EMERGING ISSUES IN CHILD WELFARE

A state survey of child welfare administrators identifies issues of concern.

With the installation of the 104th Congress, public attention has turned to U.S. domestic policy. Long dormant or quietly simmering issues have moved to center stage. Welfare policy, food policy, program funding, and health issues are being examined in a new light.

Child welfare has not escaped this new scrutiny. Most of the current discussions about child welfare have centered on funding strategies, but issues of practice also have emerged. Most prominent was the debate over orphanages last fall. Commenting on unwed adolescent mothers, House Speaker Newt Gingrich suggested that low-income children who could not be cared for by their mothers might be better served in orphanages.[1] Recalling a previous age when large numbers of children were cared for in orphanages, the reference sparked a lively debate in the news media and among public policymakers and child welfare professionals across the country.[2] Although the American public was divided on the issue, child welfare professionals generally agreed that orphanages would not be an optimal placement alternative for low-income children.[3]

Are all areas in child welfare so easily agreed upon among child welfare professionals? Probably not. Child welfare practice has never been straightforward. Most child welfare decisions center on intensely personal problems between parents and children. Problems involving people’s lives are not easily defined, solutions not easily devised. Family difficulties are as much a reflection of failures within the larger social service system as they are about the strains of daily living in modern family life. How child welfare professionals respond to problems that are beyond their purview makes the work especially
challenging. Confounding the work further, the mission of child welfare often involves balancing competing interests: Child welfare workers must serve the best interests of the child, but they must also maintain and preserve the family. In some instances, separating these competing goals is difficult.

As with most policy debates, it is important to understand whether the controversies reflect widely divergent beliefs or beliefs that are only modestly different in degree. Similarly, it is instructive to understand whether the debate is fueled by a few outspoken opponents or if the entire profession is divided in its views. Child welfare administrators face the daily challenges imposed by these questions; their views should help shape the direction of future policy.

In 1994, we surveyed public child welfare administrators nationwide on a series of current issues in child welfare. With funding from the U.S. Department of Health and Human Services (HHS), through the Office of Planning and Evaluation of the Administration on Children and Families, as well as through the HHS Children's Bureau, our goal was to understand areas where there is consensus and to further explore substantive issues that continue to spark debate. We proposed the study in order to fulfill one of the fundamental goals of a federally funded Child Welfare Research Center: to act as an information resource for public policymakers and agency administrators in child welfare.

**The Survey**

We distributed the survey in June 1994 to 2,268 state, county, and regional public child welfare administrators in the 50 states, the District of Columbia, and the U.S. territories. The survey went to child welfare administrators listed in APWA's Public Welfare Directory. We also contacted state child welfare agency officials for names and addresses of local child welfare administrators. To increase the response rate, we sent out follow-up post cards three and six weeks after the initial questionnaires. Responses were anonymous.

Of the original sample, 1,096 administrators returned their completed surveys--a response rate of 50 percent, after adjusting for surveys that were not deliverable and for the state of New Jersey, which chose not to participate.

In developing the survey, we prepared a draft questionnaire covering issues in several areas of child welfare practice. The draft survey was reviewed by other researchers, program managers, and staff at the HHS Children's Bureau. The survey was pilot-tested with child welfare staff in the San Francisco Bay area and with directors of the federally funded child welfare resource centers to confirm the clarity of the question-and-answer categories and to ensure that responses were mutually exclusive and exhaustive.

The final survey sought opinions on a number of issues in child welfare, including child abuse and neglect, family preservation, voluntary versus mandatory services, out-of-home care, and adoption.

**Child Abuse and Neglect**

With the explosive increase in child abuse reports nationally, many people have questioned whether child maltreatment is too broadly defined; others have indicated that too many professionals are now required to report child abuse.[4] While some theorists wish for decreased state intervention in family life, others are concerned that child abuse reports are now flooding the system and that child welfare
professionals no longer have the resources to cope adequately with the increasing volume.[5]

