PART II

Child and Adolescent Safety
Underscored by the mandate that “the safety of children is the paramount concern that must guide all child welfare services,” the passage of the Adoption and Safe Families Act (ASFA) of 1997 (P.L. 105-89) affirmed that child welfare agencies have a primary responsibility for assuring that children and youth are safe from abuse and neglect. Fostering Connections of 2008 (P.L. 110-351) supported and affirmed ASFA with additional provisions to keep children and youth safe.

**Prevention of Neglect and Abuse** The abuse and neglect of children and youth pose a grave hazard to their overall health and well-being, with both immediate and lifelong physical, psychological, and social consequences. The presence of child abuse and neglect constitutes the primary reason that most children and adolescents come to the attention of the child welfare services system in the United States. As traditionally constituted, services aimed at protecting children and youth who have been identified as abused or neglected have been of paramount importance to the field of children, youth, and family services. However, a more recent and growing movement in the U.S. is represented by strategies and programs that aim to prevent child abuse before it has the chance to occur and that thereby aim to avert the frequently damaging consequences of such maltreatment for children, their families, and the wider social fabric. We begin this section on safety with a chapter that examines what is known about the prevention of child abuse and neglect by Guterman, Berg, and Taylor. These authors provide the rationale for child abuse and neglect prevention and present the possibilities as well as the dilemmas and challenges that face the field of prevention as it advances into the twenty-first century.

**Child Protective Services (CPS)** To emphasize the importance of safety, ASFA legislation

- states explicitly that child safety is the paramount consideration in decision making regarding service provision, placement, and permanency planning for children;
- clarifies the reasonable efforts requirements related to preserving and reunifying families by reaffirming the importance of reasonable efforts, yet also identifies those dangerous circumstances in which states are not required to make such efforts to keep the child with the parents.

Furthermore, in the CFSR process, the safety variables, which are considered first, are summarized and evaluated in two areas:

**Safety 1:** Children and youth are, first and foremost, to be protected from abuse and neglect. One aspect of this variable is timeliness of initiating investigations of reports of child maltreatment; the second is the prevention of repeated maltreatment.

**Safety 2:** Children and youth are safely maintained in their own homes whenever possible and appropriate. The primary aspect of this variable is the provision of services to the family to protect children and youth in their homes and to prevent removal and risk of harm to children/youth.

Within the child welfare system the initial attention to the safety of children and youth is located with Child Protective Services programs. CPS is the core program in all child welfare agencies and, in collaboration with other community agencies and organizations, such as schools, leads the efforts to ensure child safety. More broadly, CPS refers to a highly specialized set of laws, funding mechanisms, and agencies that together constitute the government’s response to reports of child abuse and neglect. Each state’s laws provide the basis for its CPS programs; define child abuse and neglect; and specify how CPS agencies should respond to reports of child maltreatment. Caseworkers in CPS agencies are responsible to address the effects of child maltreatment, to implement service responses that will keep children and
youth safe from abuse and neglect, and to work with families to prevent the likelihood of child maltreatment in the future. In their chapter on child protection, DePanfilis and Costello trace the path of child abuse and neglect reports from the point of referral through the process of providing ongoing services to children, youth, and families involved in the child protection system. After first describing the philosophy and policy context for child protection programs and the nature and extent of child abuse and neglect in the United States, the authors address the purposes of these. Finally, they provide information on the effectiveness of CPS programs and a brief summary of CPS reforms being implemented across the United States.

Risk Assessment Aron Shlonsky and Eileen Gambrill, in their chapter on child and adolescent risk assessment, remind the reader that child welfare staff members make many decisions about child safety based on judgments. Life-changing decisions are made in a context of uncertainty. Caseworkers must distinguish between child neglect, poor parenting, and the effects of poverty, and they must do this without the aid of accurate assessment tools. One such judgment concerns risk assessment. The child welfare professional must ask herself a series of questions that will lead to a reasoned assessment of risk, among them: Will this parent abuse or reabuse his child in the near future? What is the probability that he will do so? Risk assessment requires the integration of various kinds of data (e.g., self-report, observation, agency protocol) that differ in their accuracy, complexity, and subsequent value when making key decisions. Risk assessment is subject to a host of errors, including overestimating or underestimating the true probability of risk to a child. These errors may result either in failing to protect children from harm or imposing unneeded services that increase rather than decrease risk, such as unwarranted placement of the children in foster care. Efforts to improve decision making in child welfare have typically focused on the development of risk assessment tools. Although the assessment of risk is sometimes a flawed process, steps must be taken to protect children from abuse while maximizing the decision-making freedom of parents.

Family Preservation: Both a Goal and a Form of Service When children have suffered maltreatment or lack of protection at the hands of their families, a common emotional and professional response has been to remove the children from harm’s way, separating children and their parents and/or siblings. For many years, this had been the first response, with the number of children and youth placed into alternative or foster homes growing throughout the 1970s. In their overview on family preservation, Mari-anné Berry and Sara McLean remind readers that family preservation is a widely used term in services to children and families, and it represents both a service goal (preserving the connection between children and their parents and extended family) and also a specific form of services, often called Intensive Family Preservation Services, or IFPS. The distinction between the goal of family preservation and the specific means by which to achieve this goal is an important one; agencies and practitioners can agree on the goal, yet employ different methods by which to achieve the preservation of family relationships.

