FAMILY PRESERVATION AND SUPPORT
SERVICES AND CALIFORNIA’S FAMILIES

SEMINAR PRESENTATIONS

STATE CAPITOL
SACRAMENTO, CALIFORNIA
FAMILY PRESERVATION AND SUPPORT SERVICES AND CALIFORNIA’S FAMILIES

SEMINAR PRESENTATIONS

Seminar 1: Child Safety and Family Preservation and Support Services

State Capitol
Sacramento
November 3, 1995

Seminar 2: Foster Care and Family Preservation and Support Services

State Capitol
Sacramento
November 21, 1995

California Family Impact Seminar
California State Library Foundation
Sacramento, California
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This Report was prepared for the California Family Impact Seminar (CAFIS) to accompany the November 3, 1995, seminar, Child Safety and Family Preservation and Support Services and November 21, 1995, seminar, Foster Care and Family Preservation and Support Services.

The California Family Impact Seminar provides nonpartisan information to government officials and policymakers concerning issues affecting children and families in California. CAFIS is a joint project of the California State Library Foundation and the California Research Bureau in the California State Library. CAFIS is affiliated with the federal Family Impact Seminar in Washington, D.C. and is part of a network of state Family Impact Seminars. The California Family Impact Seminar is located at 900 N Street, Suite 300, Sacramento, California 95814, and can be reached by telephone, (916) 653-7653, or on the Internet, at “apowell@library.ca.gov”.

The two Family Preservation and Support Services Program seminars and reports were made possible with the generous support of S. H. Cowell Foundation.

Copies of: Family Preservation and Support Services and California’s Families: Seminar Presentations, and its companion report, Family Preservation and Support Services and California’s Families: Background Briefing Report, may be obtained by contacting the California State Library Foundation. Portions of the report may be photocopied for educational, teaching, and dissemination purposes provided that proper attribution is given to the California State Library Foundation and the California Family Impact Seminar.

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California State Library Foundation
1225 Eighth Street, Suite 345
Sacramento, California 95814
(916) 447-6331

M. Anne Powell, M.S.W.
Project Director
California Family Impact Seminar

Dr. Kevin Starr
State Librarian of California

Vickie J. Lockhart
Executive Director
California State Library Foundation
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INTRODUCTION

In November 1995 the California Family Impact Seminar (CAFIS) held two child welfare policy seminars for state policymakers and their staff. The seminars were made possible through the generous support of the S. H. Cowell Foundation. The purpose of these seminars was to provide policymakers information regarding the implications of child welfare family preservation and support services programs on child safety and foster care. A total of ten research, policy and program administration experts presented their work at these two seminars. This report contains their transcripts and referenced handouts. Handouts appear following presentation text.

Seminar 1, Child Safety and Family Preservation and Support Services, took place on November 3, 1995. The speakers included:

- Michael Weber, Director
  Program for Community Protection of Children
  Edna McConnell Clark Foundation
  Chair, U.S. Advisory Board on Child Abuse and Neglect

- Connie Busse, Executive Director
  Greater Bay Area Family Resource Network

- Roger Bresnan, President
  Victims of Child Abuse Legislation, San Diego Chapter

- Bruce Rubenstein, Deputy Director
  Bureau of Planning, Policy and Community Development
  Los Angeles County Department of Children and Family Services
  and
  Margo Wainwright, Chief Executive Officer
  Youth Intervention Program

- Duncan Lindsey, Ph.D., Professor
  School of Public Policy and Social Research
  University of California, Los Angeles

Seminar 2, Foster Care and Family Preservation and Support Services, took place on November 21, 1995. The speakers included:

- Rick Barth, M.S.W., Ph.D., Hutto Patterson Professor
  School of Social Welfare
  University of California, Berkeley

- Danna Fabella, L.C.S.W., Assistant County Welfare Director
Contra Costa County Social Service Department

- Farris Page, Ph.D., Director of Training and Special Projects
  Alternative Family Services

- Vernon Brown, M.P.A., Statewide Director
  Aspira Foster Family Services
  Assistant Executive Director, Moss Beach Homes, Inc.
SPEAKER INFORMATION AND BIOGRAPHICAL STATEMENTS

SEMINAR I:  CHILD SAFETY AND FAMILY PRESERVATION AND SUPPORT SERVICES

Michael Weber, Director
Program for the Community Protection of Children
Edna McConnell Clark Foundation
Chair, U.S. Advisory Board on Child Abuse and Neglect
325 Cedar Street, Suite 303
St. Paul, MN  55101
Phone: (612) 221-4042    Fax: (612) 223-8245

Michael Weber is the Director of the Program for the Community Protection of Children, a program of the Chapin Hall Center for Children at the University of Chicago, funded by the Edna McConnell Clark Foundation. The Program was established to seek major reform in how children are protected from abuse and neglect. The focus of the Program is to promote greater involvement of the entire community in protecting children and greater involvement of Child Protective Services agencies with other social service agencies and the larger community in an effort to develop a community-based child protection practice.

Previously, Mr. Weber was the Director of the Hennepin County Community Services Department, the comprehensive social service agency which serves the Minneapolis area. In this capacity, Mr. Weber had responsibility for the Child Protection program for that area. Prior to his position with Hennepin County, Mr. Weber was Assistant Commissioner for the Minnesota Department of Human Services.

Mr. Weber has been President of the National Association of Public Child Welfare Administrators, a member of the National Commission on Child Welfare and Family Preservation, and a member of the National Commission on Family Foster Care. He was the recipient of the 1990 Vincent DeFrancis award from the American Humane Association, and recipient of the 1993 Award for Excellence in Public Child Welfare Administration from the National Association of Public Child Welfare Administrators. He was recently elected Chairperson of the U.S. Advisory Board on Child Abuse and Neglect, is immediate past-Chairperson of the Intensive Family Preservation Services National Network, a member of the National Advisory Committee of the Children’s Division of the American Humane Association, and a member of the Executive Committee of the National Association of Public Child Welfare Administrators.

Connie Busse, Executive Director
Greater Bay Area Family Resource Network
116 New Montgomery Street, Suite 224
San Francisco, CA  94105
Phone: (415) 247-6555    Fax: (415) 247-6559
Connie Busse is the Executive Director of the Greater Bay Area Family Resource Network (GBAFRN). GBAFRN, based in San Francisco, California, is a collaboration involving five public agency partners, two institutions of higher education, a hospital, a university medical center, and two private nonprofit agencies. GBAFRN is funded by S. H. Cowell Foundation, Evelyn and Walter Haas, Jr. Fund, James Irvine Foundation, Walter S. Johnson Foundation, San Francisco Foundation, and Stuart Foundations. The mission of the GBAFRN is to promote the development of multiethnic, multidisciplinary family support programs throughout its eight-county region. These programs bring together educational, health, and human services to families and children in school-linked settings.

Prior to directing the Greater Bay Area Family Resource Network, Ms. Busse coordinated the New Beginnings Demonstration Center in San Diego, California. New Beginnings is one of the oldest and most comprehensive school-linked interagency collaboration projects in the state.

**Training Products Created**

- Cultural Connection - distance education on cultural awareness
- Shanti - computer game on cultural awareness
- Printed guide for use of IBM-PC and dBase
- Computerized instruction on astronomy, musical instruments
- Computerized training on job responsibilities for multilevel clerical staff
- Video on “How to Make a Video”

**Evaluation Reports and other Publications (partial list)**


Social Studies Textbook Pilot—Grades 4 - 8: Teacher and Student Perspectives. February 1992. A descriptive study of attitudes of staff and students toward a textbook series proposed for adoption. Focus was on inclusion of various racial and ethnic groups.


Summary of Restructuring at Selected School Sites. San Diego City Schools. October 1990. Description of implementation and student outcomes.

**Roger Bresnan, President**
Victrims of Child Abuse Legislation, San Diego Chapter
4675 W. Point Loma Blvd.
San Diego, CA 92107
Phone: (619) 224-0457 (h)

Roger Bresnan is President of the San Diego Chapter of Victims of Child Abuse Legislation, an organization that attempts to address the issue of the accusatory nature of the child welfare system and the potential for infringing on the rights of the family.

**Bruce Rubenstein, Deputy Director**
Bureau of Planning, Policy and Community Development
Los Angeles County Department of Children and Family Services
425 Shatto Place, Room 500
Los Angeles, CA 90020
Phone: (213) 351-5614 Fax: (213) 383-3693

Bruce Rubenstein serves as Deputy Director for the County of Los Angeles Department of Children and Family Services’ new Bureau of Planning, Policy and Community Development. In this position, Bruce is responsible for strategic planning, policy development, training and the development and implementation of a countywide system of comprehensive, community-based services for children and families in Los Angeles County. This effort involves the development and coordination of public, private and community resources for families, with the goals of child protection, family preservation and community development.

Bruce assumes this new position after 3-1/2 years as Deputy Director for Administration and Management Services for DCFS. In addition to directing the budget, finance, human resources, labor relations and management information services, Bruce was responsible for the planning and implementation of the county’s multi-agency initiative to protect children and strengthen families through a countywide system of Community Family Preservation Network.

Bruce has a Masters of Social Work degree, with specialization in Planning, Policy and Administration. He served as a member of the legislative appropriations staff of the Illinois House of Representatives; legislative liaison and Deputy Director for the Illinois Department of Children and Family Services; and health policy advocate for Blue Cross of California. In these positions, Bruce has negotiated legislation in the areas of child abuse and neglect, adoption, child care and youth services; managed Illinois’ statewide program of community-based services for homeless and runaway youth; and lectured at chambers of commerce, senior centers and community centers on health care and health financing issues.
Margo Wainwright, CEO
Youth Intervention Program
4625 Crenshaw Blvd.
Los Angeles, CA 90043
Phone: (213) 290-7111   Fax: (213) 296-0697

Margo Wainwright is CEO of the Youth Intervention Program in Los Angeles County. Los Angeles has taken a community-based orientation toward family preservation. Ms. Wainwright’s program is one of those such family support programs, and she will talk about the impact they are having in LA.

Duncan Lindsey, Ph.D., Professor
School of Public Policy and Social Research
University of California, Los Angeles
247 Dodd Hall
Los Angeles, CA 90095-1452
Phone: (310) 206-2973   Fax: (310) 206-7564

Duncan Lindsey is Professor at the School of Public Policy and Social Research at the University of California, Los Angeles. Dr. Lindsey is Editor-in-Chief of *Children and Youth Services Review* (Pergamon Press/Elsevier Sciences), the major research journal in the child welfare field and published eight times a year. He is the author of *The Welfare of Children* recently published by Oxford University Press. Dr. Lindsey is also General Editor for a series of books published by Oxford University Press entitled, *Child Welfare: Practice, Policy, and Research*.

His recent work, besides the preparation of the background report for the seminar, includes:


SEMINAR 2:  FOSTER CARE AND FAMILY PRESERVATION AND SUPPORT SERVICES

Rick Barth, M.S.W., Ph.D., Hutto Patterson Professor
School of Social Welfare
University of California, Berkeley
Berkeley, CA  94720-7400
Phone: (510) 642-8535    Fax: (510) 643-6126

Richard P. Barth is Hutto Patterson Professor, School of Social Welfare, University of California at Berkeley. He is Co-Principal Investigator of Berkeley's Child Welfare Research Center. His six books include: From Child Abuse to Permanency Planning: Pathways Through Child Welfare Services (Aldine, 1994). Dr. Barth is currently on the Editorial Board of the Family Preservation Journal and the Advisory Group for the National Study on the Implementation of Family Preservation and Family Support. He has been a Fulbright scholar to Sweden, a Lois and Samuel Silberman Senior Faculty Fellow, and a winner of the Frank Bruel Prize of the University of Chicago for excellence in child welfare scholarship.

Danna Fabella, L.C.S.W., Assistant County Welfare Director
Contra Costa County Social Service Department
40 Douglas Drive
Martinez, CA  94553
Phone: (510) 313-1583    Fax: (510) 313-1575

Danna Fabella is currently the Assistant County Welfare Director in the Contra Costa County Social Service Department. She is responsible for the delivery of child welfare services programs, including emergency response, family maintenance, family reunification, permanency placement, family preservation, and adoptions. Before joining the Contra Costa County Social Service Department in November 1994, Ms. Fabella was the Deputy Director of Social Services in the Sonoma County Human Service Department, where she managed child welfare services and a 24-hour children’s residential shelter facility for two years. Between 1980 and 1992, Ms. Fabella worked for the Alameda County Social Services Agency as: a Child Welfare Worker II for five years, Program Director of Snedigar Cottage (a 24-hour shelter care facility for abused and neglected children) and 129 satellite shelter care programs; and as Division Director for Children’s Placement Services for four years, during which time she was responsible for family reunification, family preservation, adoptions, and licensing services.

Farris Page, Ph.D., Director of Training and Special Projects
Alternative Family Services
25 Division Street, Suite 201
San Francisco, CA  94103
Phone: (415) 626-2700    Fax: (415) 626-2760

Farris Page is the Director of Training and Special Projects at Alternative Family Services (AFS) in San Francisco. AFS, licensed by the state as a foster family agency, provides therapeutic foster care and reunification services for abused, neglected, and troubled children in San Francisco, San
Mateo, Marin and Sonoma Counties. AFS also provides enhanced foster care for developmentally disabled children which includes intensive skills and socialization training within a family context. Utilizing the Extended Family model of foster care, AFS services are designed to maximize a child’s opportunity to grow, trust, and bond within a broadly defined family environment. The AFS support network includes foster parents, caseworkers, in-home workers, educational and vocational specialists, tutors, and mentors to assist children to develop healthy relationships with adults and peers, within the family, and throughout the community.

Dr. Page also serves as Mental Health Consultant to the Children’s Council in San Francisco. Prior to joining Alternative Family Services, Dr. Page was Program Manager at Children’s Home Society in San Francisco, and Program Manager at El Nido in Los Angeles. She has also served in a variety of key positions in child development, educational, and medical settings.

Dr. Page received her doctorate in education from the University of San Francisco, a masters degree in human development from Pacific Oaks College, and special training in infancy development, legal research, preschool teacher assessment, and financial management and development. She has more than thirty years of experience as a successful executive, responsible for staffing multidisciplinary teams, improving administrative operations, creating training models, staff supervision and program management. Dr. Page has conducted special workshops on a variety of family and child related issues, and co-authored several papers on related topics.

**Vernon Brown, M.P.A., Statewide Director**
Aspira Foster Family Services
Assistant Executive Director, Moss Beach Homes, Inc.
1761 Laurel Street
San Carlos, CA 94070-5200
Phone: (415) 594-8494 Fax: (415) 637-2202

Vernon Brown’s career as an educator, social worker, and administrator has focused on providing children opportunities to become contributing members of their community. Mr. Brown is currently Statewide Director for Aspira Foster Family Services, and Assistant Executive Director of Moss Beach Homes, Inc., positions he has held for the past 10 years. He is responsible for directing a specialized foster care agency for over 900 children who have been abused, neglected, abandoned, or adjudged delinquent, including direct responsibility for the operations of nine Aspira Foster Family Agency offices and the Excell Group Home program. Mr. Brown has also served Moss Beach Homes, Inc., in prior years as: Program Director of 13 group homes and in Aspira Foster Family Agency district offices; House Manager on an 8-bed group home; and Principal of the Moss Beach Homes Group Home Private School.

Mr. Brown has served on two national boards, the Foster Family Treatment Association and the National Foster Parent Association, and as President of the California Association of Children’s Homes. Mr. Brown has a Masters in Public Administration from Golden Gate University.
SEMINAR 1: CHILD SAFETY AND FAMILY PRESERVATION
AND SUPPORT SERVICES

State Capitol
Sacramento, California
November 3, 1995
CHILD SAFETY AND FAMILY PRESERVATION
AND SUPPORT SERVICES

FRIDAY, NOVEMBER 3, 1995
9:00 A.M. - 11:45 A.M.
STATE CAPITOL, ROOM 437
SACRAMENTO, CALIFORNIA

AGENDA

8:30 - 9:00 A.M. CONTINENTAL BREAKFAST

9:00 - 9:10 A.M. WELCOME, INTRODUCTIONS AND SEMINAR OVERVIEW
Anne Powell, M.S.W., Project Director
California Family Impact Seminar

9:10 - 9:40 A.M. CHILD WELFARE, FAMILY PRESERVATION AND SUPPORT, AND
COMMUNITY-BASED CHILD PROTECTION
Michael Weber, Director, Program for the Community Protection of
Children, Edna McConnell Clark Foundation, Chair, U.S. Advisory
Board on Child Abuse and Neglect

9:40 - 10:00 A.M. FAMILY SUPPORT
Connie Busse, Executive Director, Greater Bay Area Family Resource
Network

10:00 - 10:20 A.M. ABUSE OF CHILD ABUSE LAWS & FAMILY PRESERVATION AND
SUPPORT
Roger Bresnan, President
Victims of Child Abuse Legislation, San Diego Chapter

10:20 - 10:30 A.M. BREAK

10:30 - 10:50 A.M. FAMILY PRESERVATION AND SUPPORT IN LOS ANGELES AND ITS
IMPACT ON CHILD SAFETY
Bruce Rubenstein, Deputy Director, Bureau of Planning, Policy &
Community Development, Los Angeles County Department of Children
and Family Services and
Margo Wainwright, Cheif Executive Officer, Youth Intervention Program, Los Angeles, California

10:50 - 11:10 A.M. FAMILY PRESERVATION AND SUPPORT EVALUATIONS
Duncan Lindsey, Ph.D., Professor
School of Public Policy and Social Research
University of California, Los Angeles

11:10 - 11:45 A.M. QUESTION AND ANSWER PERIOD
Introductions and Welcome, M. Anne Powell, M.S.W., CAFIS Director

Good morning and welcome to today’s seminar. We are very pleased that you could join us. The purpose of today’s seminar is to acquaint you with public child welfare and some of the significant reforms occurring in the child welfare system. The Family Impact Seminars are designed to provide presentations by recognized experts that will discuss the latest developments in child welfare, specifically family support and preservation service programs.

