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### Forming and Sustaining Partnerships

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# Partnerships for Children and Families Project

**Forming and Sustaining Partnerships**

P. Schene

June 2002



## Forming and Sustaining Partnerships

Pat Schene

When one looks at the current child welfare environment in the United States, a of the more positive developments is the formation of partnerships at the community level to share the responsibility for child protection beyond the formal public child welfare agencies (U.S. Advisory Board on Child Abuse and Neglect, 1993). This development is closely aligned with a strengths-based approach to vulnerable families as well as a willingness to serve more children and families reported for child abuse and neglect in a less adversarial manner (Farrow & Executive Session, 1997). The convergence of these developments is changing the face of child welfare in many communities in the United States. Of course, policy in this area is ultimately the responsibility of states, counties, and local governments and therefore changes more slowly and less evenly than if it were centralized. Nonetheless, the concept of building partnerships for child protection is *one* of the major current positive forces operating in the country.

Building community partnerships for protecting children arises from the recognition that it takes a community to protect children from abuse and neglect. The formal child protection agency cannot do this work alone (Waldfoegel, 1998). The development of partnerships at the neighborhood and community level is fundamentally directed toward involving more of the important formal and non-formal resources in every community in the work of protecting children.

There is a growing recognition that communities need to have reliable services and supports to prevent child maltreatment, to share in the intervention when

maltreatment does occur, and to provide sustainable ways to connect children and families to supports after cases are closed to formal services.

### **The Development of The Response to Child Maltreatment**

The response to child abuse and neglect in the United States has always depended on some level of partnership between the official child protection agency and the community. Statutory responsibilities to report connected reporters to the agency. Law enforcement personnel have long been involved in those cases where the abuse or neglect reaches the level of criminal conduct. Courts have always had a major role to play in determining whether the harm the child experienced or could experience warranted removal from the home and placement in some form of out-of-home care. Child protection agencies have had purchase-of-service contracts or memoranda of understanding with private and public agencies to provide some of the specialized services needed by abused and neglected children and their families.

The current focus on partnerships in child protection, however, goes well beyond what has been established in the past in terms of the participants and the roles played by the partnership. Community partnerships for child protection encompasses a more comprehensive form of involvement to prevent, respond to, and ameliorate the conditions that contribute to child abuse and neglect. Moreover, the concept of partnerships also includes, in some communities, actually sharing responsibilities for decision making on open cases. Partnerships also are expanding to include people in the community who do not have a formal role to play as part of an existing human service agency.

To understand the reasons communities are moving in this direction, it is necessary to briefly address the development of public involvement in the abuse and

neglect of children, the processes underway fostering partnerships, and the emerging pattern of shared responsibility for protecting children.

### Background/History of Public Involvement in Child Maltreatment

The protection of children is a value shared by all cultures and communities around the globe. Although the role of parents varies across cultures, it is always important and usually the primary source of protection, but the community also has a stake in the well being of its children. In the United States, independence, privacy, and parental rights are highly valued. The legal system supports the right of families to rear their children according to their own values and requires evidence of danger of harm before the state may intrude on the sanctity of the home to protect children (Schene, 1998).

The pattern of intervention in child abuse and neglect throughout much of the nineteenth century was largely focused on the poor and oriented toward the 'rescue' of children perceived to be neglected or abused. Much of the early work in child protection was provided through private agencies financed by both public and charitable dollars. The forerunners of the child protective service agencies of today were private associations known as 'anti-cruelty societies' formed in many eastern and some mid-western cities in the late nineteenth and early twentieth centuries. These agencies (more than 300 by the early 1900's) were supported by both public and private funds and investigated reports of child abuse and neglect, filed complaints against the perpetrators in court, and aided the courts in their prosecution (Antler & Antler, 1979; Costin, 1985).

By the mid-twentieth century, the issue of child protection was transformed in the eyes of professionals from one of law enforcement to one of rehabilitation through social

services. Efforts to protect children gradually became part of the growing array of human services provided by governmental agencies. By the 1940's, functions once performed by the private societies were taken over by a variety of public and voluntary organizations such as juvenile courts, juvenile protective associations, family welfare societies, and some newly formed governmental bodies (Costin, 1985).

The federal government became more consistently involved with the passage of the Social Security Act of 1935, establishing, not only Aid to Dependent Children, but also Title IVB – Child Welfare Services. Limited federal funding encouraged states to develop preventive and protective services for vulnerable children. In practice, however, states used these funds mainly to pay for foster care, not to provide supportive services to families whose children remained at home. This remains the main way federal funds are utilized today.

In the 1960's, medical professionals focused public attention on evidence that many physical injuries to children were apparently inflicted by parents or caregivers. X-rays and other documentation of these injuries brought widespread coverage to what was named the 'battered child syndrome'. Child abuse became an issue of national importance and the role-played by government agencies in identifying and responding to the problem expanded significantly.

In 1974, federal legislation – The Child Abuse Prevention and Treatment Act (CAPTA) encouraged states to pass laws requiring professionals and others to identify children who needed protection, and to support public social services to investigate these reports and keep track of substantiated cases. Buoyed by growing public awareness of child maltreatment, this federal leadership helped to establish a nationwide system of

child protection including state statutes that mandate the reporting of physical abuse, neglect, sexual abuse, and exploitation. CPS agencies were to investigate reports, and central registries of perpetrators and victims were established in all states.

The formal system through which we respond to child abuse and neglect is now largely a governmental one. The private child advocacy organizations and private child welfare agencies who led initial actions on behalf of vulnerable children made important contributions, but they only reached a small portion of the children experiencing abuse and neglect. Reporting laws greatly expanded the number of children identified and governmental programs to respond were established in every state. These laws were passed out of a widespread and growing concern that many children were being abused and neglected by their parents and caretakers. There was a strong sense that society needed to protect children whose parents were unwilling or unable to provide that protection.

Primary responsibility is currently vested in public child protective services (CPS) agencies that receive, investigate, and respond to reports of child abuse and neglect from professionals, family members, and the general public. CPS is usually linked to child welfare departments with broader responsibilities, including foster care and adoption. CPS functions are funded through state or local authorities and are governed by state statutes, which are often shaped by federal legislation and funding. At the local level, the work of CPS is done in close coordination with the courts, law enforcement agencies, and local social service providers.

The construction of the response to child maltreatment has been based on several core assumptions. One of these assumptions is that parents would resist intervention and

offers of help for their families. It is also presumed that legal authority to intervene in family life could only exist if reports were carefully investigated and clearly substantiated. Finally, child protective services have normally been considered a non-voluntary service provided with the support of the courts. Many of these assumptions have been challenged as we have moved forward to build partnerships with families and communities to address child abuse and neglect and serve more families voluntarily.

### Why Partnerships?

There is a growing recognition that communities need to have reliable services and supports to prevent child maltreatment, to share in the intervention when it does occur, and to provide sustainable ways to connect children and families to supports after cases are closed to formal services (Farrow & Executive Session, 1997). Although the work of the formal child protection agency (CPS) will always be central, there is a strong sense that many cases reported to CPS might be better served by a different system of supports and services. Moreover, of the cases that belong with CPS, many require resources that go beyond what can be offered by one agency. A coordinated approach using a variety of supports and services is needed by most families served by CPS.

Coordinating resources and developing needed services are key roles for community partnerships. It is also clear that many vulnerable children and families are not being reached by any agency. A key part of the community partnership agenda is to reach out to such families – building visible and accessible ways to connect families to support. Making it easier to both offer and receive help has been a shared goal of partnerships.



## Processes Underway Fostering Partnerships

The development of support for partnerships arose out of a broader child welfare reform agenda that has been taking form for more than a decade. Every state in the union has made some significant changes in their response to child abuse and neglect. The agenda for reform, although generated from different groups and different immediate pressures, is largely consistent. There has been wide agreement that we needed to address concerns in a number of key areas.

