

California Social Work Education Center

C A L S W E C

**CHILD WELFARE IN A
CALWORKS ENVIRONMENT**

By:

Laura Frame

Jill Duerr Berrick

Sophia Lee

Barbara Needell

Stephanie Cuccaro-Alamin

Richard P. Barth

Alan Brookhart

Marta Pernas

University of California, Berkeley

Child Welfare Research Center

1998

TABLE OF CONTENTS

	Page
CalSWEC Preface	iv
Acknowledgements	vi
Chapter I: Project Description	1
Chapter II: Welfare Reform in California: What Is CalWORKs?	8
Instructional Guide...9	
California's Welfare Reform: A Summary of AB 1542...9	
<i>CalWORKS Implementation...</i> 11	
<i>Eligibility...</i> 12	
<i>Time Limits...</i> 14	
<i>Work-Related Activities...</i> 15	
<i>Special Populations...</i> 16	
<i>Exemptions From Work Requirements...</i> 17	
<i>Exemptions From Lifetime Limit...</i> 19	
<i>Sanctions, Penalties, and Loss of Eligibility...</i> 20	
<i>Child Care...</i> 23	
<i>Safety Net Provisions...</i> 25	
Conclusion...26	
Questions for Discussion...26	
Chapter III: What's Different About CalWORKs?	28
Instructional Guide...29	
Income Assistance and Welfare-to-Work Program Comparisons...30	
Questions for Discussion...36	
Chapter IV: Welfare and Child Protection: The Historical Relationship	37
Instructional Guide...38	
Introduction...39	
Why an Historical Perspective?...40	
Framework for Analysis...41	
The Historical Relationship...51	
<i>Poor Law Legacy...</i> 52	
<i>Progressive Era Reforms...</i> 57	
<i>The New Deal...</i> 68	
<i>The '60s Through the '90s...</i> 78	
<i>Welfare Reform Begins a New Era...</i> 106	
Child Neglect and Poverty: The Difference...114	
The Role of Substance Abuse...119	

Summary and Conclusion...	130
Questions for Discussion...	137

Chapter V: Overlapping Welfare and Child Welfare Populations: A Look at the Data 138

Instructional Guide...	139
Part I: From Welfare to Child Welfare...	140
<i>Characteristics of Child AFDC Entries (1988-1995)...</i>	140
<i>Transitions from AFDC to Child Protection/Child Welfare Services...</i>	145
<i>Potential Implications of CalWORKS Implementation for Child Welfare...</i>	159
Part II: Births to Teenage Girls in the Foster Care System...	160
<i>Potential Implications of CalWORKS Implementation for Child Welfare...</i>	161
Part III: Kinship Care and AFDC...	163
<i>Potential Implications of CalWORKs Implementation for Child Welfare...</i>	172
Questions for Discussion...	173

Chapter VI: Voices From the Field: Child Welfare Staff Prepare for CalWORKs 175

Instructional Guide...	176
Issues Identified in Interviews With Child Welfare Administrators...	177
Issues Identified in Focus Groups With Child Welfare Workers...	179
<i>Differences Between Poverty and Neglect...</i>	180
<i>Pre-TANF Child Welfare Practice With Poor Families...</i>	186
<i>CalWORKS Training...</i>	187
<i>Interactions Between Child Welfare and Income Maintenance...</i>	188
<i>CalWORKs' Impact on Child Welfare...</i>	189
Planning for the Future...	194
Conclusion...	196

Chapter VII: Implications of Welfare Reform for Child Protection and Child Welfare Practice 198

Instructional Guide...	199
Practice Tips: How CalWORKs Requirements May Impact Child Welfare Clients...	200
<i>Intake...</i>	200
<i>Investigation...</i>	203
<i>Placement...</i>	208
<i>Dependency Investigation/Court Unit...</i>	211
<i>Family Maintenance...</i>	215
<i>Family Reunification...</i>	217
<i>Long-Term Foster Care...</i>	221
<i>Guardianship and Adoption...</i>	222

Chapter VIII: Administrative Issues Facing Child Welfare Vis-à-vis Welfare Reform	226
Instructional Guide...	227
Introduction...	228
Section I: Coordinating Child Welfare and CalWORKs Service Delivery...	229
<i>Cross-Training for CalWORKs and Child Welfare...</i>	229
<i>Developing a Coordinated Case Management Model...</i>	234
<i>Confidentiality Concerns...</i>	241
Section II: Rethinking Child Welfare Services Funding...	244
<i>The Relative Benefits of TANF and Title IV-E Funding...</i>	244
<i>Innovative Use of TANF Funds by Child Welfare Services...</i>	261
Section III: Policy Considerations for Child Welfare Involved CalWORKs	
Recipients...	266
<i>Special Exemption Status...</i>	266
<i>Special Welfare-to-Work Activities...</i>	274
Questions for Discussion...	276
References	278
Appendixes	291
Appendix A: Methods and Tables for Chapter V...	292
Appendix B: List of Key Informants...	299
Appendix C: List of Contacts for Chapter VIII...	302
Appendix D: Overheads...	303

CalSWEC PREFACE

The California Social Work Education Center (CalSWEC) is the nation's largest state coalition of social work educators and practitioners. It is a consortium of the state's 20 accredited schools of social work, the 58 county departments of social services and mental health, the California Department of Social Services, and the California Chapter of the National Association of Social Workers.

The primary purpose of CalSWEC is an educational one. Our central task is to provide specialized education and training for social workers who practice in the field of public child welfare. Our stated mission, in part, is "to facilitate the integration of education and practice." But this is not our ultimate goal. Our ultimate goal is to improve the lives of children and families who are the users and the purpose of the child welfare system. By educating others and ourselves, we intend a positive result for children: safety, a permanent home, and the opportunity to fulfill their developmental promise.

To achieve this challenging goal, the education and practice-related activities of CalSWEC are varied: recruitment of a diverse group of social workers, defining a continuum of education and training, engaging in research and evaluation of best practices, advocating for responsive social policy, and exploring other avenues to accomplish the CalSWEC mission. Education is a process, and necessarily an ongoing one involving interaction with a changing world. One who hopes to practice successfully in any field does not become "educated" and then cease to observe and learn.

To foster continuing learning and evidence-based practice within the child welfare field, CalSWEC funds a series of curriculum sections that employ varied

research methods to advance the knowledge of best practices in child welfare. These sections, on varied child welfare topics, are intended to enhance curriculum for Title IV-E graduate social work education programs and for continuing education of child welfare agency staff. To increase distribution and learning throughout the state, curriculum sections are made available through the CalSWEC Child Welfare Resource Library to all participating school and collaborating agencies.

The section that follows has been commissioned with your learning in mind. We at CalSWEC hope it serves you well.

ACKNOWLEDGEMENTS

This curriculum is the result of a collaborative effort on behalf of California's children and families. Numerous child welfare workers and administrators offered their precious time and insight in focus groups and interviews, giving us an invaluable window into the realities of clients' lives, and the complexities of child welfare work. This curriculum could not have been created without their thoughtful assistance. We would like to thank all of the individuals at the California Department of Social Services and a number of private agencies who helped us decipher the intricacies of CalWORKs policy. Within our own organization, constant conversations about welfare reform illuminated areas of concern, potential implications, questions, and conundrums. We are thankful for the opportunity to work with such a talented group.

The number of essential informants for this project is vast, and a list is included in Appendix B. We greatly appreciate their input. We also thank Laura Amsden, Michael Armijo, Esther Kang, Susan Katzenellenbogen, Seon Lee, Dana Lundblad, and Meredith Minkler for their support on the project.

While many aspects of the current welfare reform have a familiar ring, the Personal Responsibility and Work Opportunity Reconciliation Act takes California and the rest of the United States into uncharted territory. The long-range effects of welfare reform on the child welfare system and families it serves remain to be seen. The materials contained herein are merely a beginning step toward understanding the necessary changes in policy and practice. The data and recommendations provided in

this curriculum are current as of August, 1998, but will undoubtedly require revisions and updates over time. Any errors or omissions are the responsibility of the authors.

CHAPTER I

PROJECT DESCRIPTION

CHAPTER I

PROJECT DESCRIPTION

The California Social Work Education Center provided a grant to the Center for Social Services Research at the University of California, Berkeley, to develop an empirically based curriculum which would support the essential competencies of child welfare practice.

This curriculum is focused upon the implications of changing welfare policy in California for the practice of public child welfare services. It is divided into several sections, each offering information related to welfare policy, child welfare practice, and the impact of welfare reform on child welfare clients who are also involved with the public welfare system. It is designed as a teaching tool for two primary audiences: students in graduate schools of social work and employees of public child welfare agencies. These audiences may have different needs, hence, the materials are designed to be sufficiently flexible for both purposes.

It is important to acknowledge that while these materials may be useful for the training of CalWORKs (case management staff and others), the curriculum necessarily took public child welfare (not CalWORKs) as its central vantage point. Thus, it would not act as a complete reference guide for those intending to work within the CalWORKs system, providing case management, eligibility, or administrative services. It may, however, provide a useful adjunct to other training materials for those in the CalWORKs system. Similarly, some of the materials contained here are very specific to California's system of public welfare and child protection; however, it is likely that many of the

sections could be useful to instructors in other states. Depending upon the audience, the training time available, and the needs of instructors and students, the curriculum can be used in whole or in part. Materials may be reproduced by the instructor for students. Teaching tools are provided in the form of slides for Powerpoint presentations.

The curriculum was developed by a number of people associated with the Center for Social Services Research: Laura Amsden, Michael Armijo, Richard P. Barth, Jill Duerr Berrick, Alan Brookhart, Stephanie Cuccaro-Alamin, Laura Frame, Esther Kang, Susan Katzenellenbogen, Seon Lee, Sophia Lee, Dana Lundblad, Meredith Minkler, Barbara Needell, and Marta Pernas.

The project was made possible through the help of child welfare workers and managers in many California counties, analysts at the California Department of Social Services, and administrators in several other states. A list of these “key informants” is contained in Appendix B.

Child Welfare in a CalWORKs Environment is based upon research in several domains. First, interviews were conducted with child welfare administrators in several counties representing a variety of demographic and program characteristics to identify further questions, practice issues, and policy developments. Second, administrative data were analyzed for all children who received welfare and were in foster care in California, for a sample of all those who were involved with public child welfare services in 10 counties, and for older relative caregivers. Third, data were collected through focus groups with public child welfare workers in the counties listed above, and additional interviews were conducted with administrators across the state and country to

identify TANF-related program innovations. Finally, an extensive literature review was conducted on materials currently available in the area of child protection, family welfare, and the new welfare reform.

The curriculum contains the following chapters, each of which is designed to stand alone or to be used in conjunction with other chapters. Each chapter is preceded by an *Instructional Guide*—a set of recommendations on the uses of the chapter for different audiences, and followed by a suggested list of *Questions for Discussion*.

Welfare Reform in California: What is CalWORKs? This summary of welfare reform in California outlines the essential ingredients of the new law, highlighting issues of special interest to child welfare and examples of innovative policy design in California counties. Examples of specially identified issues include: welfare reform-related changes affecting special populations (such as substance abusing clients, victims of domestic violence, and parents with mental illness); child care eligibility for CalWORKs recipients involved with the child welfare system; and a sample calculation of monthly income for a family of three under CalWORKs, compared to earning minimum wage for a varied number of weekly hours.

What's Different About CalWORKs? To supplement the above description of California's welfare reform plan, this side-by-side table details the differences between current and past welfare policy in terms of major programmatic areas (e.g., program objectives, eligibility, provisions for teen parents, issues for immigrants, and grant levels/income disregards). Thus it can be used as a summary of the substantive differences between the AFDC/GAIN approach to the new CalWORKs program.

Welfare and Child Protection: The Historical Relationship. This paper traces the historical relationship between the social policies and institutions designed to address child poverty and those to protect children from maltreatment, from the days of the Poor Laws, through the present. In this context it examines the related problems of child poverty, child abuse, and child neglect in light of the longstanding entanglement between the welfare and child protection systems. The paper concludes with a discussion of the potential impact of welfare reform upon family welfare and the child welfare system, given the historical difficulties faced in differentiating between economic and relational domains of child welfare.

