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Using Resilience to Reconceptualise Child Protection Workforce Capacity

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Abstract

Current approaches to managing and supporting staff and addressing turnover in child protection predominantly rely on deficit-based models which focus on limitations, shortcomings and psychopathology. This article explores an alternative approach, drawing on models of resilience, which is an emerging field linked to trauma and adversity. To date, the concept of resilience has seen limited application to staff and employment issues. In child protection, staff typically face a range of adverse and traumatic experiences that have flow-on implications, creating difficulties for staff recruitment and retention, and reduced service quality. This article commences with discussion of the multi-factorial influences of the troubled state of contemporary child protection systems on staffing problems. Links between these and difficulties with the predominant deficit models are then considered. The article concludes with discussion of the relevance and utility of resilience models in developing alternative approaches to addressing child protection staffing issues.

Key words: Child protection; adversity; resilience; staff turnover; work – psychological aspects

Introduction

The findings from recent inquiries into statutory child protection services in Australia (for example see Crime and Misconduct Commission, 2004; Ford, 2007; Wood, 2008) indicate that contemporary approaches to child protection are often unsuccessful in ensuring the safety and well-being of vulnerable children and their families. There remains a real sense of crisis in the policy and organisational environments evidenced by ongoing public scandals and practice failures, relentless media attention, regular public inquiries that continue to highlight chronic organisational failure, and continual re-structures and reform. In addition, child protection is itself highly contested and politicised, with neo-liberal ideological underpinnings driving increasingly punitive interventions and deficit-oriented approaches (Lonne, Parton, Thomson, & Harries, 2008).

With respect to Australian state and territory jurisdictions, while there are certainly differences across the country there are nevertheless many similarities in the overall legislative, policy, organisational and practice contexts (Bromfield & Higgins, 2005). Although statutory child protection is inherently difficult, complex and stressful work it should be recognised that work stress can be energising and is not always counterproductive to job satisfaction and productivity. However, the work environment of statutory practice is often complicated by high work loads , work stress and staff turnover, which negatively affects recruitment and retention of social care professionals (Bednar, 2003; Dollard, Winefield, & Winefield, 2001; Lonne, 2003; Mor Barak, Nissly, & Levin, 2001). Nevertheless, there is considerable evidence from Australia and elsewhere indicating that the child protection workforce is one that is highly committed toward children and family well-being, and that this is an important factor in assisting staff to deal with the attendant difficulties of practice, particularly in these organisations (Bednar, 2003; Dollard et

al., 2001; Khoo, Hyvönen & Nygren, 2002; McLean & Andrew, 2000; Mor Barak et al., 2001; Rycraft, 1994; Weaver, Chang, Clark & Rhee, 2007; Wood, 2008).

In this article we argue for a rethinking of the ways in which the capacities of the child protection workforce are conceived and understood, and call for a focus on staff resilience in workforce planning and management so that children and parents can have access to high-quality professional help. We commence with a brief exploration of a number of inter-related contextual issues that affect this overall organisational and practice situation. This is followed by an analysis of the continuing application of deficit-based human resources approaches in child protection. The article concludes with discussion of an alternative model, based on resilience and adversarial growth, and its potential application in child protection contexts.

The Context of Child Protection Practice

The history of child welfare and child protection in Australia and elsewhere is characterised by significant changes over time. There has been a gradual widening of the definitions of abuse and neglect, reflecting changes in understandings of harm to children and increased community concern about their welfare (D. Scott, 2006a, 2006b). It is clear that along with greater knowledge within the general and professional communities about the causes, indicators and consequences of child abuse and neglect, there is now an increased preparedness to support statutory interventions into the heretofore sanctity of family privacy (Lonne et al., 2008). This net widening has contributed to increased notifications of suspected abuse and neglect (AIHW, 2008; Mansell, 2006a, 2006b).