Federal legislation has played a key role over the past decade. There is widespread recognition and understanding of the limitations of the existing system of reporting and response. There is also a growing sense of community concern about vulnerable children and a clearer willingness to play a greater role in their protection. Models of community partnerships now exist and provide models for other communities. There is an increased focus on outcomes and accountability that many recognize cannot be achieved unless a variety of services and supports form partnerships to achieve these outcomes.

### *Federal Legislation*

The Family Preservation and Support Initiative (PL 103-66), passed in 1993, was the catalyst for communities to come together to identify what resources they had and what they needed in the way of services for family support and family preservation. The state plans emerging from this process became the foundation for using federal funds. It is assumed that *partnerships* between public and private non-profit agencies are the *mechanisms* through which services are delivered, both to support families to prevent

initial or further child maltreatment and to preserve families undergoing crises that could lead to the placement of their children in foster care. Funding to support these services was a new entitlement and this funding has increased since 1993 (Family Preservation and Family Support Initiative, Public Law 103-66, 1993, amended 1997).

Federal policies in recent years focused on the three major outcomes of intervention in child welfare – *child safety, permanency, and well being*. Statutory language and policy clarifies the requirement that state plans have to be based on community input about the best ways to achieve these outcomes (Child and Family Service Reviews, 2000). The Adoption and Safe Families Act (PL105-89), passed in 1997, focused on promoting safe and stable families by moving children in foster care more rapidly into permanent homes and encouraging adoptions. Reasonable efforts still had to be made to rehabilitate the family to enable reunification when children were removed from their homes, but permanency for children had to occur within a shorter time period – usually within 12 months of placement in out-of-home care. One effect of the legislation has been to increase efforts to bring community resources together early in the process to help multi-problem families with children in placement in order to meet the time frames for permanency planning.

#### *Limitations of Existing System of Reporting and Response*

One area which has received much attention is the need for earlier intervention with troubled families. It has become clear that we cannot wait for a report of child maltreatment to offer help, nor can we ‘screen out’ so many cases without offering assistance. Reporting skyrocketed after reporting systems were implemented in all states in the 1960’s, with maltreatment reports increasing more than 300% from the early

1970's to the early 1990's. Reporting is not currently increasing at the same rate, but has leveled off in recent years. Still, more than 2.9 million children were reported in 1999, representing an enormous burden on the resources of CPS agencies to respond adequately when someone in the community suspects child maltreatment. Almost 40% of the reports were 'screened out' without an investigation; of those investigated, only about 30% were judged to be substantiated. Of the 461,000 children in substantiated reports, only 55.8 % received services after the investigation; an additional 217,000 children on reports that were not substantiated also received some services (United States Department of Health and Human Services, 2001).

The volume of reporting, the volume of abused and neglected children who do not come to the attention of CPS, and the limitations on the resources of CPS agencies to provide sufficient and effective services, has led many to look for alternative ways to respond. Added to these factors is the experience that many families who come to the attention of CPS cannot or do not have access to the variety of social supports and services that could enhance their parenting and stabilize their families. Moreover, many families reported to CPS would be willing to utilize such supports and services without the coercive, non-voluntary intervention associated with being identified as abusing or neglecting their children. Undergirding these considerations was the long-standing value that protecting children and strengthening families is the responsibility of the whole community, not just the CPS agency and the courts.

The cumulative impact of these limitations and the re-examination of some of the underlying assumptions of our system of reporting and response has led to a greater

openness to reaching out beyond CPS to the wider community to form partnerships for the protection of children.

*Community Concern and Willingness to Play a Greater Role*

The pressure to engage families more effectively to enhance their commitment to positive changes has also played a major role in the reform of the American CPS.

Moreover, there are many people and groups in many lower-income communities who have become increasingly concerned about the welfare of their children. They have seen many parents caught up in the problems of substance abuse, domestic violence and the demands associated with getting and keeping a job. Housing is often precarious and childcare unaffordable, leading many parents to accept less than safe options for their children. Violence in neighborhoods and the presence of gangs exacerbate the underlying concerns about children (Center for the Study of Social Policy, 1997).

Faith groups, schools, civic organizations, and neighborhood associations have found many ways to contribute to the care and protection of children. However, there is a strong sense that these efforts are not well coordinated and normally are totally separate from the efforts of public child welfare agencies. Moreover, vulnerable families need longer-term supports for their parenting responsibilities than would be reasonable to expect from a CPS agency or other formal resource. It is recognized that coordination of a comprehensive and integrated system of resources is needed to protect children and strengthen families. Furthermore, it is acknowledged that these resources must be able to respond flexibly to the variety of cases that come to CPS. Children benefit enormously from the active involvement of caring adults in their lives and many concerned people

recognize that building those partnerships can produce better outcomes for the children and their families.

Some communities are trying to build on the concerns and commitments of individuals and groups to form more coordinated partnerships for protecting children. These communities' experiences speak to the willingness of many to become involved, extend existing efforts, and work with others to protect children. This willingness stems from a belief that these efforts can be sustained and effective only if the major forces in the community are making decisions together.

#### *Focus on Outcomes and Accountability*

Public policy in recent years has focused increasingly on outcomes. This can be seen in almost any area of public policy and has particular relevance for child protection. All agencies receiving any public funds must demonstrate the effectiveness of their efforts. Moreover, the clear direction is to define effectiveness with the same outcomes; increased attention on child safety, the need for permanence, and the well-being of children also have motivated CPS agencies to re-think some of the traditional ways in which they work with families. Children who die or are profoundly harmed by abuse and neglect land on the front pages of many newspapers. Abuses within foster care; concerns about the health and conditions of many children in poverty, the disaffection of many inner-city youths and other issues have contributed to a readiness to examine what we are achieving from our efforts and interventions. Thus, it has been quite useful to not only focus accountability on outcomes, but to have a shared sense of what those outcomes should be.

It is clear that no one agency working alone can achieve the desired set of outcomes for children. The recognition of the relevance of these outcomes has led many organizations, public and private, to come up with similar or common assessment tools, to generate shared methodologies for measurement, and to be more open to forming the necessary partnerships for their achievement.

There are a variety of overt and subtle forces impacting the willingness to pursue partnerships for protecting children. Federal legislation, the limitations of the existing system of reports and response, community concern and willingness to play a greater role, and a generally increased orientation toward accountability to broad community outcomes, rather than agency-specific accountability for processes, are all illustrative of the forces that promote partnership development.

### **Who are the Partners?**

It is important to understand that partnerships grow and develop, adding new people and agencies over time. There is no set number or type of partner that must be represented before it could be known as a partnership. The idea is to expand responsibility for and participation in the mission of protecting children. Therefore, there will always be a growing list of actual partners, as well as another list of potential partners.

An important distinction is often made between formal partners and non-formal partners. Formal partners are those whose professional responsibilities or direct involvement in cases give them a defined and even expected role to play. Non-formal partners are those who represent natural settings or service agencies very relevant to the lives of children and families, but with no defined role with child protection cases.

Perceptions can vary about where any particular agency falls depending on the degree of integration of the community's protective service system.

*Appendix A* provides a partial list of formal and non-formal partners who may be involved in the protection and well being of children. This list is neither definitive nor comprehensive. It is illustrative of the types of organizations that could be part of any community's partnership for child protection. Moreover, even among the most clearly formal partners, roles usually have the potential to expand and, more importantly, their participation could include varying degrees of coordination as well as varying degrees of commitment to building the partnership. It is also clear that many of the less formal partners are not necessarily directly involved in the protection of children as their main focus and would have to be recruited into the work of the partnership.

#### Levels of Integration

Community partnerships for protecting children can take different forms in different communities. One of the distinguishing characteristics of any partnership is the level of integration – in other words, what types of activities reflect “partnership” decisions or actions, as opposed to the decisions or actions of individual agencies. Table 1 demonstrates the range of integration levels possible in partnerships and provides examples from communities which have embraced the various levels of integration in their partnership efforts.

