?
  - A. Erikson
  - B. Ainsworth
  - C. Winnicott
  - D. Anna Freud
  - E. Sigmund Freud
  - F. Bowlby
  - G. a & b
  - H. b & f
  
9. What two major categories of attachment did Ainsworth identify in infancy?
  
  
  
  
  
  
  
  
  
  
10. According to Winnicott, what does the infant utilize in learning to be alone in the presence of the mother and in the development of ego relatedness?
  - A. relative dependence
  - B. transitional object
  - C. holding environment
  - D. transitional phenomenon
  - E. b & d
  - F. b, c, & d
  - G. all of the above
  - H. none of the above
  
  
  
  
  
  
  
  
  
  
11. Winnicott considered psychopathology to be a result of what?
  
  
  
  
  
  
  
  
  
  
12. Identify the four themes in Daniel Stern's framework for assessing a new mother's development.
  
  
  
  
  
  
  
  
  
  
13. As a social worker, identify an implication of using the above framework within the field of child welfare.
  
  
  
  
  
  
  
  
  
  
14. In the case vignette, what did the therapist do to help Sally modulate her outbursts?
  - A. created boundaries
  - B. set appropriate limits
  - C. listened to the outbursts
  - D. provided a safe environment
  - E. all of the above

15. After Sally's second decompensation she returned to the agency feeling abandoned and starving. In response to this the therapist provided a meal and an empathetic ear. Therapeutically, what were the therapist and agency providing Sally?
  - A. a free meal
  - B. a new experience
  - C. transitional phenomenon
  - D. all of the above
  
16. What early psychosocial factors compromised Sally's well-being as both a child and an adult? Please list.
  
  
  
  
  
  
  
  
  
  
17. Towards the end of therapy Sally was able to recognize her daughter's happiness and stability in remaining in the foster parent's home. According to Winnicott, what did Sally develop?
  - A. capacity for concern
  - B. capacity for empathy
  - C. relative independence
  - D. absolute independence
  - E. none of the above
  
  
  
  
  
  
  
  
  
  
18. As a social worker in the position of a caseworker or therapist, what is the first thing you would do in working with a client like Sally?
  
  
  
  
  
  
  
  
  
  
19. Which two theories did the therapist use most in treating Sally?
  - A. psychoanalysis and behavioral theories
  - B. attachment and object relations theories
  - C. ego psychology and interpersonal relationship theories
  - D. object relations and cognitive theories
  
  
  
  
  
  
  
  
  
  
20. As a therapist working with child welfare issues similar to those presented in the case, how would you personally deal with the conflicts faced with abiding by the ASFA time regulations for family reunification?

## ILLINOIS CHILD WELFARE CONTINUING EDUCATION QUIZZES

### Letters to my 'Uncle Long Legs': A Case Illustration of Letter Counseling to Children<sup>1</sup>

1. According to a recent survey and census data, parent-child relationships in Hong Kong have been strained by which of the following factors:
  - a.) rising divorce rates
  - b.) economic recession
  - c.) pressure on parents to work longer hours
  - d.) parent-child conflict around traditional cultural values
  - e.) all of the above
  
2. What was the major reason provided by the article that described why children wrote to Uncle Long Legs?
  
  
  
  
  
  
  
  
  
  
3. The traditional Chinese value known as filial piety is understood to be:
  - a.) the belief that siblings should work together for the good of the entire family
  - b.) the belief that children must accept their parents' judgment as unquestionable and subordinate their interests to those of their parents.
  