During the latter part of the last century the broad social policy environment became increasingly driven by economic policy and neo-liberal ideologies, which placed emphasis on curtailing welfare, heightened individual responsibility, and the implementation of blaming and punitive responses to control those groups within the community who were perceived as anti-social, troublesome and failing to contribute economically (Jones, 2001; McDonald, 2006). Child protection was also affected by this environmental context, and abusive parents became the subject of regular media and political vilification, with a child rescue mentality often accepted uncritically as being necessary to protect vulnerable children from ‘dangerous’ parents (see for example Courier Mail 25 Feb 2008 ‘No more chances – Clean up your act, slack parents told’). Within the context of a ‘risk’ focused and increasingly anxious society (Webb, 2006), the overall policy and practice framework driving child protection became particularly deficit-oriented, focusing on limitations and shortcomings of parents, emphasizing safety over well being, and actualising an increased social control function despite seemingly contradictory legislative provisions that required parental and child participation in decision making. The advent of mandatory reporting requirements and risk assessment tools which claimed an actuarial objectivity to assessment of the risk to children, for example, helped to operationalise this deficit-orientation (Leschied, Chiodo, Whitehead, Hurley, & Marshall, 2003; Pelton, 2008; Shlonsky & Wagner, 2005). Taken overall, it became progressively more difficult for practitioners to practice in strengths-based ways within this policy, practice and organisational context. These changes in child protection policy happened despite attempts by many to emphasise the benefits of a strengths approach for working with disadvantaged families and communities (see Scott & O’Neil, 2003).

Furthermore, risk management approaches have increasingly led to risk-averse management and political leadership (McDonald, 2006; Webb, 2006). It is important to recognise that these

changing social policy directions were accompanied by rapid change in the organisational environments, including the rise of New Public Management (NPM - more commonly known as managerialism) as well as information and communication technologies that transformed work practices. NPM was very much at the vanguard of public sector reforms, with an ideology and discourse that saw “management becoming powerful and pre-eminent as a knowledge and skill base, largely supplanting professionals as the experts” (Lonne et al., 2008, p. 60). The introduction of entrepreneurial management and the application of a range of market-based approaches (such as strategic planning, enhanced accountability measures, rationing of scarce resources, performance measurement, and tight management of finances and staff) reshaped organisational cultures, priorities and performance (McDonald, 2006; Tilbury, 2004).

In child protection agencies, these changes were accompanied by the introduction of case management systems, along with sophisticated client information and communication technologies, and a raft of policies and procedures that sought to increase practice consistency in line with policy frameworks (Lonne et al., 2008; Parton, 2007). The extent of professional discretion in case management was, if not curtailed, then certainly restricted as organisations became increasingly sensitive and risk averse to scandals, especially where a child died (Lonne et al., 2008). It is perhaps ironic that worker autonomy has been consistently identified as a major factor associated with high job satisfaction and lower work stress levels. Yet, in the same research, child protection work is characterised as having heavy workloads, periods of high stress and elevated staff turnover (Dollard et al., 2001; Lonne, 2003).

Nevertheless, there is an increasing number of critiques of the changed relationships evident in child protection practice and, specifically, the consequences of managerialised proceduralism and its consequences for children and families who come into contact with these systems (Dale, 2004;

Dumbrill, 2006; Parton, 2007). For example, Ruch (2005) notes the benefits that arise from a relationship-based approach to child protection practice and some state authorities, such as South Australia's Families SA, have embraced this practice because of its importance in assisting family change processes. Some researchers have called for increased practitioner autonomy and authority in order to address the negative effects of over-proceduralism that stifles creative and committed professional work with families that have complex issues in their lives (see Cooper, Hetherington & Katz, 2003; Lonne et al., 2008; Pelton, 2008). Nevertheless, the difficulties inherent in changing organisational culture and practice need to be noted.

As a result of a range of factors, statutory child protection systems in Australia have generally experienced rapid growth in their workloads, budgets, organisational size and complexity, and workforce (Ainsworth & Hansen, 2006). Despite the massive increase in resources, service delivery structures generally remain overloaded with mandatory reporting contributing to increasing notifications of suspected abuse, and demands for services to better meet the needs of vulnerable children and families (Ainsworth, 2002; Melton, 2005; D. Scott, 2006a; E. Scott, 2006; Wood, 2008). Taken overall, contemporary child protection systems are crisis-driven and reactive.. They primarily operate using neo-liberal approaches that are forensic- and deficit-oriented, as well as being punitive toward service users and staff. While the influence of NPM has contributed to this state of affairs, there have also been positive efforts toward change resulting from its management processes, through an emphasis upon strategic review and planning, utilising a range of quality assurance mechanisms and identifying the importance of collaborative relations with other stakeholders. Where there is a focus on continual reform, there are also opportunities to alter current approaches toward workforce management and practice. Taken overall, the change context of statutory child protection has sometimes looked like a process of iterative development interspersed with periods of degeneration.