Integration in these partnerships can range from lesser involvements, in which information is exchanged and appropriate resources are planned, to deep integration in which all partners in the community are equally accountable for the outcomes for children and families. At lower levels of integration, agencies may work together to help

the families in the community connect to existing resources and to integrate advocacy efforts for acquiring more resources for vulnerable children and families. Another level of integration also may involve shared planning for meeting existing needs in order to assure the most efficient use of available services and supports and to avoid redundancy. A higher level of integration could involve efforts to understand the services offered by other partners. This education process may involve cross training or job-sharing. It might also involve a lead agency, probably CPS, hosting regular meetings of all actual or potential partners to convey information about identifying and serving abused and neglected children, for example, or to showcase the services of one of the partner agencies. At this level of integration, the agencies also could focus on the volunteer opportunities in the community that staff from any of the partner agencies could participate in and, possibly, receive some compensatory time from their agencies for volunteering.

Partnerships also can work to generate a common intake form across agencies, enabling families who need the services of multiple agencies to complete the intake process only once. Additional integration can occur when agencies share decision-making on cases through family team meetings. This process could also lead to higher levels of integrated case management and service coordination across the partnership on the cases that are appropriate for such involvement.



Table1: Levels of Integration

<b>Level of Integration</b>	<b>Ways of Working Together</b>	<b>Examples from Partnership Communities</b>
Coordinating to help families connect to existing resources	Working together to provide outreach to families in the community, recruiting neighbors and concerned citizens to contribute their time to support families, and to make it easier for people to both offer help as well as request help in order to keep children safe.	<p>Cedar Rapids developed “block links” people who are fundamentally volunteers who initiate contact with their neighbors in about a 2-5 block area. They offer information about the available resources and services related to children and families and encourage residents to participate in community meetings and celebrations. They are connected to each other, receive some training, and a staff person works closely with them.</p> <p>Communities often choose to establish family friendly “hubs” where a variety of formal and non-formal services and resources are co-located or accessed. Schools, family resource centers, churches, community centers, etc. are chosen as hub locations.</p>
Joint planning for existing needs to avoid redundancy	“Resource mapping” to identify and organize the existing sources of formal and non-formal supports and services. It may also involve some of the initial members of the partnership recruiting others or tapping into the natural systems of support and connection within the community.	<p>Michigan and Washington have formal ways the state government funds and works with coalitions of community agencies. The expectation is that in order to receive state funding, these coalitions will jointly plan to meet existing needs without redundancy, ensure families are connected to resources, and share in the tracking of common outcomes.</p> <p>The Clark Foundation demonstration sites have all engaged in a partnership process to map existing resources and communicate that information to all members of the partnership. When partnerships form governance bodies, the work of identifying existing resources and needs often leads to joint planning around how to build what is needed or expand what is available.</p>
Understanding partners’ ways of working	This could take the form of <i>cross-training</i> , or even <i>shadowing</i> staff of other agencies. It could also involve co-locating various agencies and using the opportunities of proximity to foster partnerships.	<p>In Jacksonville, staffs from the local domestic violence shelter and the child welfare agency “shadowed” each other -- meaning they went out together on the cases served by either agency. This led to strengthened relationships as well as an increased understanding of the parameters of policy and practice as well as opportunities for working together at key points in case decision-making.</p> <p>The public child welfare agency in St. Louis has hosted periodic meetings where all community agencies are invited to attend. These meetings provide information about the work of the partnership as well as helping the community as a whole understand the variety of resources available. Questions are responded to about policies, procedures, and criteria for decision-making. New partners are often recruited through these meetings. Moreover, more of the community gains an understanding of how the agencies operate.</p>

<b>Level of Integration</b>	<b>Ways of Working Together</b>	<b>Examples from Partnership Communities</b>
Developing common intake forms	Families who need multiple services only have to complete one form that satisfies all the initial informational needs of all the agencies. This could lead to the partnership supporting a “no wrong door” policy, whereby any needed service could be accessed for a family through any of the partner agencies.	All of the four Clark sites have worked on identifying a set of information they all commonly need and developed shared forms to collect that information, no matter what agency first sees the family. This not only saves the family from completing redundant forms, it also sets the stage for each agency seeing itself as part of a network.
Sharing decision-making on cases	Involved agencies, as well as family members and informal supports, come together at a <i>family team meeting</i> at key points in the case to identify the priorities to be worked on, the changes needed to protect the child, the services and supports to be offered to the family to make the needed changes, and the outcomes anticipated by the family.	<p>All formal and non-formal resources working with a family as well as people the parents themselves see as their supports meet together at a family team meeting at the outset of case planning and intervention. This is not done for all cases, but communities choose the type of case most likely to benefit from this way of work. Commonly, families with multiple prior reports, or particularly complex situations would be selected.</p> <p>In addition to formal meetings, some communities who have service resources co-located in the community have multiple opportunities for less formal case consultation and shared decision-making.</p>
Sharing accountability	Shared accountability for a set of outcomes for families served by the partnership. The case would “belong” to the partnership, not to only one agency. The commitment would be to work together to achieve those outcomes and engage in any necessary “course corrections” or changes in supports and services that would be essential for their achievement.	<p>The self-evaluation processes undertaken in a number of communities depend on shared commitment to a set of criteria to measure progress and outcomes. The governing body of the partnership reviews data collected by all members and there is the opportunity for course corrections if needed.</p> <p>The community collaboratives funded by the state in Michigan and Washington are examples of multiple agencies having a stake in achieving common outcomes related to child safety, permanency, school achievement, etc.</p>



Possibly the highest level of integration would involve shared accountability for a set of outcomes for families served by the partnership. Even though one agency might take the lead at any one time, all partners would have an equal responsibility for the outcomes.