Overlapping Welfare and Child Protection Populations: A Look at the Data. Using data from a variety of linked administrative databases that are part of the California Children's Services Archive, this chapter explores the overlap between welfare recipient and child welfare populations from several angles. Part I examines the characteristics of children who entered the AFDC program and their subsequent child welfare experiences including varying service levels and foster placement. It also examines the AFDC eligibility of children in the foster care system, along with the differences in foster care case outcomes depending upon previous AFDC status of the child, and a special examination of outcomes for teen mothers in foster care. Part II presents information on kinship caregivers and the intersection with AFDC.

This chapter is designed to help students, child welfare workers, and administrators (a) gain insight into the factors that may place certain TANF-eligible families at greater risk for child welfare involvement; (b) develop policy for informal

kinship caregivers based upon an empirical understanding of the characteristics of welfare-eligible kin caregivers, as well as the potential impact of welfare reform on this population; and (c) determine the size and characteristics of the foster care population that is AFDC-eligible.

Tables and figures on these topics are provided in the form of Powerpoint slides and include summaries of the data to stimulate discussion.

Voices From the Field: Child Welfare Staff Prepare for CalWORKs This paper reports the results of interviews and focus groups conducted with child welfare workers and administrators across several California counties. The interviews were conducted early in the welfare reform process and provide the basic initial framework for the curriculum by identifying the ways in which welfare reform is anticipated to impact the lives of child welfare clients and professionals who are part of the child welfare system. Workers discussed the complex issue of differentiating child poverty from child neglect, the ways in which these problems have been handled pre- and postwelfare reform, and the areas in which further training is needed for both child welfare and CalWORKs staff.

Implications of Welfare Reform for Child Protection and Child Welfare Practice. Presented in the form of “practice tips” for child welfare workers, this chapter discusses the impact of specific CalWORKs requirements (and options) on child welfare clients. Implications of welfare reform are identified separately for child welfare clients in each of eight domains of child welfare practice (from Intake and Emergency Response through Permanency Planning) and each domain addresses its intersection with

CalWORKs provisions, sanctions, and exemptions. Case vignettes follow most subsections and may be used for classroom discussion, and each practice tips piece is designed to stand alone as a reference document for practitioners.

Administrative Issues Facing Child Welfare Vis-a-vis Welfare Reform. As a complement to the previous chapter on child welfare practice, this chapter provides an overview of administrative issues raised by the altered interface of income assistance and child welfare, and gives examples of innovative county approaches to child welfare under the new CalWORKs program. It provides a framework for discussing and designing public policy and is recommended for social work students interested in program management, child welfare administrators, and child welfare workers as well.

CHAPTER II

WELFARE REFORM IN CALIFORNIA: WHAT IS CALWORKS?

CHAPTER II

WELFARE REFORM IN CALIFORNIA: WHAT IS CalWORKS?

INSTRUCTIONAL GUIDE

This summary of welfare reform in California outlines the essential ingredients of the new law, highlighting issues of special interest to child welfare and examples of innovative policy in California counties. This section of the curriculum is designed both as an aid for the instructor and as required reading for students. The chapter is supplemented by the next chapter (*What's Different About CalWORKs?*), which provides a side-by-side detail of the differences between current and past welfare policy. Possible questions for discussion are included at the end of the chapter.

This chapter can be used to foster the following competencies for public child welfare work: 2.4, 2.5, 2.10, 3.2, 3.5, 3.12, 3.13, 3.17, 5.1, 5.3, 5.8, 6.2, & 6.7.

CALIFORNIA'S WELFARE REFORM: A SUMMARY OF AB 1542

In 1996, Congress passed and the President signed the Personal Responsibility and Work Opportunity Reconciliation Act (P.L. 104-193), which combines the Emergency Assistance, AFDC, and JOBS block grants into a single capped entitlement to states, and places federal childcare funding into a separate block grant. The new approach to welfare funding makes numerous changes to the provision of health and social services, and increases states' discretion to revise welfare and child care program administration. The Personal Responsibility and Work Opportunity Reconciliation Act also shifts the focus of welfare from family maintenance through government-supported financial assistance to family economic self-sufficiency through

paid employment. The federal welfare reform policy known as TANF encourages employment and personal responsibility by mandating states to provide financial benefits to families on a temporary basis, having recipients participate in a work requirement while receiving aid, and providing incentives for recipients to transition off welfare. Under federal law, families will be required to: (a) work after 2 years on financial assistance; (b) adhere to particular behavioral criteria in order to continue receiving benefits, and; (c) only be eligible for aid for up to 5 years. It should be noted that states are allowed to use federal funding to exempt up to 20% of their average monthly caseloads from the 5-year time limit and can determine the guidelines they will use to excuse families from this time limit.

What is the difference between block grants and entitlements?

Under an *open-ended entitlement* program, everyone who applies and meets the eligibility criteria has a right to assistance. As a result, the county, state, and federal governments are obligated to pay as much as it costs to serve qualifying families.

Under capped entitlement **block grants**, people who meet the eligibility criteria do not have an unqualified right to assistance. The federal government gives the states a *fixed* amount each year. If more people apply than can be covered by this amount, states and counties can either absorb the cost or create waiting lists for services.

States must develop objective criteria for ensuring equitable treatment of their welfare recipients under the federal TANF program. California's new approach to welfare replaces the Greater Avenues to Independence (GAIN) program and the Aid to Families with Dependent Children (AFDC) program with the California Work Opportunities and Responsibility to Kids (CalWORKs) program. CalWORKs consists of

a cash aid component and a CalWORKs Welfare-to-Work program. While CalWORKs replaced AFDC and GAIN, the new public assistance program retains many of the eligibility standards, benefits, services, and requirements of these former programs. Despite these consistencies, however, the increased percentage of aid recipients required to participate in work activities, the wider array of support services, and new limits on aid receipt all indicate the national change in objectives from welfare to work for CalWORKs recipients.

CalWORKs Implementation

The state legislation allows county governments significant discretion in the design and delivery of CalWORKs services. The bill authorizes county public and private agencies to utilize the guidelines in developing a comprehensive delivery plan for welfare-to-work services at the local level. The counties must present plans to the Department of Social Services that delineate the range of employment and supportive services they will supply, describe collaborative efforts between agencies in providing services, specify training requirements for county workers involved in CalWORKs, describe input from the private sector and the general public in developing welfare-to-work plans, and identify performance outcome measures as well as a program budget. After the Department of Social Services issued the planning allocation letter, counties were required to submit their delivery plans within 4 months (i.e., January 10, 1998). Counties were also required to begin enrolling all new applicants for aid in the CalWORKs plan within 6 months of the issuance of the planning allocation letter (at least by March 10, 1998) or 2 months after the approval of the county plans, whichever

occurred later. Finally, counties must enroll all present recipients receiving aid by January 1, 1999.

Some options counties have:

- How broadly to interpret kin caregivers' exemption from work activities
- Whether to provide child only assistance in cash or vouchers
- Designing services for substance abusing parents

New eligibility requirements affecting children include:

- Children too young for school need proof of immunizations
- School-age children have to attend school regularly
- Willingness to establish paternity must be demonstrated

Eligibility

The CalWORKs legislation modifies the financial eligibility criteria used in the AFDC program and increases the incentive for recipients to obtain employment by permitting them to preserve a greater share of their earnings. CalWORKs does away with the \$30 and 1/3 income disregard and replaces it with a disability-based unearned and earned income disregard of \$225 plus 50% of any remaining earned income. The welfare bill also changes the asset limit rules such that recipients can now have savings of up to \$5,000 in a restricted personal account, an automobile worth up to \$4,500, and \$2,000 in liquid assets.

Note about diversion payments:

Child Welfare workers may use these payments to assist child welfare clients. While an important resource, this money can count against a family's lifetime TANF limit.

CalWORKs applicants may be offered an up-front diversion option that was not available previously. County staff must determine situations in which the lump sum cash or non-cash assistance could deter applicants from collecting welfare. Applicants may refuse the diversion assistance and choose to enter CalWORKs at their discretion. If an individual accepts the diversion option, they are eligible for Medi-Cal and Child Care assistance during the diversion period (e.g., a diversion grant valued at three times the maximum aid payment for the recipient's family size would have a diversion period of three months). However, if they then apply for CalWORKs within the diversion period the applicant is required to either refund the remaining cash assistance benefit or count the remaining diversion period towards the individual's five year lifetime limit.

Sample calculation of monthly income for a family of three:

Maximum grant for a family of three: \$611/month

Earned income at minimum wage:

\$5.75/hr for 26 hrs/wk (minimum required) = \$627.90/month

Disregard first \$225.00	Disregard 50% of remaining income	Subtract this from <i>max. grant</i> to get <i>actual grant</i>	Add to earned income for <i>total</i> <i>monthly income</i>
\$627.90	\$402.90	\$611.00	\$409.55
<u>- \$225.00</u>	<u>x .50</u>	<u>-\$201.45</u>	<u>+\$627.90</u>
\$402.90	\$201.45	\$409.55	\$1037.45

Sample incomes for a family of three under new earned income disregard rules:

Hourly wage	Hours worked/week	Monthly earned income	Adjusted grant level	Total monthly income
\$5.75	26	\$627.90	\$409.55	\$1037.45
\$7.00	26	\$764.40	\$341.30	\$1105.70
\$5.75	32	\$772.80	\$337.10	\$1109.90
\$7.00	40	\$1176.00	\$135.50	\$1311.50

Time Limits

The CalWORKs legislation specifies a maximum time period of 24 cumulative months of aid receipt for individuals receiving cash assistance at the time a county implements its CalWORKs plan. Individuals who begin participation in the CalWORKs program after implementation will be limited to 18 months of services and financial aid. Counties can extend the limit to 24 months for individuals if additional services may lead to unsubsidized employment or if employment is not currently available in the local area. If the county determines that no employment is available for a participant who reaches the 18- to 24-month time limit, the county must provide the recipient with a community service position and continued benefits until paid employment is obtainable. In addition, a participant who has received assistance and engaged in welfare-to-work services for a period of 24 cumulative months and seeks financial assistance again after at least a 1-month interruption in aid can be eligible again for assistance. However, the county will designate whether the participant will now engage in work activities or community service.

Examples of counties' plans to service families who reach the 5-year time limit:

Alpine: includes monthly home-visits, vouchers, mentoring, employment and supportive services, and oversight by CPS if deemed necessary.

San Mateo: mental health and child care services.

The state law also limits adult recipients to a 5-year lifetime term on financial assistance. The months previous to January 1, 1998 that the recipient was collecting welfare will not be counted towards the lifetime limit on CalWORKs. After the 5-year

lifetime limit is reached, the adult is removed from the assistance unit, although the children remain eligible for financial benefits, provided in the form of cash or vouchers. At county option, welfare-to-work services may be provided to participants after the 5-year lifetime limit has been reached, but the individuals must take part in community service during this period.

Work-Related Activities

Interesting work activities counties are offering:

- Child and family development classes for parents of children 6-12 months of age (Stanislaus County)
- Mentoring services (Kern County)
- Life skills classes (Los Angeles County)

CalWORKs delineates a sequence of welfare-to-work services for adult recipients during the first 18 or 24 months of participation. The first phase of participation consists of a period of up to 4 weeks of job search after an initial appraisal of the recipient's employment background. If the initial job search does not result in paid employment, the participant goes through an assessment process. The individual and the county enter into a welfare-to-work plan and the individual must complete the assigned work responsibilities or prescribed services. Work activities can include subsidized or unsubsidized public or private sector employment; paid or unpaid work experience, on-the-job employment training; education directly related to employment; and treatment services for participants with mental health, substance abuse, or domestic violence issues. The recipient must participate in work activities at least 20

hours per week beginning Jan. 1, 1998, 26 hours per week beginning July 1, 1998, and 32 hours per week by July 1, 1999.

