

Lessons in Child Welfare Reform from Cuyahoga County and Beyond: The Annie E. Casey Foundation's Family to Family Initiative

A recent federal study confirms that child abuse and neglect is a widespread problem in the United States.¹ The National Incidence Study of Child Abuse and Neglect (NIS) relies on community professionals who typically encounter children and families in the course of their work to evaluate victims of child maltreatment. While the NIS includes children who were investigated by child protective service (CPS) agencies, it also includes data on other children who were not reported to CPS or who were screened out by CPS without investigation. These additional children were classified as maltreated by community professionals. The NIS applies two measures: the Harm Standard and the Endangerment Standard. The Harm Standard is relatively stringent in that it requires demonstrable harm in order to be classified as abuse or neglect. The Endangerment Standard includes all children who meet the Harm Standard but adds others as well. Using the Harm Standard, an estimated 1.25 million children experienced maltreatment during the most recent NIS study year (2005–2006). This estimate corresponds to one child in every 58 in the United States. Defining maltreatment according to the more inclusive Endangerment Standard, nearly 3 million children experienced maltreatment, which corresponds to one child in every 25 in the United States.

Children in low socioeconomic status households had significantly higher rates of maltreatment in both definitional standards. They experienced some type of maltreatment at more than five times the rate of other children. Community professionals also considered whether the parent's alcohol use, drug use or mental illness were factors in the child's maltreatment. Alcohol and drug use were factors for 11 percent of the children, while mental illness was a factor in the maltreatment of

7 percent of the children. The NIS also found that CPS investigated the maltreatment of only 32 percent of children who experienced Harm Standard maltreatment and 43 percent of those whose maltreatment fit the Endangerment Standard.

Taken together, all of these findings demonstrate that child abuse and neglect is a significant social problem that is exacerbated by poverty, substance abuse and mental illness. The NIS also shows that this problem extends well beyond Child Protective Services. Children who are victims of maltreatment suffer immediate and long term effects to their health, well-being and quality of life, extending into adolescence and adulthood.² Therefore, efforts to improve the well-being of children and reduce child maltreatment require a community-wide partnership with public child welfare agencies and other public and private child-serving services.

Child welfare agencies are often caught between criticism that they do not intervene enough to protect children and criticism that they are 'baby snatchers' who disrupt family and community life.³ Federal child welfare funding can reinforce these dynamics by limiting service options and emphasizing out-of-home care. These challenges have contributed to a system in which child welfare workers can be disconnected from the communities they serve. The Annie E. Casey Foundation's Family to Family Initiative is one of several broad efforts to move the debate away from a false choice about whether CPS should intervene more or less in families' lives, and instead develop strategies for engaging families and communities in the care and protection of children. Results from a recent evaluation of Family to Family suggest how communities and child welfare agencies can work together to reduce child maltreatment.

THE SCHUBERT CENTER FOR CHILD STUDIES in the College of Arts and Sciences at Case Western Reserve University bridges research, practice, policy and education for the well-being of children and adolescents. Our focus is on children from infancy through adolescence in local, national, international and global settings.

Jill E. Korbin, Ph.D. DIRECTOR | Elizabeth Short, Ph.D. ASSOCIATE DIRECTOR | Gabriella Celeste, J.D. CHILD POLICY DIRECTOR | Jessica McRitchie ASSISTANT DIRECTOR
Donald Freedheim, Ph.D. FOUNDING DIRECTOR | Nadia El-Shaarawi GRADUATE ASSISTANT | Michelle McTygus GRAPHIC DESIGNER

WEB <http://schubert.case.edu> | EMAIL schubertcenter@case.edu | PHONE 216.368.0540 | 615 Crawford Hall, 10900 Euclid Avenue, Cleveland, OH 44106-7179

Lessons in Child Welfare Reform from Cuyahoga County and Beyond: The Annie E. Casey Foundation's Family to Family Initiative



David S. Crampton, PhD

Associate Professor of Social Work

Mandel School of Applied Social Sciences

Case Western Reserve University

David Crampton is an Associate Professor of Social Work at the Mandel School of Applied Social Sciences at Case Western Reserve University. His research interests focus on the evaluation of family-centered and community-based child welfare practices, with the ultimate goal of protecting vulnerable children through the engagement of families, communities and social service providers. From 2006-2009, Dr. Crampton was a member of a national research team evaluating the Annie E. Casey Foundation's Family to Family Initiative. In 2010, he served as chair of the Cuyahoga County Department of Children and Family Services Practice Review and Improvement Panel. The panel's report and recommendations can be accessed at: <http://cfs.cuyahogacounty.us/en-US/community-task-force-recommendations.aspx>

THE FAMILY TO FAMILY INITIATIVE ("FAMILY TO FAMILY")

In 1992, the Annie E. Casey Foundation began the Family to Family Initiative, a multi-million dollar national program to improve outcomes for children and families in the child welfare system by promoting comprehensive system reform. Family to Family is based on four key principles:

- 1 A child's safety is paramount
- 2 Children belong in families
- 3 Families need strong communities; and
- 4 Public child welfare systems need partnerships with the community and with other systems to achieve strong outcomes for children.⁴

Now implemented in 60 communities in 17 states, Family to Family seeks to build partnerships between neighborhoods and public child welfare agencies as part of an effort to reform the child welfare system. Family to Family relies on the following four strategies:

- 1 **Recruitment, Development and Support of Resource Families:** Identify and support relative caregivers or foster families in the neighborhoods where children live, thus reducing the distance between families whose children are placed in foster care and the foster families and strengthening neighborhood ties.
- 2 **Building Community Partnerships:** Value communities' unique strengths and traditions and the longstanding credibility of some neighborhood groups as collaborative partners who can assist with recruiting local foster families and providing

other kinds of supports, thereby increasing the public agency's community connection and the community's influence in child protection matters.