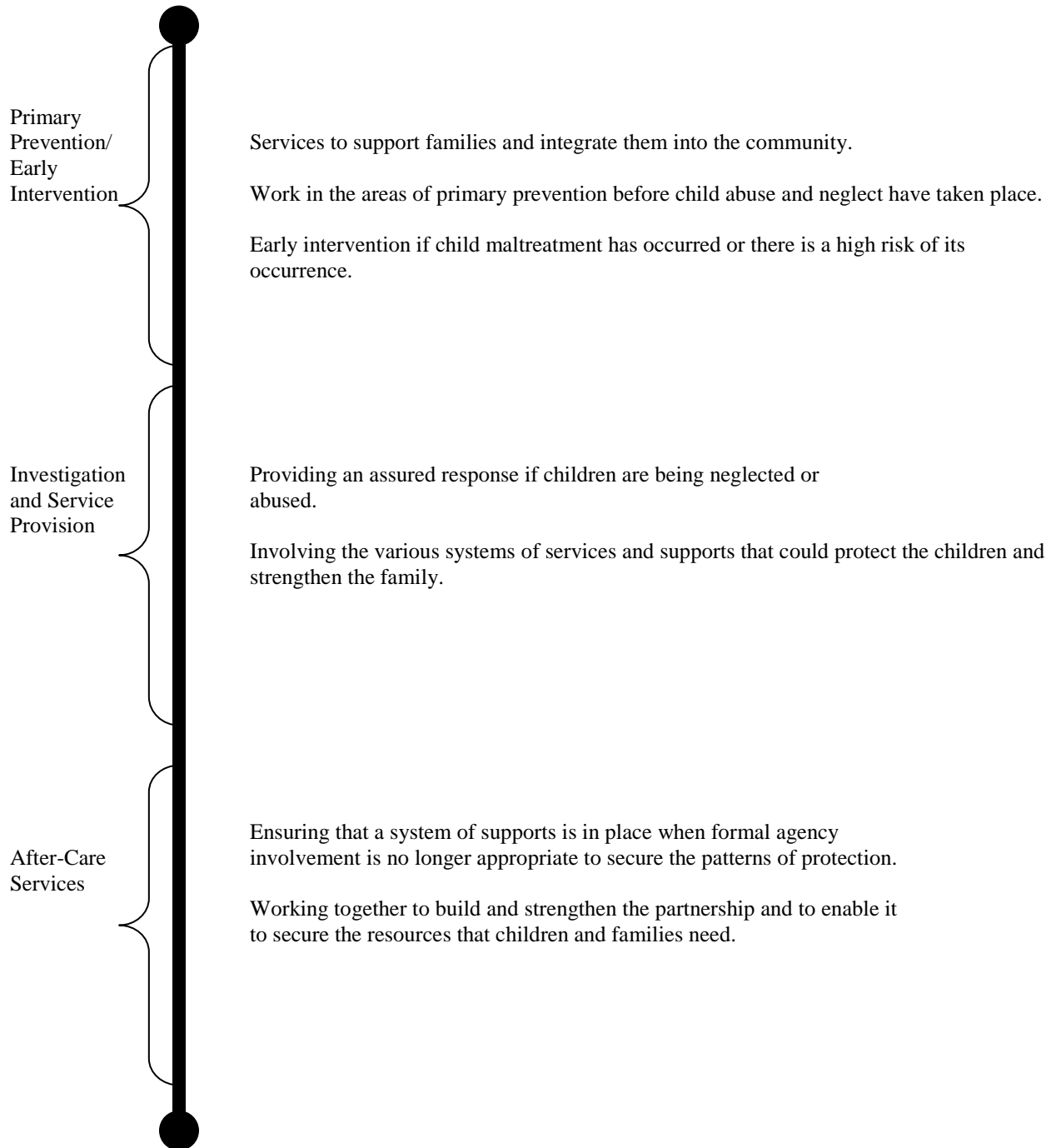
### The continuum of involvement

It is clear from the above discussion of roles and activities that community partnership involvement does not necessarily begin with an official report of child abuse or neglect or end when CPS closes the case. The continuum of involvement covers the entire gamut of primary prevention and early intervention, investigation and service provision after a report has been received, and the provision of care when formal agency involvement is no longer needed. Figure 1 describes a continuum of interventions and supports for community partnerships. It is also clear that this continuum of involvement can only be effectively brought to fruition when community partnerships include an adequate range of formal and non-formal resources committed to the protection of children and to the strengthening of families.

### **Communities with Partnerships**

In the United States, building partnerships has usually begun with leaders in the community willing to explore new ways to support vulnerable children and their families, combined with the visionary leadership and sometimes the resources of private foundations. As the concept of partnerships has become more widely disseminated, many communities are moving in this direction without any formal foundation sponsorship. Two community partnerships are described below, as illustrations of what is being attempted in many American communities.

**Figure 1: Continuum of Interventions and Supports for Community Partnerships**



## Jacksonville, Florida

This Community Partnership focuses on five public housing developments near one of the full-service high schools in the city. The five communities have fewer than 1,000 households, all living at or near the poverty level. The Partnership's mission is to make children safer by strengthening the community. Relationships have been built among local service providers, between caseworkers and family members, and among individuals who live in these public housing communities to support each other and protect the children (White, undated).

Most of the women and children in the housing developments attend church regularly and thus are connected to larger social institutions. As the public child welfare agency began focusing more on the neighborhoods, administrators, supervisors, and caseworkers became knowledgeable about the formal and informal leadership in the communities and have worked together to connect families with needed services and supports both within and outside the community.

Other social service resources, such as Project Reach, a comprehensive counselling and referral center, are housed in the same full-service school and has staff representing six different agencies to help guide families and children directly to the help they might need. They are connected to domestic abuse counseling, drug treatment services, tutoring, youth programs, and prenatal care resources. The Neighborhood Network includes dozens of service agencies, governmental offices, grassroots associations, churches, and civic groups, such as the Urban League and the Boy Scouts, who attend meetings and play a role in the Partnership (White, undated).

The core of the Partnership, however, is the residents of the five housing developments. Placing great emphasis on identifying indigenous leadership, reaching out broadly to all the

residents and the surrounding neighborhoods, and organizing neighborhood celebrations, have all contributed to a strong sense of how both to ask for help as well as to offer help.

A small circle of residents make up the Governance Committee, the Partnerships' board of directors. Most live or work in the housing developments; the others come from nonprofit organizations and government agencies. The Governance Committee has five subcommittees co-chaired by a community resident and an agency official. These include Community, Family Awareness, Domestic Violence, Neighborhood Network, and Self-Evaluation. There is also the Integrated Service Team, a subcommittee of professionals who discuss specific cases to coordinate interventions and decisions, but keep information confidential.

Some of the key ingredients for change have been the sustained commitment and follow-through of those closest to the Partnership, the continued development of grassroots support, the strengthening of the fabric of relationships across public and private, formal and non-formal resources, and the respect with which everyone is treated. It takes talent and commitment of leaders to mobilize residents and to build the Partnership, continually recognizing that everyone has strengths and assets to contribute to the community.

### St. Louis, Missouri

The St. Louis Neighborhood Network operates mainly in two zip codes in an area characterized by high rates of child abuse and neglect reporting, poverty, and transience. Neighborhood hubs, based at community schools, a church, and a neighborhood organization, serve as centers for the coming together of child welfare staff, social service agencies, teachers, clergy, family support workers, and parents from the communities.

An important context for the Partnership in St. Louis is that the city was one of the original pilot sites for the state initiative to create two tracks for responses to reports of child

maltreatment – an assessment track as well as an investigation track. The same set of zip codes were also the focus of *Caring Communities* – a statewide program to improve outcomes for children through greater emphasis on coordination among educational, health, economic development, and social services agencies. All of these forces shared some common goals related to building the community’s capacity to protect children, providing families with supports accessible in their neighborhoods, and preventing initial or continuing patterns of child abuse and neglect (Schene, 2000).

The St. Louis Division of Family Services (DFS), part of the state child welfare system, has been a leader in the Partnership and has made many changes in their own policies and practices to foster community partnerships. They have stationed their staff in the neighborhood hubs, appointed specialists in chronic neglect who work in partnership with neighborhood family support workers, and developed specialized services for drug-exposed infants and their families. They also routinely share case decision-making with other formal and non-formal resources involved with the same families and serve as partners with schools and others to help respond to vulnerable children and families, before there is a need for an official report of child maltreatment. For example, DFS and the schools work together on cases of educational neglect or truancy; without filing a formal report, DFS staff work with the school social worker to help get kids to school regularly (Schene, 2000).

The Sigel Community Education Center – a community school – provided space and utilities for Partnership agencies at the Center, in addition to developing a “welcoming center” parents in the neighborhood. An entire DFS child protection unit – a supervisor and several caseworkers – continues to be based at the Sigel School. In the process of assessing reports, these staff often connect families to community supports and services. Most of the reports are



closed at intake, but the intake period can extend as long as 90 –120 days allowing many stabilizing services to be put into place removing the need to open about 20% of cases to ongoing services (Schene, 2000).

Particular tools and processes have been developed to support the Partnership including *common assessment forms*, which are shared across agencies; *community support agreements*, where non-formal resources voluntarily commit to work with the family and provide oversight around child safety; and, the use of *family team meetings* early in the case planning process by DFS and partner agencies. These meetings are also attended by all those considered significant to supporting the family in their process of change.

### **Facilitating Partnerships**

There are a number of ways the development and operation of partnerships has been facilitated. These include making statutory changes, generating mechanisms of governance for the partnership, and changing some policies and practices of child protective services to incorporate partnerships.

#### Statutory Changes

The major statutory change that has facilitated partnerships has been in the direction of *differential response* – or the formal distinction among reports/cases of child abuse and neglect to respond to some family situations through more voluntary participation in services, as opposed to handling all reports through investigations followed by involuntary involvement in child protective services. Called “dual track”, “multiple track” or “alternative response”, this approach recognizes the variation in the nature of reports. Without expanding the existing state definitions of abuse or neglect, the use of differential response allows agencies to provide services to some cases without a formal determination of abuse or neglect. These families often are rapidly

connected with a variety of community services that could stabilize the family and help to protect the children (Schene, 2001).