Special Populations

CalWORKs offers special provisions for recipients with mental health, substance abuse, or domestic violence issues that impair their ability to locate or maintain employment. The county plans for CalWORKs implementation must describe the counties' intentions for the delivery of mental health, substance abuse, and domestic violence services. Funding for these services is provided by Medi-Cal, if possible, although CalWORKs dollars can also be used to fund these rehabilitative and treatment services. CalWORKs requires county welfare departments to refer clients suspected of having a mental disability to the county mental health department. The county mental health department will assess the recipient's need for services and provide needed treatment services which are included in the recipient's welfare-to-work plan. For recipients with substance abuse issues, the welfare case manager will refer the recipient for a substance abuse evaluation at a county drug and alcohol program. The welfare-to-work plan will be based on the evaluation and can include up to 6 months of substance abuse treatment services without concurrent involvement in other work activities. Counties can also consider domestic violence treatment services in the welfare-to-work plan if the services aid the participant in locating and maintaining employment. In addition, victims of domestic violence can be excused from work activities and time limits if it is determined that the violence constitutes good cause for nonparticipation. In response to concern about domestic violence among welfare

recipients, the state has convened a domestic violence taskforce that developed protocols for serving domestic violence victims. Counties were also required to include training guidelines for working with domestic violence victims in their CalWORKs plans.

Innovative plans for substance abuse treatment services:

Los Angeles: includes mental health services to older children affected by parental substance abuse.

Stanislaus: includes parenting classes and perinatal substance abuse services.

Exemptions From Work Requirements

Changes affecting special populations:

Substance-abusing parents:

- If indicated, drug and alcohol treatment can be the sole work activity for up to 6 months, then it must be supplemented with other work activities.
- To avoid sanctions, these recipients, like all CalWORKs recipients, must be employed after 18 - 24 months of receiving assistance.
- Any adult convicted of a drug-related felony after 1/1/98 is ineligible for aid.

Victims of domestic violence:

- Are exempt from work activities and time limits if violence creates good cause.
- US DHHS regulations do not penalize states who pass the 20% cap on time limit exemptions due to domestic violence exemptions.
- Counties are required to train CalWORKs staff to identify and work with domestic violence victims.
- Participation in domestic violence services can count as a work activity.

Parents with mental illnesses:

- Mental health treatment can count as work activity. However, these months count towards their 18- to 24-month and 60-month aid limit.
- Counties have the option of continuing TANF-funded mental health services to recipients who have exceeded their 18- to 24-month time limit.
- Some counties will continue to provide mental health services to parents who have reached the 60-month aid limit.

CalWORKs allows exemptions from the work activity requirements for certain groups of recipients. There are no set limits on the number of recipients who can be exempted from work activity; however, the state must enroll 30% of all families in

welfare-to-work activities by 1998. This amount increases 5% a year until it reaches 50% for the year 2002 and thereafter. In addition, 75% of two-parent families must be participating in work activities by 1997. This number rises to 90% for 1999 and thereafter. The state will face federal sanctions if it fails to meet these enrollment requirements. Exemptions from the 18- to 24-month work requirements are provided for the following individuals:

- Teen mothers under 18 enrolled in CalLearn or another teen parent program.
- Children under the age of 16 or ages 16 - 18 if they are attending school full time.
- An individual who is medically verified by a doctor as being disabled and for whom the condition is to last for more than 30 days, or a person who is of advanced age.
- A kinship care provider for a child who is a ward of the court or at risk of foster care placement and whose responsibilities impede participation in regular employment or welfare-to-work activities.
- An individual who is providing care for a disabled family member and the caretaking impedes work activities.
- A first-time exemption of 12 weeks to 12 months for a parent who is caring for a child under 6 months of age and a 12-week to 6-month exemption for subsequent infants.

Each county has to develop a protocol for defining and verifying school attendance for all school-age children in an assistance unit.

What is the protocol in your county?

- A pregnant woman whose condition prevents her from participating in the work requirements.
- Participants who the county determines to have good cause for non-participation can be temporarily excused from welfare-to-work activities.

Exemptions From Lifetime Limit

During any period of time in which an adult is exempted from welfare-to-work activity, their 18- to 24-month welfare-to-work clock halts, but their 60-month lifetime limit may continue to be counted. However, counties must exempt certain months from a recipient's lifetime limit. These include months when the recipient:

- Has a disability that is expected to last at least 30 days.
- Is of advanced age.
- Is a relative caregiver for a child who is a ward of the court or at risk for foster care placement or is caring for an ill or disabled household member. In both cases, the caregiving must impede their ability to work.

Kinship caregivers who receive a child-only grant are exempt from all work and time requirements.

- Is eligible for CalLearn.
- The cost of their cash aid is fully reimbursed by child support.

Counties may also exempt up to 20% of their caseload from the 5-year lifetime limit. It may be possible for some counties to exceed this limit as long as the state as a whole does not exceed the 20% cap on these exemptions. If more than 20% of the statewide caseload is exempted from the lifetime limit, the counties who exempted over 20% of their caseload from this limit will be responsible for the federal portion paid to those families exempted in excess of the 20%. The federal government has yet to issue regulations on how the 20% will be calculated. The following individuals are entitled to an exemption:

- Adults age 60 or older.
- Relative caregivers for children who are a ward of the court or at risk for foster care placement or adults caring for an ill or disabled household member. In both cases, the caregiving must impede the recipient's ability to work.
- Disabled adults.
- Adults determined incapable of working or completing welfare-to-work activities but who have been cooperative with program requirements.

Kinship caregivers who are part of a TANF grant may be exempt from work requirements and time-limits if they are:

- Of advanced age (60 or older for time limits)
- Disabled
- Caring for a child who is a ward of the court or at risk of foster care placement whose needs impede their ability to participate in welfare-to-work activities

Sanctions, Penalties, and Loss of Eligibility

For non-exempt CalWORKs recipients who do not fulfill their work requirements, CalWORKs imposes a compliance and sanction process. When the county recognizes that a recipient is not complying with the work requirements, the county will send the recipient a notice that describes the participant's rights and establishes an appointment so that the recipient can demonstrate good cause for their noncompliance. If the recipient responds in a timely manner to the notice and cannot establish good cause, the county and the recipient enter into a compliance plan to correct the violation. If the recipient does not respond to the notice or does but fails to meet the conditions in the compliance plan when found not to have good cause, the recipient will receive a sanction. The individual will be removed from the assistance unit. When a recipient is

sanctioned, they are no longer required to participate in welfare-to-work activities and the aid they receive for their children no longer counts toward their lifetime limit.

Parents who have been sanctioned or are otherwise ineligible for GA payments are still eligible for county health care plans.

CalWORKs also provides penalties under certain circumstances. The new policy requires that all recipients enroll their school-age children in school and that all children in the assistance unit regularly attend school. The counties will define regular attendance, establish good cause for failure to attend school, and specify when parents need to present documentation of a child's school attendance. The penalty for not meeting the school attendance requirements is a reduction in the grant equal to the parent or caregiver's portion and loss of the minor's portion of aid if the child is over 16. The California welfare bill also specifies that all new participants in the CalWORKs program show documentation of immunization for preschool children during the first 30 days of eligibility determination for Medi-Cal. Present welfare recipients must show proof within 45 days of their next eligibility determination. The penalty for not complying with the request for documentation is a reduction in the grant equal to the parent or caretaker's portion of the grant; the full grant will be reestablished after documentation is provided.

Applicants and recipients must also cooperate in establishing paternity for the children in the assistance unit. The welfare recipient must provide the name and other contact information for the absent parent, or the custodial parent must declare under penalty of perjury that she does not have any information. The penalty for

noncooperation is a decrease of 25% in the assistance grant to the family unit. County welfare departments must determine good cause for a failure to comply with paternity establishment guidelines. In the case of penalties, unlike sanctions, even though the adult has lost their portion of the grant, they continue to be required to participate in welfare-to-work activities and the months they receive the reduced grant amount count toward their 18- to 24-month and 5-year time limits.

CalWORKs imposes new prohibitions on eligibility for fleeing felons, individuals convicted of drug offenses, and fraud cases. Individuals who are fleeing from prosecution for a felony offense, conviction for a felony crime, or are disobeying their confinement or probation rules are ineligible for assistance under the TANF and General Assistance programs. Persons found guilty of a drug-related felony after January 1, 1998 are permanently barred from participation in the CalWORKs program, although their children are still entitled to financial assistance. In cases of fraud, individuals are permanently disqualified from receiving financial assistance if (a) they duplicated aid in two or more states or counties, (b) presented false documentation for nonexistent children, (c) fraudulently received benefits over \$10,000, or (d) had a felony fraud conviction for benefits over \$5,000. Recipients who acquire \$2,000 fraudulently are excluded from CalWORKs for 2 years and participants who receive \$2,000 - \$5,000 wrongfully are excluded for 5 years. CalWORKs maintains the present laws for false information or failure to provide eligibility information: recipients lose benefits for 6 months for the first offense, 1 year for the second offense, and permanently for the third violation. CalWORKs also maintains the family cap which denies benefits for additional

children born while the parent is receiving aid, although some counties provide exemptions to the family cap provision under certain circumstances.

Child Care

Federal child care funding will be placed in a separate block grant from TANF, which expands the state's ability to use child care funding flexibly in developing appropriate child care programs. The California welfare bill eventually creates a seamless program of child care services for TANF recipients and working parents in which all families with incomes that are at or below 75% of the state median income will be eligible for child care assistance. Also, counties can no longer provide direct payments to welfare recipients, but must create a single payment structure that establishes direct payments to the child care providers. Child care assistance will be available for all families who are participating in welfare-to-work activities or are in the process of leaving welfare for paid employment through a three-level child care structure.

- Stage I is funded with TANF dollars and is directed primarily at CalWORKs recipients during their first 6 months of receiving assistance or until the county determines that their assigned work activities become stable and that funds are available to provide Stage II child care services.
- In Stage II, responsibility for the child care cases are shifted to California Department of Education-contracted Alternative Payment Program Agencies and is funded with the TANF dollars that were transferred to the child care and development block grant. Recipients can receive Stage II child care funding when their work responsibilities become steady, and for up to 2 years after they transition off TANF aid.
- Stage III is divided into two pockets of funding. There is a CalWORKs set-aside within Stage III which is made available for CalWORKs recipients who leave welfare for work. The rest of Stage III, commonly called the *greater arena* is similar to the previous subsidized child care system and serves poor families who are not eligible for TANF assistance.

Child Care Eligibility for Child Welfare-Involved Clients

Child Protective Services-involved families:

- CPS has first priority for Stage III *greater arena* child care funding.

Needy relative caregivers (part of a TANF assistance unit):

- Are eligible for all three stages of child care funding (even if the child in their care is supported by Title IV-E foster care payments).

Non-needy relative caregivers (not part of a TANF assistance unit):

- Current law is silent regarding this group's Stage I eligibility. As a result, counties have the option of making them eligible (this may change in the future).
- This group of caregivers is eligible for Stage II child care funding as long as they are referred by a CalWORKs worker.
- This group is also eligible for the Stage III CalWORKs set-aside funding.

Needy nonrelative foster parents (are part of a TANF assistance unit through own children):

- Are eligible for all stages of CalWORKs child care funding for Title IV-E supported children in their care.

Non-needy nonrelative foster parents (not part of a TANF assistance unit):

- This group has no access to Stage I, II, or III CalWORKs set-aside dollars. They also do not get the CPS priority to Stage III *greater arena* dollars. Instead, they access subsidized child care the same as any other income-eligible parent.

In order to provide a variety of child care options for participants and to ensure that sufficient child care is available, counties will permit some flexibility in child care arrangements and payment procedures, including funding for licensed or license-exempt child care providers. If the county welfare department or contractor reimburses services for a license-exempt child care provider, the county welfare department or contractor will retain such information as the provider's name and address, hours of operation, credentials, criminal history, references and health instruction. The information will be made available to CalWORKs participants seeking child care

services. The county welfare department or contractor will use the present child care licensing regulations or CalWORKs guidelines for license-exempt caregivers in complying with these requirements. In addition, the county will deny payment if the license-exempt child care provider is found guilty of a violent felony or of child abuse.

Online resources for CalWORKs information include:

<http://www.dss.cahwnet.gov/CalWORKs/default.htm>
(CalWORKs Fact Sheets, CDSS)

<http://www.dss.cahwnet.gov/wtw/countyp1.htm> (CalWORKs County Plans)

<http://www.dss.cahwnet.gov/wtw/> (State Welfare to Work Office Website)

<http://www.welfareinfo.org> (National Clearinghouse on welfare reform)

<http://www.urban.org> (Urban Institute's Assessing the New Federalism Project)

Safety Net Provisions

In addition to CalWORKs, General Assistance is the other main financial assistance program for able-bodied and/or functional adults. CalWORKs participants who reach the 5-year lifetime limit are ineligible to receive GA until all of their children reach the age of 18. Recipients who cannot receive CalWORKs assistance because of a sanction or penalty, such as a fraud charge, are also unable to receive GA. In addition, the welfare bill restricts fleeing felons and individuals convicted of a drug-related felony from both CalWORKs and GA benefits. It should be noted that the GA program in California operates in all counties and does not receive funding from the state government.