Accompanying the increasing number of reports are high rates of unsubstantiated claims. Each state defines the term "substantiation" somewhat differently, and not all states collect data on substantiation rates; most studies examining the issue, however, point to a considerable rate of unsubstantiated reports. In 1988, Victor Eugene Flango, of the National Center for State Courts, Williamsburg, Virginia, found that, among 46 states, 45 percent of all reports brought to the attention of child welfare authorities had too little evidence to confirm or were false or inappropriate.[6] The range of substantiation is great, from only 20 percent in some states to as much as 67 percent in others. According to HHS, substantiation rates have risen in recent years from 11 per 1,000 reports in 1990 to 13 per 1,000 in 1992.[7] Although the direction is positive, many experts are critical of a system that supports such a high degree of uncertainty. Countering these arguments, other researchers argue that the child protection system often requires a broad net to protect.[8] [See "Is Child Abuse Overreported?" PUBLIC WELFARE, Winter 1990, and "Gaining Control Over Child Abuse Reports," PUBLIC WELFARE, Spring 1990.]

Mandatory reporting has also become a focal point for debate. Reporting laws were first introduced in the 1960s; and with each decade, a greater number of professionals have been included among those who are mandated to report suspected cases of child abuse. In most states, all professionals having contact with children—including doctors, nurses, teachers, daycare workers, and police—are now required to report when they suspect abuse. Other states have widened the net considerably; California law, for example, now includes photographic processors, firefighters, and dogcatchers. Forty percent of states also require all citizens to report suspected cases of abuse.[9]

Yet reporting laws provide professionals with difficult ethical dilemmas. Mental health counselors have pointed out the difficulty of gaining clients’ trust when they must report clients to child welfare authorities. [10] Some studies have also indicated that reporting practices are not uniform among professions and that some combination of ethical or professional misgivings hinders full compliance with reporting laws. [11] In response, some scholars have called for a flexible system of reporting responsibilities to allow greater discretion by professionals.[12]

Who should report? Although states vary widely in the kinds of professionals and laypeople required to report suspected child abuse, respondents to our survey were, on average, satisfied with the current categories of people required to report in their respective states. Of the respondents, 89.6 percent said that change was unnecessary; only 9.2 percent wanted categories expanded in their states.

Substantiation. The question of who should report did not appear to be a pressing issue for administrators, but substantiation rates were. Although substantiation rates for child abuse and neglect reports vary among states, 54 percent of respondents believed that the current percentage of unsubstantiated reports was "about right." Yet a significant number of respondents--35.8 percent--believed there were too many unsubstantiated reports. Comments from respondents showed their concerns about reports made out of malice or reports resulting from custody proceedings. Although we have no indication of the frequency of such reports, some specific comments from administrators illustrated their thoughts about why substantiation rates may be so low:
"Resources aren't available to do thorough assessments."

"Understaffed investigative units; insufficiently trained staff; inadequate, insufficient referral information."

"A lot of referrals are called in because someone is mad at someone else. Also, the general public does not know what child abuse includes. They also feel that our agency is the answer to all problems and can deal with everything."

Respondents who felt that the current substantiation rates were appropriate made such comments as, "If your requirement is that 'suspected' abuse and neglect be reported, you must expect many to be unsubstantiated. Reports are allegations. CPS's job is to determine validity, and therefore 50 percent is not a bad statistic."

Reporting immunity. In most states, most mandated reporters are immune from liability for making a report. In some states, the penalty for not reporting suspected abuse may be relatively severe. Administrators across the country showed strong support for the current system of mandatory reporting. Ninety-six percent of respondents supported moderate or very strong penalties for mandated reporters who do not report suspected child maltreatment. Administrators offered several suggestions for penalties for failure to report, including fines, misdemeanor charges, suspension of professional licenses, professional discipline, and negative publicity.

Categories of maltreatment. States vary in how comprehensive their reporting laws are in covering types of abuse. Seventy-nine percent of respondents were satisfied, however, with the reporting laws in their states and did not think the laws should be expanded or reduced. Despite the controversy surrounding reporting, including criticisms of "overreporting," only about 8 percent of the administrators believed that categories of types of maltreatment should be reduced.

Thirteen percent of respondents were not satisfied with the reporting laws in their states and believed that their laws should be expanded. These respondents may come from states with more restrictive reporting categories, but our study did not measure this aspect. Among respondents who hoped to see the types of maltreatment expanded, many focused their comments on emotional harm:

"Emotional abuse should be more liberally defined."

"Emotional abuse is difficult to prove. Maybe there should be an 'emotional harassment' category."

"Emotional abuse should be easier to prove or more clearly defined in the law."

Other comments were related to "prenatal abuse involving drugs" or "parents who deal and use drugs or alcohol."