Working with the broader human service system at the community level is critical for differential response to work well. Partnerships are facilitated due to the need to collaborate and coordinate services and supports. Agencies outside of child welfare take on new responsibilities with the families referred for services. There are more opportunities and expectations for working in partnership to assess the safety of the children, the progress of parents, and in making decisions about ongoing involvement (Schene, 2001).

Another form of statutory change used by some states involve state funding of community partnerships or alternative response systems that work with CPS to serve those families meeting the state criteria for abuse or neglect, but constituting low to moderate risk of subsequent harm. Examples of such approaches are seen in the states of Washington and Michigan.

In 1997, Washington State both required and funded the alternative response system to serve low to moderate-risk cases through public health agencies and community support services. Three models of partnership were identified; each received funding, managed cases, and referred families to community services as well as provided services directly. All cases were reported initially to CPS and met the basic criteria of abuse and neglect. Although these lower-risk cases are not opened to CPS, the public agency can remain involved to monitor, help with services, and respond when needed. Before 1997, Washington had referred the lower risk cases to communities, but did not provide any funding for services. Research at that time indicated that many of the families did not receive needed assistance (English, Wingard, Marshall, Orme, & Orme, undated).

In 1999, the state of Michigan implemented a five-category disposition system for child abuse and neglect cases, ranging from court involvement to voluntary community services. In two of the categories where community services are needed or recommended, there is evidence of abuse/neglect and CPS must assist the family in receiving community based services on a voluntary basis. Michigan set up Multi-Purpose Collaborative Bodies (MPCBs) to facilitate system reform. These bodies include a wide variety of service providers and community members. The State funded those MPCBs that involved a broad spectrum of community stakeholders and developed a community plan to qualify for the funds. At-risk families in unsubstantiated or low-risk cases referred by CPS are given priority for their services (Michigan, 2001).

In both Washington and Michigan, the local partnerships collect evaluative data on state-determined outcomes related to re-referral to CPS and other indicators or child and family well-being. Continued funding is tied to outcome achievement.

### **Lessons Learned in Building Partnerships**

The development of community partnerships for protecting children is not a completely new approach, but what is relatively new is the explicitness of this strategy. Accompanying this more deliberate approach is a level of conceptualization, proactive design, planning as well as continuing tracking of progress which allows us to perceive those factors that seem to facilitate partnership development.

There also is a heightened sense of the importance of identifying the salient facilitating factors in order to disseminate partnerships across many communities. This more analytical process has been reinforced by the fact that sponsoring organizations – foundations, state child welfare systems, national associations, for example – are working in multiple communities at the

same time. The communities themselves are very aware that they are being looked upon as “leaders” or “pilot projects” in new approaches to the protection of children and the strengthening of families and communities. All of these conditions allow us to identify some of the lessons being learned in developing community partnerships.

#### Centrality of leadership of public child protective services agencies

Partnership development can be driven by a variety of organizations and be led by any one of the partners. However, it has become clear that, when the focus of the community partnership is the protection of children, the leadership group has to include the public child welfare agency. If not as the original catalyst, certainly early in the developmental process, the child protection services system has to be more than just a participant. It has to be fully committed to the partnership in order to make the necessary changes in its policies, practices, and ways of working that enable partnerships to be successful.

CPS need to be in the forefront of bringing partners into the process of protecting children and strengthening families. It is essential that the purposes of partnerships are well understood and articulated by CPS in order to communicate effectively with the larger community. It is especially important that the community does not see partnerships as a way of “unloading” CPS responsibilities, but rather as a way of working together to keep more of the community’s children safe. CPS also plays a facilitating role by initially inviting others to discuss what is meant by partnerships for child protection and how they can work together. Other agencies within the partnership also can take significant steps to facilitate partnership development; when the community as a whole supports the work of CPS and is supported by

**Table 2: Summary of Lessons Learned in Building Partnerships**

Issue	Lessons Learned
Centrality of the leadership of CPS agencies	<ul style="list-style-type: none"> <li>· The leadership group must include the public agency</li> <li>· The purposes of the partnerships must be well understood and articulated to the community</li> <li>· The community must not see the partnership as a way of unloading CPS responsibilities</li> <li>· CPS agencies play a vital role in bringing together various partners and resources</li> </ul>
Locating services together in the neighborhood	<ul style="list-style-type: none"> <li>· Co-location:               <ul style="list-style-type: none"> <li>- is more convenient for families,</li> <li>- facilitates information sharing,</li> <li>- assists in coordinated interventions across agencies</li> <li>- allows workers to get to know the community they work in</li> <li>- normalizes the use of services</li> <li>- places a strong focus on prevention and early intervention</li> <li>- must be accessible and neutral</li> </ul> </li> </ul>
Formalizing new agency agreements and ways of working together	<ul style="list-style-type: none"> <li>· Agencies should provide opportunities for cross-training/job shadowing</li> <li>· Integrated service teams can provide more effective services to “multi-problem” families</li> <li>· Family team meetings can be an effective means of securing commitments from family members and community resources</li> <li>· CPS agencies should host open meetings to actively involve the community</li> <li>· Partnerships should develop a means of coordination, such as memoranda of understanding or contracts with other agencies</li> </ul>
Developing tools for partnerships	<ul style="list-style-type: none"> <li>· Useful tools for partnerships include:               <ul style="list-style-type: none"> <li>- common assessment forms</li> <li>- community-wide documentation of formal and non-formal resources</li> <li>- community support agreements</li> <li>- methods for maintaining confidentiality</li> <li>- means of providing flexible funding</li> </ul> </li> </ul>
Community outreach	<ul style="list-style-type: none"> <li>· Encourage existing neighborhood leaders to serve as “block links” to help families find the services they need</li> <li>· Find “neighborhood helpers” who provide assistance such as childcare, transportation, meals, etc</li> <li>· Encourage staff to volunteer time and/or receive compensatory time</li> <li>· Support ways to bring the community closer through celebrations</li> </ul>
Development of governance	<ul style="list-style-type: none"> <li>· Governing groups should include representation from formal agencies, non-formal resources, and community members</li> <li>· The governing bodies must track and evaluate progress</li> <li>· Outcomes/indicators should be shared with the community</li> </ul>
Evaluation	<ul style="list-style-type: none"> <li>· Tracking progress against outcomes necessitates joint planning about collection of data and report production</li> <li>· Self-evaluation can be vital for identifying areas for improvement within the partnership</li> </ul>
Involvement of non-formal resources	<ul style="list-style-type: none"> <li>· Generate significant and specific roles for non-formal partners</li> <li>· Include non-formal supports at key points in the decision making process</li> <li>· Respect and acknowledge the role non-formal supports have within the partnership</li> <li>· Understand the varying levels of, and motivations for, participation</li> </ul>

CPS, it adds greatly to the strength of partnerships. For example, in St. Louis, the director of the public child welfare agency became the chairperson of the community partnership when there were some concerns about continued commitment of some of the partners. This stabilized partnership development for an important period of time. In Jacksonville, when the public agency decided to have staff assigned to one of the community “full-service schools”, others also chose to place their staff in the same location.

#### Locating services together in the neighborhood

The co-location of services in particular neighborhood settings such as schools or community centers has facilitated the development of partnerships. Agencies such as CPS, domestic violence specialists, housing agencies, family counseling, job training, high school equivalency degree programs, being located together are not only much more convenient for families, but facilitate information sharing and coordination of interventions across agencies. Maybe even more importantly, they allow relationships to build among professionals and allow workers to get to know the community they work within and its resources.

The co-location of needed resources in a neutral setting such as a school or family resource center has the effect of normalizing the use of services. Neighborhood settings also help ease access to services as well. Under community partnerships, there is normally a strong focus on prevention and early intervention, as well as on more coordinated interventions. To enhance prevention and early intervention, it is essential to have an accessible, neutral setting where parents can gather in order to provide information about relevant community resources as well as to build the type of trusting relationships that enable families to ask for help. The co-location of resources in a neighborhood “hub” contributes in many ways to strengthening families and protecting children.