Parents who lose their TANF grant due to their children being removed from their home remain eligible for General Assistance.

CONCLUSION

Currently, many California counties are in the process of reevaluating and reorganizing their social services departments or have recently completed the restructuring process in response to the implementation of CalWORKs. This process of reorganization indicates the shift in emphasis of welfare from cash assistance to employment. Counties will also become engaged in coordinating employment efforts with supportive services, such as child care, mental health, and substance abuse services. Not only will counties have to work on linking services, but also on developing paid employment and community services for CalWORKs participants as they transition to the workforce. The potential implications of this major change in social welfare policy may be seen in various other service sectors including housing, mental health, substance abuse, emergency services, and child welfare.

QUESTIONS FOR DISCUSSION

1. Do you believe that CalWORKs will be effective in moving people from welfare to work? What factors may influence its effectiveness (i.e., economic, psychological, familial, and social)?
2. What will be needed from the public and private employment sector to support success with CalWORKs?
3. Which people seem the most and least likely to positively benefit from the CalWORKs approach?
4. If CalWORKs is effective, what consequences do you predict for families? If it is not effective?
5. What kinds of skills will CalWORKs case managers need to have that are different from those of AFDC eligibility workers?

6. How does substance abuse affect an individual's ability to participate in the workforce? What is needed during treatment in order to make a person employable?
7. How do various mental health problems affect an individual's ability to participate in the workforce? What is needed during treatment in order to make a person employable?
8. How does domestic violence affect an individual's ability to participate in the workforce? What is needed during treatment in order to make a person employable?
9. How do you think elderly CalWORKs participants may fare in the new program? What are some issues social agency administrators should be considering for these individuals?
10. CalWORKs sets a 5-year lifetime limit on aid. Do you think this is an adequate amount of time for the majority of needy families to achieve and maintain financial independence? Are there any services or supports that you think are essential to achieving this goal? What kinds of services/policies would you have in place for families who have not reached financial independence in this time frame?
11. List three ways an adult's portion of the family's grant can be sanctioned. For each of these, does this penalty seem reasonable to you? How do you think these will impact the children's well-being?
12. Under welfare reform, parents with a drug-related felony conviction after January 1, 1998 are ineligible for assistance (they can still receive a child-only grant). Does this seem like a good policy to you? How might it impact your work with child welfare clients?

CHAPTER III

WHAT'S DIFFERENT ABOUT CALWORKS?

CHAPTER III

WHAT'S DIFFERENT ABOUT CALWORKS?

INSTRUCTIONAL GUIDE

The following table summarizes the substantive differences between the “old” approach to welfare and workfare (AFDC and GAIN), and the “new” approach under CalWORKs. During discussions of the implications of welfare reform for practice or reading of the previous two chapters, it can act as a reference piece for specific details of the new welfare law. Questions for discussion are included at the end of the chapter.

This chapter can be used to foster the following competencies for public child welfare work: 1.6, 2.5, 2.10, 3.2, 3.5, 3.12, 3.13, 3.17, 5.1, 5.3, 5.8, 6.2, & 6.7.

TABLE 3.1: INCOME ASSISTANCE AND WELFARE-TO-WORK PROGRAM COMPARISONS

Subject	AFDC	GAIN (JOBS)	CalWORKs
Program objectives	AFDC was an entitlement for households below the poverty level with a minor child. The primary goal was to keep the household unit intact through financial assistance.	Education and employment training for AFDC recipients to become financially self-sufficient. Goal: Long-term employment. Emphasis on education, especially for recipients who lack basic skills and were long-term AFDC recipients (3+ years).	Economic self-sufficiency through paid employment with minimal government involvement. Encourages job readiness, reduction of unplanned pregnancies, and two-parent families. Work experience emphasized over education. Assistance is temporary and time limited.
Administering agency	County Department of Social Services (except Los Angeles County which was administered by The Department of Public Social Services).	Department of Social Services responsible for program supervision. Program county administered. Local welfare departments did intake, managed cases, coordinated work experience, and ran some job search activities. Other county or outside agencies were responsible for the rest of services such as basic skills education and job training.	County welfare departments plan and administer local CalWORKs programs. Counties began enrolling participants in early 1998. The county plans contain provisions for coordination of services between county agencies, description of services (includes drug/alcohol rehab and mental health services), training of CalWORKs staff, and community input and involvement in services.
Eligibility	Resources limits: \$1,000 for real property and \$1,500 for an automobile. Head of household must have worked less than 100 hours in the 30 days prior to AFDC eligibility. First-time fraud charges resulted in ineligibility of aid for 1 - 2 years.	Asset limits were same as in AFDC.	Resource limits: \$2,000 in liquid assets, \$4,500 for automobile, and up to \$5,000 in restricted accounts. Children must be up-to-date on immunizations and attending school. Adults with felony drug conviction after 1/1/98 will be denied adult portion of family aid. If parent does not cooperate with child support enforcement, 25% of family's aid will be cut. Fraud conviction will result in denial of adult's cash benefits for 6 months to life. Two-parent families whose principal earner has worked less than 100 hours in last 4 weeks and who meet other eligibility requirements can receive assistance.

TABLE 3.1: INCOME ASSISTANCE AND WELFARE-TO-WORK PROGRAM COMPARISONS (cont'd)

Subject	AFDC	GAIN (JOBS)	CalWORKs
Participation	In 1994, average monthly AFDC caseload was 2,665,533 cases.	Approximately 20% of AFDC recipients in California participated in GAIN (includes mandatory and voluntary participants). GAIN typically included recipients who had been on AFDC for longer periods. 20% of single-parent and 50% of two-parent households were to be enrolled in GAIN.	All adults are required to participate in welfare-to-work activities unless they are eligible for an exemption. TANF requires states to enroll 25% of families in work activities by 1997, rising to 50% by 2002. 75% of two-parent families must be enrolled by 1997 rising to 90% in 1999.
Participation requirements	Not applicable.	GAIN required if program space available, two-parent households had to participate at least 16 hours/week in work activities. No minimum standard for single parents.	Work activity requirements for single parents begin at 20 hours/week rising to 32 hours/week by July 1999. Adults in two-parent households must perform 35 hours/week of welfare-to-work activities.
Tracking	Not applicable.	Case managers developed employment contracts with clients that were used to assess progress towards economic self-sufficiency. Participant had an initial grace period to request contract changes.	CalWORKs participants create a welfare-to-work plan with the county that specifies assigned work activities and services. One 30-day grace period given to revise plans.
Participation exemptions	Not applicable.	Exemption from work participation for disabled recipients, older participants, and caretakers of children under 3 years of age or a disabled member of the household. Temporary suspension of work activities could be due to a part-time job, illness, family crises, advanced pregnancy, and other approved circumstances.	Adults who are disabled, of advanced age, or have "good cause;" women whose pregnancy impedes participation; nonparent caregiver for a child who is a ward of the court or at risk of becoming one and whose caregiving needs exceed normal parenting to the extent that caregiver's ability to work is impeded; and caregivers for a disabled family member or an infant are exempted.

TABLE 3.1: INCOME ASSISTANCE AND WELFARE-TO-WORK PROGRAM COMPARISONS (cont'd)

Subject	AFDC	GAIN (JOBS)	CalWORKs
Sanctions and penalties	<p>Not cooperating with child support enforcement resulted in ineligibility for the custodial parent. Sanctions for not meeting reporting requirements.</p> <p>Family cap: no additional benefits for children born while parent a recipient.</p>	<p>Participants who did not adhere to work requirements had grants reduced. Heads of two-parent families who were sanctioned lost adult portion of AFDC grant.</p>	<p>Noncompliance with work requirements will result in sanction of the adult portion of the grant. Continues family cap. If sanctions last more than 3 months, county can choose to provide rest of benefits in voucher form.</p> <p>See eligibility section for penalties. While penalized, adult is still eligible for Medi-Cal and required to complete work activities. Penalized months count toward 60-month limit.</p>
Time limits	<p>No time limits. Only requirement was that there was at least one child under age 18 in the household.</p>	<p>If GAIN participant had been on aid for 22 out of past 24 months and had completed the job-training component of GAIN, he/she had to work 100 hours/month in a community service position.</p>	<p>24-month time limit for those on aid at time county implemented CalWORKs and 18 months for new applicants with potential for 6-months extension. If 18 - 24 month time limit reached and recipient has not refused offer of employment without good cause and participates in community service, grant can continue.</p> <p>National 5-year lifetime limit on aid for adults. After reached, family can receive child-only grant in form of cash or vouchers.</p>
Time-limit exemptions	<p>Not applicable.</p>	<p>Not applicable.</p>	<p>Exemptions from 5-year time limit include: recipients 60 years of age or older, primary caretaker of disabled family member, nonparent primary caregiver for child who is a ward of the court or at risk of becoming one and whose caregiving needs exceed normal day-to-day parenting to the extent that it impedes caregiver's ability to work, disabled individuals, caregivers receiving a child-only grant, and recipients who are unable to remain employed but have history of cooperation with welfare-to-work program.</p>

TABLE 3.1: INCOME ASSISTANCE AND WELFARE-TO-WORK PROGRAM COMPARISONS (cont'd)

Subject	AFDC	GAIN (JOBS)	CalWORKs
Services	None provided.	<p>No lump-sum diversion available to applicants.</p> <p>Job search provided for those job-ready. Allowable jobs included vocational, on-the-job training, or unpaid work experience.</p> <p>Basic education provided for individuals who lacked a high school diploma/GED or basic math, reading, or English language skills. For this group, job search activities could begin before or after basic skills instruction.</p> <p>Substance abuse and mental health treatment not covered with GAIN funds.</p>	<p>Lump-sum cash diversion in order to prevent families from entering CalWORKs.</p> <p>Welfare-to-work activities include 4 weeks of job search. If participant does not obtain employment, assessment of work history and skills conducted and a welfare-to-work plan is created. Plan specifies work activities and supportive services for the participant.</p> <p>Work activities counties can allow private- or public-sector employment, limited education opportunities, mental health services, and substance abuse treatment.</p>
Supportive services	Not applicable.	<p>GAIN case managers referred clients to child care services. Program paid for child care expenses for children under 13 years of age. Transitional child care and Medi-Cal for up to 1 year if applicant leaves welfare for paid employment.</p> <p>Transportation costs and ancillary expenses such as schoolbooks and uniforms paid for.</p>	<p>Child care provided for families participating in welfare-to-work activities. No guaranteed child care services for recipients engaging in community service or for children over age 10.</p> <p>Transportation and ancillary costs still covered.</p> <p>Transitional services provided to families exiting welfare for work at county option.</p>
Teen parents	<p>If AFDC unit includes teen parent and senior parent, household benefits can be reduced.</p> <p>Not required to live with a parent or legal guardian.</p>	<p>Required participation in CalLearn, a program that mandates school attendance and case management for teen parents up to age 18 who have not received high school diploma or GED. Program offers financial incentives and penalties for grades and graduation.</p>	<p>CalLearn required if recipient is 19 or younger and does not have a high school degree/GED. Counties may propose alternative teen parent programs.</p> <p>Minor parent required to live with their parent. If unsafe or unavailable, CPS determines if teen should live on own or with another adult guardian.</p>

TABLE 3.1: INCOME ASSISTANCE AND WELFARE-TO-WORK PROGRAM COMPARISONS (cont'd)

Subject	AFDC	GAIN (JOBS)	CalWORKs
Immigrants	States could not exclude legal immigrants without approval from the federal government.	Not applicable.	State given the option to provide CalWORKs and Medi-Cal to legal immigrants. California elected to include legal immigrants in CalWORKs provisions.
Funding sources	Unrestricted federal funding to states used a match formula based on per-capita income in the state.	GAIN was paid for by a capped federal expenditure with a 50% state match. Child care was paid for by a state-matched open-ended entitlement from the federal government.	AFDC, GAIN, and Emergency Assistance block grants put into a single capped entitlement. California gets a fixed amount of federal money based on past expenditures. Limits administrative spending to 1996-1997 levels. Child care funding streams block grants into a single fund that California can use at its discretion. California and its counties have equal fiscal responsibility for all penalties imposed by the federal government. Counties will incur full costs of exempting more than 20% of their caseload from the lifetime limit if state as a whole surpasses its 20% exemption limit.
Grant levels/disregards	For family of 3, monthly AFDC benefits were \$565/\$538 (as of July 1997).	Not applicable.	No change in grant levels from prior law. First increase in benefit levels for inflation scheduled for November 1998. Disregard of first \$225 of unearned disability based on earned income plus disregard of 50% of remaining earned income.
General Assistance (GA)	GA was a state-mandated county-operated and funded program. AFDC ineligible families could apply for GA.	Not applicable.	Participant in CalWORKs who reaches the lifetime limit or is excluded from grant due to a drug-related felony conviction is ineligible for GA until all children are 18 or older. Remains a state-mandated, county-funded and administered program.