- 3 **Team Decision Making:** Promote the engagement of families and communities (i.e. church members, service providers, and other community representatives) by including them in decision-making about the welfare of children within their community.
- 4 **Self Evaluation:** Child welfare agencies and community partners together review data and track trends in child welfare outcomes in order to improve and adjust service provision to meet the needs of children.

EVALUATING FAMILY TO FAMILY: SYSTEM AND CHILD LEVEL IMPACTS

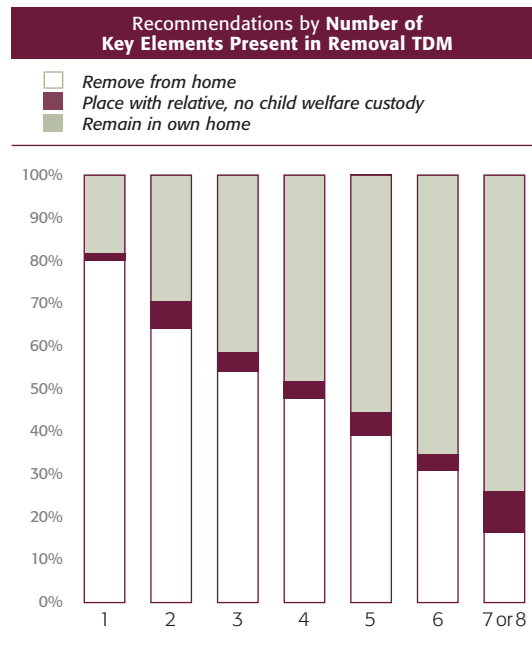
From 2006-2009, the Casey Foundation made a commitment to strengthen Family to Family in selected urban "anchor sites" nationwide, including Cuyahoga County, Ohio.* Beginning in 2006, Dr. Crampton, along with colleagues at the University of North Carolina-Chapel Hill and the University of California-Berkeley, was part of a national research team charged with evaluating the Family to Family Initiative on both a systems level and child level in these sites. A major goal of the evaluation was to determine whether the four key strategies were implemented as intended and whether the strategies worked together to improve outcomes for children and families. Given his scholarship on engaging communities in child welfare and protection, Dr. Crampton was particularly involved in the evaluation of the Building Community Partnerships (or "BCP") strategy. The underlying assumption of BCP is that by

strengthening connections between the public child welfare agencies and the families and communities they serve, the well-being of children and families involved in the system will be improved. These connections can be accomplished through a variety of different mechanisms, such as contracting for services, co-locating services, sharing staff and using teams with multiple partners.

The evaluation included interviews, surveys and focus groups with key participants in each anchor site to determine if main elements of each strategy were in place. Successful implementation of BCP is based on the degree to which sites had developed a strong network of neighborhood contracting and collaboration, had community members attending Team Decision-making meetings, and were regularly presenting child welfare data to staff and the community. Many of the anchor sites were not implementing these strategies fully, suggesting a need for improvement to achieve the Family to Family goals. Several challenges were identified that impeded the building and maintenance over time of community partnerships, including changes in staff and leadership, difficulties in negotiating or actualizing partnerships, and a lack of resources to support partnership.

One of the unique features of Family to Family is the use of community partnerships to not only improve services but to effect change in the public child welfare system overall. Inherent difficulties exist in applying an approach that is tailored to neighborhoods and local groups to a large public system that involves a variety of communities, organizations and stakeholders. The evaluation uncovered some ways in which this approach is particularly challenging, such as defining “neighborhood” and determining how to contract between public agencies and neighborhood groups for partnership activities. Despite these challenges, Cuyahoga County is among the anchor sites distinguished for its success in building the infrastructure for successful community partnerships. Some of the reasons identified for its success include a strong neighborhood identity in many of its communities, rigorous leadership by the child welfare agency directors and the availability of discretionary local levy funds to support nontraditional child welfare services.³ In terms of outcomes, Cuyahoga County reported consistent decreases in the numbers of children entering placement care for the first time from 2005-2008.³

One of the most concrete ways the evaluation measured the implementation of Family to Family was the evalua-



tion of Team Decision-making (TDM). TDM relies on a team approach to child placement decisions and involves eight elements: 1) all child placement decisions require a meeting; 2) meetings occur before a child is moved; 3) parents participate; 4) a dedicated facilitator leads the meeting; 5) multiple child welfare staff participate; 6) community representatives and service providers participate; 7) family and friends participate; and 8) the meeting is held in a community location.⁵ Part of the analysis included examining whether each TDM meeting included these eight elements and evaluating the relationship between elements and placement recommendations, as illustrated in the Figure above.⁵