Before our speakers begin, I would like to take a moment to explain why the California Family Impact Seminar, with the generous support of the S. H. Cowell Foundation, has organized this and the November 21st seminar. California, along with other states, has been provided with a rare opportunity, using new federal and state funding, to reshape how we protect children and promote family well being—to shift from a reactive system to one that enhances community-based support and proactively assists families with the challenge of raising and nurturing their children with, ideally, less governmental intrusion [see Handout #1]. Handout #2 provides definitions for family preservation and family support. There are two major principles embodied in family preservation and support services programs. First, is the expansion of focus to include the whole family. Second is bringing together a wide range of resources to address family needs. Handout #3 illustrates these principles.

This opportunity, however, is limited. Federal funding for the Family Preservation and Support Services Program ends in 1999 [see Handouts #4 and #5]. And the new Congress, in an effort to provide flexibility to states and locales, will no doubt at some point in the future revisit the current federal entitlement now in place for foster care.

It is our desire in today’s program to assist those of you who are less familiar with child welfare to better understand it and the new reforms that are underway. For those of you who are actively engaged in the state’s efforts to reform child welfare, we hope to provide you with information that will further your efforts in this major undertaking.
Child Welfare, Family Preservation and Support, and Community-Based Child Protection, Michael Weber

Michael Weber is the Director of the Program for the Community Protection of Children, a program of the Chapin Hall Center for the Children at the University of Chicago, funded by the Edna McConnell Clark Foundation. He also serves as the Chair of the U.S. Advisory Board on Child Abuse and Neglect. Mr. Weber will provide a brief overview of the child welfare system and its mission to protect children. He will outline the major reforms that are under way, and then present information about the community child protection programs which he is now working on.

This morning I would like to spend some time looking at the entire child welfare system and, more specifically, the public child welfare system, which over the last decade or decade and a half has become almost interchangeable with child protection services agencies. If we look at it historically, the child welfare system encompassed a lot of services. But to a large extent what we have right now is a child protection service agency which is supplemented, or complemented if you will, by a foster care system. The two of those services, child protective services and foster care, comprise substantially all of today’s public child welfare system. That is what we are here to look at.

As we look at the observers of and the participants in the system, whether it is the leadership of the system, the people who work in the system, the families who participated in the system, the elected officials who are funding it, or the general public who is perceiving it, there is a strong sense that this system is in immediate need of reform. We will be talking today about what the system looks like. We are not going to spend a lot of time on the problems with the system; you can read that in many newspapers most weeks. What I would like to talk about mainly are the kinds of changes that are occurring.

I would like to start my discussion with a report that came out in 1988 by two professors at Columbia University who looked for two years around the country to find the model public child welfare agency. After two years, they said they could not find a model public child welfare agency; it simply did not exist.

At the time, I was directing the Hennepin County Community Services Department, the public child welfare agency in Minneapolis. We were fortunate that they had identified our agency as the closest they could find to what they would call a model public child welfare agency. The specific factor which they identified that set our agency apart from the majority of agencies they looked at, was that we were not just doing child protective services. In fact we had a range of services—some prevention services, some early intervention services. We were not like most of the public agencies in the country that were simply saying, If there is a problem with child abuse and neglect, call us. If it is serious enough, we will respond.

At the same time, we looked at our agency and asked, Is this really the kind of agency we want to be running? What triggered this question for us was looking at some social indicators of what
was happening to abused children in our county. What we found was, overall, families and children were regressing in terms of the social indicators about children’s health, children’s well being, and family stability.

We asked, What kinds of conclusions can we draw? We felt that our services were in fact making a difference. They seemed to be having a positive influence on most of the families and on most of the children that we were in contact with. Around the country, we had recognition as a very good public child welfare agency. The question was, why weren’t we making more progress socially?

We decided that there were three possible conclusions that we could come to. One was that in spite of all of our efforts, we were not making a difference, a conclusion leading to sort of a terminal depression—which was not a very good solution.

The second potential conclusion was to say, We are indeed making a difference, but we are not doing enough. Let’s do more of the same. This would be a standard response. We felt that in fact what we were doing was making a difference. The analogy that we used is that we were taking the families with whom we were working three steps forward. But other factors in society were taking the families five steps backwards, for a net reduction of two. This conclusion assumes that families would get worse and worse. We pursued the question, If we did more of what we are doing, would we be able to offset some of these other social factors? We said, Perhaps we would. Not guaranteed, but it would take perhaps a doubling of the resources we are putting into it. We had a great deal of public support, but not that much. We asked, If in fact we were going to get that much additional support, that many additional resources, would we put them back into doing more of the same, or would we shift to the third option, changing the paradigm?

In this third potential conclusion, we asked, Is there a new way of meeting the needs of families and children in our jurisdiction? This, I think, is the question relevant to your state and to the rest of our country. That is the direction we pursued. We began looking at what kinds of changes we should make within our jurisdiction. At the time, there was a very similar look around the country, recognizing that child protection services, as they were being offered, were not meeting the needs of families and children well.

From 1989 to 1991 a significant number of national commissions were formed—the National Commission on Children, the National Commission on Child Welfare and Family Preservation, and a number of gubernatorial commissions—looking at what was happening to children around the country. Handout #1 is a one-page summary of a report that was generated from a national policy institute sponsored by the American Humane Association, summarizing the current thinking about children’s services. The participants focused on these generic elements, saying services should be comprehensive, coordinated, community-based, etc. [see Handout #2].

The one characteristic that was missed, and looking back I wish we had included it, was “empirically-based.” There was not a focus on saying, Let’s look at what the research says. But in fact these were the kinds of changes that were governing discussions in the early part of this
decade. The question becomes then, what happened as a result of those sorts of discussions? A significant amount of change did occur.

I would just like to comment on some of the factors that have been precipitating these changes around the country. We are seeing greater and lesser changes from state to state, from county to county, from region to region. Handout #3 shows the factors that are precipitating these changes. The first two are very tough ways to precipitate change. Right now, a federal lawsuit is probably the most common way of precipitating change. Depending on how you count, there are twenty-two to twenty-six states involved in some stage of a federal lawsuit with their child welfare programs. It is a very painful way to get change, a very expensive way to get change. People running the system have little control over the change. Most importantly, since these lawsuits for the most part are based on the most recent federal child welfare legislation, 1980 legislation, we are in a position that the best outcome of a federal lawsuit is coming into compliance with the best thinking in 1980 about what services should look like. I would suggest that the best outcome from a federal lawsuit is having a system that is at least fifteen years outdated.

A far more productive force of change is that precipitated by the legislature, by the governor’s office, by state leadership, or by community agencies. Such forces of change give much more latitude and are certainly the kinds of change that I am in favor of.

If we look at the changes occurring in different states, here are some of the general trends [see Handout #4]. I am not going to go through these in detail, but these are the trends that we are seeing. No single state, no single jurisdiction, is making all of these changes, but these are the main themes that we are seeing in the changes that are occurring around the country:

1. Looking for much earlier involvement. Let’s not wait until there is a major crisis.

2. Community-based programming. Saying that a highly-centralized, government-operated system is not going to be as effective as necessary.

3. Family-centered programming. Over the last twenty or thirty years there has been a major emphasis on looking at the safety of the child. That is what has emerged more and more, particularly from the early 1980s when we began to see the media stories about the tragic deaths of children. As a response, many of the leaders in public child welfare agencies said, We have to make sure children do not die. So let’s look at the child, with little attention paid to the families. We are seeing now more and more states, as a major effort, training all of their public child welfare agency staff in family-centered programming.

4. Expanding the continuum of care. In 1990 the American Public Welfare Association did a survey of the states. There were only three services that were available in all states. Child protection and foster care were the major ones, and I have already talked about them as constituting the majority of the system. The third service available in every state was special needs adoptions. Since then there has been a major move to add services, particularly family preservation and family support. We will get to those in a few minutes.
5. Far more of an emphasis on outcome orientation. The focus has been on the process which has been the major push in the federal government as it looks at compliance with federal programs—Did you do it the way we told you to? The focus has not been on, Did we get the kind of results we want? That is gaining emphasis more and more, in spite of some of the federal trends.

6. Noncategorical funding. Particularly those of you in finance agencies know the hazards of having a categorical fund. We can pay for a family that needs this kind of service. But the family who needs something halfway between the two, I am sorry, we have not got that because we cannot pay for it. You take Brand X or Brand Z in spite of the fact that you need Brand Y.

The other themes are relatively self-explanatory, so I am not going to spend a great deal of time on them. I would be more than happy to talk about what specific states are doing in each of those areas during the discussion period.

What I would like to do now is shift from today’s system and general directions of change to talk about three specific changes that are occurring in child welfare systems around the country. First, I will talk about family preservation, then family support, and then what is happening in child protective services.

First of all, how do family preservation services fit into the overall picture that I have tried to portray? I will start with a relatively recent history. The family preservation movement started, if you can point to any one thing, with a study that was done in Oregon. The study was completed in 1979. This chart identifies a state policy that emerged in 1979.

The Oregon study essentially was looking at children in long-term foster care. Those children were considered unadoptable; they had to be in foster care until they turned eighteen. Having looked at those children in some detail, what the study found was that although many of the children were considered unadoptable because they were mentally retarded, teenagers, or whatever was the situation, they were in fact adoptable. More relevant for our discussion, it was identified that many of those children did not seem to have had to go into foster care in the first place, or they did not have to stay in foster care as long as they did. They could have remained with their birth families, or they could have been returned to their birth families. It is this kind of thinking that first culminated in the 1980 legislation, Public Law 96-272, which required state foster care programs to make “reasonable efforts”—remember, this is the language of federal legislation—to avoid unnecessary foster care.

There were three problems with that legislation. First of all, the funds that were needed and were promised in the legislation never came forward. State and local jurisdictions would not get the funding that was anticipated to make those reasonable efforts.

Secondly, reasonable efforts were never described, never defined. There have been plenty of lawsuits about what constitutes reasonable efforts. Two particular elements were: Is it reasonable to provide only the services already available, or must jurisdictions develop additional
resources? Secondly, how many chances do families get? One of the things that we have seen in media coverage of child tragedies is that, too often, when a family gets five or six or seven or eight chances in an effort to provide reasonable efforts, there is a tragedy for the child.

Thirdly, and perhaps most importantly to this discussion, the federal legislation talked about avoiding foster care. It did not talk about avoiding “unnecessary” foster care, nor did it talk about the importance of child safety. As I reflect back on why Congress did not talk about protecting child safety along with family preservation, I conclude that it was because it was assumed. It was so obvious that these efforts were not there to avoid appropriate foster care. This family preservation effort was not there to keep kids at home when they were unsafe. That was so blatantly clear that it was not stipulated in the federal legislation.

Following legislation requiring reasonable efforts came the movement to develop family preservation services throughout the country. These family preservation services were often modeled on the Homebuilders program, developed in the state of Washington. The question then became, who is going to implement it around the country? This was based on intensive services designed as a response to get families through a crisis without putting the child into foster care. There was a focus on the safety of the child, and there was a recognition that a four- or six-week program was not going to change a family’s childrearing pattern that had developed over five or ten or fifteen years. The program did have a major concern that once the crisis was over the family should be connected to ongoing services to meet the long-term needs of the family.

As the model spread throughout the country and the movement developed, the advocates said, “You really should have a family preservation program.” A number of mistakes were made in implementing this program and I would like to note three of them. In many jurisdictions, this crisis intervention program was seen as a long-term response. The assumption was that this could fix the problems that had developed over the five or ten years of the family. Second, in many cases the public presentation talked about avoiding foster care, rather than talking about avoiding unnecessary foster care. There was not a specific or articulated attention to child safety.

Finally, in many cases the implementation of the program was based on cost avoidance—saying that because family preservation on a family-by-family basis is cheaper than foster care, the program will reduce the total number of children in foster care and reduce the overall foster care budget, without taking into consideration other factors in society that would influence the number of children in foster care. For example, we saw in the mid-1980s the crack cocaine epidemic which drove foster care rates up. What we are seeing right now is that in spite of the fact that family preservation has been implemented in many jurisdictions, the number of foster children throughout the country has continued to rise since about 1985.

Let me now talk about a viable form of family preservation and a nonviable one. Viable family preservation, as far as I am concerned, focuses on reliably using a consistent model, and Handout #5 describes the model of service delivery which should be considered appropriate family preservation. Family preservation should be used as short-term services, including crisis intervention, with reasonable goals and expectations. That is to say, Can we turn around fifteen years of childrearing in a six-week period? Absolutely not. Family Preservation services must
include a component for linking families to long-term service delivery to deal with the long-term family problems, must be attendant to the safety of children, and must recognize that foster care is in fact appropriate for many children. Finally while family preservation is cheaper on a family-by-family basis, you cannot sell family preservation as a way of saving the entire system money.

Let me jump then to the other side of the coin. What is a nonviable way to describe family preservation programs, or a nonviable way to promote family preservation? If one assumes that any program which keeps children out of foster care is family preservation, I would suggest that is not viable. If there is a presentation or a promise that this is a magic bullet that will solve all problems for all children and all families, absolutely not [see Handout #6].

If one assumes that the six-week program will change a five- or ten- or fifteen-year pattern of childrearing, absolutely not. If an initiative attempts to avoid any use of foster care, that is not an appropriate approach to family preservation. Finally, if an initiative promises to reduce the overall number of children in foster care or the overall budget, I would suggest that is an expectation that cannot be met.

I would like to conclude my comments on family preservation with some sections from the most recent report of the U.S. Advisory Board on Child Abuse and Neglect [see Handout #7]. The report is specifically on fatalities. In the report, we tried to address the issue of whether family preservation leads to child tragedies. We said there are a number of things that must be included in a legitimate family preservation program in order to avoid any sense that family preservation is in fact contrary to the value of children’s safety.

I have already talked about many of the report recommendations in my presentation. I would like to focus now on a couple of things. First of all, as Congress passes a law, we should not assume that everybody knows we are talking about values, including children’s safety or family preservation or whatever. Rather, the legislation itself must focus on the compatibility of the different values, including family preservation and children’s safety.

Additionally we recommend that states and other jurisdictions implementing family preservation programs should do it with some relatively specific guidelines. We should not leave the opportunity there for whoever is implementing the program to assume that this is a magic bullet which solves all problems. Handout #7 shows the recommended guidelines themselves. They are relatively self-explanatory. What you will notice is a strong emphasis on attending to the safety of children, and on realistic expectations about what this program can and cannot do.

I would like to shift then to another element in the changes that are going on in this country in children’s programs, family support programs. Often family support and family preservation programs are confused because they are talked about independently. Family support programs generally are seen as more prevention oriented. This is the genesis. In the early 1980s, they were promoted when public sector money was going more and more into the end of the system—child protection, foster care and special needs adoptions. There was a real concern on the part of the community and on the part of some elected officials that we must make some investment in preventive services. This is what emerged in the form of family support.
The vast majority of funding for family support in its initial days came from the private sector. Public funds were not going into prevention. We witnessed a good investment, but nevertheless that is not where the public funds were going. Family support programs for the most part emerged through United Way funds, charitable funds, foundations, etc. For these services generally there is not a specific model, as there was in family preservation (i.e., the Homebuilders model which became the model for many family preservation services).

Family support did not have a specific model. But there were some common characteristics. Family support tended to be very preventive. It was available to all families. There were not income eligibility or other forms of eligibility, rather it said that all families need some kind of support. The services were available to families without any kind of stigma. It was not a question of whether this was for abusive families or this was for poor families. Family support was available to any family that was asking for those services.