TABLE 3.1: INCOME ASSISTANCE AND WELFARE-TO-WORK PROGRAM COMPARISONS (cont'd)

Subject	AFDC	GAIN (JOBS)	CalWORKs
Monitoring/ Evaluation	None required.	MDRC evaluation found modest increased work participation and earnings for family groups in GAIN program at follow-up. MDRC also found substantial savings in AFDC expenses for state of California as well as more modest savings in food stamp costs.	State requires counties to maintain data on client participation. Information used to evaluate if state participation rates have been met and to investigate state and local outcome measures. A statewide evaluation will be conducted by an outside evaluator.

Sources:

California Department of Social Services. (1997, August 14) *Major items of welfare reform contained in AB 1542*. Sacramento, CA: Author.

MDRC. (1994). *GAIN: Benefits, costs, and three-year impacts of a welfare-to-work program*. Washington, DC: Author.

The Urban Institute. (1996). *AFDC benefits from CRS survey of the states*. Washington, DC: Author.

Bay Area Social Services Consortium. (1997). *An analysis of county welfare reform plans: An emerging casebook: County implementation of CalWORKs*. Berkeley, CA: Author.

County Welfare Directors Association of California. (1997). *California welfare reform: Summary of the provisions of AB 1542 and AB 1008*. Sacramento, CA: Author.

QUESTIONS FOR DISCUSSION

1. Unlike the AFDC program, which was designed by the federal government, CalWORKs provides counties with a fair degree of discretion in designing their local CalWORKs program. What are some advantages of this sort of local control? What might be a disadvantage of this new system?
2. Choose an area of program change from the table that is of particular interest to you. What do you think is the underlying philosophy represented by this change in policy? What are the pros and cons of this policy change? What might the anticipated and unanticipated consequences of these changes be for children and for child welfare practice?
3. The MDRC study of the GAIN program cited in the table found that the program only had a modest impact on the employment rate for participants. Which aspects of CalWORKs do you think will make this welfare-to-work program more effective than GAIN? Are there additional services or programs that you think would enhance the success of CalWORKs?
4. While welfare reform was designed to provide financial incentives for recipients to transition to self-sufficiency, it also created financial penalties if states do not reduce their welfare rolls by a certain amount. Do you think this fiscal pressure will have a positive effect on the way county welfare agencies deliver services or does it encourage counties to push families off assistance regardless of the availability of employment?

CHAPTER IV

WELFARE AND CHILD PROTECTION: THE HISTORICAL RELATIONSHIP

CHAPTER IV WELFARE AND CHILD PROTECTION: THE HISTORICAL RELATIONSHIP

INSTRUCTIONAL GUIDE

The following paper is designed to place welfare and child protection policy in historical perspective, thereby creating a context for discussions about the implications of welfare reform for child welfare policy and practice. The paper can be used by the classroom instructor as background material or it can be assigned to the students to read themselves.

The chapter also includes several tables and figures that can be used for information and discussion.

- Table 4.1: Key Historical Events and Landmark Legislative Decisions Shaping Welfare and Child Protection Programs.
- Figure 4.1: Dimensions of Child Welfare
- Figure 4.2: Trends in the Relationship Between Income Maintenance and Child Protection
- Figure 4.3: Poverty, Child Maltreatment, and Child Welfare: How Do They Overlap?

Questions for discussion are included at the end of the chapter.

This chapter can be used to foster the following competencies for public child welfare work: 2.1, 2.5, 2.6, 2.10, 3.2, 3.5, 3.10, 3.12, 3.13, 3.17, 4.9, 5.1, 5.3, 5.8, 6.2, and 6.7.

INTRODUCTION

Family welfare and child protection are viewed from a contemporary standpoint as distinct domains of child welfare policy in the United States, protecting children from the vicissitudes of the market on the one hand, and protecting them from their families on the other. While income maintenance programs such as Aid to Families with Dependent Children (AFDC), unemployment insurance, and disability insurance (SSI) have all been designed to guard children's economic interests by buffering their parents from the labor market, child protection policies have been designed to shield children from adult behaviors including inadequate parenting (neglect), overly harsh and dangerous parenting (physical abuse), and grossly inappropriate parenting (sexual abuse). Placed in historical perspective, however, these distinctions are relatively new: the separate welfare and child protection systems established through the Social Security Act began centuries ago as one general system of poor relief, and despite their ostensibly separate program mandates today, much common ground remains. While children's economic well-being may be shaped by the state of the economy, their parents' ability or willingness to participate in the labor market also directly affects children's economic prosperity. Children's personal well-being may be tied to parental acts of commission such as physical or sexual maltreatment, but their well-being may also be touched by omissions of food, supervision, or other necessities that may or may not be within the parents' personal or economic capacity to provide. In a variety of ways, parents act as key mediators of the economy's influence on their children. The complex relationships between poverty and parenting quality, coupled with the long-standing

institutional entanglements between welfare and child protection programs, mean that the passage of the Personal Responsibility and Work Opportunity Reconciliation Act (P.L. 104-193 or PRWORA) will have effects across both domains of child welfare policy. A look at history illuminates the common interests of welfare and child protection, highlights the recurring difficulties with drawing boundaries between child welfare interventions, and in turn sheds light on the possible consequences of welfare reform.

WHY AN HISTORICAL PERSPECTIVE?

In 1912, a delegate to the National Conference of Charities and Correction boldly stated that, “[P]overty is a cause of dependency and will be until social justice shall prevail throughout the world and the dawn of the millennium breaks upon us” (Pinckney, cited in Bremner, 1971, p. 370). Unfortunately, on the eve of the millennium, poverty and the consequent dependency of children remain an unsolved problem. Questions remain, as well, about how to differentiate family economics from parenting and child well-being, about the most appropriate form of state intervention when families encounter problems with parenting and self-sufficiency, and about the optimal relationship between cash assistance and services to support families.

In examining the present-day overlap between income supports and child protective services, placement of the issues in historical context lends a sense that these structures are not immutable. Knowledge of history makes it clear that the definitions of child welfare and protection and the public policies supporting them have been shaped by social convention and that we are free to reshape them as well. An understanding of the common historical roots of family welfare and child protection also

provides a sense of both the change and continuity in problems affecting children and families in the United States.

FRAMEWORK FOR ANALYSIS

Social problems, public opinion, and public policy have complex and mutually influential relationships. The following discussion reviews certain social conditions of children and families from the 18th through the 20th centuries, identifying which problems warranted intervention, and why; it tells how those problems were defined, names the social policies and/or institutional “solutions” created, and discusses any conditions or movements leading to a shift in the problem definition or policy solution. These developments are traced using legislative events as the key historical “markers,” as summarized in Table 4.1. It also acknowledges the reciprocal influence of the dominant public view of a social problem and the social policies that address it. According to Gordon (1994):

Values and ideas about how, how much, when, and by whom the needy should be helped influence our welfare system as much as do the federal budget, eligibility criteria, and unemployment rates...while the budget, in setting national priorities, influences popular sensibilities about what is important and urgent (p. 2).

Thus, the welfare and child protection relationship is best understood through a framework that situates social problems historically, culturally, and politically. One such perspective for understanding child maltreatment is social deviance theory, which posits that behaviors are essentially neutral, in themselves, and acquire positive or negative

meaning only within a social system (Giovannoni & Becerra, 1979). From this standpoint, child sexual abuse would be considered deviant because it is “perceived to threaten the maintenance of the social system or the social order” and because caregivers who molest are behaving outside their accepted social role (Giovannoni & Becerra, p. 20). A similar perspective is suggested by Nelson (1984):

A social problem goes beyond what a few, or even many, individuals feel privately: A social problem is a social construct. Its “creation” requires not only that a number of individuals feel a conflict of value over what is and what ought to be, but also that individuals organize to change the condition, and achieve at least a modicum of recognition for their efforts from the wider public (p. 5).

To analyze the social construction of parenting and child protection, however, need not imply pure relativism (e.g., child abuse simply *appears* to exist by virtue of its collective definition). There may be “universal viewpoints or definitions” of child maltreatment that “transcend history and culture” (Giovannoni, 1989, p. 3). It is unclear, however, how child neglect fits into these universal notions as it is complicated by the economic circumstances of the parents (i.e., does she/he have the means to adequately provide for the child?) and the parent’s intentions (was the neglect *committed* or was some parenting behavior simply *omitted*?). Thus, the codification of parenting standards in law can powerfully shape the public image of appropriate parental behavior. For example, if parents can be jailed for bruising their children, bruises become part of the lexicon of child protection; if parents can be denied welfare benefits for using illegal drugs, addicts may be deemed unworthy of raising their children.

Complementing this broad social construction analysis is a more specific model for defining the social problems of child maltreatment and child poverty. Child maltreatment can be understood along three dimensions: the *conceptualization of the phenomenon* (e.g., as criminal, psychiatric, or environmental), *the type of parental acts labeled* (e.g., physical abuse, inadequate supervision), and the *threshold of harshness* required before the events are seen as maltreatment (Barnett, Manly, & Cicchetti, 1993). Family poverty may be defined along similar lines. Questions about the nature and cause of poverty include: is child poverty due to parental psychopathology, limitations of a local economy, and/or the increasing number of families headed by women with lower labor market earning potential (*conceptualization of the phenomenon*)? What does poverty look like, and which poor families warrant help (conditions of existence, similar to the type of acts labeled)? What should constitute the poverty line, under which children and their parents are entitled to government assistance, and what are the implications of raising or lowering that line (*threshold of harshness*)? Definitions are further influenced by social, economic, and political forces, as well as developments in social science theory and research.

Table 4.1

Key Historical Events & Landmark Legislative Decisions Shaping Welfare and Child Protection Programs

Year	Legislation/Event	Key components
1853	<i>Children's Aid Society of New York founded</i>	Primary mission to remove children and youth from almshouses, orphanages, and parents of the "dangerous classes," "placing out" in Midwestern farm families. ¹
1874	<i>New York Society for Prevention of Cruelty to Children founded</i>	Although not the first case of legal action on behalf of a maltreated child, the case of "Mary Ellen" drew widespread publicity and was instrumental in the founding of the New York SPCC, the prototype for many child cruelty societies that followed. ²
1899	<i>Juvenile Court established in Illinois</i>	Based in <i>parents patriae</i> doctrine – the idea of state as ultimate parent early juvenile courts emphasized rehabilitation over punishment. ³
1909	<i>White House Conference on Dependent Children</i>	First conference declared that "Except in unusual circumstances, the home should not be broken up for reasons of poverty, but only for considerations of inefficiency or immortality." ⁴
1911	<i>First mother's pension laws</i>	In spite of the opposition of some charity workers who preferred indoor relief, the Illinois Legislature passed an Act containing the following language: "If the parent or parents of such dependent or neglected child are poor and unable to properly care for the said child, but are otherwise proper guardians and it is for the welfare of such child to remain at home, the court may enter an order...fixing the amount of money necessary to enable the parent or parents to properly care for such child, and thereupon it shall be the duty of the county board...to pay...." ⁵
1912	<i>U.S. Children's Bureau established</i>	Initial appropriations made under Department of Commerce and Labor; charged primarily with researching "all matters pertaining to the welfare of children and child life among all classes of our people." ⁶
1921	<i>Sheppard-Towner Act</i>	Mandated the reduction of infant and maternal mortality rates through provision of federal matching funds to states for establishment of prenatal and child health centers. Repealed in 1929. ⁷
1935	<i>Social Security Act</i>	Franklin D. Roosevelt's "New Deal" contained, in addition to Titles I (<i>Aid to the Blind</i>), II (<i>Unemployment Insurance</i>), and III (<i>Old Age Assistance</i>), Titles IV (<i>Aid to Dependent Children</i>) and V (<i>Child Welfare Services Program</i>): <i>Title IV: Aid to Dependent Children (ADC)</i> – cash grant program to assist children without fathers (primarily intended for widows). <i>Title V: Child Welfare Services Program</i> – with the Children's Bureau responsible for administering grants for maternal child health programs, services to disabled children, and services for protection and care of homeless, dependent, and neglected children or those in danger of becoming delinquent.