### Formalizing new agency agreements and ways of working together

Successful partnerships are characterized by agencies that are flexible enough to incorporate significant changes into their conventional practices to support the coordination of interventions with families. These changes include opportunities for employees to cross-train and/or job shadow, the establishment of integrated service teams, the use of family team meetings, and other non-traditional organizational agreements and responses.

*Cross-training* occurs when staff from several agencies are trained together either in new practices or in becoming familiarized with each other's clients, methods of case acceptance, case planning, decision criteria, objectives of intervention, service content and delivery, and case closure processes.

*Job shadowing* allows for an expansion of cross-training when front-line staff from one agency join with a staff member from another to actually go through their working day. In the process, they not only gain an understanding of how the agency works with their clients and the needs of the families, but also have the opportunity to develop relationships across agencies that foster partnerships.

*Integrated service teams* provide a mechanism for shared decision-making in cases where families face issues that cross agency lines. Often "multi-problem" families are receiving services from more than one agency without the agencies coordinating interventions. By working together in a team, assessment information is shared (with the permission of the family) and decisions related to planning, intervention, case closure, and after-care supports are made collectively. An illustrative example from Louisville, Kentucky is the *Comprehensive Services Team* which represents the variety of agencies involved in the case to plan together on how to coordinate their interventions and track overall progress against shared goals.

*Family Team Meetings* have been incorporated in many partnership sites. This involves a range of public and private agencies in the partnership agreeing to hold joint family team meetings with family members, extended support systems, and others of the family's choosing. These meetings provide an opportunity to discuss the positive and negative factors, impacting the patterns of parenting and to develop a plan of intervention based on the priorities of the family, the safety needs of the children, and the willingness of available services and resources to commit to supporting necessary changes. These family team meetings are called by any member of the partnership and attended by all relevant partner agencies.

*Non-traditional organizational agreements and responses* are often needed to develop successful community partnerships. Hosting open meetings often are effective means to help community members to understand each other's resources and to discover ways to access services, as well as to understand the greatest priorities or needs in the community. It is also important to develop means of coordination among the various resources available. These links can be accomplished through memoranda of understanding with other public agencies or contracts for purchased services from private agencies. However, it is also beneficial to allow some cases to be served on a voluntary basis primarily by community resources within the parameters of maintaining child safety.

#### Developing Tools for Partnerships

Communities have found it important to create specific mechanisms and concrete agreements to operationalize partnerships. These have included common assessment forms, community-wide documentation of formal and non-formal resources, community support agreements, methods for maintaining confidentiality, and ways to provide flexible funding.



*Common assessment forms* can be used by all members of the partnership to collect standard information about those being served and to avoid multiple assessment processes. Beyond initial assessment, many sites have developed comprehensive assessment forms and processes that explore and document a broad spectrum of family strengths and needs to put together a case plan that often involves more than one agency or resource.

*Community-wide documentation of formal and non-formal resources* is often necessary to ensure that families can utilize all available resources to support parenting responsibilities. These efforts go beyond an information and referral resource. The process has normally required hours of volunteer time interviewing residents about what they might need or could offer to support other families. Among formal resources, the documentation process has agencies describing their services in ways that foster their utilization; in some cases, this documentation process has led to commitments to programs that have emerged only through the partnerships. For example, Cedar Rapids families experiencing both domestic violence and child protection concerns have access to a specialized network of services for children who witness violence. In St. Louis, a partnership developed between a hospital, CPS, and a church-based team of volunteers to intervene with specialized supports to mothers of drug-affected newborns to keep the infants safe with the parents (Schene, 2000).

Non-formal resources often examine ways in which they can offer specific volunteer opportunities or programs of support. Churches, for example, have organized themselves in certain communities to offer parenting classes, childcare, one-on-one mentoring, bible study programs, and other supports to families in the community. In Jacksonville, the residents of the public housing communities, all of whom are low-income, largely single-parent families, have

joined support groups and volunteered their time to mentor other mothers, provide child care, and even have children stay in their homes when necessary.

*Community Support Agreements* are written agreements between a parent, the CPS, and a community support resource that specifies the mutual expectations. Often these agreements are concluded after initial CPS involvement with a family, when there is no immediate prospect of removing the child from the home, but where there are ongoing safety concerns. CPS agrees to close the case, but be available if needed; the parents agree to certain actions that will enhance the safety of the children; the resource person, often a close friend or relative of the parents, a minister, a school counselor, even a neighbor, agrees to pay special attention to the well being of the children and to support the family in particular ways.

*Methods to ensure confidentiality of information* are needed for formal and non-formal resources to work together and share information about families. Families often are receptive to this and willing to sign release forms when that information shared is seen as helpful to them. The partnerships need to assure the proper safeguards are in place and all involved must receive some confidentiality training. Parents often are asked to give permission to share information across the partnership, rather than simply releasing it to one agency. This can happen only when the trust in the partnership is developed sufficiently.

*Ways to provide flexible funding* need to be developed to enable families to address their specific needs. Agencies have removed many categorical barriers to the use of funds in order to bring some flexible resources to the partnership. Partnerships often develop a shared pool of flexible funds that any of them can use to help a family in an emergency such as potential evictions or utility cut-offs.

## Community Outreach

Active outreach to the residents of communities is a vital part of partnerships' success. All of the partnerships are engaged in efforts to strengthen families to prevent child abuse and to intervene early to change patterns of parenting that threaten child safety and well being. Prevention and early intervention requires reaching out to families before there is a substantiated case of child maltreatment. Outreach has taken various forms in different communities. Some sites have looked to existing leaders in the neighborhood to serve as "block links" to help families find the services they need. There are also "neighborhood helpers" who provide some direct assistance to families around childcare, transportation, or meals. These individuals receive a very modest stipend for committing 10-15 hours a month. For example, Cedar Rapids, Iowa has "block links", people who volunteer to contact all those in their immediate area to help acquaint them with the community's resources and to encourage them to participate in general community events.

The process of identifying neighborhood assets and recruiting volunteers within the neighborhood has been used in many communities. This process also has served as an outreach mechanism as well as a way of educating the community about the partnerships.

Agencies can also reach out by encouraging staff to volunteer their time, and/or giving them compensatory time for working with others in the partnership. Likewise, being available for consultation with partnership members about the need for reporting an incident of suspected maltreatment or exploring other ways to maintain safety is also beneficial to partnerships.

Supporting ways to bring the community closer through celebrations and other efforts have been fundamental in increasing the sense of connectedness and support.

## Development of Governance for the Partnerships

It seems essential for the viability of the partnerships to have a formal structure responsible for overseeing participation, decision-making, needs assessment, resource development, and ongoing problem-resolution. There is normally a governing group for the partnerships with participation from the formal agencies, other groups, and concerned residents of the communities. The governance mechanisms have taken different forms depending on mandates and funding arrangements. Tracking and evaluating progress and outcomes is another responsibility of partnerships and their governing bodies. Sharing information about outcomes for children and families, as well as other indicators of child and family well being, with the community has played a key role in the success of these partnerships.

The Multi-Purpose Collaborative Bodies (MPCBs) established in communities across Michigan have somewhat different responsibilities. These governance institutions are designated by the state to receive and distribute the funds to the variety of community agencies involved in the partnership. To qualify for the funds, the MPCB's have to develop a community plan, get commitments to the plan from stakeholders, and define in the plan how they plan to serve the families referred by CPS. They also are responsible for collecting quarterly evaluation data from all components of the partnerships (Michigan, 2001).

The State of Washington has taken a similar approach, allowing community-based organizations to receive state funds to serve the lower risk cases. These organizations must bring together a set of relevant services and monitor some key outcomes to receive the funds (Washington, 2000).