There were two general forms that were implemented. One was establishing neighborhood centers usually called family resource centers. Jurisdictions did it differently. Maryland was the first jurisdiction to set centers up on a large scale. They went statewide, and there are quite a number of family resource centers throughout Maryland. Pittsburgh, as a community, was far more specific. They said they will blanket their entire city with family resource centers, and they have, I believe, eighteen of them established now. They are all operated by nonprofit corporations and multiple agencies, both public sector and private sector, which provide services at those family resource centers. Cedar Rapids, Iowa, has a somewhat different model. They have also made a commitment to blanket their entire community, but they have not set up new organizations. They have set up family resource centers that are essentially housing all the existing agencies. The other agencies already in the community have said, We will begin providing our services on a neighborhood basis through the family resource centers.

The other model that has emerged as family support has been the model of home visiting programs. There are a number of them; perhaps the best known is the federal Healthy Start Program in Hawaii. That model was developed out of the Healthy Families America Initiative and is being promoted around the country by the National Committee to Prevent Child Abuse. There are some 150 Healthy Family sites already. Finally, the Success By Six Program, which was developed in Minneapolis and is now being promoted by the United Way of America, is a home visiting program focusing on children’s success by age six, a school-readiness program. The assumption is that if children get a good start as infants, they will be more successful when they enter school. If they are more successful when they enter school, they are more likely to be successful when they leave school.

Connie Busse will be talking much more specifically about some of the things going on in California. Let me jump to the third part of the system that is perhaps the next set of the system up for reform; that is the child protection system [see Handout #8].
We can say a great deal about the child protection system, its advantages, its disadvantages. I would like to summarize three problems that seem to emerge in the work I have done with child protection agencies over the last few years.

Three major problems and three major solutions regularly emerge. First of all, the child protective system tends to be too crisis-oriented, responding only when things are serious. We hear far too many stories around the country, I called child protective services, they said it was not bad enough yet, when it gets worse, call. That is a lousy way to set up a system. But in fact, it has been there and, unfortunately, it is predictable. If we look at some of the federal initiatives, some of the state initiatives, this approach is predictable behavior on the part of those agencies. It is not as if somehow they had decided to run as dumb a system as possible. It is a system that we as a society have created.

What is the response to this first problem? What is a better approach to this? It is to move into a continuum of services that is prevention oriented. The assumption must be that there will be a continuum of services with universal support for all families, recognizing that all families need some kind of assistance. The continuum will have preventive services for high-risk families. There are early intervention services to respond to families’ needs as they are identified, whether they are identified in a context of abuse and neglect or not. Finally, there is the ability to have a good crisis response system to protect the child for when a crisis such as abuse or neglect does occur.

The second problem is that in many jurisdictions, child protective services is a solo operator. To a large extent we have said, If you see anything that looks, acts, or feels like child abuse or neglect, call us on the hotline, then butt out, please, thank you. The assumption being that the child protective services agency can handle this alone. That is not feasible. We have to look to the entire community to be able to play a role in taking care of its children. This means the community setting the agenda. Dayton, Ohio, and Grand Rapids, Michigan, have done wonderful jobs of looking to the entire community and saying, How can we meet the needs of children who are abused and neglected?

The focus has been on a community-based system, bringing the entire community in. We have different kinds of roles, differentiated roles. A few years ago we were talking about how the community is becoming involved in child protective services. In many cases, that was really a privatization kind of model. Let’s look to the churches and synagogues, schools, and Head Start programs to do what child protective services does. That is not what we are talking about now. We are talking about a much more appropriate role, an appropriate role for those other actors within the community.

The third problem with child protective services is its homogenous response. A wide variety of reports come in, but there has been an emphasis on providing a consistent, singular response, a “one size fits all,” if you will. A much better approach is for the child protective service agency to have the capacity for multiple kinds of responses.
Handout #9 describes what those multiple responses will look like. As a first response, the agency has the capability of diverting some reports back to the community saying, Yes, you called us. Perhaps you had to call us because in fact it was a mandated report. But there are other agencies, other sectors of the community that can handle this kind of a problem better. Handout #10 describes what we believe are outcomes that can be achieved with these responses.

Secondly, the agency has the ability to provide preventive services and support for families. What we know now is that the vast majority of child protective services resources are put into investigations. The vast majority of families get no service or any kind of intervention other than the investigations. At the same time, less than half of the reports are substantiated. The assumption of community partnerships for child protective services is that families need support. Most of the families would receive a response focusing on preventive support, preventive services for families. These services would be provided through an individualized plan, and the services would be focused on what will most likely minimize the impact of the risk factors that are leading to abuse and neglect in these families.

The third response that a child protective service agency should be able to deliver is authoritative intervention, a response close to what we know now. The assumption is that this response is appropriate for perhaps 15 percent of the reports that are received. We talked about a “one size fits all” approach. That one size being, to use the shoe analogy, everybody getting a nine and a half. Some jurisdictions are going to a dual track, which talks about everybody getting perhaps a seven and a half or a ten and a half. We are talking about multiple capacity, and here we have talked about three different responses. We are not talking about one size of shoes or two sizes of shoes, or even three sizes of shoes, but rather the flexibility of the child protective services agency as part of the larger community to be able to respond appropriately to the needs of all its children.

I would like to make just one comment on the larger community involvement. Over the last decade, we have recognized in the child welfare field that we cannot focus on just the child. We have had the experience of seeing children removed from their parental homes, put in foster care or residential treatment for a year or perhaps a year and a half or sometimes maybe two years, with the focus being, We will fix this child, and then we will send the child back to an unchanged home. We learned that did not work. If in fact we did make some advances in the child’s behavior in whatever setting he or she was in, those desired changes did not persist when the child went back home.

I think we have to look at the same principle with our families. If we invest only in the family and not in the community, it is very similar to trying to change the child and put the child back into an unchanged family. If we focus only on the family and not on the community, we are not going to have an impact on families or on the community. I would suggest in closing that one of the major thrusts is going to have to be recognizing the larger picture—the communities in which families live. The larger community is with the family and in turn with the child.

If we see this kind of change in our child protective services system, what can we expect? I mentioned earlier that many of our services are becoming far more community oriented. We can reasonably expect larger community involvement and ownership in protecting their children.
Some would see it as a means; I would see it as a goal that is valuable in and of itself. I think we can see the preventing of unnecessary involvement of families in child protective services and not just, Let’s not have them involved in child protective services, but, Let’s have them not involved in child protective services because the local community has a better and earlier response. We do see a change when child protective services are now involved with a family, but there is a far more appropriate response—the individualized response of the many sized shoes, if I can use that analogy. That response will be appropriate for preventing abuse and neglect or preventing further abuse and neglect. It will be appropriate for supporting the family, and it will take into consideration the medical adage, first “do no harm” within the family.

I believe this will increase the safety of the children, particularly the safety of the children who come to the attention of the system, through a focusing not just on prevention but on less recurrence of abuse and neglect. Finally, I think we will see a decrease, although an unmeasurable one, in the actual incidence of abuse and neglect. We will not see and we should not expect to see an end to abuse and neglect or fatalities, nor should we promise to see an overall reduction in maltreatment reports. In looking at the analogy of family preservation services, we should not say, This is going to cure everything. There are too many factors in society that will offset this.

Handout #11 shows what I would call related issues. If we had another couple of hours, I would like to talk about these twenty-three issues. But I put them up here simply as a way of saying, These are other elements that have to be taken into consideration as we are looking at our child welfare system. We can add plenty more issues. If we were to add more, I would perhaps add welfare reform and some of the other things that are going on within the larger system. But these are elements that must be taken into consideration as we redesign our system.

And with that, I will wrap up my presentation, essentially saying that our child welfare system today is seen by many as being in need of reform, significant reform. The people running the system are perhaps loudest about saying, We want to change the system. We want to change it into the reformed system that I have talked about and that will be talked about by the next couple of presenters. Thank you.
Family Support, Connie Busse

Connie Busse is the Executive Director of the Greater Bay Area Family Resource Network, a collaborative effort that seeks to establish multiethnic, multidisciplinary family support programs in the San Francisco Bay Area. Ms. Busse will describe family support and the different types of family support programs in California and will discuss how these efforts reduce child maltreatment.

I always like to follow Mike Weber because he gives you such a nice clear picture of the child welfare system. I have been reading this book called Leadership of the New Science, by Margaret Wheatley, and one of the things she said really struck me. She said, “First of all, I no longer believe that organizations can be changed by imposing a model developed elsewhere. There is no objective reality out there waiting to reveal its secrets. There are no recipes or formulas, no checklists or advice that describe reality. There is only what we create through our engagement with others and with events that occur.”

Ms. Wheatley’s perspective comes from taking some of the new science theories, quantum theory, Chaos theory, and self-organizing systems of biology, and putting those together and looking at how they affect organizations. I think a lot of what she is talking about really applies to how we need to think about what we do with our systems for families and children. Children really will be safe in our society when we decide to engage those issues, and when we decide to create those kinds of communities, environments that support establishing expectations, with the resources for children and families.

There is no one answer, there is no magic formula. No one is going to ever be able to tell you, If you will just do this, you can change it. But there are a lot of wonderful ideas, and they were all inspired by some of the families and children who are in hostile environments, or these types of families and children in trouble who are struggling with abuse issues. What we need to do is to find ways to bring those out. That is why I am such a strong proponent of family support, because family support is such a positive model and such a positive way to begin looking at families and children and how we can change the current conditions.

Family support is really a movement. It came out of a long history of things that happened, like settlement houses. It is also a set of principles, a theory, a set of practices, and a way of delivering services and interacting with families and children that is different from how it is most often done now.

The Children’s Defense Fund has developed a triangle that describes the continuum of child and family services [see Handout #1]. It looks at family support as happening for all families where, for example, there is inadequate housing or for families where the child care might be an issue.

When I think of family support, I think of it as being in the entire triangle. I think of it as a whole set of supports, opportunities and interactions that support families wherever they live. [See Handouts #2, #3, and #4 for a more complete description of family support.] I think of it as a
way of interacting with families once they get into the system, that looks at that family and understands that no matter who they are they have strengths. No matter how horrible something that we perceived that they did might be, there is some way that we can tap into some strength in them and begin to change that around. Also, that we, as the system, do not have the answers.

It is very important when we think about legislation and designing programs to remember that the world looks very different when you are living in an inner-city or an isolated rural community. You do not have enough money, enough food, and no one to turn to.

When we look at the principles of family support, the principles really say there is a basic relationship between any program that we design and the family. That relationship is the relationship of equality and dignity and all of us who work with families need to connect to that relationship in that way. The program’s first priority is to establish and maintain that relationship and then to look at those connections as vital resources to one another.

When I talk a little bit later about some of the models, you will see how exciting it is when people who have maybe not experienced any success in their life before, or have felt that they are worthless, discover that they have something to offer someone else. When they begin to engage and see that they have something to offer to others, their whole life can change around. There are many stories of people who have gone back to school, who have become self-sufficient, who have started businesses, because they started out in some kind of a family support program in their neighborhood.

Family support programs are based in communities, right there where people live. They are based on what a community sees it needs. They also have cultural relevance. You do not design the same thing for the Mission District of San Francisco as you design for Houston, Texas. You design something that comes out of the community itself. Programs are often that bridge that brings families out of their isolation, either as an individual or individual family, or out of their isolation in their community. There are some communities that are very isolated from one another. That is a part of family support.

An awful lot of what happens in family support is educating people about what it takes and different ways of thinking about raising children. We call it parent education. My experience when I ran a program was that when we called something a parenting class, people did not come because often for them the one thing they really felt they knew how to do was raise their children. Or if they did not feel they knew how to raise their children, they were embarrassed to admit it or they felt helpless about it. We quit doing things we called family parent education.

We did things like had potlucks and toy-making sessions and various kinds of activities. While we were having those sessions, we talked a lot together with the families about different ways that they could think about raising their children. We gave them examples. I think it is one of the ways we have to be very careful when we design these things, that we do not take away the dignity of people and that we honor what strengths they may have. We enhance their skills, but we do it in a way that respects them.
A major part of family support programs is that they are voluntary. When families come in and ask for help, that is really seen as a strength and as a positive. It is not seen as needy or hopeless. It is really seen that they are so strong that they know that they can reach out and ask for what they need.

There are a lot of different kinds of components to family support. There are life training, parent processes, support groups, information referral, advocacy for families with others, and all sorts of auxiliary supports. There is usually always a drop-in aspect to it. Child care is very often a part of it.

I would like to talk a little about what family support programs look like when you get them working and when they are in a neighborhood or when they are in a rural area or wherever they are. What you will see is a lot of people there who are there because they want to be there. They drop in whenever they want to, and they drop in because they know that something can go on there that is supportive and helpful to them. It is not a judgment on them that they are there.

They might be there to participate in a craft; they might be there to participate in a class that you are having—to participate in an exercise event, or to come and wash their clothes. I do not know about you, but I—due to certain circumstances, I am living in an apartment for the first time in thirty years—find it appalling to have to pay $3.00 every time I want to wash a load of clothes. But I can afford to do that; poor families cannot do that. Places that do family support have the kinds of things that families truly need in order to make that difference. That difference of $3.00 is a meal for that family, and they do not need to have to spend it washing their clothes.

In these kinds of places, there are activities for youths, for the whole family, and for individual parts of the families. There are connections to all kinds of other resources that they might want. There are answers to problems that perplex families. Those answers do not just come from professional people with degrees and a lot of constructs about how things should be done; they also come from the people.

Sometimes you need professionals. They have an important role to play, but the role should be as facilitator and guide and not as judge and definer and decreer of what this family needs to do. We need to walk alongside that family and give them guidance and options and facilitate what happens, but we should not decide what happens.

When we have that kind of program, a family will come in and they will see that they can find answers to their situations and they find them from one another. When that happens, you really see in communities hope returning, and you see families beginning to care about the community and about one another. You see things like community gardens and cleaned-up parks. They run the drug dealers out of parks and they run them out of neighborhoods. They begin to have a set of understandings or standards or agreements with one another about how children in their neighborhood will be treated. They begin to do the kinds of things that many of us experienced growing up—especially if you are a little older—that there were a whole lot of people who knew you and cared about you. If you were straying, they were sure to let you know. If you were doing great, they were sure to let you know. That is what starts happening when you base
programs in the community that meet the needs of the community, respect its culture, and are not seen as a judgment on what is happening.

There are thousands of family support programs. I want to mention just a few examples from here in California to give you an idea of some of the different places that family support can happen. There are, all over the country and all over the state, many models.

There is a program located at San Francisco General called Asian Perinatal Advocates. This program works with Asian mothers who are not English speakers and who very often are new immigrants to the country. Many of them come as brides to husbands they have never met before. They are living with mothers-in-law or with people that they do not know. They are having children, and they have no guidance. They have no one to turn to for their own needs and often become depressed and lonely. They are very ripe targets for the kinds of abuse and neglect that can go on.

Staff from Asian Perinatal Associates meet the mother in the hospital when she has that baby and talk with her and establish a relationship with her in her own language. The staff person becomes a friend to her, a professional friend, connecting her to resources, providing her guidance, doing home visiting, and eventually connecting her to other people. They have the flexibility to work with that mother for two years. They have seen wonderful results in people who have now become connected to the broader community.

Another program is the Good Samaritan Family Resource Center in the Mission District of San Francisco. This program has been operating for over a hundred years, serving every new group of immigrants that has come into that neighborhood. Currently it is a very dynamic program that has a comprehensive array of services linked to a lot of other people. In addition the program offers employment training and ESL classes, and sports teams for the youngsters who would otherwise have no safe activities in which to participate. They are one of the communities that cleaned up their parks, established agreements with the gang members and the drug dealers to leave so that the children would be able to play soccer there.

The Center uses volunteers and paid staff who work together. They have over 80 volunteers who work there at least once a week. Typically staff will work with the family to discover hidden talents. They have many families from the center who have gone on to start their own businesses and become successful. They have done a great deal to impact their whole surrounding neighborhood. The family support center really reflects the culture of the community with artwork, and fairs, and the kinds of celebrations that they have with the staff.

One of the really successful efforts that the Center has is a program for new mothers. In our next issue of Network Connection, there is a story about a young mother who had her first baby and who had been on AFDC herself as a child. She did not feel she had good role models and had been a member of a gang. She started coming to this center and really turned herself around. Now she is bringing in a lot of other young women to be part of this center. It is the community taking back its community and demonstrating that support is not just professional.
The Parent Services Project, which is headquartered in Fairfax, is actually a national program with more than 300 sites across the nation. They practice family support at child care centers. They really integrate the whole family into the child care center. The staff talk to the parent as they pick up and drop off the children. They often convey a lot of information and look for signs that a family might be in trouble. The staff plan things like snow trips and other kinds of whole family events.

