

2002

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Recommended Citation

Roberts, Jill S. and Early, Theresa J. (2002) "Family to Family: Child Welfare for the 21st Century," *Journal of Family Strengths*: Vol. 6: Iss. 1, Article 7.

Available at: <http://digitalcommons.library.tmc.edu/jfs/vol6/iss1/7>

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Family to Family: Child Welfare for the 21st Century

Jill S. Roberts and Theresa J. Early

Child welfare services have undergone many revisions and transformations since their initiation. Some scholars trace the beginning of child welfare in the United States to events such as a 1655 Massachusetts conviction for maltreatment leading to the death of a 12-year-old boy (Watkins, 1990). The predominant philosophy of child welfare has shifted over time from an early emphasis on child saving, to child protection, to family preservation. Building on family preservation, one of the current transformations in child welfare that is taking place in isolated pockets to whole states, is family-centered, neighborhood-based services. One force behind implementation of this transformation is the Family to Family Initiative of the Annie E. Casey Foundation.

This paper places family-centered, neighborhood-based child welfare services within the historical context of development of child welfare and within the recent move to reinvent human services (Adams & Nelson, 1995). Against this backdrop, a locality-based implementation of the Family to Family Initiative is described.

The term “child welfare” has had different meanings over time in the United States. Child welfare has responded to different social problems, and its institutions and programs have operated under different philosophies and mandates. The shifts in emphasis of the child welfare system continue to the present day in at least a limited fashion, with some of the more recent trends including family preservation, kinship care, and family-centered neighborhood-based services.

The beginnings of child welfare in the United States are traced by various authors to early events, such as the 1655 conviction of a man in Massachusetts for maltreatment leading to the death of a 12-year-old boy (Watkins, 1990) or the 1874 placement of severely abused, eight-year-old Mary Ellen with the American Society for the Protection of Animals (Antler & Antler, 1979). Events such as the latter gave rise to the founding of organizations such as the New York Society for the Prevention of Cruelty to Children and many other children’s aid societies (Lindsey, 1994). In a matter of years, the main focus of the aid societies was on orphaned and abandoned children (Lindsey, 1994; Costin, 1992), who were housed primarily in orphanages of various sizes (Smith, 1995).

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Institutional care was eventually seen as overly restrictive and failing to prepare residents for eventual independent living, resulting in a preference for placing dependent children in family foster care (Smith, 1995). The number of children in out-of-home care was later influenced by the “rediscovery” of child abuse with the 1962 publication of the battered child syndrome (Kempe, Silverman, Steele, Droegemueller & Silver, 1962). Children who entered care often moved from placement to placement or remained in care for long periods of time when families continued to be judged inadequate to care for them. As Curtis (1999) reports, almost 8 out of 1,000 children in the United States, a total of 502,000 children, were in out-of-home care by 1977.

Federal legislation was passed in 1980 (Public Law 96-272, the Adoption Assistance and Child Welfare Act), requiring “reasonable efforts” to avoid out-of-home placement, to speed reunification, or achieve permanency of living arrangement through adoption. The shift to family preservation yielded new program models (Kelly & Blythe, 2000), a brief decline in the number of children in out-of-home care from 1980-1982, but subsequent increases in this population (Curtis, 1999). Although figures vary across states, African American and Hispanic children are disproportionately represented among children entering care (Goerge, Wulczyn, & Harden, 1999). The provisions of “most familylike” and “least restrictive” placements of P.L. 96-272 express a clear preference that, if placement could not be avoided, children should be placed with relatives when possible (Pecora, Whittaker, Maluccio, Barth, & Plotnick, 1992). In a similar vein, the earlier Indian Child Welfare Act of 1978 (P.L. 95-6087) requires active efforts to maintain Indian children with their families or other families that share the same culture (Matheson, 1996). Thus, both pieces of legislation have resulted in a preference for relative foster placements or kinship care, which has been described as “the African American response to family preservation” (Scannapieco & Jackson, 1996). Formal kinship care is defined as a system in which the state or county has custody of a child but a relative takes care of the child and “...the term ‘kin’ often includes any relative by blood or marriage, or any person with close nonfamily ties to another” (Scannapieco & Jackson, 1996, p. 191). Kinship care has also made up for the decline in the availability of more traditional foster families, with about one third of the children in court-ordered care being served in relative placements (Courtney & Maluccio, 1999).