## Evaluation

Many of the partnerships are committed to monitoring and measuring their collective achievements against a set of specified criteria related to child safety, child and family well-being, service utilization, and community participation. Positive impacts on these outcomes cannot be achieved by any one agency acting on its own. Moreover, tracking progress against outcomes requires some joint planning around the data to be collected and the reports to be completed. The utilization of self-evaluation procedures for each partnership in the four cities supported by the Edna McConnell Clark Foundation has been a vital part of identifying needed course corrections. Each partnership has developed its own plan for self-evaluation; data is collected and regularly reviewed by the governance groups. In addition, the Foundation has contracted with Chapin Hall at the University of Chicago to undertake both evaluations of implementation as well as a formal outcome evaluation.

## Involvement of Non-Formal Resources

Of all the characteristics of community partnerships, the one that attracts the most interest is the ways communities are involving a variety of informal resources in the work of strengthening families and protecting children. As mentioned earlier, informal partners cover a broad spectrum of individuals and organizations. The common denominator is that they have no formal or statutory role in interventions in child protection, beyond the obligation to report maltreatment. Given this lack of formal regulation, it is important to generate significant and specific roles for non-formal partners. Including non-formal supports for families at important points to help guide decision-making and provide ongoing supports to the families is essential for the partnerships to be successful.

In addition to specifying roles for non-formal partners, respecting their role and acknowledging them as significant members of family team meetings or on the governance committees of the partnerships must be emphasized. General efforts to educate the community about the shared responsibility for keeping children safe often can be the context for the involvement of non-formal partners. However, it is vital to understand the varying levels and types of participation as well as the different motivations for becoming involved.

Many non-formal supporters are interested in helping with specific cases because they know the children and families. Others are willing to provide help to, for example, a group of mothers who may need mentoring or a group of young people who are involved in a sports or recreation program. Energy and resources must continually be expended to nurture the involvement of non-formal partners; their participation is voluntary and sustaining their important contributions is an ongoing responsibility of the partnerships.

This discussion of the lessons being learned in developing and sustaining community partnerships for child protection clearly underscores not only the complexity of the process, but also the variability across communities and the need for flexibility in constructing and sustaining partnerships. In addition to these lessons, there are more specific *principles* that have guided the work of building successful partnerships. These principles include keeping the safety of children as the paramount concern for the partnership, focusing on specific communities or neighborhoods, including all people in the neighborhood, offering a full continuum of services, and ensuring respectful approaches to dealing with families. (See *Appendix B* for a detailed list of guiding principles for building partnerships). As communities continue to move forward with their partnership efforts, it will be essential to keep these lessons and guiding principles in mind as partners face both the challenges and the opportunities that such initiatives can provide.

## **Challenges and Opportunities**

### Challenges

#### *Working with Formal Partnership Resources*

Working as part of a community partnership is clearly quite different from working within the parameters of any one organization. In partnership, any one participant has responsibilities for joint decisions and shared interventions as well as within his/her own agency. Every organization has its own set of policies, practices and way of relating to families. These are not always the same as the decisions and interventions of the partnership. Not only do front-line staff and supervisors have to accommodate to this reality, administrators have to understand how to hold staff accountable in the context of the partnership. Moreover, issues of accommodation have to be identified and sometimes brought to the attention of the governing body of the partnership in order to be addressed effectively. Table 3 lists some of the common challenges encountered by agencies when working in partnerships.

#### *Working with non-formal community resources*

These differences in ways of working are magnified when contracting how the formal systems of intervention work with non-formal or voluntary ways of helping. As mentioned, some of these informal resources include organizations such as schools, churches, and recreation centers, who do not share a formal or statutory role in intervention in family problems, but share an interest in the safety and well being of children and the strengthening of families. Other parts of the non-formal system include

**Table 3: Overview of Challenges in Developing Partnerships**

<b>Partnership Issues</b>	<b>Specific Challenges</b>
Involvement of formal partnership resources	<ul style="list-style-type: none"> <li>• Differing approaches and forms used for assessment;</li> <li>• Different criteria for agency involvement and time periods for keeping cases open;</li> <li>• Differing policies related to confidentiality of information – especially relevant when domestic violence resources partner with child protective services and/or family preservation resources;</li> <li>• Differing modes of meeting with and relating to families – especially relevant in terms of how much has to be accomplished within the family home and expectations related to office visits as well as the voluntary nature of client participation;</li> <li>• Practice differences related to the relative balance in focus on family strengths vs. the identification of dysfunction;</li> <li>• Differing approaches to case planning, types of interventions, tracking of progress, and case closure.</li> </ul>
Involvement of non-formal partnership resources	<ul style="list-style-type: none"> <li>• Need to recruit such resources;</li> <li>• Lack of predictability of their involvement;</li> <li>• Need to define roles together to ensure meaningful as well as appropriate involvement;</li> <li>• Careful and different approach needed to sharing confidential information on cases;</li> <li>• No clear place of work for consistent contact, sharing of information about the partnership or about specific meetings on cases;</li> <li>• Lack of agency guidelines on the incorporation of the views and involvement of non-formal resources;</li> <li>• Need to develop different patterns of accountability for non-formal resources in carrying out their roles and commitments;</li> <li>• Nurturing sustained involvement of “voluntary” resources;</li> <li>• Identification of patterns of communication and coordination and assignment of responsibilities for those patterns.</li> </ul>
Staff training	<ul style="list-style-type: none"> <li>• Knowing where the major faith communities are and how they serve their congregations;</li> <li>• Understanding the services schools provide including any specific programs for families to help their children succeed academically, GED or literacy services for adults;</li> <li>• Knowing the range and locations of services related to physical and mental health, counseling, domestic violence, substance abuse evaluation and treatment, income support programs, housing services, welfare to work programs, special services for new parents, child care resources, etc.;</li> <li>• Familiarity with the recreational, after-school programs, family resource centers, parenting classes, Parents Anonymous groups, Boys and Girls Clubs, YMCA’s etc.;</li> <li>• In specific neighborhoods there are often natural leaders – people who residents turn to for advice or assistance; staff helping families can sometimes utilize such leaders, but need to be trained in ways to approach them.</li> </ul>



extended family members, relatives, and neighbors who are generally not part of any service organization, but also share a concern for children and families.

*The availability of needed resources and family access to resources*

Availability and access to resources is also a challenge that many partnerships face. Partnerships generally encompass work with children and families that fall within categories of prevention and early intervention as well as shared intervention on open CPS cases. Resources for prevention and early intervention usually are harder to obtain because there is no statutory obligation for the public child welfare agency to intervene until there is a report of child abuse or neglect. This presents obvious problems in finding families, but even after identifying families in need of intervention and prevention services, the partnerships are hard-pressed to secure funding. Agencies that provide what is needed may have funding criteria that limit access to these services. Some partnerships have assigned staff specifically to the task of identifying and developing needed resources. This is a continuing challenge.

*Promoting the partnership to the whole community*

A related challenge is that of promoting the partnership to the community. Partnerships rest on the premise that the protection of children is in the interest of the whole community. Furthermore, partnerships promote increased “help-seeking” and “help-providing” propensities in neighborhoods and communities. There has also been a commitment in some community partnership settings to building greater community awareness through “celebrations” or the solicitation of “great ideas” that might receive funding. All of these types of efforts contribute to promoting the partnership to the whole community. Yet is it difficult to reach everyone in the community and to translate awareness of the partnership into some form of participation. This challenge might be addressed over time with the continued presence of the partnership and the

continued invitation to become involved. This, of course, depends on the value members of the community place on the partnership.

### *Governance*

Governance offers a distinct challenge to community partnerships. There are no existing governance institutions at the neighborhood or community level in most of the United States. City and county governments cover too large an area and do not address some of the governance functions relevant to partnerships. There is a need for governing bodies not only to organize and coordinate the work of the partnership, but also to reflect authoritative community decisions on the identification of needs and the allocation of resources. Since other entities such as governments, the United Way, and foundations currently make resource allocation decisions, one function of partnership governance is to influence those decisions. They sometimes have been able to ensure that funds flowing into neighborhoods and communities enhance partnerships and address needs identified by the partnership. Moreover, in every community, residents need services that do not or cannot be reproduced in every neighborhood – such as a residential drug treatment facility. A function of partnership governance is to understand and attempt to increase the access to such needed resources. The internal functioning of the partnership, the access of residents to outside resources, and the articulation of governing and allocation processes are part of the responsibilities of partnership governance.