The Project has a fathers group—fathers groups are becoming a lot more connected and needed in family support situations. We were having a short discussion earlier about the way in which fathers have been isolated from families, not only in poor families or families who are on AFDC, but in all families. Fathers in the United States have had a less significant role in their families than probably they need to have. I am excited to see the number of fathers groups that are starting to appear. They create this web that nurtures the family at this very young age with the children.

Another program that you probably have heard about is the Vaughn New Century Learning Center in the San Fernando Valley. It is usually called the Vaughn Street Center, and you may have heard of Yolando Trevino, its director. This center is a wonderful example of community governance, of what happens in a site. Many of the sites do not have real participation of their residents who live in their community. This site does. Fifty-one percent of its governing board are community residents, and they actually hired the director when she came. It was their decision. They are very involved in the program. They spend thousands of hours volunteering at the center, and they have set up a skills bank. In that skills bank, families trade skills that they have with one another so that they can get needs met and so they again see that there is something they have to contribute. Located on a school site, the Vaughn Street Center has seen a big turnaround in school performance as a result of their work with increased test scores and increased attendance.

There are all kinds of places that family support can go on, and it can go on in public agencies as well. I am currently involved in a program with Contra Costa County where they have service integration teams that they have developed and located in centers. Originally they conceived of those teams as bringing in and integrating just services. Now they are beginning to see that they need to incorporate support groups and skills banks and all of the other things that communities really want.

Another aspect that all people who are working with families are beginning to see is that it does no good to work with individual families. You really must work with the whole community. You really must work with groups of families and provide connections, and you must work within the context of a neighborhood, so that you have some chance of a standard being established. Another important thing that almost everyone is working on in limited ways, and we expect to work on in larger ways, is employment development. It is very clear that one of the tasks that we have ahead of us is to seek out decent employment for all these people who are not currently employed and have a long way to go in skills development. For me, what I see when I go out to programs and sites, is the real change in how people feel about their community and their neighborhood when they have a program in their neighborhood that honors and supports them.
In concluding, one of the projects I would like to briefly talk about is Coliseum Gardens in Oakland. They have a model called Health Realization. Coliseum Gardens was one of those places where the fire department would not go in without a police escort; the paper was not delivered; there was no cable TV because it was such a dangerous place. Through the kind of support that is built on the strength of the community, the whole community has turned around. They have indeed planted gardens, and gotten the city to turn on the water for them so they can do it. They have turned around the attendance of children in school. They decreased teen pregnancy. They have driven the drug dealers out of this very difficult neighborhood, and they have changed that community because the residents wanted to change. They believed they could change. They gradually and slowly built that change, using each other and using other resources as needed to reach out to them, both public and private.

Family support is something that reaches across all aspects of the community, and when it does, it begins to create that safety net, that web, that can allow our children to grow up in a safe and nurturing environment.
Abuse of Child Abuse Laws and Family Preservation and Support, Roger Bresnan

Roger Bresnan is President of the San Diego Chapter of Victims of Child Abuse Legislation, an organization that attempts to address the issue of the accusatory nature of the child welfare system and the potential for infringing on the rights of the family. Mr. Bresnan will present his organization’s views on how the public child welfare system intrudes upon the family, and how family preservation and support programs help or hinder family privacy and unity.

Ladies and gentlemen, my name is Roger Bresnan. I am the President of the San Diego Chapter of Victims of Child Abuse Legislation (VOCAL). Thank you for inviting me to present our organization’s views on how child welfare services intrude upon the family and how family preservation programs help or hinder family privacy and unity.

For those of you who do not know what VOCAL stands for, let me explain. We are a nonprofit organization, organized to guide and support parents. We are family preservation advocates. Our goal is to see that children and their families are protected from all forms of abuse and human rights violations. VOCAL has international representation at the United Nations through the Albert Schweitzer Society International, by Brigadier General Dr. F. Arthur Bogarts and a chapter creating the Unilateral Foundation for Human Rights.

I can remember back fifteen, twenty years ago, when the social workers in our communities were out there giving food, shelter, furniture, transportation to any who needed assistance. I remember thinking this is a good thing to help people out who, through no fault of their own, loss of job, divorce, etc. needed temporary help. I also recall that many people that received services could have also gotten help from friends and family until a new job or a change in their current situation occurred. But, regardless, the services were provided, usually in a nonadversarial manner. It was not until around 1985 that I personally noticed a new direction in the delivery of social services. It was as if the Stanford Prisoner's Study of the early 1970s had begun to take hold in the personalities of the social workers of that era.

The Stanford Prisoner's Study in the early 1970s was conducted by Zimbardo. What they did in this study was to recruit students on a voluntary basis and split them into two control groups. Group 1 were to be prison guards and Group 2 were to play the role of prisoners. For several weeks, to conduct this experiment, a section of the basement at Stanford had been turned into a prison-like environment.

This experiment demonstrated that after several days, the students acting as guards started to become hostile to the students acting as prisoners; the “prisoners,” forgetting this was an experiment, actually accepted themselves as real prisoners. This psychological phenomenon is repeated in the delivery systems set up to enforce the Welfare and Institution Codes, changing the roles from nonadversarial to adversarial.
The current mantra, “It takes a whole village to raise a child,” was put into perspective rather well by Mrs. Phyllis Schafly in an article printed in *Conservative Chronicle*, October 11, 1995, titled “Changing Schools into Social Welfare Agencies.” I quote Mrs. Schafly:

A new mantra has crept into the stream of discourse about government's role in social service. Identified as an African proverb, it takes a whole village to raise a child. This statement is false, if not ridiculous. It takes a mother and a father to raise a child, and most parents don't want the whole village butting into the raising of their children because they know that if the village usurps parental prerogatives, the village will teach children behaviors the parents don't want them to learn.

The whole village mantra is not merely a rhetorical flourish or poetic license, it is in the indicia of a major initiative of the social service professionals to expand their turf at the expense of parental authority and responsibility.

It is in the arena of law that we can find answers to and solutions for many ongoing systematic abuses within the collaborative process we are all working to define because of the block grant process.

I attempt here, from a layman's point of view, to present the crux of the legal dilemma facing social services, juvenile courts, legislative statutes, and the Constitution of the United States. It is imperative that anyone involved in these arenas understand the contractual nature and responsibility of those positions. In the beginning of the Welfare and Institution Codes, Section 19 states that the welfare codes are defined to provide protection, support or care of the child, to provide protective services to the fullest extent deemed necessary by the juvenile court. The Juvenile Court becomes the de facto parent, to support or care for the child, not the natural parents.

These Welfare Codes have only one connection to the State Constitution or the 14th Amendment state citizen, not the 9th Amendment state citizen. What is the difference? If a parent consents to the Welfare Codes as a 14th Amendment citizen, then he or she does so by uninformed consent, without the knowledge of the contractual relationship with child protective services. By contrast, the 9th Amendment citizen has constitutional protections that disconnect the link or connection of the Welfare and Institution Codes and disconnect the federal state.

These contrasts are described by Justice Antonin Scalia in what he calls the fourth branch of government, which was held to be constitutional if you are a 14th Amendment citizen, but unconstitutional if you are a 9th Amendment state citizen. Contract law is not something understood by most parents. Because neither the social workers, attorneys, nor the courts disclose the contract, the parents are misinformed about the services offered by the social workers.

The Administrative Codes were designed to create a nonadversarial environment for the family if they consent with knowledge. But because they are uninformed and/or misinformed with third-party hearsay, it becomes a preponderance of evidence in a hostile forum. Furthermore, even if
VOCAL discloses the contract to the parents and the parents make the necessary pleadings to revoke that contract, the courts simply ignore the pleading entirely and proceed forward to issue court orders. And again, the parents become even more hostile and angry with the justice system and child protective services. They learn that the abuse laws are now being used to deny them their God-given rights to parentage.

If any constitutional protections are available, the last to be informed of these protections are the parents. Neither the attorneys nor the social workers will inform the parents of their need to get a contract to perfect the jurisdiction. As enumerated in the California Constitution, Article 6, Section 6, the judicial council, by consent of the parents, may offer an administrative proceeding to the family. But again, the disclosure of the Welfare and Institution Codes, as partially described in Section 265, states that the judicial council shall establish rules governing practice and procedure in the juvenile court not inconsistent with law if, and only if, the parents are fully informed and consent to these rules. Because the juvenile court proceedings are contractual in nature, both parties must be fully informed in order for the contract to be valid.

The civil laws as described here are laws by consent only to the judicial council rules. Therefore, the civil law principles are confused with the judicial council rules, in contrast to the 9th Amendment citizen's constitutional law protections. Because the parents have the absolute right to parentage, the state cannot interfere or supplant this right, unless the parent knowingly consents or is found unfit. Unfortunately, this focus on an unfit status is the only object the social worker and the juvenile court will see, not the consent issue.

Today's social workers are exercising an abuse of power by conforming any speculative evidence into the unfit standard. The parent or parents lose their rights to parentage and again, the juvenile court becomes the de facto parent. The only solution or bridge here to provide the proper services by child protective services, is to disclose the hidden secret of a contract. When a person is falsely accused of abuse, and subsequently loses his right to parentage in a juvenile justice court with a 99.9 percent conviction rate, predisposed bias to destroy a person's family, you have made an enemy for life. Today, there are millions of people, victims of our court and social welfare system, who are hostile and distrustful of America's justice system. It is no surprise that acts of revenge are occurring across the nation.

Another area of major concern to us is the criminal side of the collaborative process. Cases notwithstanding such as the Dale Akiki or Jim Wade cases in San Diego are examples. The 1995 case of Barbara Steele, a single mother, brought forth shocking new evidence of fraud and cover-up by the district attorney's office, San Diego Children's Hospital, and the police department's child abuse unit. Barbara's two-year old son fell off a two-foot high child's table while trying to get down. He fell over, bumped his head, went into convulsions, coma, and died two days later. Barbara was immediately arrested and charged with first degree murder and put in jail with a half-a-million-dollar bail.

At the request of her relatives, I met with Barbara after she had been incarcerated for about five and a half months. After my third visit, we did a background check through the courts and learned she did not have a record. Her neighbors said she was a good mother. The original
autopsy confirmed shaken infant death. A subsequent autopsy, by a different doctor at the same hospital, found no evidence to support such a finding.

As we dug deeper, we learned that the arresting detective had a problem with Barbara's ex-boyfriend and father to her child. Upon examining the police report, we discovered the detective had lied on the report, stating drugs were involved. Barbara Steele does not use drugs. None were found in her possession or in her house. She was never even tested for drugs in her system. Later questioning of the doctor, who made the initial autopsy, by Barbara's attorney uncovered that the doctor had been pressured by higher-ups at the Children's Hospital and the DA's office to write the report to record shaken infant syndrome. This hospital has a history of wrongful treatment and care of children, causing deaths by incorrect diagnosis.

During Barbara's confinement in jail, whenever she would cry, the jailers would open her cell door and let other women prisoners in to beat on her. She was an emotional wreck and terrified about having to return to jail. She ended up pleading to a lesser charge of misdemeanor child abuse to avoid further jail time. Today, she is fighting the system to get her other child, her young daughter, back in custody.

I tell this “never could happen in America” story in the hope that you understand how even third-party “experts” have their own agenda, and it is not justice. What can be just as disconcerting, the children that are in abusive situations are being neglected because the social welfare and court systems are suffering an artery clog handling wrongful, inappropriate claims.

In conclusion, the 1994 Title IV legislation made it clear that the consumers were to have the loudest voice in the block grant process. I urge all of you to read the report I have submitted to CAFIS. [This report is available upon request]. I have identified many problems consumers are having with the elements within the collaborative process now in place. I also included a list of recommendations to correct many of these problem areas.

In the interim, we, the people of this village, are praying that you come out of your denial and recognize that there are major problems within your agencies and commit to an earth-shaking change within all agencies or move on to another village. I thank you very much for my allotted time.
Family Preservation and Support in Los Angeles and its Impact on Child Safety, Bruce Rubenstein and Margo Wainwright

Bruce Rubenstein is the Deputy Director of the Bureau of Planning, Policy, and Community Development for the Los Angeles County Department of Children and Family Services, overseeing both the implementation of family preservation and the development of future implementation of family support. Assisting him in this presentation is Margo Wainwright, CEO of the Youth Intervention Program in Los Angeles County. Los Angeles has taken a very community-based orientation toward family preservation [see Handout #1]. Ms. Wainwright’s program is one such family support program. They will discuss their work in developing and implementing community-based family preservation and family support services programs.

Bruce Rubenstein:

We will try, as we go through our presentations, to build on ideas presented by the earlier speakers. In LA we have seen many of the same challenges discussed by the first three panelists. We saw them in our planning process several years ago. They are very real [see Handout #2].

We began a planning process in 1991 to fundamentally reform our child welfare services system, as we defined our approach to family preservation. Since our comprehensive, community-based approach to family preservation is so different from the national service delivery model, we are right now considering a change of the name to something which signifies our systems reform approach. We are not sure what the name should be.

Los Angeles County is, in some ways, a very different state within the state of California. Actually, it is about fifty to eighty different communities with varied priorities and diverse types of families. We began our strategic planning process, which is also unusual for a county, to create a vision of what we wanted to see for children, families and communities. We started off with some very basic principles, primary of which was a collaboration process. It is important that Margo and I are here together. We really want to present together because we need to model that type of behavior. If you do not really demonstrate collaboration—if it is just talks and speeches—it just is not taken seriously and we appear to be hypocrites. It is very important that we do these types of presentations together.

Also, we established a concept of a public sector, a private sector, and a community sector. Public agencies are various agencies of government. The private agencies are the professional agencies with boards of directors that raise money and have a certain discipline and have very good grant writers. The community sector has developed four indigenous neighborhood institutions (e.g., churches and schools). We originally called them nontraditional agencies. We saw how ludicrous that perspective was several months into our process when we started saying the nontraditional ones were the churches, schools and the Boys and Girls Clubs. We learned a lot during that process.
Our planning involved police and cities, child welfare, mental health, probation, child care, schools, the DA. We saw that everyone needed to be involved because we accepted the principles of inclusiveness. The whole community is responsible for child safety; the child protective system need not set off in its own direction as an isolated service delivery system. Our population in the LA child welfare system has grown from 50,000 to 65,000 over the last few years. We just are not going to be able to protect the kids and deal with them humanely with that type of growth. Child welfare should not be the safety net in this society to access family supportive services, but we are becoming more and more of a safety net for services. We continue this type of process of collaboration through a monthly roundtable, and we meet every month to hash out the big issues with all the community leaders that we have identified.

There is a continuum of families which we used to categorize service approaches [see Handout #3]. We looked at it from a family’s point of view, healthy families, families who do not need any public or private intervention, families facing challenges so they may need some help in where to get it. As they start facing serious challenges and start putting themselves and their children at risk, then you get into more structured systems.

The first part is family support. When families are at a point where they need help and put their children in danger, family preservation intervenes. At the other end of the continuum are children who have no families and, in fact, that is a whole different area of preparing them for emancipation.

Margo Wainwright:

Bruce just made a statement about children that have no families. Please, when you think through the things we are speaking about, understand that these children may not have any biological family that has taken responsibility. But the moment these children reach an age when they are no longer being protected by a system, they return to the communities in which they feel like they belong. Therefore, communities must take major responsibility because each of you sitting in this room has to know that a child is not grown at eighteen years of age. If they are going to return to those communities, the communities must have some buy-in and must be responsible for those children, their needs, and their growth. That is the only way you can really collaborate.

When you look at a continuum of services, you must look at all services and include after care, because we cannot leave a child at eighteen, take away the safety net, and say, This is your life, go on and do it the way you can. That will not work in any country, in any world. We have been faced with that, and we are dealing with unrealistic numbers of homeless youth in this country today. If we do not build the capacity in the communities in which these children feel safe, then there really will be a much worse situation than we are currently being faced with.

Bruce Rubenstein:

We have in LA County 25,000 children who are going to emancipate as wards of the dependency court over the next ten years, and it is a very challenging issue that the state and the legislators need to deal with in terms of permanency for those children and how they are going to develop
into better parents. What models do they have for good parenting? These are real important issues to be thought through.

In the Community Plan for Family Preservation in Los Angeles County, I want to just mention a few things. [This report is available from the speaker.] One is that family preservation is not another program. We rejected the Homebuilders model immediately. One size seven and a half shoe will not fit all families. The evaluations of Homebuilders have been poor. We rejected it out of hand. We began to say family preservation is an approach which links up families, services, and activities within a community to support families. We defined family as an integrated comprehensive approach to mainstream families with a community support network which focuses on the strengths of the family. We needed a clear sense of mission. We sought to organize community agencies and pool resources.

