Integrating Child Welfare Values and Practice

Supervisor/Manager Core Module 1
Casework Supervision
Pre-Training Reading


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Child Welfare Values Today

Today, important elements of our societies’ values regarding the welfare of children are articulated in the professional values of the child welfare field within the social work profession. The child welfare field has applied fundamental social work values to the provision of child welfare services, thereby deriving the following general value:

All children have an absolute right to a safe, permanent, stable home, which provides basic levels of nurturance and care, and is free from abuse, neglect, and exploitation.

This general child welfare value is the overriding moral end targeted by all aspects of the child welfare field of practice. It is a derivational incorporation of all four of the fundamental values of social work. For children, freedom includes the possibility to grow and develop free from harm and exploitation. For children, justice includes access to basic care and nurturance. Children do not ask to be born, and this is their birthright. These rights exist because children, like adults, are human beings with intrinsic and irreducible worth. And finally, if we have any unselfish oblation to others, it is especially so for children. We cause them to be, they are dependent upon us, they are fragile, and they are without power and influence.
To achieve the ends set forth by this general child welfare value, the child welfare field has developed several norms to guide professional activity. The overriding prescription for child welfare professionals is to *always act in the child's best interests*. This general norm helps the field to stay focused on its primary responsibility - children. It is the most important professional norm of the child welfare field. But it does not always provide applied criteria for the identification and differentiation of policies and interventions. More specific norms for sanctioning activities in the best interests of children are required. Some of these more specific norms of child welfare practice are:

- **The child welfare system must protect children.**

  The only justification for the child welfare field's nonvoluntary involvement with a child and family is that the child is at risk of abuse or neglect. All child welfare protective activities and interventions must be toward the goal of protecting the child from harm.

- **The child welfare field must provide family-centered services.**

  The family unit is the central focus of child welfare practice. It is always in a child's best interests to remain with his or her own family, if the family can be helped to provide an environment that provides basic care and nurturance, and is safe from abuse and neglect. Child welfare services should enhance and promote the healthy development of families, and empower them to provide safe and nurturing care to their children. Out-of-home placement should be avoided, unless it is the only way to protect the child. When children must be placed out of the home temporarily, planning and services to promote reunification should begin as soon as the children are removed.
- **Child welfare services must promote permanence for all children.**

  Permanency planning is, simply, a comprehensive and ongoing case planning process directed toward achieving the goal of permanence for children. Our adherence to principles of permanency planning reflects a fundamental child welfare value regarding the right of children to grow and develop in permanent, stable family environments. Case planning is the step-by-step planning and problem-solving technology used by social workers to bring about desired ends. The term “permanency planning” thus reminds us that case planning activities should always be directed toward assuring that the children we serve have permanent families who can provide them with nurturance and protection.

- **Child welfare services must be culturally competent.**

  Cultural competence is the capacity to relate with persons from diverse cultures in a sensitive, respectful, and productive way. Cultural competence incorporates a complex and interrelated array of cognitive and psychological traits and behaviors. And, since it is virtually impossible for anyone to fully understand all the characteristics, nuances, and traits of all the world’s cultures, achieving cultural competence requires a lifelong process of learning and change. While child welfare workers will never learn all aspects of the cultures of the families we serve, they must become sensitive, respectful, and adaptive in their cross-cultural communications and interactions.

- **Children who need out-of-home placement should always be placed in the least restrictive, most home-like environment, as close to their own home as possible.**
A properly chosen placement will meet children's physical, emotional and social needs, will strengthen and preserve children's relationships with their families, and will minimize separation trauma. To the degree possible, children should be placed with members of their own extended families, or in their home communities to maintain continuity, preserve important relationships, and support their cultural identity.

These are examples of the norms, or instrumental values, of the child welfare field. They are all valued means, instrumental to achieving safe, permanent, stable homes for children which provide basic levels of nurturance and care, and which are free from abuse, neglect, and exploitation.

**Integrating Child Welfare Values and Practice**

Values do not always appear complementary. Moral and practice dilemmas can result from apparent values conflicts. For example, our culture places a high value on both individuality and cooperation, practically guaranteeing conflict. Our society also highly values both creativity and conformity. Again, the potential for conflicting values and norms is virtually guaranteed.