The Child Protection Workforce: A Focus on Adversity

Within crisis-driven and reactive contexts, staff encounter challenges with potential for significant negative individual and organisational impacts. Retention issues are frequently attributed to adverse experiences of staff. Yet, adversity, being defined as disruptive events or experiences with the potential to negatively impact on healthy levels of psychological and physical functioning (Bonanno, 2004, p. 20), is characteristic of child protection work. There are at least four conditions of adversity that research has identified as common experiences in child protection work. These are work stress (Dollard et al., 2001; Lonne, 2003), burnout (Maslach & Leiter, 1997), trauma (Horwitz, 2006; Stanley & Goddard, 2002) and vicarious traumatisation (Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999; Dane, 2000; Horwitz, 1998). The existing research highlights the potential for these experiences to have significant adverse impacts for child protection workers (Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999; Dollard et al., 2001; Lonne, 2003; Horwitz, 1998). Research suggests these adversities contribute to declining staff well-being (Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999; Meldrum, King, & Spooner, 2002) and increased levels of trauma symptomology and psychological distress (Dunkley & Whelan, 2006; Figley, 1995; Lam, 2002; Miner-Rubino & Cortina, 2004; Pearlman & Saakvitne, 1995; Rothschild & Rand, 2006). Both of these patterns ultimately impact on organisations through lowering the willingness and ability of individuals to optimally function and to continue working in child protection.

Following on from significant bodies of work on stress, the concept of burnout in human services arose in the 1980's (Maslach & Leiter, 1997). Since that time there has been a proliferation of research considering the distress experienced by human service workers. Although trauma in

many work contexts had been considered, the recognition of trauma experiences in child protection was slower to emerge (Stanley & Goddard, 2002).

Organisational factors are acknowledged to contribute significantly to the development and negative impacts of work stress (Sulsky & Smith, 2005), chronic stress (Sauter & Murphy, 1995) and burnout (Lewandowski, 2003; Maslach & Leiter, 1997) in child protection (Dollard et al., 2001; Forster, 2004; Schaufeli, Maslach, & Marek, 1993). These impacts occur through worker interactions with people in physical and/or psychological pain (Obholzer & Roberts, 1994), dealing with violence, high workloads, limited resources and poor supervision (Dollard et al., 2001). Resulting impacts include reduced performance, increased absenteeism, mistakes, psychological distress, job dissatisfaction, physical and mental ill health, and symptoms of burnout, which adversely affect client services (Dollard et al., 2001; Schaufeli et al., 1993).

By the 1990s, trauma concepts were expanded to include vicarious trauma, which was particularly relevant to human service workers, including child protection staff. Vicarious trauma, being the “impact of empathic engagement with people who have experienced trauma” (Pearlman & Saakvitne, 1995, p. 279) is recognised as significant for child protection workers (Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999; Dane, 2000; Dunkley & Whelan, 2006). There is agreement that individuals who work with traumatised people can suffer similar psychological and emotional distress to their clients (Cunningham, 2003). Research indicates high rates of vicarious traumatisation in child protection workers, with studies indicating between 30% - 50% have significant levels of symptoms of vicarious traumatisation (Bell, 2003; Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999).

Whilst vicarious traumatisation is a significant contributor of distress in child protection, workers are also faced with the threat of direct trauma. Child protection workers experience trauma through events such as threats, assaults and intervention in traumatic incidents (e.g., client self harm, client deaths) (Littlechild, 2005; Rothschild & Rand, 2006; Smith, Nursten & McMahon, 2004). These traumatic experiences have the potential to cause psychological distress for the worker (Lam, 2002; Miner-Rubino & Cortina, 2004; Mitchell & Everly, 2001; Schouten, Callahan, & Bryant, 2004), including clinical symptoms of critical incident stress and Posttraumatic Stress Disorder. Where the impacts of direct trauma are combined with similar symptoms of vicarious trauma there is a heightened potential that the worker's capacity to continue their work will decrease (Cunningham, 2003).