We have done a lot of innovative things with state funding. Shifting a million dollars of county child welfare funds to mental health enables us to double the resources because Medi-Cal matches it on a 50/50 basis. These funds go to mental health centers that participate in helping our families. We have done the same thing with Alcohol and Drug funds. I know several people are here from that state department. However, that department of state government would not allow for the matching, for some unexplained reason. That is a separate issue that we need to deal with later. There are still barriers. Most people are still into their categorical lines of thinking and highly regulated systems which really are barriers to innovative service delivery for families.

Because child welfare is primarily concerned with child safety, I want to show you what we have done in LA in our family preservation approach. We adopted a list of service delivery principles and defined family preservation as an approach. Handout #4 shows our principles. Number one is child safety. Family preservation is a way of guaranteeing the safety of children [see Handout #5]. How do you do that?

**Margo Wainwright:**

In our model we base the service to the families on the level of service or the level of risk that has been identified for the children. If there is a family that is really functioning very well, but there is a shadow of a doubt as to whether they are meeting all the requirements to assure child safety, we are in there once a week. If it is a case where we feel less comfortable, we are in twice a week. If it is a case that we really are not sure about, we are in there four times a week.

The real issue is that we are not in there without the family saying it was okay for us to be in there. We meet our families where they are and look at what strengths we can use to build upon. In every portion of this model, participation includes the family. At all levels, all decisions are made with their input. If they decide that they no longer like what is going on and they want to pull out, they have the option to pull out.

Family preservation has been a voluntary program. Although some judges have chosen to court order family preservation to assure that their families can get into the program, it is really designed to be a voluntary program that families feel completely comfortable participating in.
Bruce talked about nontraditional agencies looking at small agencies, churches, and things like that. We really do attribute a massive portion of the success of the program to the fact that the county truly allows grassroots organizations to be involved. Those are the organizations that the community uses. They are more trustworthy than anyone. The way they assured that was to make sure that the agency had bought into that community, that their physical operations, their corporate offices, and all of the things that caused that organization to run were housed within that community. The families and the individuals would not see it as an organization coming to preach, take the money, and then go back to their own community. You really have to be invested or you could not even apply to be a lead agency. That was one of the real strengths of this program.

**Bruce Rubenstein:**

Let me point just to another principal, the recognition of the county as a member of each community. We had to transform our workers, those workers that had been so focused on going into the homes and building evidence and investigating; we had to transform them into community players, and let Margo and her staff convene our workers with the family so we did not neglect our responsibility as the child welfare agency or child protective services.

Our goal, number one, is child safety [see Handout #6]. That is not separate, and as Margo said, we have hammered on that many, many, many times. There is no conflict. Secondly, we have a second goal around empowering families. Third, we want to organize communities to help us in that job. Fourth, and really our sixth priority, is we want to decrease the need for public resources over time. Unfortunately, state law only speaks to number six—reduce the number of placements, save money. That is important to us, and as you may see in a second, we have done a tremendous job at that. However, our most important priority is to protect kids and build families.

Handout #7 shows a chart with a wheel and spokes, with a child and family in the middle. That is an excellent representation of our model. Our family preservation is different from family support, but it was still a paradigm shift in child welfare. That is, families need education, libraries, the district attorney, foster homes, health care, law enforcement and child welfare working together.

Every family has a different set of needs. What pulls it together is not the child welfare agency; it is not the schools; and it is not the Drug and Alcohol agency. We figured all these systems are talking collaboration, but they each want to chair the meetings in each community. We rejected that concept in LA and decided that in each community there is a lead agency, its board is of the community, its management is of the community, and they are the ones who should pull us together.

We ended up with eighteen lead agencies. They are the Triangle Christian Services, which is the Christian service arm of the Black Baptist Ministers Association. They are the Boys and Girls Club of the San Fernando Valley, Pomona Unified School District, City of Long Beach. We got a
lot of different leaders. Every community has a different leader. And on Crenshaw, the Youth Intervention Program, which has historically focused on probation kids with their group home, Margo and her board and her leadership team are truly respected in the community. She organized the network of agencies, including ourselves.

Handouts #7 and #8 describe our service delivery model with community agency in the center. We have these eighteen contracts with lead agencies. They have about 300 subcontracts. Rather than the county having 318 contracts, we let communities run their own service systems. We pay the networks like HMOs. We expect a specified range of services to be provided with our funding. The array of services includes, among many others, first and last months’ rent and transportation, provided to try to address the problems that bring a lot of people into child protective services—families who really need not be there if the income maintenance system or housing was sufficient to enable those families to protect their own children.

In our first three years of this different approach, the major services that are needed after you get through the traditional ones are social workers for parenting training and counseling. After that, transportation, child care, drug treatment, housing and jobs are the five major issues that our networks have identified.

In LA we have thirty different communities at least, and we are organizing. This is not just putting out for bid, because if we did that, only the ones with the best grant writers would win. We had to actually go out and organize and make sure that churches and schools and others got involved.

Let me do two more things, and then maybe we can get into the issue of family support. We believe we have done a whole paradigm shift, similar to what was mentioned by Michael Weber. Our outcomes so far are that in the face of now keeping 7,000 children together in their homes who would have been placed in foster care, the child abuse death rate has gone down three years in a row. That is our measure of safety. Frankly, I know there are a lot of universities that have formal evaluations. I like to look at child abuse death rates as a very simple measure of whether we are doing a pretty good job of child safety.

The second thing is that we have organized so far in only six of our thirty communities initially. Where we organized, which are our most highest need communities, South Central, Compton, North Long Beach, Echo Park, East LA and Pocoima, we have halted the growth of the use of foster care, less than 1 percent growth. In fact I was just looking at Margo’s community. We had 902 children placed into foster care in March of 1992. Now we have 906, a growth of four kids. Meanwhile, the county as a whole has grown over 20 percent in the number of kids in foster care. We fully credit the organization of community agencies under a community lead for making a tremendous difference in the use of foster care. In Compton, the number of children in foster care has actually gone down 20 percent from 570 children to 460 children. Once we invested in the community, we found we were unnecessarily placing kids into foster care. It really represents a $20 to $30 million shift in resources.
Margo Wainwright:

In South Central there are seven lead agencies. That was because the number of children in out-of-home placement in South Central Los Angeles was absolutely enormous. African American children represented, at that time, about 40-plus percent of the foster care population in the department. It was needless to say that that community received the greatest amount of funding. In the process of recognizing the problems in that community, all seven of the lead agencies established a network. This means that we need to gather monthly and talk about what has worked and what has not worked, what has caused us to have the success we had.

We have placed our parents on our advisory board, and they advise us on issues around families who would be brought to the attention of the court for abuse and neglect. We use them to help us, to critique our program. They sat on our different committees and talked to us about what the real needs are, based on their experience. I can speak for my agency, but I know that we service about 140 families monthly. We have at least 140 families that come and ask for services, because one of the families we have serviced has told them that we were able to help them through their dilemma, and they have come on their own.

What we have found, and I think that is very significant in family support, is that we just do not get poor families coming to the door to ask us about help. Counseling, a lot of the recreation kinds of activities that we have within our agencies, and our mentor program are some of the many things that enable us to help families. We have many middle class families in the Crenshaw area that are made up of single mothers and single fathers who are faced with the dilemma of raising a child in a society where peer pressure is much greater than anything their parents can say. We can fool ourselves that they do not have the kind of control that they have over children, and when we play like that control is not there, we see children falling through the cracks. Peer pressure is outstanding. It means that you have got to bring those young people into your program.

In our program we put the youth who had been in the foster care system through either probation or Department of Children and Family Services through a very extensive training program. Now they are our mentors to children ages six to twelve, tutoring them in academics. We have identified a couple of school sites that allow us to use their facilities after school. They take them to social and recreational activities. They participate in all kinds of new and innovative things. It is like a “Big Brother Big Sister” thing, and all the children that we serve and the children that are mentoring those children are all from that community.

As you can see from the numbers and the statistics, it has really been something that has worked in Los Angeles County. I would really recommend when you look into programs that are working, that you really look at the LA County model. It is not traditional family preservation. What we are really struggling with now is whether or not we should be calling it “family preservation” because we plug in every single aspect that our families need.
I really think LA County is quite smart, and I say this all the time, because once they give up the responsibility of the family, if it is not something that they pay us for, we still try to find a way to go out and make sure that happens. We utilize all the resources that we can get.

**Bruce Rubenstein:**

The leverage is a tremendous amount of commitment and community resources.

I am so glad that staff from nine state departments are here. You have got to meet together regularly. We are meeting regularly; you are requiring us to meet regularly community by community. If you are not talking to one another, clearly you are not aware how your rules are getting in our way. For those in the Department of Social Services, you are still working on a deficit model and are creating new screening forms, which violates some of your own rules.

We heard about two models, family resource centers and home visiting. Once again, LA is off in another world, because in our process we have listened to families and what are our top priorities. We are going to use our family support money for parks, police, creating jobs, and youth gang intervention. I am not sure any of the people involved in our planning committee ever thought that that is what family support is about. What professional services are family support? Unfortunately it is not professional services as we have been thinking. Families want their youth to be in creative, productive, after-school activities in their parks and in their schools, and they also want to have safe streets. And that supports families.
Family Preservation and Support Evaluations, Duncan Lindsey, Ph.D.

Duncan Lindsey is a professor in the Department of Social Welfare in the School of Public Policy and Social Research at UCLA. Dr. Lindsey will present an overview of evaluation findings and talk about the challenges of evaluating family support and family preservation.

I think this is very helpful to view child welfare issues from different perspectives. I am going to, if I can, take the perspective of the academic, the scholar, the critic, and try to take a look at the child welfare system broadly.

We have had in California for quite a number of years, and nationwide, a child welfare system that is trying to cope with problems of what to do with children whose parents cannot adequately care for them. I was born in California, in Los Angeles, and raised there, and went to elementary school, junior high and high school. One of the things that strikes me is how much California has changed.

I taught for two years in Toronto, Canada, and one of the things that always struck me is that California has a larger population than Canada, is much wealthier than Canada. We are sort of a fruit basket of the United States. The entertainment industry, Silicon Valley, and the microcomputer industry all began here. California is a very wealthy state, but an important critical element of the state is our children. What do we do for our children? What is our collective responsibility towards children?

California is undergoing some major changes, and we are all a little unsettled with it, I think. One of the major changes is in the population. When I grew up here a number of years ago, it looked quite different. But California is changing, and the population mix is changing. Handout #1 shows children born in California in 1992. One of the interesting things is how we are a multicultural society, much more so than we have ever been before. I know when I was growing up here this was not so true as it is today. These are the children born, according to vital statistics, in California in 1992. The majority are Latino (42%), African American (8%), and Asian (10%). Some of these changes have important implications for California, because there is a very different rate of poverty within these varied groups.

Children of color, Latino children and African American children are much poorer, and they are the primary groups of children we serve in public child welfare agencies. Handout #2 shows that the median income in California varies strikingly by racial and ethnic groups. In European economies, poverty is defined as half the median income. For large portions of California’s population, and this especially affects California’s children, they are living in poverty.

This shows up in the child welfare system, as you can see in Handout #2. While African American children make up about 8.2 percent of the population, or 8 percent of the population 0 - 14, they represent 40 percent of the children in foster care. We might begin to try and understand why this is occurring. Handout #3 shows child poverty rates in California by racial and ethnic
groups. You can see that for Latino and African American children, quite a number are living in poverty and that partly explains it.

One of the things I want to do is provide an overview of what is happening before we talk about family preservation, because it is propelled by the same phenomena. Looking at foster care caseworker costs in California, taken from a report of a couple of years ago, one of the things that is amazing, or at least striking to me, is that the foster care population in 1986 and 1987 has increased from about 40,000 kids to currently 94,000. Quite a number of more kids are coming into foster care.

The weighted cost, the reason it is so expensive to keep a child in foster care, is that the figure includes the cost of children in group homes which are quite expensive. But still this is an expensive endeavor that the state is involved in. One of the things that struck me was that the cost here is about $2 billion a year, if you multiply these numbers out, which is more than is spent on the 150,000 young people served by the University of California. The University of California has 150,000 students, and it costs about $14,000 per student to go there. In foster care, we are spending a lot more.

Handout #4 shows what is happening with foster care. I am sure this is one of the fundamental concerns. With foster care, nothing seems to stop the numbers from going up; the number of kids ending up in foster care continues to increase. There are numbers that go beyond here. I found numbers for 1978, but they are inconsistent. But others say that these are less accurate than are other numbers. But even within here, we can see the long-term trends [see Handout #5]. I have other numbers here that can show you that historically, it has been going up.

Not only are the number of children in foster care continuing to increase, but also child abuse reports are rising. The data in Handout #6 are for child abuse reports in the United States from about 1975 when the federal government mandated reporting. We see that every year it is going up. The number is now at about 3 million child abuse reports a year. There is nothing that changes or alters this. If this were a stock, you might want to invest in it and see its price continue to grow. Every year it continues straight up.

This is reflected in both physical abuse and sexual abuse reports. Handout #7 shows the same figures for California beginning in 1983. We are seeing the same phenomena occurring. This is what is driving the number of children in foster care. As was pointed out, most of the child abuse reports receive nothing other than an investigation. Less than 7 percent of reports receive something other than an investigation, and most often that is foster care services.

As a result of these trends, where every year the number of children ending up in the foster care and child welfare systems continues to rise, family preservation came along and said early on that they could reduce the number of kids coming into foster care. One of the first published studies was in 1974, by Jill Kenny and colleagues, describing their Homebuilders project in the state of Washington. They reported 97 percent of the children that they worked with avoided placement in foster care. All these kids coming into foster care, if they could have used family preservation as Homebuilders had developed it, would have avoided coming into the foster care system.
What we have in California today is probably primarily a child safety model. Family preservationists have come along and looked at this. Instead of removing these children from the homes and placing them in foster homes, which no one really likes or is satisfied with, they argue we need to preserve the family. They suggest we do everything we can to preserve the family, and perhaps by reducing the caseload and having the crisis intervention programs and so on we can do this [see Handout #8].

**Effectiveness of Family Preservation**

Over the last ten years, about twenty-five different studies on family preservation have been done. We went through and looked at all of those studies and said, What do the studies tell? There were, as I say, twenty-five different studies. The problem with a number of these studies is that they do not use a control group, which makes it very difficult to know if you are having an effect. Often, if they use a control group, it is not an equivalent or random control group. Or if they even use a random control group, the control group is composed of children already in care, as opposed to children who are not in care.

Going through these twenty-five studies, we identified four that you can say met the “gold standard” of clinical trials [see Handout #9]. They had a randomized design, standard control groups, and children were offered services. The largest study was conducted by Schuerman and colleagues, which was published last year, looking at more than a thousand children. Each of the children in this treatment group received ten times the normal number of contact hours with a social worker. They received much more service than the comparison groups.

What they found at the end of their study was that there was no difference. In the other experimental studies that were done, similar results were found for all four of the clinical trials. There was no significant difference between groups.

Mike Weber mentioned earlier that it might really be that family preservation may have set its sights too high, its goals too high. It suggests that by providing this intensive treatment in this short period of time, we can solve a family’s problems and prevent placement. What a number of these studies find, especially if you look over a longer period of time, is that the kids end up being in care.

Not only has family preservation not had measurable impact in terms of reducing the foster care caseload, but we have also had a difficult time in reducing child fatalities. One of the arguments for converting child welfare into a child protection system was that by mandating child abuse reports, children would be safer. We have had mandatory child abuse reporting laws that radically reformed child welfare in the United States since about 1975. As you can see in Handout #10, the numbers have gone way up, but there has been no measurable change in terms of reductions in child fatalities.

I wanted to come back to California. It is hard to get state data on children in foster care, but the federal government collects reasonably reliable data. I want to go over a few of these with you. Handout #11 shows children on AFDC in California since 1937. Let me just say that family...
preservation, the term, was first used around the late 1890s when the argument was, “We are putting too many children in orphanages, we are sending too many children outside to these foster homes, placing them out. We need to keep them home, we need to preserve the family.” The early family preservation advocates argued for public aid to the family. “To preserve the family, we need to provide a mother’s pension program,” they argued.

The first family preservation approach focused on providing a mother’s pension program. It was viewed as long-term payments for the mother, so the mother could stay home and keep the child, and the child would not need to be removed and placed in state custody. Mother’s pension programs eventually became the AFDC Program. The AFDC Foster Care Program occurred in 1970. But as you can see, it continues to grow. Handout #11 shows that it has been growing ever since its implementation.