4. According to the author, in Hong Kong children's self-esteem is determined largely by
  - a) academic competence
  - b) positive peer socialization
  - c) the accumulation of wealth
  - d) superior athletic prowess
  
5. During which developmental period do children begin to develop a concept of self and a search for identity?
  
  
  
  
  
  
  
  
  
  
6. Some positive aspects of letter counseling are:
  - a.) the child can write when she wants to and needs no appointment
  - b.) the child controls the process of disclosure as well as the end product
  - c.) emotions that are difficult to verbalize may be more easily expressed in written form
  - d.) there is an absence of confrontation
  - e.) the writing process may serve to mentally organize recalled events and desensitize painful affect
  - f.) all of the above
  
7. According to this article, the Hong Kong education system views\_\_\_\_\_ to be one of the most significant indicators of productivity and competence.

<sup>1</sup>The following questions were developed by the *Illinois Child Welfare Journal's* Editorial Staff and may not be associated with the article's author.

8. Briefly describe the rationale behind assigning one counselor for each child.
  
  
  
  
  
  
  
  
  
  
9. Letter counseling has been used as a treatment option for:
  - a.) parent-child conflict
  - b.) conduct disorder
  - c.) marital therapy
  - d.) grief resolution
  - e.) child sexual abuse
  - f.) all of the above
  
10. Using your answers from question #9, describe possible psychological symptoms children may experience if they are deprived of these supports.
  
  
  
  
  
  
  
  
  
  
11. In Hong Kong letter counselors must be licensed mental health professionals prior to receiving children's letters
  - a.) true
  - b.) false
  
12. According to the article, what are the key socialization agents that affect a child's development?
  
  
  
  
  
  
  
  
  
  
13. Letter counselors are expected to demonstrate which of the following values in their written responses to clients:
  - a.) demonstrate care for the client and consideration of the possible impact of the response
  - b.) show empathy, acceptance and respect for the client
  - c.) validate and normalize the client's experience
  - d.) focus on client strengths
  - e.) take action if the client discloses abuse, risk of harm to self or others, or suicidality
  - f.) all of the above
  
14. The article states that most of the Uncle Long Legs' volunteers are skilled in which professions?

The Case

15. What does Mary identify as the source of her unhappiness
  - a.) she believes that her mother loves her little brother but does not love her
  - b.) her little brother yells at her and orders her around
  - c.) anxiety over academic failure
  - d.) frequent scolding from her mother
  - e.) all of the above
  
16. How does the counselor begin to help Mary with her problems?
  - a.) the counselor thanks Mary for sharing her unhappy feelings
  - b.) the counselor acknowledges the reality of Mary's perception of her problems
  - c.) the counselor praises her for seeing more than one aspect of her mother's behavior
  - d.) the counselor gives her direct advice about relaxing and studying
  - e.) the counselor advises her to seek additional support from teachers and the school social worker
  - f.) the counselor reminds her that the quality of her effort is more important than the outcome
  
17. What evidence do the letters present that Mary's mental state begins to improve?
  - a.) Mary expresses hope that her life will become happier
  - b.) Mary reports feeling better and more cared for in the relationship with her mother
  - c.) Mary shows an interest in improving the relationship with her brother
  - d.) Mary asks for help to improve her relationships with her friends
  
18. Which of the following factors does the author identify as present in successful letter counseling cases?
  - a.) timely written responses to the children
  - b.) the creation of a therapeutic alliance by assigning one particular individual who follows each child
  - c.) the counselor's assurances of a long-term correspondence
  - d.) the counselor's acceptance of the child's full range of emotion (negative, positive, etc.)
  - e.) specific advice to resolve the presenting problem and encouragement to use the advice
  - f.) the child's choice to use the letters as ongoing sources of support and reminders of the counseling relationship
  - g.) all of the above

Client Evaluation of the Service

19. What evidence did the survey respondents provide that the letter counseling service had been helpful?
  - a.) more than half of respondents identified the counselor among the first to contact when seeking advice
  - b.) the overwhelming majority of clients evaluated the service as helpful to them
  - c.) some respondents provided specific and personal examples of how they had been helped
  - d.) many recipients of the service chose to become letter counselors for other children once they were old enough to volunteer
  - e.) all of the above
  
20. Would you expect similar results if a service like Uncle Long Legs were to be implemented in the United States? Briefly discuss your opinion and rationale below.