**Family Preservation**

Similar to the debate about reporting child abuse and neglect, discussions regarding family preservation services have intensified in recent years. Family preservation became popular during the late 1980s. Its emphasis on solving families' immediate problems struck a chord among child welfare professionals. Its popularity was also based on early evidence of its effectiveness in preventing out-of-home placements.
With further evaluations, the early promise of family preservation began to fade. Some critics contended that placement prevention was not occurring, whereas others suggested that family preservation services decreased the ability to protect children appropriately. As the debate has subsided somewhat, many recognize the value of family preservation services in assisting troubled families, despite the somewhat weak evidence regarding placement prevention.

Almost two-thirds of the survey respondents--63.7 percent--believed that in-home services should be voluntary, but many added qualifiers to this question, suggesting that few situations fit cleanly into categories of absolute voluntary or mandatory situations. One respondent summarized concerns in this way: "I have mixed feelings here. We need to provide service delivery in such a way that we serve the majority with in-home services voluntarily, but we will always need some mandatory services."

Respondents were divided over whether family-maintenance services should be time limited or should continue as long as families need services: 47.1 percent thought services should be offered as long as needed; 52.9 percent believed services should be time limited.

In general, administrators believed that workers could adequately assess potential harm for children and families who are eligible for family preservation services (84.1 percent); 15.9 percent of administrators, however, were not satisfied with the current capability of workers to assess potential harm. There was a significant gender difference in responses to this question: 53 percent of men assessed workers' capacity as "adequate," compared with 41 percent of women. Women were more cautious, with 40 percent assessing workers' capacity as "somewhat adequate," compared with 34 percent of men.

Opinions were mixed on the effectiveness of family preservation services to prevent out-of-home placements. In general, most administrators were cautiously optimistic in their estimation of services; 32.5 percent indicated that family preservation services were only effective in preventing out-of-home placements about half of the time. Only 6.4 percent indicated that family preservation services were usually effective in preventing placement. There was a statistically significant difference in responses between those who work in family preservation services and those who do not: Predictably, those working in family preservation services rated the effectiveness of services more highly than those who do not. About 35 percent of those who work in the area indicated that family preservation is effective more than half of the time in preventing placement, compared with only 17 percent of those who do not work in the field.

Kinship Care and Permanency Planning

Family preservation services are not the only issue to engender somewhat heated exchanges between child welfare professionals and scholars. The recent increase in kinship placements is also an area of growing controversy. In less than a decade, kinship care has become a highly visible placement alternative for dependent children. In several large states, placement with relatives now constitutes almost half of the out-of-home placement caseload.

As placements with relatives have increased, the extent to which kin caregivers are required to comply with conventional foster care licensing standards has decreased. In most states, child welfare agencies have relaxed their requirements considerably in order to accommodate family members as children's caregivers. But the use of kinship care has not expanded without misgivings. Some have questioned the
quality of care in many of these kinship homes and the prudence of placing children with a grandmother who may have raised the maltreating daughter.[18]

A recent study involving focus groups with child welfare workers in one western state highlighted workers' ambivalence about the use of kinship care, particularly given the limited time workers have in making thorough placement decisions with regard to relatives.[19]

As child welfare administrators examine the increasing costs associated with caring for greater numbers of children in foster care, many have begun to consider changes in funding for relatives and in the services that family members receive from child welfare agencies.[20] Changes in services and funding for relatives will likely stir increasing debate, raising questions of equity for kin and nonkin caregivers and children.

Child welfare practice has changed in order to emphasize placement of children with relatives. So too, has practice begun to respond to the changing nature of the foster care population. The average age of children in foster care has decreased considerably in recent years.[21] In five of the largest states--California, Illinois, Michigan, New York, and Texas--infants account for 20 percent of all new entrants to the foster care system.[22]

Many researchers have suggested that the increase in crack cocaine use has led to the burgeoning caseload of infants and young children in out-of-home care.[23] Although this may be the case, the large number of very young children entering and remaining in care has led to a new consideration of conventional child welfare practice.[24] Child welfare professionals are questioning whether the current 18-month permanency planning guidelines are equally appropriate for a 10-year-old child and a 1-month-old infant and if the interests of children are different when they are placed in care at birth.