Handout #12 gives us a good idea of what is happening to foster care over a long period of time, from 1959 through 1992. Today in California you can see 60 percent of the 90,000 children in foster care come from AFDC families, and they are AFDC funded. AFDC foster care was going up for a long period, and then around 1971 it seemed to level off. The question is, why did it do that? Some people argue that it was permanency planning. These women were the first permanency planning project.

But right around 1983 when California radically changed its child welfare system and focused more on protection, there has been a stark increase from 1983 on in the number of children coming into foster care, statewide. The composition of these children that are coming on to AFDC—I have not separated out AFDC for foster care—is shown in Handout #13. Children added to AFDC (ages 1-10) were primarily of color: 44 percent were Hispanic and 23 percent were African American.

What I would like to do is end by raising a question, and it is in a sense a question of family support. What will happen with the dramatic changes that are being proposed in reductions for AFDC? I am not arguing that it is a bad thing or a good thing, but it will impact the child welfare system. What will be the consequences for children?

Handout #14 is a chart on the youngest child in the long-term AFDC family. The interesting thing here is that in California 70 percent of these children in AFDC families—that is about 1.8 million children in California—for these families, child care is the problem. They have a child six years old or less. More than half have a child that is three years old or less. These families have child care difficulties.

According to the Urban Institute and the Congressional Budget Office, the proposed federal welfare reform legislation will additionally impact the reductions and changes in welfare policy and AFDC policy. One of the things that is frightening to me is, if you break this down by age, children age two and under are most effected. Handout #15 shows that one of the major consequences will be that Latino and African American children will be no longer entitled to income protection. What we are removing is the first line of defense against child abuse.
The reason I bring this up is that there is a very strong relationship between income and child abuse. Data from the National Incidences studies of child abuse done during the Reagan Administration shows the difference in rates of child abuse for families above $15,000 and below $15,000. The rates of child abuse and neglect are almost 8 times higher for poor families. Most of the children that make up the child welfare system are children from low-income families.

The figures for neglect show the same trend as the figures for abuse. I am going to end this, but I want to say that poverty is directly related to these issues. I want to end by asking you to help me figure this one out or help me with this question. I will end it here with a little antidote. There are 220,000 seniors in the state of California who live in households with incomes below the poverty line. There are more than 2 million children. The poverty rate is 6.9 percent for seniors, 25.3 percent for children. This has enormous implications for our child welfare system.

About two years ago I read a book called *The Children of Men* by P.D. James; she is a science fiction writer. The book starts with a fight in a coffeehouse in Brazil. When the fight is over, the last person born on earth dies. The person was twenty-five years old. In this novel the author asks, “What does the world look like when there are no more children?” And we see right away that the children are our future. When there are no children, there is no future. We are simply passing time until the last person dies off. The story dramatizes the importance of children—they grow up and become our future. They really are—the children are our future in California. We need to be concerned when 25 percent, one quarter, of our children live in poverty and are confronting a situation which may be even worse.

We have enormous opportunity; this is a great state, the Golden State. I will just end with that. Thank you.
SEMINAR 2: FOSTER CARE AND FAMILY PRESERVATION
AND SUPPORT SERVICES

State Capitol
Sacramento, California
November 21, 1995
Foster Care and Family Preservation and Support Services

Friday, November 21, 1995
9:30 A.M. - 12:00 P.M.
State Capitol, Room 447
Sacramento, California

AGENDA

9:00 - 9:30 A.M. Continental Breakfast

9:30 - 9:40 A.M. Welcome, Introductions and Seminar Overview
Anne Powell, M.S.W., Project Director
California Family Impact Seminar

9:40 - 10:00 A.M. Child Welfare Service and Foster Care Utilization Trends in California
Rick Barth, M.S.W., Ph.D., Hutto Patterson Professor, School of Social Welfare, University of California at Berkeley

10:00 - 10:20 A.M. The Role of Family Preservation in Reducing Foster Care Placements
Danna Fabella, L.C.S.W., Assistant County Welfare Director, Contra Costa County Social Service Department

10:20 - 10:40 A.M. Family Support and Foster Care
Farris Page, Ph.D., Director of Training and Special Projects, Alternative Family Services

10:40 - 10:55 A.M. Break

10:55 - 11:15 A.M. The Role of Foster Care in the Family
Vernon Brown, M.P.A., Statewide Director, Aspira Foster Family Services, Assistant Executive Director, Moss Beach Homes, Inc.

11:15 - 12:00 P.M. Question and Answer Period
Introductions and Welcome, M. Anne Powell, M.S.W., CAFIS Director

Welcome to today’s seminar, Foster Care and the Family Preservation and the Family Support Services Program. The seminar is designed so that recognized experts in policy and programs can provide you with the latest information available about child welfare, family support and family preservation. One of our major goals is also to provide you with an environment in which you can have a free and open discussion.

The informational packet you received contains an agenda, biographic sketches of each speaker, the registration list for this seminar as well as the seminar that took place on November 3rd, and a list of agencies, affiliated agencies, etc. We have also included a number of interesting articles in the packet. Please take particular note of two articles: one on foster care and adoptions that appeared in the LA Times Magazine in October, 1995; and one on the implications of welfare reform and foster care in the Sunday (November 19, 1995) New York Times, a shorter version of which was repeated in yesterday’s (November 20, 1995) Sacramento Bee.

Those of you who attended the November 3rd seminar will recall that Mike Weber, Director of the Edna McConnell Clark Foundation’s Program for the Community Protection of Children, provided an overview of the child welfare system and an outline of major reforms under way, particularly with regard to the federal Family Preservation and Support Services Program, and child welfare services. At that seminar, he also examined how this new program and its underlying philosophy affects child safety. Today’s seminar will review these program shifts and how they impact children that are part of the child welfare system, particularly those in foster care, and how it affects their families.

Before Dr. Barth begins, I want to take a moment to explain why the California Family Impact Seminar, with the generous support of the S. H. Cowell Foundation, has organized this seminar. California and many other states have experienced a significant increase in the number of children entering the foster care system. The New York Times article notes a 60 percent increase from 1985 to 1992, rather dramatic. And the cost for foster care during that period of time increased tenfold. As you can imagine, this has both significant programmatic and fiscal implications.

As the article in the New York Times also reveals, there is concern that changes in public welfare policy will lead to significant increases in the number of children requiring placement or other types of attention by the child welfare system, which could potentially overload the system.

California is one of the first states in the country to consider instituting family preservation programs on a widespread basis. One of the first that we know about was in Washington, the Homebuilders model. In the mid-1980s three California counties were given authority for pilot family preservation programs. We are very fortunate that Danna Fabella is one of the speakers today, because Danna was in one of those pilot counties, Alameda, at the time. The initial data from the three pilots appeared promising. Now the results of the more comprehensive evaluation are complete and have been submitted to the state; it looks like a significant number of other counties are implementing various forms of family preservation.
Family support is a newer policy in state government. In fact, until legislation required California to implement the federal Family Preservation and Support Services Program, the state had only nominal programmatic or financial involvement in family support as part of the child welfare system.

Both family preservation and family support are being developed at a county level throughout the state under the direction of the Department of Social Services. There are a number of documents available from CAFIS which explain development of both family preservation and family support programs. As the family preservation evaluation comes forth, we will also await word on how the communities are faring with family support programs, since this is a relatively new concept to many communities throughout the state.

The new federal program is providing states with the rare opportunity to re-examine how it serves the needs of neglected and abused children. However, this opportunity is time-limited. First of all, federal legislation sunsets in 1999. I think more significant is the new Congress’ interest in redefining federal-state programmatic and financial relationships and responsibilities for a number of programs, including child welfare. In fact in the House (1995) version of welfare reform, child welfare was included.

It is our desire today to assist those of you who are less familiar with child welfare to better understand it and the recent reforms that are under discussion and being implemented. For those of you that are actively engaged in the state’s efforts to reform child welfare, we hope to provide you with some new information that will further your thinking.

Finally, I want to say a few things about why child welfare experts throughout the country are recognizing family preservation and support. In part there has been a long-standing dissatisfaction with a lack of alternative services to foster care. Until these new approaches began, state and local welfare departments and child welfare authorities had little more to offer the maltreated child than to put them in foster care. In short, the traditional and often only response was to remove the child from the source of harm. This traditional approach, in addition to being very expensive, often ignores the underlying problems facing the child. He or she is likely to return home to a problem family situation or remain in foster care on a long-term basis. In fact even today there are a number of foster children who are aging out of the system and having to leave foster care when they reach their eighteenth birthday without the family support that many of us might have experienced in our childhood.

While trying to be helpful, foster care can cause serious and long-lasting problems for the child; in some cases long-term foster care also has some negative effects on the children. The case can be handled for years, during which parental rights remain intact, suggesting the possibility of reunification. But many of these kids will not return home, and thus it is not clear to them what may happen in their future.

We do not have time to explore all aspects of the child welfare system and foster care. However, I raise these issues to give you some context as to why it is that we need to reform child welfare.
and the foster care component of that system so that you might think about the role family preservation and family support might play in these efforts.
Child Welfare Service and Foster Care Utilization Trends in California, Richard P. Barth, M.S.W., Ph.D.

Richard P. Barth is the Hutto Patterson Professor at the School of Social Welfare, at UC Berkeley. He is Co-Principal Investigator of Berkeley’s Child Welfare Research Center, and he is currently on the Editorial Board of the Family Preservation Journal and the Advisory Group for the National Study on the Implementation of Family Preservation and Family Support. He will present some data regarding child welfare utilization and family preservation, and discuss the findings and their implications.

It is a pleasure to see you all out there and to have this opportunity. If my father-in-law, who is a Southern Baptist preacher, were presenting today, he would start off by telling you the three things he was going to tell you and then he would tell you those three things, then he would remind you of what he just told you because he would figure you were daydreaming during most of the presentation. I am going to try to do something like that. But I was raised a congregationalist and do not have that much discipline, so I am going to expand it to six points.

What I want to do is just talk a little bit about family preservation and family support and offer a quick review of what I consider to be key issues. Those include understanding the importance of family preservation and family support as a part of a comprehensive child welfare services program if delivered over a sufficient period of time—and you will hear that refrain again. Further, I will discuss the expectation that family preservation and family support will not have a dramatic impact on the placements to foster care and argue that we need to look for other ways of reducing the foster care census, if that is one of our goals—which I believe it is. I will suggest that family preservation should be used more for family reunification services and in order to reduce reentry into foster care for children who have gone home. Those are my main points on the family preservation side. Handout #1 outlines the policy and program implications of family preservation and foster care.

On the foster care dynamics side, I am going to tell you that placements to foster care have continued to climb quite sharply. I will tell you that reentry into foster care is about 20 percent; that is, about one in five children who go home come back into care within three years. Of considerable concern to me is that the youngest children are actually coming back into care at a higher rate than the older children.

I will tell you that we need, guess what, more research to understand why those children are coming back into care.

Handout #2 is just a brief summary of the four major family preservation programs that were also described in the materials that Duncan Lindsey prepared, the Illinois, California, New Jersey and Idaho programs. There seems to be more of an impact on family functioning and the family’s ability to better care for their children than there is on prevention of child abuse reports or on placements into foster care.
The evaluated programs are mostly short-term programs that do not have a dramatic impact or any real potential impact for the most part on placements to foster care. They do seem to support families who might not otherwise have gone into foster care in their capacity to care for their children. This is a very important contribution of family preservation programs. The main reason why I think this is true is that I believe these programs were too brief. Otherwise, I basically support the model of services which is very tangible, in-home, concrete, and to some extent skill-focused. I think the efforts just were not long enough.

One of the reasons I think that is that it is consistent with other research. Handout #3 shows an example of a curve that shows the effects of psychotherapy on outcomes. And psychotherapy is not a very good practical analogue to family preservation service, but you can pick a lot of other proxies and the curves will look the same. Basically, it is just a good curve to show what is known in the behavior-change literature as a dose-response relationship. That is, during the first maybe six months or so, you get quite a bit of change and you continue to get substantial change over time. To a point, the more time and service you get the more achievement you see. I think this is also the case with family support and family preservation.

There is also other evidence from the family support literature suggesting that brief early intervention programs and all visiting programs do not have very much impact, but that the longer programs may have an impact. I think if we simply keep in mind this dose-response relationship—and the dose in many ways is not only services but the length of time those services are provided—we will get an understanding that this may be more what a family needs than the very focused and short-term programs that we had originally thought of as family preservation.

All the groups have grown. Physical abuse has increased, sexual abuse has increased, and neglect has increased. Child abuse reports have gone up from about 374,000 in 1988 to about 664,000 in 1994. But neglect has increased more than child abuse. As we will see later when we look at the reason that children were removed from their homes and put into foster care, the group that is growing the most is the neglect group.

If you think back to the beginning of family preservation programs to the early articles by Jill Kinney and David Haapala and general consulting and clinical psychology during the 1970s, they were basically working with families with older children who were involved in physical abuse. In the program they were teaching a lot of behavior management skills and it was very much a parent training program that also included parent-child conflict resolution.

Since the population of children coming into care is more of a population involved with neglect at this time, that is another reason why I think longer-term services are needed—before children are placed, as well as after children are reunified with their families.

Handout #4 shows the relationship between the front end and the child abuse reporting piece in the foster care side of child welfare services, a piece that we have a very hard time understanding in California because we do not have good front-end data. And what I did with this data was I took about three different sources, basically to ask, what is the likelihood in California that any child who is reported for child abuse will end up going into foster care?
And the only way we can do that is to first take all our duplicated counts, which those 660,000 were—there could be more than one count on a child—and try to use a formula to try to reduce that highly duplicative count. I borrowed the formula from some other states, so it might not precisely mirror California but it should be close. Then I looked at what our foster care placements are, which we get from our foster care data. The column that is the most interesting is the column second from the right which says FCA (foster care admissions) divided by TR (total reports).

In California at this time, not unlike the other states—a little lower than Illinois and New York and a little higher than Texas and Michigan—6.9 percent of child abuse reports result in a placement in foster care. Given that likelihood, that so few reports actually result in placement to foster care, it also makes targeting the problem much harder. The data tells us that we are sort of in the mainstream with regard to other states. They also tell us that it would be very hard to target that 6.9 percent to try to prevent them from coming into foster care because they are such a small fraction of the overall activity.

Now we are going to get into some figures which some of you have seen before [see Handout #5]. These are from the newly available as of this week, Performance Indicators Report for California, which is actually a series of reports. I will be presenting statewide data. There are five regional reports that provide basically this information for every county in California. [This information is available from the speaker.]

Handout #6 is basically our placements into foster care and the exits from foster care and the foster care population. This is a real important one. Basically it shows that there has been a substantial growth in the foster care population. What is real important is to understand that this growth breaks down into two parts, the placements and the exits. If placements go up dramatically but exits go up even more, then you have a decline in the foster care population. When we think of the foster care population, it is just easier to think of it as only a function of placements. If that were only so, and family preservation could reduce placements, family preservation would have a big impact on the foster care census.

But the fact of that matter now is that in the last year, in 1994, we had about a net change of 6700 children in foster care which resulted from higher placements and the lowest exit since 1989. Our exits have gone down at the same time. The placements come in two parts. There are the new placements and there are the old placements. Another way of reducing placements to foster care is to reduce the numbers of children who have gone home or come back into foster care. That is important to keep in mind. Those are two ways to reduce placements.

Now with regard to where we are on foster care placements, Handout #7 shows seven states for which we have comparable data. It basically shows that we in California have had a placement rate for three in 1,000 children for the last six or seven years. This only takes us to 1993. As I mentioned, we did have an increase the last year. Even though New York’s placements are coming down, our incidence rate is lower during that whole time. We were higher than Illinois for much of that time, but now Illinois has gained on us. I believe that Michigan is sort of running parallel.
California is sort of at the middle to high end with regard to placements and has been following the trends of other states at least until 1993. It was up in the last part of the last decade and then coming down in the beginning part of this decade. Now, I am afraid our placements are turning back up again.

One of the things I think that has become widely recognized now is that a lot more of the children who are coming into foster care—Handout #8 shows their first entries or placements—are now coming into kinship homes for the first time this year. The proportion that are coming to kinship homes has matched the proportion that are in foster homes, about 43 percent. If you look on any given day at how many children are in kinship homes versus nonkinship homes, there are more in kinship homes because their lengths of stay are longer.

This is a dramatic change. The direct placements into group homes has gone down somewhat although the group census will not have changed as much. The first placements to group homes has gone down to 8.4 percent from 9.4 and 9.5 in 1992 and 1993, which I think is probably a good sign.