# **ILLINOIS CHILD WELFARE CONTINUING EDUCATION QUIZZES**

## Teaching Strategies for Maltreated Students with Learning Disabilities<sup>1</sup>

1. Research indicates that child maltreatment produces negative effects on academic competence. From the list below, which negative effect(s) can child maltreatment produce?
  - A. Learning disability
  - B. ADD/ADHD
  - C. Low self-esteem
  - D. A and C
  - E. A and B
  - F. All of the above
  - G. None of the above
  
2. In comparing non-maltreated children to maltreated children in academic settings, what does research suggest?
  - A. Non-maltreated children are more motivated to learn
  - B. Maltreated children consistently score less on standardized testing
  - C. Maltreated children easily form relationships with teachers
  - D. Maltreated children demonstrated more negative affect towards their teachers and were less motivated to learn
  - E. All of the above
  - F. None of the above
  
3. The use of peer relations as a teaching strategy includes \_\_\_\_\_  
and \_\_\_\_\_.
  
4. As a school social worker, how would you consult with an educator on a case involving a maltreated child with poor academic performance?
  
5. What may you suggest to the educator in terms of responding to the child presented above?

<sup>1</sup>The following questions were developed by the *Illinois Child Welfare Journal's* Editorial Staff and may not be associated with the article's author.

7. Teachers are mandated reporters who must provide proof that abuse has occurred with children.
  - a.) true
  - b.) false
  
8. One concern educators hold with reporting abuse to child protective agencies is that investigations may not provide thorough assessments and analyses. What are some additional steps educators can take in addressing this issue?
  
9. The use of cooperative learning teaching methods with maltreated children is beneficial because:
  - A. children learn competitiveness through challenging one another on individual tasks
  - B. pupils work together to ensure one another's success
  - C. it provides intense social interactions which allow children to develop competitive problem solving skills necessary for future success
  - D. all of the above
  - E. none of the above
  
10. Peer tutoring is a beneficial teaching strategy for maltreated children in several ways. One is the enhancement of social skills, which is achieved through \_\_\_\_\_ and \_\_\_\_\_.
  
11. Child victims of abuse and maltreatment experience the most difficulty with interpersonal and mathematical-logical aspects of intelligence, which are highly valued in educational settings.
  - a.) true
  - b.) false
  
12. According to the theory of Multiple Intelligence, what can teachers do to maximize a student's academic performance?
  
  
  
  
  
  
  
  
  
  
13. Reciprocal teaching, verbal mediation and scaffolding are teaching strategies derived from:
  - A. Theory of Multiple Intelligences
  - B. Cognitive Theory
  - C. Theory of Social Influences on Learning

14. Reciprocal teaching is a teaching strategy that can be valued for at risk children because it can:
  - A. assist children with understanding materials that originally would be too difficult to learn by themselves
  - B. increase confidence and self-esteem
  - C. create an environment where children can present abilities and be recognized for success
  - D. all of the above
  
15. As a school social worker, how might you address the issue of cultural diversity with an educator working with maltreated children of different ethnicities?
  
  
  
  
  
  
  
  
  
  
16. Mnemonic strategies help students recall information through association, categorization, visualization, and verbal repetition.
  - a.) true
  - b.) false
  
  
  
  
  
  
  
  
  
  
17. Some indicators of \_\_\_\_\_ abuse are aggression or over compliance, low self-esteem, self-destructive behaviors, suicidal ideations and/or attempts, poor hygiene, and age-in appropriate distractibility.
  - A. Sexual
  - B. Physical
  - C. Emotional
  - D. Neglect
  - E. All of the above
  
  
  
  
  
  
  
  
  
  
18. Self-evaluations, teacher evaluations, and team assessments are methods of accountability associated with what teaching strategy?
  - A. cooperative learning
  - B. peer tutoring
  - C. Theory of Multiple Intelligences
  - D. Social Influence of Learning Theory
  