Table 4.1**Key Historical Events & Landmark Legislative Decisions Shaping Welfare and Child Protection Programs (cont'd)**

Year	Legislation/Event	Key components
1938	<i>Fair Labor Standards Act</i>	Landmark federal legislation regulating “oppressive child labor.” ⁸
1939	<i>Social Security Act Amendment</i>	Began food stamp program (discontinued in 1943 due to scarcity of food in World War II).
1950	<i>Social Security Act Amendment</i>	Aid to Dependent Children expanded to include the parents or guardians of dependent children.
1956	<i>Social Security Act Amendment</i>	States encouraged to add social services to their welfare plan and services considered reimbursable costs (at 50% match) for first time. Social services not required of states, however. ⁹
1961	<i>Social Security Act Amendment</i>	Established ADC-Unemployed Parent (ADC-UP), making it possible for children to receive aid due to parental unemployment. Expanded ADC & allocated federal foster care funding. ¹⁰
1961	<i>Flemming Ruling (Department of HEW)</i>	Ruled “suitable home” policies a violation of spirit of law, and obliged states to provide aid to families, as long as child continued to live in the home. “If the home was indeed unsuitable, efforts should be made to improve the offending conditions and, failing that, to arrange for placement of the child elsewhere.” ¹¹
1962	<i>Public Welfare (Social Security Act) Amendments</i>	Changed the program name from ADC to AFDC (Aid to Families with Dependent Children), emphasizing the family unit; also made a second incapacitated or unemployed adult eligible. Increased federal support (75% of cost) to states to provide casework, job training, and other services to welfare recipients such that eligibility and service provision were combined. Amended Title V so that daycare was defined for first time as public child welfare service. ¹²
1964	<i>Food Stamp Act</i>	Provided coupons to low-income people to be redeemed for food in grocery stores.
1965	<i>Title XIX</i>	Authorized Medicaid: Health care primarily for low income, elderly, SSI, and AFDC recipients. Title XIX paid medical bills previously the responsibility of welfare agencies; also included in 1965 were increased welfare payments. ¹³
1967	<i>Social Security Act Amendment</i>	Brought administration of child welfare services and AFDC under single unit (at state and county levels); intended to increase coordination of service planning. Made new funds available through Title IV-A, which resulted in expansion of daycare for working poor. ¹⁴
1967	<i>California Supreme Court Ruling</i>	Ruled “midnight raids” on welfare recipients illegal. ¹⁵

Table 4.1**Key Historical Events & Landmark Legislative Decisions Shaping Welfare and Child Protection Programs (cont'd)**

Year	Legislation/Event	Key components
1968	<i>Supreme Court Ruling King v. Smith</i>	Invalidated “absent father” rules so that mothers could no longer be denied benefits for “cohabiting” with a man. ¹⁶ Reiterated in 1970 Lewis v. Martin decision. ¹⁷
1972	<i>Social Security Act Amendment</i>	Established Supplemental Security Income (SSI), which combined the prior cash assistance programs to poor blind, elderly, or disabled (including children). ¹⁸
1972	<i>State and Local Fiscal Assistance Act</i>	Initial cap to services grants at \$2.5 billion annually, limiting state shares to percentage of total population. ¹⁹
1974	<i>Child Abuse Prevention & Treatment Act (P.L. 93-247)</i>	Mandates state reporting requirements of child abuse and neglect; funds some prevention, identification, and treatment programs. ²⁰
1974	<i>Juvenile Justice & Delinquency Prevention Act (P.L. 93-415)</i>	Funded alternatives to reduce detention of juveniles and encourage state initiatives in prevention and treatment of delinquency and status offenses. ²¹
1974	<i>Title XX (Amendment to Social Security Act)</i>	Eliminated federal matching, authorized block grants to states for social services to AFDC and SSI recipients, replacing programs previously authorized under Titles IV-A and VI ²² . Also in 1974 was the initial amendment to Title IV-D strengthening system of child support enforcement. ²³
1980	<i>Adoption Assistance & Child Welfare Act (P.L. 96-272)</i>	Amended Title IV-A and Title IV-B, created Title IV-E. Changed federal funding mechanism for foster care such that states are assisted in maintenance of low-income (AFDC-eligible) children in foster care. IV-B funds for child welfare and family preservation services without regard to AFDC eligibility of clients. Established Adoption Assistance Program (AAP; federally subsidized adoptions for special needs children in out-of-home care). Instituted Independent Living Program (ILP). Also established permanency planning as guiding philosophy, required case planning and judicial review, and instituted requirement that families be provided “reasonable efforts” to prevent the out-of-home placement of children. ²⁴
1981	<i>Social Security Act Amendment (Social Services Block Grant)</i>	Amended Title XX, creating block granting to states with ceiling on expenditures for social services and with fewer programming stipulations.

Table 4.1**Key Historical Events & Landmark Legislative Decisions Shaping Welfare and Child Protection Programs (cont'd)**

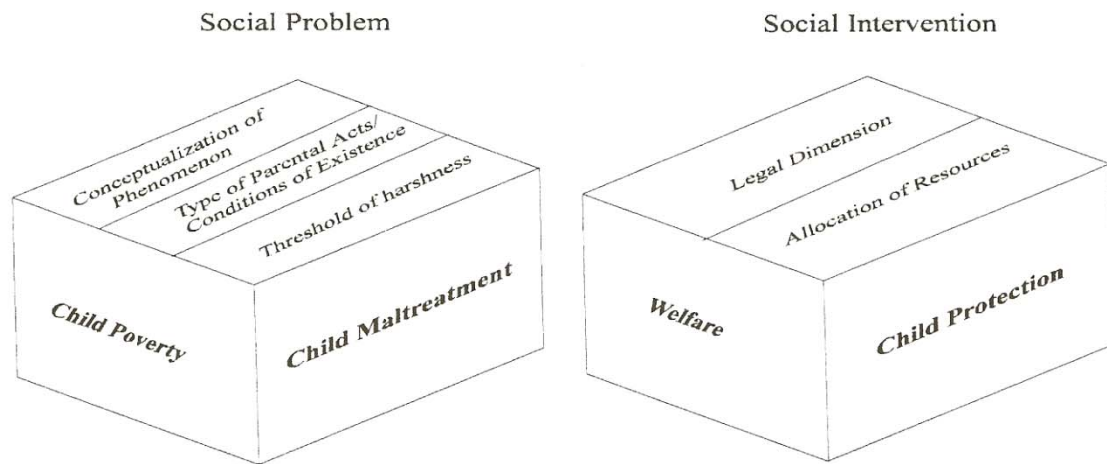
Year	Legislation/Event	Key components
1982	<i>California Senate Bill 14</i>	Incorporated federal changes required by P.L. 96-272 into state law through enactment of Chapter 978. Established four child welfare services programs; goals were to (a) provide treatment to families to reduce unnecessary foster placements, (b) safely reunite more foster children with their families, (c) increase the stability of foster care placements, and (d) place more adoptable children into adoptions. ²⁵
1988	<i>California Senate Bill 243</i>	Homelessness declared insufficient grounds for child removal.
1988	<i>Family Support Act</i>	Created Job Opportunities and Basic Skills (JOBS) program, intended (P.L. 101-630) to help AFDC recipients avoid long-term dependency on welfare; required state participation in and matching funding of work training programs; included provisions for child support and paternity establishment.
1990	<i>California Senate Bill 2669</i>	State legislation stipulated that “a positive toxicology screen at the time of the delivery of an infant is not in and of itself a sufficient basis for reporting child abuse or neglect.” ²⁶
1995	<i>Teen Pregnancy Disincentive California Assembly Bill 908</i>	Requires never-married minor parents to live in the home of their parents, legal guardians, suitable adult relatives, or another adult-supervised living arrangement in order to receive AFDC; unless the minor meets certain exemption criteria. CPS is mandated to assess certain conditions in which a minor parent lives independently to determine safety of minors. ²⁷
1996	<i>Personal Responsibility & Work Opportunity Reconciliation Act (P.L. 104-193)</i>	Federal welfare reform bill repeals AFDC and replaces with Temporary Assistance to Needy Families (TANF), along with major revisions in the areas of SSI, Child Support, Services to Immigrants, Child Protection, Child Care, Child Nutrition, Food Stamps, and the Social Services Block Grant. The major provisions of TANF include block granting to states for assistance to poor families; incentives to states to reduce out-of-wedlock births; time limits on the receipt of aid; work requirements as a condition of eligibility; restrictions on teen parents and those convicted of drug-related felonies; “family caps,” or the option to states of denying aid for additional children born while the parent is receiving aid; restrictions on parents who fail to cooperate in paternity establishment, and state options to require high school attendance for parents.
1997	<i>Adoption and Safe Families Act (P.L. 105-89)</i>	Amends Title IV-E to include health and safety of child as priorities in meeting reasonable efforts. Outlines new circumstances under which parental rights may be terminated and shortens permanency planning timelines. ²⁸

NOTES: TABLE 4.1

1. See Trattner, W. (1989). *From poor law to welfare state: A history of social welfare in America* (4th ed.). New York: The Free Press. Also see Kadushin, A. (1980). *Child welfare services* (3rd ed.). New York: Macmillan Publishing.
2. Costin, L., Karger, H., & Stoesz, D. (1996). *The politics of child abuse in America*. New York: Oxford University Press.
3. Mnookin, R. H., & Weisberg, D. K. (1989). *Child, family, and state: Problems and materials on children and the law*. Boston: Little, Brown & Company.
4. Proceedings of the Conference on the Care of Dependent Children. (1909). Letters to the President of the United States embodying the conclusions of the Conference on the Care of Dependent Children (pp. 192-197) as cited in Bremner, R. H. (1971). *Children and youth in America: A documentary history (Volume II: 1866-1932; p. 365)*. Cambridge, MA: Harvard University Press.
5. Laws of Illinois, XLVII. (1911). Juvenile courts: Funds to parents. Springfield (pp. 126-127). As cited in Bremner (1971, p. 370).
6. Trattner (1989), p. 196.
7. Haynes, K. S., & Holmes, K. A. (1994). *Invitation to social work*. New York: Longman.
8. Mnookin & Weisberg (1989).
9. Coll, B. (1995). *Safety net: Welfare and social security: 1929-1979*. New Brunswick, NJ: Rutgers University Press.
10. Costin, L., Bell, C., & Downs, S. (1991). Child welfare policies and practice (4th ed.). New York: Longman. Also see Committee on Ways and Means, U.S. House of Representatives (1996). *Green book*. Washington, DC: U.S. Government Printing Office.
11. Coll (1995), p. 209.
12. See DiNitto, D. (1991). *Social welfare politics and public policy* (3rd ed.). Englewood Cliffs, NJ: Simon & Schuster. Also see Costin et al. (1991).
13. Coll (1995).
14. Costin et al., (1991).
15. Trattner (1989).
16. Pappas, A. (1996). Welfare reform: Child welfare or the rhetoric of responsibility? *Duke Law Journal*, 45, 1301-1328.
17. Sosin, M. R. (1986). Legal rights and welfare change, 1960-1980. In S. H. Danziger & D. H. Weinberg (Eds.) *Fighting poverty: What works and what doesn't* (pp. 260-282). Cambridge, MA: Harvard University Press.
18. Costin et al. (1991).
19. Coll (1995).