Changes in child welfare intervention models, then, have been driven by changes in the social problem being addressed, with the intervention sometimes later being included in the problem definition (e.g., institutions as the intervention into abandoned and orphaned children as the social problem; family preservation as the intervention into growing numbers of children adrift in foster care; kinship care as the intervention to maintain foster children’s ties to family and/or culture). In discussing the impact of out-of-home

placement on development of minority children, Urquiza, Wu, and Borrego (1999) state: "...whenever children are removed from their own family and cultural context—that is removed from their family of origin, from consistent contact with extended family members, from their community or neighborhood, or from situations in which care providers and social contacts have similar behaviors, values, and traditions—they no longer possess the supports and familiarity afforded by these social institutions" (p. 88). Family preservation efforts and kinship care have been partial remedies, but these options either do not always work or are not always available.

Recognizing the protection that may be afforded by the neighborhood and community, recent reform efforts have focused on providing another option to maintain cultural ties and social contacts when placement cannot be averted and when kin are not available: family-centered, neighborhood based (FCNB) services. The Family to Family Initiative, sponsored by the Annie E. Casey Foundation, is one force behind the development and implementation of FCNB child welfare services.

Family to Family

Consistent with other "reinventions" of human services programs, the shift to FCNB services entails "...encouragement of a mission-driven, outcome-oriented, innovative practice that builds partnerships and empowers citizens, prevents problems, is proactive and entrepreneurial, decentralizes authority, and empowers workers to get results" (Adams & Nelson, 1995, p. 10). Family to Family is intended to bring about a new system that emphasizes appropriate family preservation efforts; targets children in congregate or institutional care, to return them to foster homes in their neighborhoods; involves foster families in family reunification efforts; serves as a neighborhood resource for children and families and builds the capacity of communities from which the foster care population comes; and provides permanent families for children in a timely manner (Annie E. Casey Foundation, 2001).

Key strategies of Family to Family, intended to bring about necessary change in the child welfare agency as well as the community, are recruitment/support of resource families, building community partnerships, family team decision making, and self-evaluation (Annie E. Casey Foundation, 2001). As with any other field, making a major change in the way services are organized and delivered is not easy. As Omang and Bonk (1999) point out, "Hardly anyone disagrees in theory with the most basic Family to Family principle, which is that of child welfare agency partnerships with foster and adoptive families and relatives, with neighborhoods and communities, and with other public and private agencies. But in practice, child welfare workers have always run the procedure and made the critical decisions, too often regarding birth parents as adversaries and foster parents as employees in the day-to-day work of caring for children at risk" (p. 17).

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The remainder of this article chronicles the efforts by a county child welfare agency to implement Family to Family in one portion of the county.

Local Implementation

In 2000, Franklin County Children's Services (FCCS) was awarded \$50,000 to begin the Family to Family approach in Columbus, Ohio. The North Region, specifically the Linden area, was to be the target population for implementation. This region and area were chosen because of a high concentration of open cases within the neighborhood and a correspondingly high placement rate. Of the many children in foster care from the Linden area, only a few were actually placed in foster homes in their own community. According to unpublished FCCS statistics (April 2001), placement statuses of the 524 open cases were as follows: 274 (52 percent) were living at home; 116 (22 percent) in kinship care; and 134 (26 percent) in placement. Of the children in placement, only four (3 percent) were placed in the Linden area. Of the 250 children in out-of-home care, 43 (17 percent of those in placement, 8 percent of open cases) were placed outside the county, eight (3 percent of those in placement, 1.5 percent of open cases) were placed out of state, and 22 (9 percent of those in placement, 4 percent of open cases) were placed in congregate care.

To begin the program, many things needed to happen concurrently, including an assessment of current agency functioning to determine how it needed to be adjusted to conform to the FCNB approach. At the same time, a community resource was needed to be the initial contact between the agency and the community and its families. Once identified, policies needed to be written and procedures developed, and staff needed to be trained. The initial plan submitted to the Casey foundation and the Ohio Department of Job and Family Services identified seven work committees that would be convened to begin the process.

Policies and procedures committee, to assure existing agency policies and procedures support and complement the philosophy and practices of the FCNB approach, and to craft additional policies/procedures to support the integration of FCNB practice modalities. Initial tasks of this committee included working with various other committees to develop policies and procedures for new or revised practices, such as the Family Team Meetings, Family Case Conferences, Community Visitation, and Family FCNB Reimbursement and Respite Services.