Many social workers become concerned about potential moral dilemmas in child welfare practice. For example, in family-centered services, who is our client? Is there a conflict between parental rights and children's rights? And how can we plan for permanence, be family-centered, and still place children when necessary?

Following, we have identified some apparent practice dilemmas, and have attempted to show how these dilemmas fail to materialize, if careful thought is given to their underlying values and their operationalization into practice.
Family-Centered Services Vs. Child Protection - Is There a Conflict?

The recent emphasis on family-centered services has surfaced some confusion regarding the relationship between children’s rights and parents' rights. We often hear derisive comments about extreme philosophical positions supporting either parents' rights or children's rights, as if these were on a continuum, with children's rights at one end and parents' rights at the other, and as if we should place an "X" on the spot that best describes our leanings. The "children's rights" end of this hypothetical continuum is often construed as synonymous with child protective services. The "parents' rights" end of the continuum is often construed as synonymous with family preservation. In fact, this continuum model of parents' rights versus children's rights, and family-centered services versus child protective services, is confusing and inaccurate. The relationship between parents' rights and children's rights cannot be described as the two ends of an exclusionary continuum. They are, in fact, most often compatible. Family-centered services is not the opposite of child protective services. In reality, when children can be protected in their own homes, family-centered services is the best means of achieving child protection.

Rights and Responsibilities

Many ethics philosophies incorporate a conceptualization of human rights. Among these various ethical paradigms the scope of rights may vary, and their moral validity may emanate from a variety of sources; however, they are always divided into two types of rights: absolute and contingent. Absolute rights convey upon their beneficiary privileges that are unconditional. Absolute rights do not have to be earned, and they cannot be taken away. Contingent rights, however, are conditional. They must be earned. Contingent rights may be dependent upon the individual meeting certain responsibilities, and they may disappear if those responsibilities or conditions are not met. Children’s
rights are an example of absolute rights. Parents' rights are an example of contingent rights.

**Children's Rights**

Children's rights are absolute. By the fact of being born, children have an absolute right to certain levels of care and support, and to an environment free from abuse. These rights have no contingencies. They should not depend upon children's economic circumstances, the religion of their parents, their genetic inheritance or its phenotypic expression, their culture or race, or even the behavior of their parents.

**Parents' Rights**

The depth and breadth of parents' rights is considerable. Our society has clearly and correctly determined that, in the vast majority of circumstances, parents should have the authority and responsibility to make decisions for their families and children. Parents are the legitimate source of most major decisions regarding their children's physical, social, emotional, and psychological development and well-being. Parents' rights are, however, not absolute rights. They are contingent upon parents meeting their responsibility to provide their children with minimum levels of nurturance and care, and a safe environment free from abuse or exploitation.

**Child Welfare Services**

Our society has evolved a clear position regarding the state's interest and moral obligation to assure the absolute rights of children to certain levels of care and nurturance, and to a safe environment. The legal concept of “parens patriae” conveys to the state the legal authority and moral responsibility to assure that children are not neglected or abused by their caregivers. In exercising this authority and responsibility, public child welfare agencies, as agents of the state, can fulfill not only their obligation to protect the absolute rights of
children, but they also can facilitate parents in meeting their responsibilities to nurture and protect their children, thus helping parents to meet the contingencies of their parental rights. This combination of protecting children and empowering families should be the foundation of family-centered practice. When parents meet their contingent parental responsibilities, sometimes with empowering and supportive family services, then parents' rights and children's rights become integrated and interfused ends. Family-centered practice is the recognition of this potential compatibility.

**Family-Centered Child Protective Services**

The guiding principle of child protective services is to always act in the best interests of the child. If we accept that it is always in the best interests of children to remain with their own family, when that environment is, or can, with reasonable efforts, become an abuse-free and nurturing environment, then there is no philosophical conflict between family-centered services and child protective services. Family-centered services should not replace child protective services, but rather should complement them. Family-centered services, when successful, protect children from abuse and neglect, and also protect children from the trauma of unnecessary separation and placement. Family-centered child protective services best describes a family-centered approach to our child protection responsibilities.

Family-centered child protective services will always:

1. Be in the best interest of the child.
2. Advocate for the **absolute** rights of children to an abuse-free and nurturing family environment.
3. Advocate for parental rights contingent **only upon** the protection of their children.
4. Recognize that it is always in the best interest of children to remain with their own family when that environment is, or can, with reasonable efforts, become an abuse-free, nurturing environment.