In the main, research on conditions of adversity has been quantitative in nature, deficit-based, and developed from the perspective of psychopathology (Adams, Boscarino, & Figley, 2006; Dunkley & Whelan, 2006; Linley & Joseph, 2005). This research has led to broader consideration of staff impacts through awareness and understanding of the negative consequences of work stress, burnout and trauma on human service workers (Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999; Dane, 2000). It has also, however, contributed to the adoption of psychopathology-based approaches in human services organisations, focusing on support for (and sometimes removal of) non-coping individuals rather than a broader examination of workplace characteristics that affect all workers and may need to be modified.

Unsurprisingly, organisational responses continue to predominantly rely on individual coping through inoculation approaches and personal counselling (Bell, Kulkarni, & Dalton, 2003; Gibbs, 2001). Although these may be supported or provided by the organisation (often in the form of

employee assistance services), the responsibility for accessing supports and implementation of change usually remain with the individual. A culture of perceptions of individuals as 'not-coping' if they are affected by the work, or the need to be seen to 'be tough' are often evident. In these environments, a 'blame' culture is perpetuated, with 'not coping' individuals seen to be 'at fault'. Unable to 'cope' with the stresses of work, they frequently leave the organisation; their own needs are not recognised and retention issues remain largely unaddressed.

Despite this predominant negative focus, researchers have increasingly identified a proportion of child protection workers who continue to function effectively and report high job satisfaction (Conrad & Kellar-Guenther, 2006; Reagh, 1994; Stalker, Mandell, Frensch, Harvey, & Wright, 2007). Further, a closer examination of the research suggests that even where negative indicators are evident, 50% to 70% of study participants remain without symptoms or dysfunction (Bell, 2003; Conrad & Kellar-Guenther, 2006; Cornille & Meyers, 1999). Thus, while experiences such as vicarious trauma have been argued to be a predictable, normal interaction with trauma work, it is the minority of child protection staff who report symptoms, and of these, not all are at clinical levels. Stress research also argues that stress can have positive and motivating impacts. Therefore, we can not assume that all child protection workers who experience stress and trauma through work will fall into categories of psychopathology and be rendered unable to continue effective work.

An Alternative Model Based in Strengths and Resilience Approaches

Given staff numbers who demonstrate symptoms of psychopathology remain the minority, and many who display symptoms continue to experience satisfaction and work effectively, we need to consider alternative concepts and models to understand and respond to work stress. Strengths

perspectives and resilience models offer potential new insights in relation to child protection staff functioning and retention, and broader approaches to building capacity within individual staff and organisations (Lonergan, O'Hallaran, & Crane, 2004).

Resilience is a concept that has received significant focus in relation to client groups, particularly children from highly disadvantaged backgrounds and/or who suffer abuse and neglect (Rickwood, Roberts, Batten, Marshall, & Massie, 2004). In a field where it has often been suggested that the traumatised reactions of staff reflect those of the highly disadvantaged clients they service (Hart, Blincow, & Thomas, 2007), it seems an obvious gap that these concepts have not also been considered in relation to the staff who face significant adversity in supporting and responding to this client group. Yet, researchers have only recently considered the development of resilience in workers (Bonanno, 2004; Tedeschi & Kilmer, 2005).

Resilience approaches focus on those who manage or overcome adversity, and either avoid negative impacts or identify benefits as a result of these experiences. Some suggest resilience is focused on “the ability to maintain relatively stable, healthy levels of psychological and physical functioning”, or equilibrium, in the face of adversity (Bonanno, 2004, p. 20). Others suggest the concept relates to positive adaptation in the context of adversity (Luthar, Cicchetti, & Becker, 2000), suggesting resilience may not preclude initial distress and has links to adversarial growth. Adversarial growth, defined as “growth and positive change, that is, a shift toward more optimal functioning as a result of the adverse experience” (Linley & Joseph, 2005, p. 263), includes the concepts of posttraumatic growth (Tedeschi & Calhoun, 1996; Tedeschi & Kilmer, 2005), stress related growth, thriving, perceived benefits, and positive adjustment. With both adversity as a precursor, and common outcomes of positive adjustment there is alignment between resilience

and adversarial growth with the potential for positive outcomes for both individuals and organisations.