Geographic assignment committee was tasked with establishing and recommending options for geographically assigned North Region cases, by neighborhood within the North Region.

Foster parent committee, in charge of refining foster parent education and training activities and foster parent support. This committee also reviewed policies and procedures relevant to foster parent training and support and made recommendations for needed changes to be consistent with the FCNB approach.

Family partnership committee, with responsibility for working with the policies and procedures committee in developing, implementing, and tracking integration of the Family Team Meetings, as well as assisting staff with integrating the Family Team Meetings into practice.

Provider partnership committee, charged with identifying and recommending strategies to enhance partnerships between targeted provider agencies and North Region staff. Tasks included identifying providers with which to partner and orienting them to FCNB practice.

Neighborhood partnership committee, responsible for establishing partnership relationships with neighborhood groups and individuals, to develop support for neighborhood children at-risk of abuse and neglect and their families, in the various North Region neighborhoods.

Self-evaluation committee, in charge of developing and monitoring outcomes related to Family to Family goals, and reporting on these to the entire team.

Early Results

The Community

The first step in relation to the community was to identify community resources that could support the change effort. To be successful, FCNB services have to take the community as a partner right from the start. Agency staff may believe that the agency is developing the community, but community members find this perspective offensive. To avoid this type of conflict, it was helpful to find a link to the community to act as a guide and a messenger, and to help agency staff navigate within the community. The Greater Linden Area Council was identified as the guide in the community.

One way to be in the community is to hold meetings in the community, away from the agency offices, to break down barriers and build relationships. St. Stephens Community

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House, a long-time Linden settlement house, was identified as “home base,” and all meetings initially were held there. As churches became involved, meetings began to be held at them as well. Working with the Greater Linden Area Council and St. Stephens, other community entities were identified that would be helpful in promoting Family to Family, including schools and health providers.

Family to Family
back
sales
Effort was made to identify churches and enlist their support. As a result, a number of the community leaders who have signed on as active partners and supporters of the project are local clergy. The Linden clergy are organizing to work with their congregations to create new foster homes and community understanding.

Foster Parents

Existing foster families in the Linden area were identified and given specific training in the FCNB model. Expectations of foster parents are to include the birth parent in the child’s medical appointments and school conferences, and to allow birth parent visits with the child in the foster home as long as it is safe to do so. The Linden area foster parents were also encouraged to recruit friends and family to support FCNB. As a result of these and other recruitment activities, 14 potential foster families were identified and are in precertification training as of this writing.

Provider Agencies

Part of the project has been to include agencies in the Linden area that provide services to the child and family populations. Fifteen provider agencies are currently active partners in the Linden Family to Family Initiative. These agencies include private foster care agencies, the schools, school support services, and various treatment agencies.

Impact on Child Welfare Practice

FCNB is a different way to work with families to keep children within their communities. It is a different way to provide services, to have client input, to put the client first. Previously, for example, when a child entered the system, the first thought was foster care, not relatives. Family to Family meant changing that perspective: relatives/kinship care needed to be the first thought, and regular foster care considered later if kinship care could not be established. This took more work in the beginning, because it is not as easy to “round up” relatives as it is to call another agency department and request a foster home. Relative home studies needed to happen prior to a kinship placement, which meant longer work hours initially.

However, after awhile, it became standard to find relatives prior to placement being needed. At the very beginning of service provision, families were asked to identify their supports, and names, addresses, and telephone numbers of relatives were obtained and placed in the case file. As initial meetings were held, families were encouraged to bring

relatives and support people, so support people were included in planning with the family from the outset. As problems were identified, workers looked around the table for solutions from all parties involved.

Other changes in practice included several new meetings or changes in old meetings. The Family Team Meeting was held within five days of placement and was an attempt to maintain the child's routines as much as possible. Participants included the birth parents, the foster parents, the child if appropriate, the social worker, and any other supports the family wished to invite. Discussion centered around the child's likes, dislikes, habits, customs, culture, and the like. The agenda of the meeting also included setting boundaries for visits and other contact. Specifically excluded from discussion were the problems of the parent and the reason for the foster placement.

The format of the Family Case Conference was revised to better include the family, relatives, and other supports in ongoing planning for the case. FCCs are held at various points in time relative to case opening and other critical events. The first FCC is held within 30 days of case opening, if a child is going to be removed (or has just been removed), and at six-month intervals during placement. In the case of removal, the FCC includes discussion of the cause of removal and specifies what is needed to reduce the risk so the child may return home. Later reviews include permanency planning and discussion of whether reunification continues to be in the best interest of the child. The family continues to be involved in these processes.