5. Recognize that trauma to children can result from both abuse and neglect, and, from separation and placement.

6. Recognize our obligation to provide comprehensive family-centered services to strengthen families, when it is in the best interests of children.

7. Place children out-of-home only when it is necessary for their protection.

8. Make comprehensive efforts to reunite families when placement is necessary, and families can be preserved.

Child protective services have been the responsibility of child welfare social workers in the U.S. and Canada for over a century. Guided by the philosophical principle of always acting "in the best interests of the child," the field of child welfare has responsibility for protecting children from abuse and neglect. In the past, some social workers and agencies have been too quick to remove children from their homes because it was thought to be "in the best interests of the child." While child welfare professionals were aware of the risks involved when children remained in maltreating families, they were often less clear regarding the traumatic effects of separating children from their families and placing them out-of-home. Recently, as research and experience document both the traumatic effects of separation and placement, and the success of efforts to strengthen and preserve many families, there has been a move toward using comprehensive family-centered services to protect children in their own homes.

The recent focus on family-centered services represents an important reemphasis of casework methods, and a recommitment to the fundamental
importance of family integrity to our society's health. This focus is long overdue. Unfortunately, there has also been dangerous rhetoric de-emphasizing our essential responsibility to protect children. Family-centered child protective services must be clearly understood, and clearly communicated, as a means to protect children, not an abdication of our responsibility to do so. And, while family-centered services can help a majority of families provide care and protection for their children, some children must be placed out of their homes to assure their protection.

Integrating Family-Centered Services and Child Placement

As we indicated earlier, permanency planning is a comprehensive case planning process directed toward achieving the goal of permanence for children. Principles of permanency planning reflect fundamental child welfare values regarding the rights of children to grow and develop in permanent, stable family environments. The rationale for permanency planning is derived from an understanding of the developmental needs of children, and the traumatic effects of separation and placement on children and their families. When children are separated from their families for extended periods of time, they experience multiple psychological losses and threats, which can produce emotional and developmental trauma. When children are removed from their families, their most significant emotional attachments are disrupted or severed. The absence of stability, continuity, or certainty in their lives creates constant anxiety about an equivocal future. They are often emotionally overwhelmed, and they lose the ability to participate in, much less to master, normal developmental activities. Delays in cognitive, social, and emotional development are common outcomes for children who have experienced traumatic separation. Finally, children in lengthy placements will often experience the natural process of grieving and detachment from their families. This may prevent them from ever being fully reintegrated in their families.
All children have a need and a right to grow in safe, secure, and permanent families, with parent(s) and other family members whom they can love, trust, and depend upon. Because of the traumatic effects of separation, children should live with their families of origin, whenever possible. The goal of family-centered child welfare services is to maintain permanence for children within their own homes by strengthening and empowering their families to care for them. This can prevent the need for placement, or permit timely reunification, while simultaneously removing the risk of future maltreatment.

If this is not possible, the options for permanent placement are, in the following order of preference: 1) an adoptive home with relatives, or with other persons whom the child knows well and to whom the child is emotionally attached, including his or her foster caregivers; 2) legal guardianship with relatives; 3) a home with an adoptive family approved by a child-placing agency; or 4) a long-term family placement with an unrelated family, with legal validation of the permanence of the relationship, such as legal guardianship.

Long-term foster care cannot be considered a permanent home under most circumstances. However, there are instances when legal barriers or other unusual circumstances preclude a formal, permanent placement such as adoption or guardianship. In such situations, if the foster home placement is stable over time, if the family is psychologically committed to the child, if the child and the family identify the child as a permanent part of the family, and if the intent of a permanent (i.e. lifetime) relationship exists, a long-term foster home placement might be considered a legitimate permanent home for a child. However, we should not move too quickly to accept long-term foster care as a permanent placement option. Intense and creative efforts by child welfare professionals to recruit, prepare, and support families for children previously...
considered "hard to place" and even "unadoptable" have resulted in many successful and lasting adoptive placements.

In order for child welfare agencies to assure that permanence, continuity, and stability are attained for all children in agency care, a hierarchy of services must be offered by the agency. These services begin at the point of intake and continue throughout the entire service delivery process.