When a TDM meeting had only one element the recommendation was to remove the child from their home 78% of the time. Conversely, when seven or eight key elements were in place, 70% of children had a recommendation to remain in their own home. The presence of parents and other key team members suggests that there is engagement of family and community in maintaining the safety and well-being of the child, as well as enriched assessment of the family's circumstances, resulting in an “own home” recommendation. While these data suggest positive outcomes for children, they must be considered within the context of two other factors: safety and whether the recommendations are implemented subsequent to the meeting. Additional analyses confirmed that these recommendations were typically implemented and safety was maintained.

IMPLICATIONS FOR POLICY AND PRACTICE

Harnessing the rich history of the Settlement House movement in the nineteenth century, the Family to Family Initiative's reliance on community partnerships and neighborhood-based approaches to support vulnerable families is not new.³ However, Family to Family is unique in its efforts to use a community based approach to transform public systems, an ambitious undertaking.

A major hurdle to encouraging and sustaining child welfare reform is the strict federal funding mechanisms under Title IV-E of the Social Security Act where the majority of federal funds pay for foster care and adoption (versus the much smaller pool of IV-B dollars that pay for child and family support services). Some states, including Ohio, participate in a Title IV-E Waiver Demonstration Project and have shown how more flexible use of IV-E funding for services such as in-home family strengthening activities improves outcomes for children and families.⁶ Ensuring the

availability of more flexible local levy funds to supplement federal funding is another fiscal policy challenge.

Despite efforts to improve community engagement in child welfare practices much work remains to be done if communities and families are to become truly involved in efforts to protect vulnerable children. With strong director-level leadership, some of the elements identified in the Family to Family evaluation for building successful community partnerships may be adopted through local child welfare system policy change. These include: developing an infrastructure within the public child welfare agency for community partnerships; creating a shared vision for the overall safety and permanency of children in care; and instituting formal mechanisms, such as contracts with community-based organizations, geographic assignment of child welfare staff, locating key activities such as family visitation and TDM meetings in the community and

utilizing parent advocates to support system-involved parents to be engaged and successful.

Mandatory reporting of child maltreatment has led to qualitative and quantitative changes in the reporting of child maltreatment and in the services offered by child welfare agencies. Approaches to mandatory child welfare services tend to focus on the individual or family level, specifically considering the problems of the relatively few children who are victims of serious abuse. While the protection of these children is imperative, advocates and researchers are increasingly calling for approaches that also address the environmental stressors, such as social inequality, that influence child maltreatment. Broader approaches which bring together children, families, child welfare agencies and the community have the potential to provide more holistic, culturally-appropriate services and to serve the needs of a larger number of children.⁷

¹ Sedlak, A.J., Mettenburg, J., Basena, M., Petta, I., McPherson, K., Greene, A., and Li, S. (2010). *Fourth National Incidence Study of Child Abuse and Neglect (NIS-4): Report to Congress*. Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families.

² Hussey, J. M., Chang, J. J., & Kotch, J.B. 2006. Child Maltreatment in the United States: Prevalence, Risk Factors, and Adolescent Health Consequences. *Pediatrics*, 118(3):933-942.

³ Usher, L., Wildfire, J., Webster, D., Crampton, D. (2010). Evaluation of the Anchor-Site Phase of Family to Family. Baltimore, MD: the Annie E. Casey Foundation. Retrieved from: <http://www.aecf.org/~ /media/Pubs/Initiatives/Family%20to%20Family/EvaluationoftheAnchorSitePhaseofFamilytoFamily/anchoreval.pdf>

⁴ The Annie E. Casey Foundation. Major Initiatives: Family to Family. Retrieved from: <http://www.aecf.org/MajorInitiatives/Family%20to%20Family.aspx>

⁵ Wildfire, J.; Rideout, P. & Crampton, D. (2010). Transforming Child Welfare, One Team Decisionmaking Meeting at a Time. *Protecting Children*, 25(2): 40-50.

⁶ Public Children Service Association of Ohio: "Protect Ohio-Flexible Funding Title IV-E Waiver Enhances Child Outcomes" summarized by Crystal Allen. Retrieved from: <http://www.pcsao.org/InTheNews/2010/ProtectOhio.pdf>

⁷ Pennell, J., & Crampton, D. S. (in press). Parents and child maltreatment: Integrating strategies. In J. W. White, M. P. Koss, & A. E. Kazdin (Eds.), *Violence against women and children: Consensus, critical analyses, and emergent priorities: Vol. II. Navigating solutions*. Washington, DC: American Psychological Association.

* Other anchor sites included Denver, Colorado; Guilford County (Greensboro), North Carolina; Jefferson County (Louisville), Kentucky; Maricopa County (Phoenix), Arizona; Wake County (Raleigh), North Carolina; and Alameda, Fresno, Los Angeles, Orange and San Francisco counties in California.