I want to say a little bit about ages [see Handouts #9 and #10]. When we designed our child welfare system, in some ways we forgot to consider the child’s age. There was little discussion about age in Public Law 96-272 or Senate Bill 14. Basically every child was thought to have the same needs and to fit the same patterns, and we know that development does not exactly work that way. I think the most interesting finding here is that although infants—these are children under age one—still dominate the first placements into foster care, the numbers are coming down. They may be moving back up a little bit in 1994; we will see how that goes, but they certainly have been coming down. It is the three- to five-year-old placements to foster care that now seem to be on the rise, and interestingly enough those are the kids that did not come in in 1988 or 1989 as infants but these are their first entrances. Still, almost 20 percent of all entrances into foster care are infants. But the proportion is a little bit reduced from what it was in 1989 and 1988.

Handout #11 shows the reasons children were removed from their homes. I think removal reasons do have implications for family preservation. Basically when you ask the social workers to write down why a child has come into foster care, they can only choose one reason. Of course we know that kids have experiences which are broader and more complex than that. Neglect is increasingly the compelling reason for entering children into foster care. You can see that that has always been the case, but is becoming more the case. There has been a rather dramatic increase since 1991. If we are thinking about family preservation, again, as a strategy for reducing placements, then this population, which is increasingly involved in entering into the child welfare system, is made up of families that are experiencing neglect and are likely to need the longest and most services.

Now when I talk about neglect, you have to understand this includes severe neglect, general neglect, abandonment, and parental incapacity. It is all those things. We do not have it all broken down, but it is not just neglect alone. There are also other characteristics that describe this population including abandonment and incapacity.
Handout #12 shows first entrances into foster care by ethnicity and age. Again, in terms of targeting for family preservation, we need to see who is entering foster care. Basically what we have done is nest these bars so that we have put age within race so that each bar has both an age and a race attached to it. The tallest bar of all is African American infants under the age of one. Infants is the tallest bar of all entrances. There is just a phenomenally different rate of entrances into foster care for children from different ethnic backgrounds. This is sometimes called “disproportionality,” although I am not very comfortable with that term because we do not really know if it is just disproportionate to need or disproportionate to the population of children and families in California. But it exists nonetheless and it is a very striking and powerful indication that there is much work to do in the African American community, in particular with the young African American children and their parents.

Handout #13 now switches us from a discussion of placements to foster care to who is there on any given day. This is an important switch because if we want to be thinking about family preservation and family support as a reunification strategy, then we need to start thinking about who is in the census in care at this moment and who is going to be going home. As I mentioned, this is an historic time as far as we now see more kinship care than conventional foster care. We also have seen a flattening in the number of children in group homes over the years.

How do we compare to other states with regard to census? The top line is the total census in foster care in these five large states [see Handout #14]. The top line of the bottom group is California and of course, we have more children than any other state by far. This is just a foster group census; this is not a prevalence rating that is divided by the number of children in the population. It is just to give you all a sense of the trends. Many other states have had similar trends. Illinois has had a different trend and it is growing very fast. It appears New York has a different trend and that they have and are reducing their number of children in foster care. Where their entrances have gone down, they have also had a very aggressive program to place more children in adoption —whether they are in kinship or not—so their exits have gone up. They are making quite an impact in terms of the foster care census in New York by increasing exits.

Handout #15 shows curves that biostatisticians have called survival curves. It is a terrible term, but basically what this means is how many children survive in the status that they were in, and how many leave that status over a given period of time. The easier way perhaps to understand it is in the bottom grid. Basically what we did was we took all the kids who had gone home and then looked at how many of them are coming back into foster care and when. These figures down at the bottom are the reentry possibilities, just to give you an idea.

For the children who come into care, we call them zero years, infants. Within the first twelve months after they went home, 9 percent came back into care. That is within the first three months. Within the first six months after going home, 13 percent of them come back into care. This number continues to grow up to four years and probably grows beyond four years, but that is as far as we calculate it. Up to 27 percent of infants are coming back into care during our study period. In some counties, it is nearly 40 percent.
What is interesting about all this is that infants’ reentries to foster care are actually a little higher than for the older kids, which I find troubling because infants are most vulnerable. Also, it is important to note that they do not come back into care right away, so it is like we are making a reasonable transition for a couple of weeks, or maybe a couple of months, but then infants start coming back into care. These rates are basically pretty flat for a while and then they continue to go down. It is not a problem that can be readily addressed by just saying do a little bit better planning for the first couple of weeks or months after the kids go back home; there is this continuous growing number of kids coming back into foster care. It does look as though we need a much longer term view on reunification.

Handout #16 shows the relationship between time in foster care and reentry. Basically there is a lot of research that says that the children who stay in foster care the shortest come back into care the fastest and the most often. It is a little counterintuitive because of the way you might say “Well, the children who went home fastest probably came from the strongest families and you would expect more successful reunifications for them,” but now in at least three states we have found that the kids who go home the soonest, reenter care at the highest rates.

Handout #17 is about the number of placements, just to give you a sense of what the lives of the kids are like in terms of the number of places while they are in care. It is really important that if you ever see the number of placements and the authors have not broken it down into closed cases and open cases, then just turn the page because the results are likely to be very confusing. We separated cases that were at least open for four years and cases that were closed and were placed with the family, that means either reunified or adopted.

Basically, we broke this down by kin and non-kin, because children have very different foster care careers depending on whether they are in kinship care or not. What you see is that for children who have open cases for at least four years, and that is about a quarter of the kids who come into care here in California, about one third (29 percent) of children are still in that first placement. That was a surprisingly high number. On the other hand, you have 29 percent that have four or more placements during that time. That was disturbing. Kin placements are more stable, and of course, children who go home or get their cases closed do not have as much exposure to as many places as the others do. Among children who do get their cases closed, almost 60 percent get their cases closed having only been in one placement. I think that is a number we certainly work to increase, but I find that to be somewhat reassuring.
The Role of Family Preservation in Reducing Foster Care Placements, Danna Fabella, L.C.S.W.

_Danna Fabella is currently Assistant County Welfare Director in the Contra Costa County Social Service Department. Among other responsibilities, she is responsible for the delivery of child welfare services programs, including emergency response, family maintenance, family reunification, permanency placement, family preservation, and adoptions. Before joining Contra Costa County, she was with the child welfare program in Alameda County and, for a short time, with Sonoma County directing their child welfare and family preservation efforts. Ms. Fabella will discuss how family preservation has changed child welfare and how family support is evolving in these communities, and its value for the child welfare population._

I have been in foster care programming for over fifteen years, since I graduated from UC Berkeley in 1980. I have had about fifteen years directly involved in child welfare—both case management and supervision—and developing programs, including developing the family preservation program in Alameda County.

I have seen it from its interesting positions and the statistics. Dr. Barth helped explain what was happening in the field, for example in 1989, the influx of drug exposed infants. We all know that was a result of maternal drug use.

I think it is interesting to note in Dr. Barth’s statistics that our system of child welfare developed from the phenomenon of a battered child syndrome. We have a system that was in fact developed for one thing, to protect battered children. In fact it is doing something else. First we became child rescuers. Then we had laws that were put into place to develop a framework in which families could have their children returned.

Out of that, child welfare developed the current four major service components of emergency response, family maintenance, family reunification and permanent placement.

After the “battered child syndrome,” the next phrase that we heard in our program was “foster care drift.” Out of this grew the efforts to look at how we can get children home more quickly. Thus, Public Law 96-272, and with that became the need to show “reasonable efforts” prior to the removal of children. Then workers were looking at family disruption versus child protection. That became a major thing as a line social worker in the 1980s, looking at, Do I remove this child, or do I let this child stay with his or her family? We struggled with those two concepts, protection and disruption and family preservation.

At the same time we were fortunate that the fiscal impact caused by the rising foster care population was one that both the community and our public policy makers were increasingly very dissatisfied with. Even with Public Law 96-272 there was an increased number of children in foster care. Even with services to families, and trying to get those children home, we continued to see a rise in the overall cost of foster care.
Again, as Dr. Barth said, the foster care program is funded through a case-driven system, so that the more children you have in your program, the more funding sources you have. Unfortunately the service part of the allocation is a capped allocation and thus limits the direct services to families. In a foster care system, those of us in county government felt restrained by the system with limited dollars. We knew it was not working and wanting to do something else.

At that time I was in Alameda County; it was my assistant director who wanted to risk trying something different for families. And that was the state family preservation program, Assembly Bill 558 (Hannigan), which allowed a percentage of the foster care dollars to be used to provide alternative services to families. I say it was risky, because there was a penalty involved in that if you overspent the allocation which was state dollars, you would need county dollars to “pay back” the state. It is always risky at the local level when you start overspending the county budget. You are certainly at risk, because when there is not sufficient county money, there is the potential for laying off staff.

But the thing that it did do at the county level, is it began to change those of us in county services as it demonstrated that there were different ways to work with families. We always knew this, but when we began to experiment, we saw that it could work. That was a model of intensive, small caseloads, and the ability to provide concrete services to families in order to get their children returned.

In fact, in Alameda County we started the program using children that were already in foster care. Initially, rather than a diversion program, we actually did look at children that we could return safely with intensive services. We also looked at children that we could bring out of group homes; they were older, beginning to “age out” and place with a family and with community services. In that way we were both fiscally successful and able to immediately bring down our caseload.

It became a little more complex when we tried to design services in the front end of the system to chronically neglected families. Family preservation programs designed for crisis situations where you can provide intensive services to stabilize the family assume that there was a stabilized family to restabilize. It is much harder in the families that we tend to deal with. And this began to overwhelm us in Alameda in 1989. Dr. Barth’s statistics show us the increase in 1989 of the drug problem, and as a result, the babies coming into our system. We were working with families with chronic substance abuse problems.

What we were dealing with in family preservation, the state family preservation program, initially was returning kids out of foster care. The remaining were those children that needed to be in foster care for a variety of reasons. They needed some kind of permanent, out-of-home placement. We had to design something that would work for the families entering the system that have chronic drug problems and where neglect is the factor.

Where we are at now is what I call the “desperately seeking solutions” phase. We think that family support and family preservation is the answer. I guess I am here to tell you that I do not believe that is so. One of the things I do believe is that one of the pluses of what is going on is
pulling together the community into the planning for services, including the community in the solution, and including families in what it is they feel they need in order to provide a home for their families.

However, the concern I have is if you look at the families that the family support and family preservation programs are being designed for, they are so far removed from the families that are actually coming in our door. I do not think you will see an impact in the reduction of foster care through these next five years from family support and family preservation programs alone. That is not to say that I do not think they are worthy. In fact, I think just the opposite. I think family preservation programs are extremely valuable. However, I think that one of the things we need to look at is what is common for all our children in foster care. The common denominator really is poverty, and lack of support in the community to bring families out of poverty.

The more we can do to provide family support—to strengthen and empower families—the more we provide more services to at-risk families, we will eventually begin to impact child welfare. But we will not impact child welfare with these few dollars for the next many years to come. I strongly believe that it takes far more support out there in our community which directly focuses on poverty.

One of the things we are seeing in Contra Costa County, is that the kinds of programs that the community wants are exactly those things that disenfranchised communities would want—jobs. For example, in one of our targeted family preservation areas, helping people to find jobs is the service they want. That makes sense to me. I would too. They also want respite care and daycare for their children.

These particular families may or may not have been coming in for assistance. I believe strongly, however, that policy decisions will probably change the number of children coming into our system more than anything else. I saw that in 1989, directly within months of that change in the law allowing drug toxicity screening for at-risk infants. I think those are the kinds of things that will impact us more greatly than the availability of family preservation services.

As I said earlier, one of those pluses as a result of family preservation and family support programs—and I do not want in any way to underestimate this because I think it is powerful—is that we for the first time in county child welfare have had the ability to do planning and needs assessments. We have never been able to do that. We were just constantly responding to crisis—always scrambling, trying to figure out what was going on. And this is one of the reasons I really like the Child Welfare Research Center in Berkeley—they provide us information and tools to begin to think about what is happening out there, and help us reflect on what program strategies we need to develop.

With family preservation we have to have planning money to look at and go into the community and do needs assessment. That is empowerment. For example, in my community one of the things we did is target four areas. We did that through matching the communities that received the most public services. We ran focus groups in those communities and found out what the communities wanted. It has created a much better, stronger relationship with those communities.
When I went to one of the focus groups and work groups, they would want to know, “Are you going to try just develop another county program?” I would say no, we are going to try to develop the program that you want, that you need in your community. They were really open and involved. I have been extremely impressed with the amount of involvement in these groups.

When I looked at what they finally recommended and wanted to do, they took my word and asked for exactly what they wanted. However, there is not very much money with which to do what they wanted. I am fortunate to also be in an “AB (Assembly Bill) 1741” county which enables us to integrate services in our target areas. The integrated services are designed to better coordinate and collaborate services in those communities. Our 1990 words, the “community-based collaboration coordination services” is our attempt to deliver services locally with community input.

As we flip through the different phrases in child welfare, this is our new phrase. However, I applaud the phrase. We are somewhat skeptical in county government, and I will admit to that, because we really see the community believing very strongly that this is the answer. I believe this is one part of the answer. It is one piece of the continuum of services that need to be provided in the community. Broad-based family support, broad-based family preservation, and a child welfare system that can provide early intervention services, family maintenance services and permanency planning for children. We will always have children in foster care, but our systems need to develop a much better way to go into permanency planning more quickly, and more permanently. That is a piece of what the family preservation and family support programs allowed us to do, to sit back and begin to think about a continuum of services in our county.
Family Support and Foster Care, Farris Page, Ph.D.

Farris Page is the Director of Training and Special Projects at the Alternative Family Services Agency in San Francisco. AFS is licensed by the State as a foster family agency, and provides therapeutic foster care and reunification services for abused, neglected and troubled children in San Francisco, San Mateo, Marin and Sonoma counties. AFS also provides enhanced foster care for the developmentally disabled that includes intensive skills and socialization training within a family context. Dr. Page will describe the family support program her agency provides to children in foster care, a family support model that is unique among programs nationwide.

I would like to start by acknowledging and thanking the executive director of my agency, Alternative Family Services, Dr. Jay Berlin, Ph.D., for hiring me some five years ago to begin the pilot project for intensive family reunification services. I thank him because it has been an exciting challenge, probably one of the greatest challenges of my professional career. This has been the roughest assignment that I have ever had.

I have composed just a few short words to frame what allows us to make this commitment to this work, because it really is a commitment. It has to do with childhood.

Childhood - A poem by Farris Page:

There is nothing sweeter than the soft, warm touch of a young infant's hand.
There is nothing sweeter than the wavering wobble of a toddler's first step.
There is nothing sweeter than a child who begins to decode letters which become words which replace pictures and become abstractions.
There is nothing sweeter than a child's squeal when the training wheels are removed from his or her bike and the child believes that one can truly fly.
There is nothing sweeter than the transformation of the quadrants of a pie into the time of day.
There is nothing sweeter than childhood.

It is the children who are placed in foster care in foster placements who are traumatized by each removal. Parents frequently do not have them returned to them. It is childhood that they both lose. We can make progress in terms of reducing the emotional trauma and damage that lingers throughout a lifetime for children placed in out-of-home care.

Having said that, I would like to talk a little about the Intensive Family Reunification Program. I made the mistake of reviewing some of the outcomes of several reunification projects. When you look at them in the light of scientific data and the outcomes, it does not look very good. The suggestions are that there are not significant changes in programs which provide interventions versus groups of families who do not get interventions. That may be true, but I am not sure that I agree with that.
What I do think is that intensive services have an opportunity to do a fairly comprehensive assessment of families who might benefit from in-home services fairly quickly, within a thirty- to forty-five-day period of working extensively with them. By intensive intervention, I mean that there are cases where in-home workers or caseworkers have daily contact with the families on their caseloads. I had a young lady, an in-home worker, who finally reunified a family and in the course of a twelve-month period she had more than 600 hours of face-to-face contact with the clients.

Intensive is a little more, in terms of the caseload size for individual workers, than weekly or even monthly contacts. One of the things that I would like to say about our project, I think, not knowing a great deal about the Alameda Project, is that our program is modeled on that program, with the strategy to involve the biological parent in the process of reunification. This turned out to be quite effective for a number of reasons. It is a unique experience (for many parents who found themselves with their children in foster care) for someone to ask what is it that you need, how can we support you, what assistance do you need other than child care to have your children returned home and to a safe environment? I think this not a minor thing. Parents are responsive to being treated humanely.

I wanted to state briefly what the basic criteria for the referrals to this project happen to be. Because we got some matching funds from the local department of social services, one of the first criteria had to be that the department of social services referred all the cases. Now that does not sound like a major thing, but one of the things we experienced once it was known in the community that we had a reunification program, were mothers and fathers and people who were on the streets in the grocery store, who would stop workers for self referrals. We were not able to provide the services unless there was a caseworker who referred them.

Referrals were worker driven; there was no systematic way in which workers made decisions about reunification services. I think that perhaps this may have something to do with what Dr. Barth raised relative to the number of children in the foster care system and the number of African American children in foster care. I think there is some relationship between race and referrals for reunification services.