  
  
  
  
  
  
  
  
  
19. MI-compatible instruction can foster the academic success of at-risk children because it teaches to their strengths.
  - a.) true
  - b.) false
  
  
  
  
  
  
  
  
  
  
20. What are some ways teachers can help maltreated students become more organized?



## **ILLINOIS CHILD WELFARE CONTINUING EDUCATION QUIZZES**

### Missing Children, Changing Populations and Unrecognized Needs: Why Governor Blagojevich's Child Welfare Task Force was so Important<sup>1</sup>

1. What responsibilities did Governor Blagojevich ask the Task Force to meet through their research about the Department? Outline the six expectations listed in the article below.
  
2. Within the Department's system which children are most likely to become runaways?
  - A. male wards between ages 15 and 18
  - B. female wards between ages 12 and 15
  - C. male wards between ages 12 and 15
  - D. female wards between ages 14 and 16
  
3. Re-examining the incentive structure that favors adoption over reunification in performance contracting was a recommendation that the Task Force made concerning the overrepresentation of Hispanic children.
  - a.) true
  - b.) false
  
4. Concerning independent living and troubled youth, the Task Force suggested the use of a multi-systemic therapy (MST) approach for hospitalized wards. Describe key components of a MST approach below.
  
5. To develop an accurate picture of the child welfare system, Task Force members interviewed and received written input from which of the following groups?
  - A. case workers
  - B. supervisors
  - C. DCFS wards
  - D. all of the above
  - E. none of the above
  
6. What philosophy spearheaded the Department's decision to change the name of protective service workers from "Investigators" to "Protective Service Workers"?
  
  
  
  
  
  
  
  
  
  
7. The Task Force was divided into two working groups identified as \_\_\_\_\_ and \_\_\_\_\_.

<sup>1</sup>The following questions were developed by the *Illinois Child Welfare Journal's* Editorial Staff and may not be associated with the article's author.

8. In “indicated” reports children are often involved in more serious forms of maltreatment and are in greater need of protective services.
  - a.) true
  - b.) false
  
9. By gathering both quantitative and qualitative data from multiple sources, and analyzing it using both descriptive statistics and qualitative data analysis, what research aims did the Task Force accomplish?
  - a.) regulation of the bias associated with any one method
  - b.) triangulation
  - c.) hypothesis testing
  - d.) a and b
  - e.) none of the above
  
10. What type of services did the Task Force deem necessary to ensure that parents needing substance abuse treatment get proper referrals and treatment?
  
  
  
  
  
  
  
  
  
  
11. The Task Force recommended placing runaway children in alternative placements rather than returning them to the placement from which they had run. Briefly discuss one or two ideas that would provide an alternative placement.
  
  
  
  
  
  
  
  
  
  
12. According to the Task Force’s investigation, the Department’s inability to hire and develop qualified staff led to the critical shortage in direct service staff.
  - a.) true
  - b.) false
  
  
  
  
  
  
  
  
  
  
13. What responsibility does a “gate keeper” hold in the Department?
  
  
  
  
  
  
  
  
  
  
14. Concerning child protection investigations, the Task Force suggested that the Department review recommendations by which child welfare bureau for possible implementation? Check all that apply.
  - A. Inspector General
  - B. Child Welfare League of America
  - C. Child Death Review Team
  - D. American Humane Society
  - E. Department of Illinois Children’s Bureau
  
  
  
  
  
  
  
  
  
  
15. Although members of the Task Force believed DCFS supervisors should spend most of the time supervising, they found that supervisors spend the majority of the available time doing \_\_\_\_\_ and \_\_\_\_\_.

16. Concerning adoption, the Task Force recommended that the Department expand the availability and range of services to families at risk of disruption, especially in areas of the state where there are disparities. What types of disparities did they discover?
  