Preliminary Outcomes

After the first 11 months of the Family to Family program, changes are overall in the desired direction, although quite small in some areas. Table 1 summarizes the 11-month outcomes.

Table 1. 11-Month Outcomes

Outcome	Baseline 10/00	09/01	% Change
Kinship Care	50	56	+12
Foster Homes in Area	50	54	+8
Children in Foster Homes Outside Area	110	83	-25
Children in Foster Homes Outside County	39	30	-30
Average Length of Stay	11.3 months	10.9months	-4
Average Number of Moves in Care	1.4	1.5	+7*

* Change is not in the intended direction

The largest desirable changes have been in reducing the number of children placed in foster homes outside of the area and outside of the county. However, an undesirable change almost as large was an increase in the number of children served in congregate care. Further, the average number of moves in substitute care increased, perhaps because caseworkers aggressively pursued returning children to the area from more remote placements. Gains in the use of kinship care and number of active foster homes in the service area, although in the appropriate direction, are smaller than projected. Length of stay in care was reduced slightly.

The tangible, quantitative outcomes reflect the changes, but are only part of the story. Some of the unmeasured outcomes include North Region social workers' increased knowledge of community resources, and their use of resources to avert placement or build community supports for children and families. Services outside the formal child welfare system also have been supported and enhanced by the contract with the lead community agency, St. Stephens. Better connections have been forged between St. Stephens and social workers who work in the schools through various community programs. Anecdotal evidence suggests that these connections are being used to access support for families to avoid placement and to maintain children in their neighborhood schools if placement cannot be avoided.

Family to Family is clearly being judged a success from the perspective of the county child welfare agency: implementation of the FCNB approach in another region began in fall 2001.

Discussion and Implications

As a reinvention of human services, the Linden area Family to Family program is in general on target. It is driven by a mission—to maintain children in their homes, within their families, or at least in their neighborhoods. Family to Family is outcome-oriented, and appropriate outcomes have been identified and are being monitored. The program also intends to build partnerships with the community, with other service providers, with foster parents, and with families served by the agency. In the Family to Family project, involvement with the community is a two-way street. The child welfare agency needed to learn what the community had to offer and how staff could support community services. At the same time, the community needed to learn of the problem and the agency's commitment to bring about change in where and with whom children are placed in foster care. One of the first mechanisms for achieving these objectives was to forge connections with institutions in the community so that services could be located in the community.

However, as Meezan (2000) pointed out, for services to be “community-based” (or, here, neighborhood-based), agencies must go beyond merely locating services in communities or neighborhoods. They also must find ways to involve community residents in the planning and design of services and community leaders in the administration of social service organizations, as well as reach out to indigenous and faith-based institutions (Meezan, 2000). Intuitively, working with indigenous organizations would facilitate greater access to community norms, customs, and assets. Empirical evidence also exists that child welfare services run by an indigenous African American organization in Oregon produced better outcomes for a population with intractable problems (Ciliberti, 1998). Family to Family is in the very beginning stages of making this great a link to the community, primarily through efforts to identify and work with churches.

Evidence concerning some of the other hallmarks of reinvention mentioned by Adams and Nelson (1995) is more elusive. Partnerships are being built, but the extent to which these are empowering citizens and preventing problems remains to be seen. Further study over time also is necessary to determine to what extent the project's efforts are entrepreneurial, as well as the extent to which authority is decentralized and workers are empowered to get results.

In the local implementations described here (the North Region and the West Region just beginning), it is heartening from a social work perspective that settlement houses have been chosen to lead the effort in the community. As noted earlier, the role of a large, public agency in bringing about community change is not straightforward. Community organizing traditionally has not been a function of child welfare. Administrators and

workers within child welfare may have a lot to learn in order to engage with the community in change efforts, especially when the child welfare agency is a major target of the needed change.

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Author note: An earlier draft of this paper was written in partial fulfillment of the requirements for the MSW by the first author, under supervision of the second author. The views expressed are those of the authors and not the funders or the service agency. Please address correspondence concerning this article to Dr. Early, OSU College of Social Work, 1947 College Rd., Columbus, OH 43210; e-mail early.22@osu.edu.



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