Douglas J. Besharov, of the American Enterprise Institute, has highlighted the need for significant child welfare reform in order to expedite the adoption of young, drug-involved children.[25] [See "The Children of Crack: Will We Protect Them?" PUBLIC WELFARE, Fall 1989.] This subject will likely increase in intensity if the number of infants continues to swell the foster care population.

Kinship care. In general, there was a strong consensus about kinship care among administrators:

- 84.4 percent believed that kinship caregivers should not be excluded from the child welfare services system;
- 77.3 percent believed that relative foster parents should receive the same services as nonkin foster parents;
- 75.1 percent agreed that payments for kin should be the same as for nonkin caregivers;
- 73.4 percent agreed that standards for kin should be the same as for nonkin foster parents;
- 80.4 percent believed that responsibilities for kin should be the same as for nonkin foster parents.

Illustrating this support, one administrator commented, "Kinship caregivers should be the first priority of placement for youngsters if that is necessary. Child welfare systems should make every effort to offer
kinship homes the opportunity to care for other family members. They should be supported economically if needed and supported for their values and family system."

Still, despite this support, 19.3 percent of administrators indicated that kin foster parents should receive lower payments than conventional foster parents. A small percentage of administrators commented that the financial needs of kin caregivers should determine their payments, and 23.2 percent said that kin foster parents should be held to lower standards than conventional foster parents: "Often kin may not have up-to-code homes or the training of nonkin; but they often are able to keep the child in the family, and they provide more stability."

Permanency planning. Sixty-nine percent of administrators noted that permanency planning time limits should not be changed for drug-abusing families. The other one-third of the respondents were almost evenly divided in their views about whether time limits should be shortened in these circumstances (14 percent) or lengthened (17 percent). There was a statistically significant gender difference in responses to this question. Female administrators were more likely to "strongly agree" to shortening the permanency planning time for drug-abusing families--30.4 percent, compared with 23.7 percent of male administrators.

For most administrators, the age of the child is an important factor in placement decisions. Almost two-thirds of respondents said that age should be taken into consideration in setting permanency planning time limits. For children placed in foster care before their first birthdays, about 64 percent of administrators indicated that permanency planning time limits should be shortened.

Three quarters of administrators opposed group care placements for young children. Female administrators were more likely than male administrators to hold this aversion: About 79 percent of the female respondents, compared with 71 percent of men, "agreed" or "strongly agreed" that children under the age of 5 should not be placed in group care settings. Despite their views about group care placements for very young children, 61 percent of administrators noted that the child's behavior--not the child's age--should be the primary factor in determining placement in group care.

Adoption

Race and ethnicity have long been contentious issues in the field of adoption, and few topics in the child welfare arena rival the intensity of the long-standing debate over transracial adoption. When the National Association of Black Social Workers promulgated a policy statement against the practice of transracial adoption in 1972, it set off a debate that has grown increasingly divisive.[26] Some critics of transracial adoption note the adverse effects of such placements on the identity development of children of color and have, in some instances, regarded such placements as tantamount to "cultural genocide."[27] Proponents cite a growing body of research supporting transracial adoption and note the harm to the child if not placed and the civil rights infractions associated with denying adoptive placements on the basis of race or ethnicity.[28]

The debate has now moved to Congress, which passed the Multi-Ethnic Placement Act last year, disallowing the delay or denial of adoptive placements on the basis of race. Congress is now reconsidering the issue, weighing a far more stringent law strictly delimiting the role of race and ethnicity in foster and adoptive placement decisions.
Almost two-thirds of the administrators in this study said that race should be a strong factor in adoption placement decisions. Many qualified their responses, however, indicating circumstances in which transracial adoptions might be appropriate. For instance, "Placement with adoptive homes that are not of a particular race denies that child of their cultural inheritance, unless the adoptive family commits to living, worshiping, shopping, in a race-appropriate neighborhood."

Fewer respondents--29.3 percent--signified that race should be given only limited consideration: "I resent the necessity of placing biologically Indian children who have never been exposed to any Indian culture only with Indians; or black-white mixes only with black or mixed couples."

A small percentage of our sample --3.8 percent--believed that race should not be considered at all in making adoptive placement decisions; 2.6 percent said that race should be the determinant in adoption decisions.