20. Pecora, P. J., Whittaker, J. K., Maluccio, A. N., Barth, R. P., & Plotnick, R. D. (1992). *The child welfare challenge: Policy, practice, and research*. New York: Aldine de Gruyter.
21. See Costin et al. Also see Pecora et al.
22. Coll (1995).
23. Costin et al. (1991).
24. Committee on Ways and Means (1996); also see Pecora et al.
25. Legislative Analyst's Office. (1991, January). *Child abuse and neglect in California: A review of the child welfare services program*. Sacramento, CA: Author.
26. Senate Bill No. 2669 (Presley). California State Legislature. Approved by Governor September 30, 1990.
27. Assembly Bill No. 908 (Brulte). California State Legislature. Approved by Governor August 3, 1995.
28. Thomas – U.S. Congress on the Internet. (1997, December 19). Bill summary and status for the 105th Congress. Retrieved from: <http://thomas.loc.gov/cgi-bin/bdquery/z?d105:HR00867:@@@D>

Figure 4.1
Dimensions of Child Welfare



Related to the definition of social problems is the design of social interventions, which can simply be understood along two dimensions: the *legal* (which usually gauges the most coercive interventions), and the *allocation of social resources* (Giovannoni & Becerra, 1979). Both the child protection and public welfare systems can be examined in terms of the legal sanctions and rights applied to recipients and the level and type of resources made available to each program. These dimensions, coupled with those used to analyze child poverty and child maltreatment, are presented schematically in Figure 4.1 above. By analyzing the relationships between these dimensions across systems and over time it becomes evident that although the public has come to view welfare and child protection as having vastly different goals and intentions, they in fact have many common roots.

THE HISTORICAL RELATIONSHIP

During any era, prevailing philosophical views about childhood lay the foundation for defining the basic needs and rights of children. In the educated middle- and upper-class world of White, Anglo-Saxon Americans, views of the child shifted during the mid-18th century. This included a move away from the colonial concept of children as “miniature adults” requiring close supervision and stern treatment, toward the *tabula rasa* (blank slate) theory of Locke (Postman, 1997; Trattner, 1989) and the more romantic, positive view of Rousseau (Robertson, 1973). It also coincided with a move away from the determinism of Calvinism, with its belief that poverty was a natural condition of humanity (Trattner). By the mid-19th century, influenced by Emerson and Thoreau, the view had begun to shift even further toward one of children as innately good and pure (Tiffin, 1982, Trattner). As the child came to be seen as less inherently sinful and childhood was recognized as a developmental period different from adulthood (Drew, 1996), the sanctioning of harsh physical discipline began to subtly erode, slowly ushering in more permissive and democratic parenting practices (Tiffin). Simultaneously, the predominantly White, middle-class suffrage movement took up the cause of child labor, which was becoming less acceptable, and viewed instead as exploitative (Tiffin)—at least for White children. In contrast, there was no support for the protection of African American children: The institution of slavery was predicated on social legislation that ensured intergenerational slave status (Giovannoni & Becerra, 1979). Thus, while there was no “ideal of a ‘protected childhood’” for African Americans, in the dominant culture these changing views of childhood “provided the cultural

backdrop necessary for the acceptance of abuse as a social problem” (Nelson, 1984, p. 5).

Poor Law Legacy

The social response to child poverty changed along with views of the child. The Elizabethan Poor Laws of 1601, which had resulted from the famine and social disorder of the 1590s, acted as the logical precedent underlying welfare policies in both England and the United States for two-and-a-half centuries (Trattner, 1989). The American colonists, while innovative in many respects, fashioned their laws to deal with poverty after the traditions in England. Initially, small communities were sustained on principles of interdependence, caring for poor families within their boundaries (Trattner). Rural poverty was present “wherever Americans attempted to farm poor land or competed unsuccessfully with larger operators in the commercial market” (Patterson, 1986, p. 10). As the population increased, combined with immigration and the English practice of exporting criminals and the unemployed to already difficult conditions in the New World, the problems of urban destitution became more complicated (Trattner). English poor law defined three major categories of dependents: children (the poor, the illegitimate, and orphans), the incapacitated (the “worthy poor”), and able-bodied adults (the “unworthy poor”). These categories did not apply to African Americans, however, few of whom fell under the jurisdiction of the poor laws:

Colonial law held slaves to be the property and responsibility of their masters, and free blacks relied largely on themselves or their own self-help systems for support. When they did enter the poor law system, mostly in the North, black

men and women were treated as the most undeserving of the poor...After the American Revolution, northern states that passed acts of gradual emancipation held masters responsible for the support of the black women and men they freed. (Abramovitz, 1988, pp. 90-91)

Further, slave codes and laws against interracial coupling made it possible for towns to avoid, as much as possible, “becoming responsible for the care and maintenance of mulatto children and free black adults” (Abramovitz, 1988, p. 99). For those who did come under poor law traditions, forms of support would change in the 18th century. Originally, when the resources of kin failed or were unavailable, traditions of local responsibility included placing the poor in private homes at public expense—and sending away any nonlocals who were needy (Katz, 1989). With the influx of “unsettled poor” into towns these policies began to change. In Boston, for example, the colonial treasury began to provide assistance. Public institutions began to appear as alternatives for housing the poor, the mentally ill (Trattner, 1989), and the many immigrants who would be considered “medically indigent” by today’s standards (Coll, 1969).

From the standpoint of the Elizabethan Poor Laws of 1601, the poverty of children was functionally equivalent to the poverty of adults and the solutions were similar—solutions that remained in place throughout the 18th century. Families became poor due to circumstances beyond their control—primarily because of the loss of the breadwinner(s) through death, desertion, and accidents—as well as due to conditions largely viewed as individually caused. Although the exact historical role of substance abuse in the deterioration of family life is difficult to assess, there are frequent

references to alcoholism in discussions of colonial poor law (usually in reference to the “unworthy poor”; e.g. Bremner, 1971; Coll, 1969). According to Coll, in 1818 the New York Society for the Prevention of Pauperism reported the following causes of dependency: “ignorance, idleness, intemperance (the foremost), want of economy, imprudent and hasty marriages, lotteries, pawnbrokers, houses of ill fame, and the numerous charitable institutions” (p. 34). Further,

If intemperance were the “cause of causes” as many emphasized after making informal estimates and various “statistical” counts in almshouses, it was no wonder. Americans consumed large quantities of hard liquor. It was even common to pay wages partly in alcohol (Coll, p. 34).

Death of a caregiver was by no means infrequent in the Colonial era, particularly for the less affluent whose working and living conditions were harsh (Tiffin, 1982). Prior to the development of modern medicine, the medical profession’s ability to prevent death, even from childbirth or a minor illness, was limited and many children were orphaned (Lindsey, 1994). With the Poor Laws came the preference for “outdoor relief” (in the family’s own home), and only when these measures failed was “indoor” relief in the form of institutions (the poorhouse or workhouse) used for both adults and children (Kadushin, 1980). In this context, “child welfare” did not generally exist as a separate concern and orphans were treated as dependents, much like indigent but deserving adults. For instance, while poor children in colonial communities could be removed from destitute families and placed with others in the community, through “boarding out” or

apprenticeship (Trattner, 1989), this function fell under the broad umbrella of “poor relief”—today’s “welfare.”

During the mid- to late-1700s, with the combined influences of the Enlightenment and the American Revolution, poverty had begun to be viewed as less a natural condition of society and more an individual, personal responsibility (Katz, 1989). By the early 1800s, the influence of classical economists and laissez-faire philosophy was creating opposition to the Poor Laws. Not only was destitution increasingly viewed as the fault of the individual, but public aid was increasingly viewed as a contributor to pauperism (Handler & Hasenfeld, 1991). The doctrine of “less eligibility” embodied this view, that “the condition of all welfare recipients, regardless of need or cause, should be worse than that of the lowest paid self-supporting laborer” (Trattner, 1989, p. 49). Consistent with this theme, the almshouse and the workhouse (“indoor relief”) became the primary modes of handling the poor. At its inception, the poorhouse made few distinctions between women and men; children, young adults, and the aged; the mentally ill, the disabled, the sick, and those addicted to alcohol; and those whose unfortunate luck had led to unemployment and poverty. All were housed together.

The Poor Law Reform Bill of 1834 essentially made it a crime to be poor in England, and in the United States the existing measures of relief were increasingly viewed as wasteful of public dollars and as destructive of the incentive to work (Trattner, 1989). Almshouses remained a primary source of family welfare until the 1850s, when a reform movement was begun demanding the removal of children and their placement in separate institutions. Although the first orphanage was created in 1727 in New Orleans,

orphanages proliferated primarily in the second half of the 19th century. By 1900, these “orphan asylums” reportedly housed approximately 100,000 children (Lindsey, 1994; Trattner, 1989). The poorhouse was found to be crowded and unsanitary and considered a breeding ground for immorality: Raising children among the poor, it was feared, would foster dependency and transmit the “characteristics” of poor adults (Trattner). The use of the orphanage thus represented some effort to identify children’s needs as distinct from adults’—a movement fueled by the benefits, accrued to the orphanage founders, of capitalizing on child labor. Yet the orphanage eventually grew disreputable, as well. Intended as an age-appropriate alternative to the almshouse, many of these institutions were managed as private businesses on public subsidy and were consequently large, overcrowded, and based upon a monotonous, rigid routine. In 1853, the Children’s Aid Society of New York was founded by the Reverend Charles Loring Brace, who undertook as his mission the “placing-out” of children and youth, including those who were abandoned and those in poorhouses and orphanages, to family farms in the Midwestern United States. Brace promoted a model of foster family care that provided farmers with workers, and children with a family lifestyle regarded as “morally sounder” (Kadushin, 1980) while simultaneously working to “drain the city” of destitute children whom he viewed as the “dangerous classes” (Trattner). Brace has been roundly criticized for lack of oversight and minimal screening of foster families and he was called to task as early as 1872 for his practice of sometimes removing poor children without their parents’ consent (Giovannoni & Becerra, 1979). He also drew fire from the Catholic Church for placing Catholic children in Protestant homes (Tiffin, 1982).

Various reports suggest that Brace's organization removed 20,000 (Tiffin) to over 50,000 (Trattner) children in the first 25 years of operation.

Thus, from the centuries dominated by Poor Law philosophy through the mid-1800s, the legal basis and social construct of family welfare changed dramatically. By the 1850s, social interventions were beginning to develop which foreshadowed the modern child protection system. The preference for outdoor poor relief had transformed into a large institutional method of welfare for families with and without children. Physical child maltreatment was beginning to be identified. By the end of the century, child "neglect" was more conceptually distinct from "dependency." Where neglect had been (infrequently) recognized, in colonial times, "it normally referred to failure to provide a child with a suitable education or trade.... In the nineteenth century the responsibility of parents to guarantee their children's physical, mental, and moral welfare began to receive more attention," and as legal statutes were developed, the definition of neglect became both more precise and more inclusive (Tiffin, 1982, p. 39). As the urban centers of the United States grew and the demographics diversified, so did the complexity of poverty and other social problems. The latter half of the nineteenth century witnessed the launching of several social reform movements that affected family life, economics, and parenting.

Progressive Era Reforms

By the mid- to late-19th century, the more benign colonial views of poverty (which had largely accepted poverty as part of the human condition) had given way to a more punitive, individualistic standard that coincided with the rise of the market economy and

emphasis on the work ethic (Abramovitz, 1988; Katz, 1989). In this context, at least three major trends were occurring which would affect the welfare/child welfare relationship: social movements supporting child protection, mother's pensions, and regulation of child labor. Again, the impact of these movements was related to the political power of the White women and men who drove them. After the Civil War, Black women actively organized for the welfare of poor families (including the creation of orphanages for Black children), but for the most part this occurred within a separate social and political sphere (Abramovitz; Gordon, 1994). Each of these three movements toward child protection, mother's pensions, and protective child labor legislation contained undercurrents of racial inequity, a problematic legacy which continues today.