The second criterion in terms of the growth of the project was that children had to reside in out-of-home placement, versus being in the care of relatives who may benefit from in-home services.

The third criterion relative to referrals was that children older than twelve years of age were not accepted into the project because teenagers are much more difficult to work with. What we did find was that we were not as successful with sibling groups of four or more.

The fourth criterion for referrals to our program was that participants had to reside in Bayview-Hunter's Point, which is an area in San Francisco. For those of you who are not familiar with San Francisco, the participants represent in many ways overall San Francisco county statistics of children in out-of-home placement. There are approximately thirty-four kinds of children in foster care in the city and county of San Francisco. Seventy-two percent of those children are African American.
The fifth criterion in terms of referral to the program was that biological parents with a history of substance abuse must be drug free six months prior to entering the program. When I looked at the current roster of our program, 75 to 80 percent of the clients' problems were drug related. There is a backlog of available spaces for drug treatment.

And so with all of those things, one might ask how one sought referrals. It was very difficult. We had the grandiose notion that we would have a control group and do some research with an evaluation component. Of course, we were not getting referrals to treatment and so that fell by the wayside. I think that is probably one of the weaknesses of most programs. There is a reason for this; there are not sufficient fiscal resources to do program evaluation and research. We are scrambling for funding; it is indeed a luxury to have money to do research. I think that it should not be that way; we should be concerned about outcomes and following up with families placed in foster care. This would be a very practical way of guiding social welfare policy and, hopefully, we will come to that soon.

One unique feature of this particular program is that the workers, caseworkers and in-home workers reside in the community served. The project started out with eight placements, very small, three foster families, two caseworkers and two in-home workers. It was required that all of the staff reside in Bayview-Hunter's Point. It was required that all foster homes be recruited from Bayview-Hunter's Point. We were successful in hiring people to work who were from the community and were successful in getting foster families who lived in the community. It has had a very positive outcome.

One of the things for those of you who have been around and know the child welfare system, is there is a move to provide wraparound services. We had what was more of a wraparound unit in terms of staff. When the in-home workers or the caseworkers were in the grocery stores or the laundromat or wherever they might have been, they were in contact, in many instances, with clients. Many of them had known our clients through relatives or had gone to school with them. This provided some very unique advantages. The advantages were that workers who knew the community, the atmosphere of being in the community, and who had access and understanding of what the real needs were, provided case management and in-home services.

We were originally intending to reunify our families within six months. We never really were successful. The overall reunification time was anywhere from six to seven or eight months. We had the expectation that there would be four or five months of in-home care where the workers would monitor the biological families. This would allow us to monitor the children by making routine checks.

The thing that I think was most significant in the success of the program was that the foster parents who were approved were required to have family visitation in their homes with the biological parents. There were many people interviewed, who came into the office and made comments, “Oh, no, you want me to have those drug people to come in my home and have a visit and see their kids?” Yes, that is exactly what I am saying. “Oh, no, I can't do that. I can bring them down to your office and they can come and get them, but I can't have those kind of people in my home.” We managed to find families willing to open their homes for visitation who felt that
it was clinically sound. The children were not split in terms of good parent/bad parent. They truly saw their biological parent and teaching foster parent as partners working for the same outcome, reunification of the children with their families.

By having visitation in the home, the parents could visit, prepare dinner, monitor homework, bathe the children, get them ready for bed, while we were assessing their parenting skills. I have come to believe that parenting classes which are held in classrooms and where issues of child development are addressed in isolation of interaction between the biological parent and their kids, is a waste of time. It is a fact that they need to observe interactions which support them and redirect inappropriate parenting strategies.

In foster homes, the teaching foster parents were modeling appropriate parenting, assessing where we needed to increase our training and focus, and embracing the biological parent as central to the child. What happened as families reunified was that marginal families were always in some crisis and called the foster parent prior to calling a staff person. We can, in a small way, provide a continuum of support from foster parents that would outlast any project. The people in the community continue to be there and continue to have relationships with the children and the biological parents.
The Role of Foster Care in the Family, Vernon Brown, M.P.A.

For the past ten years, Vernon Brown has been Statewide Director of Aspira Foster Family Services, and Assistant Executive Director of Moss Beach Homes, Inc. He is responsible for directing a specialized foster care agency for over 900 children who have been abused, neglected, abandoned, or adjudged delinquent. He also has direct responsibility for the operations of nine Aspira Foster Family Agency offices and the Excell Group Home program. Mr. Brown will discuss how foster care providers also provide family preservation and family support services.

I really want to thank you for the invitation, and it is really nice to see a lot of people in the audience that I know.

I have a unique perspective from the private nonprofit foster care system. I have been privileged to work within that system since 1978 and actually since 1978 with the agency Moss Beach Homes. Handout #1 shows the way I think everybody feels nowadays, and I think it is a good descriptor of where we are. I find myself here in the catchall manager position. You know, when the reorganization comes up, whatever is left over you have to catch up on. Unfortunately I think that all of us are experiencing that overload of reorganization. For those of us in the private foster care continuum, it is a time of turmoil and unrest in regards to funding issues and where we fit within the continuum of care.

I would like to define foster care for you from my perspective. With a real quick raise of hands, how many of you have been teachers? How many of you have done social work or had a caseload? How many of you have lived 24 hours a day with eight delinquent boys for two and a half years? That was a real defining point. How many of you have been driving along the highway with a teen that had a psychotic break at 55 miles an hour and decided it was time to get out of the car? I was returning that youngster back to the county.

It is important to define foster care within the child welfare continuum, what we do out there in terms of providing resources for children who have been coming into placement for a number of years. I think that it is significant that post-Proposition 13, there was a real shift to look to the private nonprofit groups to provide out-of-home care. Today there are a lot of children in private nonprofit at-home care. My agency is one of those. And we are a large agency. It has been a development that has happened for us.

I started with my wife for two and a half years, living with groups of adolescents, and then for another six years with the organization doing direct supervision of group homes. Then the agency moved into providing foster family agency programming. I think that you will find that the trend is for foster family-based types of programming. A substantial amount of children that are coming into care now, who used to go into group home care, are going into foster family agency care. I will be very honest about my bias about that. But it also generates the discussion that we are having.
It is important in this discussion around family preservation and how foster care fits into that mix, and its impact and the future in terms of providing services for children—and I am focused on trying to provide services for children—that the discussion should move to family focus. Farris Page so eloquently stated that families are what we are talking about.

Our experience over the last ten years of being a foster family agency and on the scale that we are operating, is that we have a collection of some interesting statistics. For our agency during the course of this year alone, we will have had contact, direct telephone contact, with over 12,500 potential foster parents. Every time we have a contact, we are informing the public about the needs of children and about what care is all about and what is happening to children. We take that very seriously.

Presently as an agency we have over 900 foster parents that we certify, which is just another word for license. Those 900-plus families have over 900 children in care in the total agency. And that spreads the breadth of the state from Los Angeles all the way to Santa Rosa throughout the Central Valley and the Bay Area.

What is important and what we are finding is that there is this resource of foster families out there. We are finding that that resource of foster families is an important part of any kind of a discussion in terms of family and what you are doing within families.

I also want to address group care. Our agency has a group care facility. It is an important component in the continuum, too. At least we have seen that need for stabilizing kids. Another issue is if children do come into care, how soon can you reunify them with their families and what resources are available to them? I think Alameda County did that quite a bit in terms of working with kids and getting children out of care and working with families around those kinds of issues.

One of the trends is for delivering services in family-based types of settings, both in the county and in the private sector. Another trend that I think is good, is that the growth of foster family agencies and the growth of children in care is the result of a lack of capacity for that spectacular growth back in 1989 and up through this period of time. A lot of children have come in. Dr. Barth said that the statistics he showed now show children in private family foster agencies as well. The trend is towards that.

The private foster care folks are really concerned about what role we play in this continuum of care. We have also looked at issues about how we partner, how we participate in the discussion with the counties, and how we support families to be able to reunify them. Our agency and a lot of agencies are moving toward including the family of origin or whatever family is defined as for that child and bringing them into the process right up front. We are also training our foster parents in their responsibility to reunify children with their families.

Historically, we had the good parent/bad parent kind of separation that has always occurred. There is a need to really have a value orientation that is family-focused. I think that family preservation has helped in terms of the private foster care area to focus on that issue about our responsibility to families.
One of the structural problems that we are faced with is a funding issue. For after-care services, it is nonallowable cost if you are running a group care facility or if you are running any kind of a facility. You have to find those resources out there. We do that from time to time based on the needs of the family and the child, but it is not as frequent as we would like. One of the other things that is important is to recognize that the private provider community has come up with a lot of innovative kinds of things that they have done. We serve as a resource to provide services.

One of the things that is developing for us in some of our offices—and we have sixteen offices in the state—is that our foster parents are starting to become advocates for families. They are becoming advocates in the community about the delivery of services and they are coming forward and saying, This should change and this should not be the way my community is. I think the focus on supporting and facilitating that is where our agency is being needed. In my mind you cannot underestimate the power of family. You cannot underestimate the power of people who live in a community who come forward if they are encouraged and supported around making substantial changes.

It is important as these people advocate for children in terms of getting school and medical services. I do not know how many of you on a day-to-day basis understand that Medi-Cal is going managed care, and we are finding that managed care means that a lot of our kids do not get served. We have foster parents who are stepping forward and just taking the kids to their doctors. They always went to their own doctors, but as fee-for-service Medi-Cal disappears many of those doctors are no longer a part of the new managed care system. Foster parents are paying out of their own pockets for this care.

The aging-out question is also an important one. We have a lot of foster parents that are supporting their kids after they turn eighteen and graduate from high school, in terms of college and as always being a place these kids can turn to. I do not want to underestimate, though, the needs that teens have to go back and find out where they are with their birth family. The statistics show that they will do that. They reconnect with their birth families, they find out where things are with them, and then they come back to their foster family.

The system is not by any stretch of the imagination perfect, but ten years ago for me the defining moment as part of the first child that we placed into our fledging FFA (Foster Family Agency)—and I was the first social worker in our FFA—was a girl for whom I convinced my neighbor to become a foster parent; she lived a couple of blocks down the street. She had that kind of “empty nest syndrome.” Her last son had gone off to college, and she wanted to do something to become involved. She knew what I was doing and she came forward and I said, “Well, geez, why don’t you be a foster parent?”

Well, to make a long story short, we placed a fourteen-year-old delinquent girl who had a long history of drug usage. Her family were sellers and she had a lot of busts for being in the room where the deal was coming down. I had introduced hundreds of kids into the local schools, and would say to the vice principal, “Mr. Barry, this is John, he is our newest child in our group care facility. We are going to enroll him in school.” Well, Mary Ann walked in there with this girl, Tracy, and Don said, “How is your son doing, how is everybody else doing?” And this woman
was a significant player in the community. She introduced this girl as her foster daughter. Totally different. I was sold on that. I think that is again the power of family. I think that is where we need to focus in the future.

One of the unique things that our agency has had the privilege of being able to do recently is to take developmentally disabled children out of institutional care from regional centers and developmental centers. Kids who had never walked, never spoken, who had never been outside of a hospital center, are now in homes. They are speaking; they are walking; they are going to Sea World. We have thirty-eight of those children now in our agency, twelve from developmental centers; this value orientation is saying that a child deserves an opportunity to be in a family and not in an institutional setting. Believe me, we are as bureaucratic as anybody else. I am going to CCL (Community Care Licensing) and telling them what we are going to do, and getting all the things together to meet the medical criteria of Assembly Bill 636 for these kids. I am making sure that our liability insurance carrier understands what we are doing so that if something happens they are not going to say we are not covered. I am working out the protocols for placement and all those kinds of things, that while difficult, are doable. These things have been accomplished and we feel very good about that.

Senate Bill 969, which was a pilot for an intensive foster care program for developmentally disabled children, allowed us to expand the program. I think that is an important model for foster care.

Some of our challenges in the future have to do with some of the structural issues between the private sector and the public sector:

- in terms of cooperation;
- in terms of being able to do something that is innovative;
- recognizing the legal responsibility that the county has for the protection and safety of those children; and
- representing those children in front of the juvenile court and how we play into that process.

A lot of counties now in the state of California have privatized their county counsel. I do not know how many times we get subpoenaed each week now, probably eight or nine times. It is interesting that children are being better represented. I do not know what that means to county counsels when they are paying for it, because I am sure these attorneys are billing for every time they subpoena somebody. But how children in the foster care system are represented and how private foster homes and agencies jointly cooperate with the county are issues that we are struggling with.

We have recently brought in Jim Nice from Family Unity, a project in Oregon. He has been within our agency for two years and he has done a series of trainings all over the state and has a joint program with us. It is like there is a value orientation that says that you have to respect families. We have struggled with county government and county services around bringing
together a group of people when a child comes into placement and sitting down and letting the family decide what the solution to the problem is.

It is a very passive, facilitative kind of a thing. It is not casework; it is a facilitation. Where we are focused is how we facilitate the reunification in a way that the family is an active participant in that process. We have had some amazing results, although it is still very early. We have had discussion with counties asking, How would you like it if we all got together and had the family decide? That means that you bring in Aunt Rose from Las Vegas if she needs to come in and she thinks she is a significant resource for that child. You bring in everybody who recognizes their interest in that child. It can be the neighbor down the street. There is a lot of work around getting the right people in the room. We found this to be an important component in terms of whether you are going to really help a family and facilitate a family to:

- be able to determine their need and look to them for the best answer;
- look to them for their strengths; and
- look to them for a solution to the problem.

We have then become a part of that process ourselves. That is pretty exciting. I have gone to a couple of these programs, and they are really fun and one of the neatest things I have seen in a long time.

I think that it is important once again to recognize that the private provider community sometimes gets painted with the broad brush of corruption and no care for children, etc. I am not going to stand up here and be an apologist for those that are unscrupulous and unable to do things the right way. But I think that you will find that there are thousands of children that are receiving really good care.

Small Miracles is a report in which we focused on children and what is good about foster care. [This report is available from the speaker.] Though it is kind of a propaganda piece for the agency, we are a little bit proud of twenty years of being in existence. When I started with the agency there were eighteen children in care. I have seen a tremendous transition, and please take the time to read the children’s stories. I do not care if you read about the agency, but some of these stories are very compelling. I know that it is anecdotal and it may not reflect the broader implications of public policy issues, but what is important is that we are focusing on children and focusing on families and we are not losing sight of that. We are realizing that though poverty is an issue that we would like to be able to address, we are looking to our communities to support them in terms of resolving those issues, and using the resources of foster parents.

We have 7,800 adults that have interaction with our 900 children in our foster family agency, 7,800 people who have on a consistent basis, on a weekly basis, more than two hours of contact with kids. The ability to have at a very low cost that much resource available to that many children is an important issue.

Where family preservation comes into that, in terms of where I see the foster care system going, is as a part of the continuum. It has driven a lot of the debate. A lot of the debate in my mind
should focus on how we get children out of care and support families so that they are able to be home when the children are returned. It should address issues of poverty and why children come into placement, which is a huge problem. I do not know if our public or political will is there to change that. In that light, I am very pragmatic. What is it that I can do as a private provider to provide service? What can I do to provide the opportunities for somebody there?

In closing, I did not touch on everything that I would have liked to. One other thing that is really important to think about is adoption. There really needs to be a public policy discussion around adoption. And clearly in foster care, at least in our agency, and what I know of statistics, is that over 50 percent of adoptions are occurring in foster care. What we are finding is that our foster parents are potential adoptive parents. There are some programs that are doing that and are doing a really fine job. They are looking at the difficulty of how that is structured and the way in which the system works. I think community-based private entities or providers are very community-based, have high recognition many times within their community, and do not suffer some of the problems that the public sector does.

It is an accusatory system and the part of what she is doing in terms of empowering families within her county is an important part of redefining what social services are. The advantage that the private community has had is that we do not have that baggage of coming along in terms of removing children when there is no one there to properly provide support.

I think it is important that a forum like this provides an opportunity to have discussion and create a common vision; we can have discussion around our value orientation, and our focus is on families and on children. I think that is an important touchstone that we should have in order to take care of how we deal with two legal structural issues. There really needs to be an examination of how we finance this system. That is going to happen with welfare block granting and how it is played out in each county. How are we going to provide continuity in the entire state in regard to where children’s needs are best going to be served?

My son gave me this quote; he is in the fourth grade. They have these quotes they have to look up and I am going to close with this quote. It is not as eloquent as Farris Page’s poem. But this is from Oliver Wendell Holmes, and I think it is important. “What lies behind us and what lies before us are tiny matters compared to what lies within us.” I think that is what is important about those of us that are involved with children and care about children, how we translate that, and how our caring and interest in children is translated into how we operate.