Family preservation services, notes Berry, should not be confused with family support services, but often are. Family support programs (addressed in the well-being section of this chapter) are typically less intensive and more widely available to a range of families in need. Families do not have to be experiencing substantiated child maltreatment to access family support services; these services are generally available to all who seek them. Family preservation services, in contrast, are provided to families that are involved in the public child welfare system for substantiated child maltreatment. Such families are usually mandated either to
Substance Abuse  Maltreatment is rarely the only issue for families that enter into the child welfare system. Substance abuse and other addictions, serious physical and/or mental illness, domestic violence, and HIV/AIDS are often additional critical factors. Poverty is pervasive, and inadequate or unsafe housing is also a significant problem. These serious difficulties can result in extremely complex family situations that need multiple and coordinated services.

Ryan and Huang in this chapter focus specifically on parental substance abuse and substance dependence in the context of the child welfare system. These authors discuss how substance abuse is currently defined and measured in the literature, provide estimates of substance abuse in child welfare populations, and identify critical child and adolescent outcomes affected by substance abuse. This chapter concludes with a discussion of recent innovations in service options and of clinical developments in the field of parental substance abuse.

Sexual Abuse  Estimates are that about half of sexual abuse cases are intrafamilial; they involve a child's caregiver as the abuser (e.g., father or stepfather) or as being neglectful and not preventing sexual abuse (e.g., when a babysitter is the abuser and the caregiver has knowledge of the abuse). The remainder of sexual abuse cases are extrafamilial. In most communities the child welfare system is only responsible for intrafamilial cases. Extrafamilial cases are handled solely by law enforcement. However, since law enforcement also has responsibility for intrafamilial sexual abuse, child protective services and law enforcement are expected to work together on intrafamilial cases of sexual abuse. Kathleen Faller's chapter on sexual abuse addresses child sexual abuse allegations, investigations, and interventions, focusing on how the child welfare system handles these. Since child sexual abuse is also a crime and requires multiagency collaboration, attention is also given to how the criminal justice system and other systems interface with the child welfare system on sexual abuse cases.

Domestic Violence  The overlap of domestic violence with child abuse and the concern about the impact of domestic violence on the lives of children are not new concerns. Over the past twenty-five years, researchers, child advocates, battered women advocates, and policy makers have grappled with how to best keep families safe while protecting the adult and child victims of violence. Questions left unanswered surround who should be held accountable for exposure to domestic violence—the mother, the usual caregiver who is unable to protect her children, or the father, most often the abuser of the mother but frequently invisible in the child's case plan. How should child welfare systems respond to families with domestic violence? Does exposure to domestic violence indicate child maltreatment? Does the role of child welfare systems include removing children for their own protection from domestic violence and to break the cycle of violence?
In her chapter on this topic, Judy Postmus discusses the answers to these questions by reviewing the research, including studies concerning the number of children impacted by domestic violence and the consequences faced when children are exposed. She follows with a discussion of the philosophical challenges existing between the child welfare system and domestic violence service providers along with the barriers and assumptions faced when professionals attempt to address these challenges. A brief description of state and local initiatives is also presented, along with some practical guidelines for screening, assessing, and intervening with children from families with domestic violence. The chapter concludes with practice, policy, and research implications for the future of addressing children’s exposure to domestic violence.

**Practice Issues** Throughout part 2 a number of practice issues relevant to the protection of children are identified. ASFA emphasizes the importance of maintaining children and youth safely in their own homes. Among the practice activities in relation to child/youth safety is the development and implementation of a plan that ensures safety. Child/youth safety must be the first consideration during planning and implementation of services (while the child/youth remains in the home, for reunification, selection of placement resources, visiting arrangements, and/or termination of services). Another critical task aimed at ensuring the safety of the child or youth in placement is the completion of substitute caregiver criminal background checks, the review of licensing or certification files, and the assessment of the physical environment.

Since parents must demonstrate safe parenting before a child or youth may be reunified with them, parental compliance with the plan for services alone is not sufficient to justify reunification. Practitioners must assess whether sufficient changes have resulted in the problems that contributed to the child’s placement to assure that the child can safely return home.

One of the challenges of child welfare practice is the integration of family-centered practice with protective authority. An important factor in achieving this balance is the involvement of children, youth, and parents or other primary caregivers, including fathers and paternal resources, in all aspects of planning and implementation to the degree that they are able and to the extent permitted by any outstanding court orders. The use of family resources (including extended family, fictive kin, and paternal resources) should first be considered when creating a safety plan, and the use of family preservation practices should be considered when appropriate to safely maintain a child or youth in her own home. Community members—such as neighbors and groups—should also be considered as resources, while agency intervention—such as out-of-home placement—should be the last option.

It is critical that practitioners clarify what is and is not negotiable about the case plan and the family’s overall involvement with the child welfare system (for example, court orders and safety considerations). Options and alternatives should be considered with the family should reunification not appear immediately possible (e.g., voluntary surrender or parental rights, directed consent, kinship care, guardianship). In every phase of services, safety planning is a priority; safety planning is not a one-time activity that occurs and may then be forgotten.