While risk factors of distress are relatively well understood, the processes and experiences that support resilience and growth are less so, particularly in work contexts. Resilience theorists postulate that resilience, rather than distress and pathology, is the norm (Bonanno, 2004) and that adversarial growth is also common (Arnold, Calhoun, Tedeschi, & Cann, 2005). The resilience literature has developed from initial concepts based on personality factors (such as hardiness and adaptability) (Bonanno, 2004; Luthar et al., 2000; Robinson, 2000) and expanded to develop process based understandings of resilience (Hart et al., 2007; Jaffee, Capsi, Moffitt, Polo-Tomas, & Taylor, 2007). The development of process based understandings of resilience, linking individual and context open opportunities to explore options for development and support of resilience in organisational contexts. While this is an emerging field, and the concepts of resilience and adversarial growth have been challenged on the basis of rigor of the research, measurement and validity (Luthar et al., 2000; Smith & Cook, 2004; von Eye, 2000), these concepts offer an alternative model worth considering, given the limited success of current approaches in relation to stemming staff turnover.

Where deficit models focus narrowly on contributors to stress, Bell (2003, p. 514) argues that a strengths perspective can inform broader personal and organisational strategies and resources that support resilience. As Linley (2005, p. 263) argues, variables that are protective against distress “do not automatically promote resilience and adversarial growth”. Resilience and adversarial growth may occur where there is initial distress and or limited impact but where normal functioning is able to be retained or regained, with possible subsequent personal growth

(Bonanno, 2005). This highlights the need to consider resilience broadly and not just as the flip-side of distress.

A model based on resilience and growth provides the potential to consider not only individual distress but also contributors to positive experiences, job satisfaction and the capacity and desire to continue in the field of child protection. This also allows for consideration of organisational processes and the implementation of strategies for building organisational resilience.

Whilst options for achieving organisational processes to promote resilience have as yet received relatively little attention by researchers, some contemporary findings suggest directions for the future. Control, commitment and challenge have been posited as key elements of resilience (Collins, 2008; Maddi & Khoshaba 2005), with Collins (2008) suggesting that all three can be developed at the individual and organisational levels. While further research to identify new ways forward is required, a strengths and resilience based approach to currently indicated strategies may provide a starting point and support enhancements to workforce development and management.

We suggest that increased use of reflective practice, supervision, ongoing learning and collaborative peer support may be useful in promoting resilience in child protection staff, through strengthening workers' sense of control, fostering commitment through valuing client related work, and assisting staff to successfully manage challenges.

The provision of supervision as support and learning processes in addition to task management, can enhance worker autonomy and control. Control can be promoted not only in relation to client issues but through participation in organisational development including contributing to policy

and practice development. Increased use of relationship-based approaches to practice also creates opportunities for increased worker autonomy.

Commitment to improving the lives of clients is often seen as central to staff, motivating them to work in child protection. Commitment may be related to both an alignment with organisational values and spirituality or mission. As Reagh (1994) suggests, workers who find meaning in their work and feel valued stay in the field. This provides an opportunity for organisations to value and support the personal commitment which draws worker to, and increases worker satisfaction in, child protection. Commitment may be enhanced through recognition of professional skills and genuine valuing of the work that child protection staff do.

Professional supervision (as distinct from managerial) and other support strategies can be instrumental in acknowledging the challenges of child protection work, and assisting staff to successfully manage these challenges, thus facilitating understanding of the self in the work environment and ongoing adaptation to the work and context.

The importance of social support and relationships both with the client and between staff has been recognised by many studies in relation to staff stress. Social support can be promoted at an organisational level as well as developed individually. For example, peer support programs have been developed and utilised in emergency service agencies to support workers affected by trauma. This concept has recently been extended to child protection in Queensland providing a support system for the daily stressors of the role, increased support where specific incidents occur and promotion of more supportive work environments (Russ & Bennett, 2007). Collaborative approaches also create potential for support. In contexts of highly complex cases, collaborative approaches offer not only support in responding to the client work but in creating a network for

the worker. It is increasingly recognised that collaborative approaches offer much in responding to complex cases. Organisations that support collaborative approaches may also be promoting resilience.