17. Professionals employed by the Department suggested that the reason too little attention had been paid to child well-being was because:
  - A. case workers were not properly trained to identify such outcomes
  - B. case workers and managers focused on more easily measured outcomes
  - C. managers were unable to provide case workers the necessary guidance to identify such measures due to excessive paperwork and bureaucratic demands
  - D. all of the above
  - E. none of the above
  
18. The Task Force suggested that the Department focus on how children will be protected in the future rather than conducting traditional investigations in cases involving young children.
  - a.) true
  - b.) false

## **ILLINOIS CHILD WELFARE CONTINUING EDUCATION QUIZZES**

### Latino Population Trends and Child Welfare Services: Reflections on Policy, Practice, and Research from the Latino Consortium Roundtable Discussions<sup>1</sup>

1. It is estimated that anywhere between 20% to 30% of all Latino families involved with IDCFS will need bilingual services at some point during the lifetime of the case.
  - a.) true
  - b.) false
  
2. The lack of linguistically appropriate resources for Latino families often inhibits them from:
  - A. receiving adequate services
  - B. fulfilling court mandates within ASFA timelines
  - C. making progress toward reunification
  - D. b & c
  - E. all of the above
  - F. none of the above
  
3. Statistics have shown that Latino children make up about 6% of open child cases and 16% of the total open family cases in the state of Illinois. What might this indicate?
  - A. The need for more foster care placements
  - B. Most Latino children are placed in foster and substitute care
  - C. Discrimination against reunifying Latino children and families
  - D. none of the above
  - E. all of the above
  
4. The goal of the Burgos Consent Decree was to provide a complete array of intact family, post-reunification and basic services for Latino families in their respective communities.
  - a.) true
  - b.) false
  
5. What are the three policy and system reforms IDCFS and Illinois-based agencies presented to create opportunities to enhance permanency, safety and well being of Latino children?
  
  
  
  
  
  
  
  
  
  
6. Fifty-one percent of Latino children placed in substitute care are between the ages of 10 and 21. As a social worker, identify two clinical implications that may arise as a result of older children being placed in foster care.

<sup>1</sup>The following questions were developed by the *Illinois Child Welfare Journal's* Editorial Staff and may not be associated with the article's author.

7. Latino children placed with unlicensed kinship caregivers may face:
  - A. exclusion from additional compensation for the care of a child with special needs
  - B. risk of being taken away without opportunity for reunification
  - C. fewer opportunities to benefit from foster care training, advocacy, casework and auxiliary services
  - D. all of the above
  - E. a & c
  
8. Through the Memorandum of Understanding, the Consulate General of Mexico in Chicago assists IDCFS with what services?
  
  
  
  
  
  
  
  
  
  
9. About 72% of all Latino open child cases are in foster care.
  - a.) true
  - b.) false
  
10. The Latino Consortium's purpose is to:
  - A. improve services for Latino families in Cook County
  - B. provide holistic community-based bilingual and culturally competent services to Latino children and families
  - C. Assist other organizations and agencies to provide culturally competent services
  - D. b & c
  - E. all of the above
  
11. What watershed demographic within the Latino population is about to occur?
  
  
  
  
  
  
  
  
  
  
12. In June of 2004, the Memorandum of Understanding was strengthened to protect Mexican minors and their families. State briefly how the Memorandum of Understanding was strengthened.
  
  
  
  
  
  
  
  
  
  
13. What key role did IDCFS delegate to the Latino consortium on behalf of Latino children in substitute care?
  
  
  
  
  
  
  
  
  
  
14. State briefly: what protections are now afforded to Latino families as a result of the filing of the Burgos class action lawsuit?

15. Unfortunately, not all provisions of the Burgos Consent Decree have been fulfilled. Name some of the remaining difficulties in bringing Illinois under compliance with the Decree.
  
  
  
  
  
  
  
  
  
  
16. Name three recommendations made by the Latino Consortium that would address the language barriers and settlement patterns of Latino families in the state of Illinois.
  