**Intake**

Placement is typically viewed as the "back end" of child welfare services, and as a result, many intake workers do not recognize the extent of their responsibility for preventing placement. By conducting a proper risk assessment, and by arranging immediate and intensive supportive family services to mitigate risk factors, intake workers can set the stage for maintaining many children safely in their own homes. Removal and placement of children in substitute care, even if intended for only short periods of time, should not be considered unless the children cannot be protected from maltreatment while in their own home.

**Family-Centered In-Home Services**

To prevent placement, child welfare agencies must be able to provide immediate, intensive, in-home supportive services to families on an ongoing basis. Such services can often greatly reduce the risk of imminent abuse or neglect, can improve the quality of child care in the home, and can strengthen the family's ability to provide such care on its own.

The family service caseworker’s first task is to work with a family to complete a comprehensive assessment. The family assessment identifies the personal, social, economic, and environmental factors that contribute to risk of maltreatment, and delineates family strengths and resources that could
mitigate risk. A case plan should be developed that outlines activities and services that eliminate the contributing factors to maltreatment, as well as build family strengths.

A well-developed family support program should include such services as linking families to naturally-occurring support systems; education and training in parenting and child care skills; protective day care; homemaker and home management services; medical care; budgeting and income management; individual and family counseling; and referral to community providers for other supportive and treatment services, including mental health, mental retardation, and substance abuse services.

Child welfare agencies can often reduce the number of children in placement by "front loading" the service system. This can be accomplished by committing a large percentage of funds, staff, and other resources to in-home services, and by strengthening programs designed to prevent the removal of children from their families. The child welfare agency should take the lead in developing and organizing an integrated network of community-based services and resources. Agency caseworkers can serve in a case management capacity by referring families to the most relevant service providers, and by coordinating the services provided by other community resources. A team of service providers, including the child welfare caseworker, can also work directly with families in their own homes. Organizing community agencies and neighborhood resources into a collaborative team to help families at risk is one of the most effective strategies to prevent placement of children.

**Placement Services**

In situations where children are endangered, and intensive services to their families cannot assure their protection at home, placement in substitute care
is often necessary. Several variables should be considered when choosing a placement that will promote permanence and reduce separation trauma.

Abrupt separation from their families and placement with strangers can often produce psychological crisis for children, regardless of supportive strategies. When placement is necessary, children should be placed with extended family members, or with other persons whom the child knows, whenever possible. This will greatly reduce the risk of crisis.

A child should also be placed as close to home as possible. Placement within the child's home community allows the child to maintain important interpersonal attachments, and to continue to participate in familiar activities in the child's own neighborhood, school, or church. This is a direct contradiction to a common, but inappropriate, child welfare practice of moving children to new communities so their families won't learn of their whereabouts, and therefore, won't be able to "sabotage" or otherwise "interfere with" the placement. While appearing to promote placement stability and reduce stress for children, this practice actually exacerbates separation trauma, and is clearly in neither the child's nor the family's best interests.

Any placement environment should be culturally as similar as possible to the child's own home. This prevents the added stress of "culture shock," and helps to retain continuity for the child. It also helps the child preserve a positive sense of ethnic, cultural, or racial identity, all of which are important components of self-esteem.

Children should always be placed in the most home-like, least restrictive setting possible. Substitute care placements listed in order from least to most restrictive are: 1) a relative's home; 2) a family foster home; 3) a family-operated group home; 4) a community-based group home, staffed by unrelated
or changing caregivers; 5) a structured residential treatment center; and 6) other child care institutions. The agency should never choose a more restrictive placement than is necessary to meet a child's developmental and treatment needs. Many children are currently placed in overly-restrictive settings because of the child welfare system's failure to develop and maintain a continuum of appropriate family and community-based foster, group, and treatment homes. (Refer to related discussion in Section IX-A, "The Components of an Effective Foster Care System.")

While in placement, the child should have regular and frequent visits with family members, and with other relatives and friends when appropriate. Regular visitation is critical to maintaining the child's emotional health during substitute care placement, and is also necessary to support reunification.

Finally, a plan to reunite the child with his or her family should be implemented immediately after placement. Reunification activities should be conducted within a specified and limited time frame, with a maximum of six to 12 months in a temporary home.