Conclusion

It is clear from many inquiry findings and research studies that there are major issues in developing and maintaining a quality child protection workforce in current environments. While research on work stress and burnout has informed and improved staff support strategies, broader, organisational responses are generally lacking, or achieve limited success.

Individualised, deficit oriented approaches perpetuate these issues with a focus on negative impacts on individual worker functioning, placing responsibility and at least, implicitly, blame on the individual who is seen as not coping with the pressures of the work. Colleagues in this culture may be reluctant to support fellow-workers and deny or otherwise hide their own stress lest they be also singled out as 'non-copers'. Across Australia, large numbers of child protection workers continue to leave the sector, with significant personal and organisational costs. While many workers do stay in child protection long-term, with a proportion of these thriving in conditions that others find untenable, the collective perception is increasingly one of inexperienced workers facing insurmountable stress. However, these 'war story' scenarios do not do justice to the realities, lived experiences and commitment of those child protection practitioners who enjoy the exceptional rewards of this challenging and professionally demanding work.

Systemic responses are needed to address the chronic job dissatisfaction and resultant staff recruitment and retention issues in child protection. A resilience-based approach to child protection workforce development and management has considerable potential to turn around

these entrenched patterns. Such an approach would explicitly recognise the nature and potential impacts of child protection work, both negative and positive, and build in systemic support for staff as part of organisational routine and culture. In a context of sensitivity to environmental issues impacting on staff and proactivity in providing appropriate responses, worker stress should elicit responses at organisational as well as personal levels. The focus needs to be on recognising and providing the level of support necessary for all staff to do their job, rather than viewing the need for support as an individual's failure. There is also much to be learned from workers who thrive in situations that others may find unbearably stressful; understanding those who thrive may well suggest directions for building resilience in others. In the current organisational contexts of this challenging work, rethinking workforce capacity in terms of resilience offers considerable promise for effectively addressing work-related stress and the haemorrhaging staff turnover.

While concerted effort will be required to introduce the sorts of approaches advocated here, we are confident that change will occur. In our view, although there is a dominance of managerialism in these organisations there is also increasing recognition of the unworkability of current forensically-oriented practices in statutory child protection and that fundamental change is required. For example, the Wood Inquiry (2008) recommended a move toward a greater role for preventative and non-government based service delivery to assist vulnerable children and families. Families SA has embraced relationship-based practice as fundamental to staff who are to help families care well for their children. Furthermore, most organisations have embraced the need for increased professionalization of their workforces so that staff have the necessary knowledge, skills and attitudes to successfully undertake this sort of work. Rather than seeing these organisational systems as resistant to change, we would do better to recognise the impetus within them through their committed and talented staff to continue reform processes. Changing organisational cultures and building a supportive and worker-friendly environment is essential.

Nevertheless, it should be recognised that change is constantly occurring through the vision and persistence of managers and staff who understand the issues and desire to do things in different, more productive ways so that children and families are safer and experience improved well-being. There are ways forward and having a resilient workforce is a critical component of a well-functioning organisation.

In Australia the identification of issues in child protection systems and practice has primarily been through external enquiries which direct organisational change and recommend increased organisational control and prescribed approaches. These approaches are not working well for either children, families or workers. Given that there continues to be significant staff turnover and recent attempts to address this have had limited success, the consideration of alternative approaches is warranted. Development of strategies to building staff and organisational resilience offers one such alternative. The need for the assembly of a body of evidence for resilience in work contexts to guide organisational approaches is evident. Further research into the place of resilience building approaches offers organisations opportunities to increase their workforce capacity by identifying specific measures to assist staff to deal positively with the stresses and events that this complex work entails. Early research by the authors on staff resilience in child protection is underway. Given the identified issues and the limited research currently available, further research is warranted to enhance understanding of resilience in work contexts which are seen as having significant adversity such as child protection. This research needs to consider not only individual but organisational approaches to resilience. Ongoing reform of child protection systems is dependent upon the active participation of their staff and reconceptualising workforce capacity in terms of resilience is an important way to further this critical task, and thereby help families and the community to care well for vulnerable children.

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