There were statistically significant differences in responses to this question according to the demographic characteristics of the respondent. Men were more likely than women to give race a limited consideration in adoption decisions (37 percent of men, compared with 29 percent of women), as were administrators with fewer years' experience in child welfare (40 percent of those with 1-12 years, compared with 30 percent of those with 13-25 years or 26 years or more) and administrators in rural settings (37 percent, compared with 27 percent of those in urban or suburban settings).

Administrators working in adoption were more likely to consider race (71 percent compared with 65 percent), as were respondents of color (76 percent compared with 67 percent). When demographic factors were considered simultaneously, however, the respondent's ethnicity and whether the administrator worked in adoption was not significant. Gender, experience in child welfare, and work community remained significant factors. Respondents most likely to consider race in adoption were women with more than 12 years experience working in an urban or suburban setting.

When asked to consider the grounds for terminating parental rights in facilitating timely adoptions for children, administrators gave mixed responses. Forty percent noted that the grounds for terminating parental rights should be lessened to facilitate timely adoptions, whereas 58 percent indicated that current grounds for terminating parental rights do not need to be changed. Comments from administrators, however, almost wholly reflected their wishes to see permanency planning time frames shortened:

"The time frames need to be shortened. Two years in foster care in the life of a 3-year-old. a 10-year-old, or a 16-year-old is too long."

"Too much time is given parents who give cursory compliance to correcting the reasons for the child being in foster care. If a good, specific case plan is written and parents put forth only minimal effort, termination should be granted."

Regarding the central goal of child welfare policy, administrators were divided. About 45 percent noted that the current emphasis on maintaining family ties is correct, 30 percent said that the system should make greater efforts to keep children with family and 25 percent responded that the field should place
more emphasis on the child’s well-being and less on family ties.

Implications for Policymaking
Child welfare administrators share ideas of great congruence as well as areas of sharp division. We found something approximating a consensus regarding maintaining penalties for nonreporting of child abuse and neglect, preserving the current definitional types of child maltreatment, and sustaining the existing categories of professionals who are mandated to report abuse and neglect. Administrators disagreed, however, about the prevailing level of unsubstantiated child abuse reports; a significant minority of respondents was concerned that the rate of unsubstantiated child maltreatment reports is too high.

Some of the greatest areas of disagreement exist in the burgeoning field of family preservation and in-home services. About two-thirds of the respondents believed that in-home services should be offered voluntarily, whereas the other third dissented. Respondents were also almost evenly divided in their assessment of the optimal length of time for in-home services: About half thought services should be time limited, whereas the other half felt that services should be offered as long as necessary. Although most administrators are confident in their workers’ abilities to assess potential harm in family preservation cases, there is surprisingly little agreement about the degree to which family preservation services are effective in preventing out-of-home placements.

The most unequivocal areas of accord were found regarding kinship care. Administrators generally agreed that relative foster parents should

- be maintained within the formal child welfare system,
- receive the same services and pay as foster-family parents, and
- be held to the same standards and responsibilities as foster-family parents.

Most respondents also showed an interest in changing child welfare policy and practice to reflect the unique developmental needs of very young children. Two-thirds of administrators supported the concept of shortening permanency planning time lines, and three-quarters favored limiting the use of congregate care for very young children placed in out-of-home care.

In the area of adoption, the great majority of respondents concurred that race should be considered in placement decisions. About two-thirds thought race should be considered as a strong factor; about one-third favored ethnicity as a limited factor.

We found little agreement regarding the ease or difficulty of terminating parental rights: About half of the respondents said that terminating parental rights should be somewhat easier than it currently is; the other half said that current standards for termination procedures are appropriate.

Finally, the family- and child-focused administrators could be identified as divergent groups: About one-quarter of respondents said that children’s well-being should receive greater consideration in child welfare decision-making, whereas another third suggested that the field may need to shift somewhat more toward a family-focused system.
Many of these issues have currency in state and federal public debates. Offering testimony before the House Committee on Economic and Educational Opportunities regarding child welfare block grants, HHS Secretary Donna Shalala recently said, "There is unanimous agreement that the system for serving abused and neglected children and their families is seriously overburdened and unable to respond adequately to the needs of children today.\[29\]

Indeed, there appears to be great unanimity between child welfare professionals and public policymakers that the current system is plagued by numerous problems. How these problems are resolved, however, is a matter of considerable discussion. As policymakers consider child welfare reform, it would be appropriate to act in accord with the country's child welfare experts. For example, recent efforts to minimize the role that race and ethnicity play in adoption run counter to the views of over two-thirds of administrators, who said they believe that race should be given strong consideration in adoptive placement decisions.