  
  
  
  
  
  
  
  
  
17. According to the authors, being undocumented makes it considerably more difficult for Latino families to comply with the demands of the child welfare system. Briefly explain how the lack of documentation acts as a barrier to compliance.
  
  
  
  
  
  
  
  
  
  
18. State two recommendations made by the Latino Consortium that would address the needs of undocumented families.
  
  
  
  
  
  
  
  
  
  
19. State three recommendations made by the Latino Consortium to address the barriers to licensure faced by unlicensed relative foster parents.
  
  
  
  
  
  
  
  
  
  
20. Name three ways that data collection should be improved in order to more adequately address the problems faced by Latino families in the child welfare system.

# **ILLINOIS CHILD WELFARE CONTINUING EDUCATION QUIZZES**

## Annotated Bibliography:

### Why Are People of Color So Disproportionately Over-Represented in the Child Welfare System?<sup>1</sup>

1. State briefly how cultural diversity compounds the difficulty of defining child abuse.
  
2. With regard to sleeping arrangements, Ahn (1990) states that Asian mothers are much more permissive of parent-child co-sleeping as compared to other cultural groups. What does she identify as the Asian parents' motives for favoring this particular sleeping arrangement?
  
3. What disciplinary method did all ethnic groups identify as effective:
  - a. talking to children
  - b. spanking children
  
4. Identify the theory Ahn talks about that could alienate parents from other cultures. Explain briefly why the use of that theory would be difficult to accept for parents from cultures where parent/child relationships are hierarchical and undifferentiated.
  
5. What widely used American medical practice do Hong and Hong (1991) identify as abhorrent and painfully abusive to babies?
  
6. Define familism (according to Hong & Hong, 1991).
  
7. Brissett-Chapman (1997) argues for the development of culturally competent risk assessment tools for use with African-American families. In the absence of such tools, what have workers historically relied upon to assess risk?

<sup>1</sup>The following questions were developed by the *Illinois Child Welfare Journal's* Editorial Staff and may not be associated with the article's author.

8. Identify three of Brissett-Chapman's recommendations to better engage African-American families.
  
9. In the Jenny et al. (1999) research on missed cases of head trauma, the researchers found that medical teams tended to miss diagnosing head trauma more frequently in:
  - a. children from families of color
  - b. children from white families
  
10. Jenny et al. (1999) state that in 20 of the 54 missed cases of head trauma, that the baby's facial or head bruising was attributed to accidental injury. What developmental skill do they say babies should have to explain bruises to the face or head?
  
11. In the Lane et al. (2002) research on racial differences in the evaluation of pediatric fractures, the researchers found that medical teams tended to suspect child abuse more frequently when:
  - a. children from white families presented with fractures
  - b. children from families of color presented with fractures
  
12. To increase the validity of their study Lane et al. (2002) took a random sample of 100 patients and had their charts reviewed by an outside expert in child abuse. State briefly how the outside reviewer's opinion differed from doctors who had examined the injured children.
  
13. What recommendations from the AMA's Council on Ethical and Judicial Affairs do Lane et al. endorse?
  
14. What was the Flemming Rule (Lawrence-Webb, 1997)?
  
15. Woodley Brown and Bailey-Etta (1997) state that the higher incidence of reported cases of violence among African-Americans and the poor might reflect biased reporting. However, they state that the higher rate of reports may also be indicative of what reality?



16. What are the two hypotheses that McRoy (2004) identifies as explanations for Black children's overrepresentation in the child welfare system?
17. What kind of training does McRoy recommend to better prepare social workers for work with poor families and families of color?
18. Courtney et al. (1996) examined several outcome studies that found significant differences along racial lines. What were some of the outcomes they examined?
19. What is Roberts' (2002) main thesis in her work on Black overrepresentation?
20. Why does Roberts believe that teaching cultural competence will only become part of the problem?