**Permanency Planning When a Child Cannot Go Home**

When it is determined that a child cannot go home, the agency should quickly arrange a permanent alternative home. This placement should be legally formalized through adoption or guardianship. Potential placement resources include extended family members, families who have cared for the child (including current and previous foster families), and families approved by a licensed child-placing agency to adopt children.

Adoption should proceed quickly. The agency should systematize all legal and court processes to assure timely filing and receipt of permanent custody orders. The search for the most appropriate family for the child should be
conducted prior to receipt of court custody. This permits placement into an adoptive family shortly after permanent custody is received. “Risk placements,” wherein children are placed in their intended adoptive homes as foster children prior to their becoming legally free for adoption, can promote permanence by preventing the need for another move when permanent legal custody is received. If legal entanglements prevent a child from becoming free for adoption, the placement can be formalized as a long-term foster home.

Once a child has been placed in an adoptive or other permanent home, permanency planning includes providing family-centered services that strengthen, support, and maintain the permanent placement. The provision of adequate postplacement and postlegalization services is, perhaps, the single most important factor in preventing placement disruption.

It cannot be stressed enough that permanency planning is a fundamental and integral component of all child welfare services, including family-centered services and placement. It is not simply an intervention for children who have been in placement for extended periods of time. Permanency planning requires the completion of individualized family assessments, the development of clearly defined goals and objectives, the provision of relevant services to develop family strengths and promote family stability, and the provision of timely adoption services for children who cannot be returned home. Permanency planning is, therefore, the responsibility of all agency staff, particularly executives and managers. All staff must be able to create and maintain resources and environments that allow line workers to provide services which promote permanence for children. Without a total agency and community commitment to family support, true permanency planning will be difficult to achieve.
Conclusion

Moral values are strongly held, emotionally inured conclusions regarding the relative worth of specific ways of being and acting within social relationships. There are many essential and important values that have been identified as social work values. These include fundamental values of the profession, derivations of these fundamental values that reflect specific circumstances, and valued means instrumental to achieving these desired moral ends. The fundamental values of the social work profession are:

1. All human beings have an intrinsic and irreducible worth.
2. All individuals have a right to liberty. This includes self-determination and privacy.
3. All individuals have a right to justice. This includes equal opportunity.
4. All human beings have a responsibility to help others to achieve their social rights and human potentials. (This is the most definitive value of the social work profession.)

All other values of the profession are derivations of these fundamental values, or valued means of achieving these ends.

A part of the history of child welfare is the history of the evolution of social values toward children, and how those values became manifest in social and cultural norms. Within and among cultures, throughout history, there have been conflicting norms and behaviors that both sought social justice for children, and allowed their exploitation and harm. Many cultures saw children as no more than subjective extensions of their families, with no separate or specific rights. Children were treated as commodities, exploited economically, and socially used, abused, discarded, and even killed. In more recent history, societies have begun to recognize rights of children. They have begun to see
that it is both a pragmatic necessity and a moral obligation to support, care for, and protect children. Our societies have recognized the state's responsibility and authority to guarantee the rights of children and protect them from harm, and the need to support and empower families to facilitate this goal.

Public child welfare agencies have evolved as agents of the state with the authority and responsibility to provide child protection services and other family and children services. Child welfare is a field of practice within the profession of social work. Its guiding value is a derivation of the fundamental values of the social work profession. This guiding child welfare value is: All children have an absolute right to a safe, permanent, stable home which provides basic levels of nurturance and care, and is free from abuse and exploitation. Toward achievement of this valued end, the child welfare field has evolved an overriding prescriptive norm: Always act in the best interests of the child. Additional, more specific, professional norms have evolved to assure that child welfare efforts are in the best interests of children, and result in safe, permanent, and nurturing homes for children.

These include:

- Child welfare activities must always be toward the protection of children;
- The child welfare field must provide services that are family-centered;
- Child welfare services must promote permanence for children;
- Child welfare services must be culturally competent; and
- Children who need out-of-home placement should always be placed in the least restrictive, most homelike environment, as close to their own homes as possible.
Integrating child welfare values into practice requires considerable thought and skill. Apparent values dilemmas often do not materialize when the values are integrated appropriately.