Further, although the Family Preservation and Support Services Program was enacted in 1993, this study suggests that we have not yet reached unanimity about the effectiveness of family preservation services or the manner in which these services should be implemented. This is not to suggest that federal assistance for family preservation and support are not welcome at the state and local levels, but rather that research and practice have not yet provided sufficient information for administrators and policymakers to have developed a common cultural belief about the optimal form, nature, and substance of these programs.

In the area of kinship care, many states are considering possible system reforms, due in part to concerns over cost containment.\[30\] Child welfare administrators are of almost one mind in their attitudes toward kinship care. Most see relative foster parents in very much the same light as traditional foster-family parents and believe that our systems should reflect these similarities more than their differences. Policymakers concerned about reforming kinship care should take into account administrators' views and should consider realigning kinship programs so that they better match the current standards, requirements, and pay in foster family care.

Finally, most states have not designed policies that take into account the developmental needs of children. Evidence from this study suggests that it might be appropriate to develop age-sensitive policies at the state level while simultaneously testing their effectiveness and suitability.

Child welfare is a vital and dynamic area of work. Administrators responding to this survey raised their own concerns about future child welfare issues, such as

- welfare reform and its impact on the child welfare system;
- the lack of housing and other social support services, driving families to child welfare;
- "the increasing focus on outcomes rather than process accountability"; and
- "the duality of being a quasi-authoritative agency and a supportive social service agency with no public consensus on the most appropriate role for the agency."
These issues and others that are likely to arise in the future will continue to be debated as we develop a more effective child welfare services system. Child welfare work is intensely difficult and will always be accompanied by controversy. When child welfare administrators agree, that consensus should be thoughtfully regarded. Policymakers must respond to the perceived views of the general public; yet where issues are complex, they can also learn much from the practice wisdom in the field. Efforts to align future public policy in child welfare with the knowledge and experience of professionals in the field will provide a significant contribution to the children and families served by the child welfare system.

**Characteristics of Survey Respondents**

**Gender**

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<tr>
<td>Female</td>
<td>60%</td>
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**Ethnicity**

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<td>Caucasian</td>
<td>90%</td>
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<tr>
<td>African American</td>
<td>6%</td>
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<td>Hispanic</td>
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<td>Asian American</td>
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<td>Other</td>
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**Age**

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<td>Over 55</td>
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<td>40-55</td>
<td>70%</td>
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<td>24-39</td>
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Range 24-69 years

Average 45 years

**Experience in the field**

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<td>26 years or more</td>
<td>17%</td>
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<tr>
<td>13-25 years</td>
<td>50%</td>
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Less than 13 years 24%

Respondents were well experienced, with a combined total of 19,255 years in the field.

Education

BA or BS 52%

MA, MS, MSW, or PhD 46%

No college degree 2%

Location

Rural 61%

Urban, suburban 39%

We were surprised by the number of responses from rural areas but have no explanation for the high rural response rate.

South 38%

Midwest 38%

West 13%

Northeast 11%

Areas of specialization

Child abuse and neglect 74%

Out-of-home services 59%

In-home services 54%

Adoption 35%

Other services 4%
Percentages have been rounded.

NOTES AND REFERENCES

BERRICK AND LAWRENCE-KARSKI

Emerging Issues

This study was conducted in close collaboration with Richard P. Barth and Neil Gilbert, principal investigators of the Child Welfare Research Center, University of California, Berkeley.


11. Seth C. Kalichman and Cheryl L. Brosig, "Practicing Psychologists' Interpretations of and


16. Only results of chi-square tests of significance of $p \leq .05$ are included in our findings.


21. Richard P. Barth et al., From Child Abuse to Permanency Planning: Child Welfare Services, Pathways, and Placements (Hawthorne, N.Y.: Aldine...
• 22. Robert M. Goerge et al., A Report from the Multistate Foster Care Data Archive (Chicago: Chapin Hall Center for Children, 1994).


• 29. Donna Shalala in a letter to Rep. Bill Goodling (R-Pa.), chair of the House Committee on Economic and Educational Opportunities, including her testimony before the committee, March 9, 1995.

• 30. Testa, "Kinship Care in Illinois."

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