### *Training*

Not only do front-line staff and supervisors need to be trained within their own agencies to undertake their responsibilities, they need to understand how other agencies operate and they need to be trained on coordinated intervention policies and practices. Partnerships depend on a high level of staff specialization by neighborhood or community. To be effective, staff need to

understand the broader context of resources and needs within the community and how residents use and access services and supports. The non-formal system of resources also needs to be understood by staff. Training also is necessary in helping staff make decisions in cooperation with extended family members or other supports, as well as with other agencies serving the same families.

### *Resource Development*

There is also a need for training staff in resource development. Most communities have more needs than existing resources can address. As needs are identified by the community partnership, some identified staff need to be assigned to work on resource development.

*Sustaining partnerships* is a continuing challenge. Often begun by a core group of committed individuals, partnerships have to become institutionalized as the normal way of working. This is necessary for the development of partnerships and for their survival. New generations of partners have to be committed to this concept and see its value.

### Opportunities

There are many opportunities in building community partnerships for protecting children and supporting families. These opportunities manifest themselves in relations with individual families as well as in how agencies and communities function. In terms of individual cases, the response to vulnerable children and their families normally will be perceived as less adversarial, more sensitive to the needs of particular families, more comprehensive, and more likely to involve a range of supports when partnerships are in place. The reasons go beyond the presence of partnership resources to the philosophical foundation of partnerships. Community partnerships are normally motivated by a family-strengths perspective, based on the assumption

that most parents want to do a good job, but may lack the resources, knowledge, supports, or stability to parent well.

In partnerships, the assessment process is normally more comprehensive and yields more substantive information about the priorities of the family as well as the network of support the family might naturally draw upon. Bringing those non-formal supports into intervention planning can greatly increase parental motivation to change as well as provide help in the change process. The assessment and case planning process in community partnerships can lead to a shared commitment to objectives by parents, their supporters, as well as formal and non-formal agencies providing services.

When a case is closed in a more traditional child protection agency, there is usually little likelihood of having after-care services in place. With the involvement of non-formal supports in partnerships, CPS case closing is not the end of supportive involvements with the family.

Opportunities are also presented by community partnerships beyond work with individual families. Generally, the total resources available to serve vulnerable children and their families increase. There is a larger constituency for the protection of children when communities come together. There is a greater chance that there will be a continuity of care system developed through partnerships.

### **Conclusion**

Forming and sustaining partnerships in communities to better protect children from abuse and neglect, and to improve support to vulnerable families is one of the most positive developments emerging in the United States in recent years. Few families at risk of child abuse and neglect have only one challenge in their lives. Partnerships provide the opportunity for more holistic responses to the daily living realities and periodic crises families experience. As more

resources are coordinated, a synergy can develop for continued expansion in the ways communities support parents and protect children.

The United States has concentrated the responsibilities for the protection of children in public child welfare agencies with the support of law enforcement and the courts. Moving from that mode of operation to one of community partnerships is not accomplished quickly or easily. The motivations for moving in that direction are growing and early successes in building community partnerships help in the dissemination of this more inclusive way of working.

## REFERENCES

- Antler, J., & Antler, S. (1979). From child rescue to family protection. Child and Youth Services Review, 1, 177-204.
- Center for the Study of Social Policy (1997). Community partnerships for protecting children: Documentation of the first year. NY: Edna McConnell Clark Foundation.
- Costin, L. B. (1985). The historical context of child welfare. In J. Laird & A. Hartman, (eds.) A Handbook of Child Welfare. NY: The Free Press.
- English, D. J., Wingard, Marshall, Orme, & Orme. (Undated). Alternative responses to child protective services: Emerging issues and concerns. Olympia, Washington: Office of Children's Administration Research, Department of Social and Health Services, State of Washington.
- Family Preservation and Family Support Initiative (1993). Public Law 103-66 (amended 1997).
- Farrow, F., & Executive Session (1997). Child protection: Building community partnerships. Boston: John F. Kennedy School of Government, Harvard University.
- Michigan Family Independence Agency (2001). Various state reports and interviews by author on the five-category disposition system and the Multi-Purpose Collaborative Bodies.
- Schene, P. (1998). Past, present, and future roles of child protective services. The Future of Children, 8(1), 23-39. Palo Alto, CA: David and Lucille Packard Foundation,
- Schene, P. (2001). Differential response. Best Practice/Next Practice. Spring 2001. Washington, DC: The National Resource Center on Family-Centered Practice.
- Schene, P. (2000). Community child protection in St. Louis, Missouri. Internal report to Edna McConnell Clark Foundation, New York City.

U.S. Advisory Board on Child Abuse and Neglect (1993). Neighbors helping neighbors: A new national strategy for the protection of children. Washington, DC: United States Government Printing Office.

US Department of Health and Human Services, Administration for Children and Families, Children's Bureau (2001). Child maltreatment, 1999. Washington, DC: US Government Printing Office.

Waldfoegel, J. (1998). The future of child protection. Cambridge, MA: Harvard University Press.

White, A. (undated) Community partnerships for protection of children – Jacksonville, Florida. NY: Edna McConnell Clark Foundation.

## **Appendix A – Partners in Child Protection and Well-Being**

### ***Formal Partners***

- CPS – intake, assessment, ongoing services
- Mandated and non-mandated reporters
- Law enforcement
- Courts
- Parents and caregivers
- Health care providers, emergency care
- Foster care, emergency shelters, group homes, and residential treatment facilities
- Formal, in-home services provided through or by CPS
- Schools
- Children’s’ Advocacy Centers for interviewing child victims
- Substance abuse evaluation and treatment agencies
- Family preservation services
- Domestic violence shelters and programs
- Developmental screening resources
- Public agencies providing services to families involved with CPS – such as mental health programs, family counseling
- Wrap-around service programs

### ***Non-Formal Partners***

- Extended family, close friends, neighbors, concerned citizens
- Public housing community staff and residents
- Child care centers



- After-school programs
- Nutrition programs
- Welfare agencies – including “welfare to work” programs
- Faith communities
- Home visiting programs for new parents
- YM/YWCA, YM/YWHA, 4-H
- Recreational organizations, parks, sports programs
- Big Brothers/Big Sisters or other mentoring programs
- County extension services
- Family resource centers

## **Appendix B – Guiding Principles for Building Partnerships**

- The safety of children is the paramount purpose and goal of the partnership. Partnerships have to share responsibility for the protection of children.
- Partnerships have to focus on specific communities or neighborhoods. Even if a broader array of services is utilized, they are accessible through local points of contact.
- Everyone living or working in the community can have a role in the partnership; a basic objective is to increase the propensity to offer help as well as to accept help.
- Governance of the partnership has to be formalized; decision-making must reflect the thinking of formal agencies and institutions, but also parents, local residents, involved communities of faith, and other non-formal supports to families.
- A continuum of supports and services should be offered by the partnership including primary prevention, early intervention, careful assessment of reports of child abuse and neglect, concrete services to protect children and stabilize families, and aftercare as well as sustainable supports for parents and children.
- Approaches to families are consistently respectful, recognize the strengths of even the most troubled families, and endeavor to preserve family ties whenever possible.
- Comprehensive assessments using common tools across the partnership will facilitate the identification of needs and strengths and the responsiveness of the partnership to children and parents. This will lead to more effective engagement of families in services and supports and better outcomes for children.
- When a case is opened to any service or support from the partnership, intervention will be coordinated across all those involved in the work with the family.
- The partnership will organize itself to identify the major gaps in services and supports and work together to address those needs, including active advocacy efforts to obtain resources.

# SOCIAL WORK



## Partnerships for Children and Families Project

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