Child Protection

The rising movement for child protection was exemplified not only in expanding private agency efforts to remove children from poor homes, the streets, and orphan asylums, but was predicated on the identification of "new" forms of child maltreatment, problems distinct from the poverty-based neglect of the prior era. While the objective conditions of existence may have been largely the same, a new viewpoint existed: that of child rescue workers who saw these children as deserving of court protection or placing out due to "cruelty" (Costin, Karger, & Stoesz, 1996). In addition to dependency and abandonment as the primary reasons for placing out children, other forms of "child maltreatment," specifically physical abuse, had begun to turn up in the courts (Barnett et al., 1993). By 1825, a number of localities had made it a "public duty" to intervene in cases of "cruelty or neglect" (Davidson, 1994); however, there was not an organizational

mandate to find such cruelly treated children and bring them to the attention of the courts (Early & Hawkins, 1994). Similarly, while the doctrine of *parens patriae* (the legal and philosophical basis of our current child protection system) was first utilized in a Philadelphia court in 1838, throughout the 1800s many poor families had their children removed without due process or legal recourse (Giovannoni & Becerra, 1979). Private social service agencies, following the increasingly popular casework model of Mary Richmond, played an influential role in this process. In its purest form, Richmond's "social diagnosis" was intended to offer a method of effective casework services, but the resulting proliferation of this method within Charity Organization Societies in urban American centers reflected highly subjective, moralistic interpretations by "friendly visitors" on the causes of poverty or child maltreatment (Abramovitz, 1988; Giovannoni & Becerra). Physical abuse was not crystallized into a social problem until 1874 with the case of 10-year-old "Mary Ellen" in New York City (Nelson, 1984). Legend suggests that upon discovery by a friendly visitor that the girl had been bound and beaten by her stepmother, appeals for assistance were made to the American Society for the Prevention of Cruelty to Animals—since existing laws were insufficient for the child's protection (Giovannoni & Becerra). While the details of Mary Ellen's legendary rescue have recently been disputed and it has been pointed out that many similar cases had been reported without sparking the same public interest (Costin et al., 1996), most writers seem to agree that Mary Ellen's case touched off a new kind of movement for child protection. It has been argued that this case was socially ripe for the overwhelming media attention it received, due to Mary Ellen's "illegitimacy" and the fact that her

caregivers were not her natural parents. These factors coincided with a powerful women's rights and temperance movement which gave fuel to the cause (Costin et al.). This widely publicized case led to the formation of the Society for the Prevention of Cruelty to Children (SPCC), the first child protection association in the country. The SPCC served a law enforcement function from the beginning, removing children from their parents when a private agency visitor determined they were mistreated (Costin et al.). The rise of the child protection movement has been credited with shifting public opinion about the rights and vulnerabilities of children, questioning of the usefulness of corporal punishment, and an awareness of the unique psychological experiences of childhood (Barnett et al., 1993). The "child-savers" had a strong value orientation, and their "standards about what counted as neglect, abandonment, or inadequate support were of course class, ethnic, and religious constructions that did not always coincide with those of the children or parents being 'saved'" (Gordon, 1994, p. 44).

During the early part of the 19th century, some municipalities developed laws allowing the removal of children for reasons of maltreatment, but the model for state statutes was passed in Michigan in 1889. This law defined an ill-treated child as one who met any of three categories: (a) was morally endangered by their parents, (b) had parents who exhibited immoral behavior, and/or (c) whose life or health was endangered by their parents. The uniqueness of the law lay in its inclusion of physical well-being, in addition to the moral well-being of children, which was a more common concern (Giovannoni & Becerra, 1979). The establishment of the first juvenile court in 1899 (in Illinois) created a special avenue for the legal handling of maltreated children;

however, these courts continued to operate under a set of very vague statutes that left many poor parents at the mercy of the judge (Faust & Brantingham, 1974; Giovannoni & Becerra; Tiffin, 1982).

Much of the literature takes an ambivalent stance toward the developing social work profession during this period and the child protection field in particular, given the apparent blend of good intentions, religious commitment, and judgmental moralizing during a time of increasing class and ethnic tension. Nonetheless, it is clear that the development of a professional child welfare specialization both influenced and responded to the shifting conditions of family life. Children had become a target of public and private intervention by virtue of their developmental status and the concept of children's rights and protections (separate from those of adults) was unique in history. The ill treatment of children seems to have been viewed more from a moral, than a psychological, criminal, or environmental standpoint.

Mother's Pensions

At the same time the identification of child maltreatment led to children being removed for their "protection," a movement was occurring which would keep more of them at home—a return to outdoor relief through mothers' pensions (Abramovitz, 1988). In the latter decades of the 19th century, the absence of male breadwinners was a social problem of increasing magnitude, and in 1897 New York State passed a Destitute Mother's Bill (Gordon, 1994). But the movement supporting mother's pensions continued to carry the theme of equating poverty with poor parenting ability, and thus less eligibility for support. Like the laws resulting from poor law reform, mother's

pensions were intended for *deserving* women, widowed or deserted (Gordon). Thus it was “the children of ‘worthy’ parents (who) were among the first to be deinstitutionalized and sent back to be cared for by their mothers at home” (Abramovitz, p. 170). Many of the less fortunate were denied aid or had their children removed, including those whose children were “illegitimate,” or who continued to have unmarried relationships with men. Also considered undeserving were Black women, Mexicans, and immigrant women, who received lower benefit levels and/or were subjected to the biases of social workers visiting their homes (Gordon). Gordon points out that women reformers’ motivations “had strong currents of racial thought” and that “in the early twentieth century Americans of Anglo-Saxon backgrounds perceived southern Europeans, for example, much as they perceived Latinos or African Americans; no doubt there was more prejudice against non-Europeans but there was a continuum, not a break, between European and other minorities” (p. 47). Although many early mothers’ aid recipients were of White, northern European heritage, the larger proportion were immigrants who lived in deeper poverty—and

[G]roups today regarded as minorities received only a tiny proportion of mother’s aid.... Not until 1931 did any national survey of mothers’ pensions provide a breakdown by race; then we learn that 3 percent of recipients were black. Even in studies of illegitimacy, which have been intensely racialized in the last few decades, before the New Deal there were few mentions of race. As northern black populations grew, they were able to get somewhat larger shares of aid. (Gordon, p. 48)

Most state and local pension laws were passed in the decade 1910-1920 and the inclusion of “suitable home” provisions maintained the connection between economic support of mothers and the supposed welfare of their children. For example, the 1913 Ohio legislation included the following language:

...the mother, must in the Judgment of the Juvenile Court, be a proper person, morally, physically, and mentally, for the bringing up of her children...such allowance shall in the judgment of the court be necessary to save the child from neglect and to avoid the breaking up of the home of such a woman...it must appear to be for the benefit of the child to remain with such mother...a careful preliminary examination of the home of such mother must first have been made by the probation officer, an associated charities organization, humane society, or such other competent person or agency as the court may direct... (Ohio Commission, cited in Bremner, 1971, p. 387).

With the inclusion of moralistic language in the pension laws, financial aid to women was conditioned upon a subjective assessment of their fitness as parents, and the existing avenues for child removal could therefore act as a major alternative to cash assistance. The monitoring of mothers' behavior through a variety of “suitable home,” “fit parent,” and other restrictive policies has remained a central theme in welfare linking it to child protection, a theme that has continued through the passage of the Social Security Act up to the present.

Child Labor

Also during the progressive era, a movement had begun to regulate and restrict child labor and the apprenticeship of poor children had come under increasing scrutiny (Abbott, 1938; Bremner, 1971). To place limitations on child labor, however, was to fundamentally alter the economic structure of families—particularly for those without an adult male wage-earner. Single mothers relied upon the employment of their children when the children remained at home, and the other alternative—placing out—also relied upon the work of children. Poor children were employed for dual purposes: self-support and vocational training, although many apprenticed children were exploited by the families with whom they were placed (Abbott). One antidote for this system was education, but the original compulsory attendance laws were little followed as there was stubborn opposition...especially from those who employed the children and from poverty-stricken parents who thought the sacrifice of their children necessary. With no adequate program for the treatment of dependency, there were many who agreed that work for some children was necessary, and poverty permits were authorized in some of the state laws (Abbott, p. 263).

Public opinion was divided over child labor, so sharply that Jane Addams was reportedly offered \$50,000 toward Hull House in 1903 “if she would give up her advocacy of a child labor law then being considered in Illinois” (Abbott, p. 265). Addams did not give in, arguing against the “evils of child labor” that “debauches our moral sentiment, [and] it confuses our sense of values, so that we learn to think that a bale of cheap cotton is more to be prized than a child properly nourished, educated and

prepared to take his place in life” (Adams, 1903, cited in Bremner, 1971, p. 648). Protective child labor legislation (the 8-hour law for children under 16) was passed in Illinois in 1903 and the first federal child labor legislation was passed in 1916—although the comprehensive Fair Labor Standards Act was not passed until 1938 (Bremner; Mnookin & Weisberg, 1989). Today, restrictions on child labor are taken for granted as based in a child’s right to be free of exploitation. At the time, the legislation signaled a dramatic shift in the rights of children and the economic well-being of families.

These three movements—child protection, mother’s pensions, and child labor—were linked by their roots in the problem of poverty, with single mothers figuring prominently in all three “because their children were more likely to be in the labor force than other children—about one-third of their children as contrasted to 6 percent of those with fathers” and because it was argued that “undernourished, neglected children could not learn well” (Gordon, 1994, p. 40). Thus, by the turn of the century, a philosophy of family preservation and a preference for in-home care of children, had returned (Abramovitz, 1988). This perspective was formally stated in the first White House Conference on the Care of Dependent Children, which took place in January 1909.

Often cited as a turning point in the child welfare movement, a key component of the conference was a debate over the question “should homes be broken because of poverty?” In the language of the 1909 conference, the dividing line between poverty and maltreatment, or the circumstances beyond poverty which justified child removal, involved parental character. No apparent effort was made to define these standards of “worthiness;” a common understanding seems to have been assumed, and the relative

specificity of today's "neglect" statutes was entirely absent. Similarly absent was any mention of Black children, as the conference focused "almost exclusively on the white family" (Abramovitz, 1988, p. 194). However, the resulting consensus and recommendations of the conference contained the following statement, the first of its kind to formally declare a difference between a family's economic condition and their right (or ability) to raise children:

Home life is the highest and finest product of civilization. It is the great molding force of mind and of character. Children should not be deprived of it except for urgent and compelling reasons. Children of parents of worthy character, suffering from temporary misfortune, and children of reasonably efficient and deserving mothers who are without the support of the normal breadwinner, should as a rule be kept with their parents, such aid being given as may be necessary to maintain suitable homes for the rearing of the children...Except in unusual circumstances, the home should not be broken up for reasons of poverty, but only for considerations of inefficiency or immorality (cited in Bremner, 1971, p. 365).

Children were previously removed for reasons of poverty alone ("destitution") when a parent, most often a widowed or abandoned single mother, had no means to support the child. The development of mother's pensions signaled a major shift in the mode of public support for many poor women and children, a shift designed to preserve "the highest and finest product of civilization": mothers raising children at home. The concept of universal income security for families introduced a baseline societal expectation that children's needs would be met, and child poverty could theoretically be

avoided in a way not possible under the vestiges of Poor Law policy. The accompanying idea was that where parenting failed, children were still to be raised outside the home—thus cementing a link between welfare and child protection. To gauge the failure of parenting, more complex standards needed to be developed: identifiable types of child maltreatment such as physical, sexual, and emotional abuse (which were beginning to be named through the child protection movement), and a definition of neglect that appeared to differ from poverty.

Yet the question of the 1909 conference, essentially a debate over society's threshold of tolerance with family problems, was not easily answered then, and remains unanswered nearly 90 years later. Throughout history the physical well-being and safety of children has been tied to the financial security of their families, and the delineation of more subtle, emotional needs and physical rights of children is a more recent development (Zelizer, 1985). Around the turn of the 20th century, the issue of child safety was more commonly linked to health and hygiene for children, to their caregivers (who needed to remain alive and healthy to support them), and to freedom from dangerous labor conditions than to questions about sexual or physical abuse (Giovannoni & Becerra, 1979; Lindsey, 1994). Equally important over time, however, have been questions of morality and parental "fitness": questions based on theories about the causes (and consequences) of poverty. The views of early social workers and the public, which are often dismissed as judgmental, often include terms such as "intemperate," "immoral," and "lazy" in reference to poor parents and were often imbued with a certain dose of racism. While these assessments may have been moralizing, they

are remarkably similar to the rhetoric leading to the present welfare reform. Nonetheless, the reforms of the progressive era were liberalizing in their time, altering the social and political position of women and children in ways that the 1930s would seal into federal law.

The New Deal

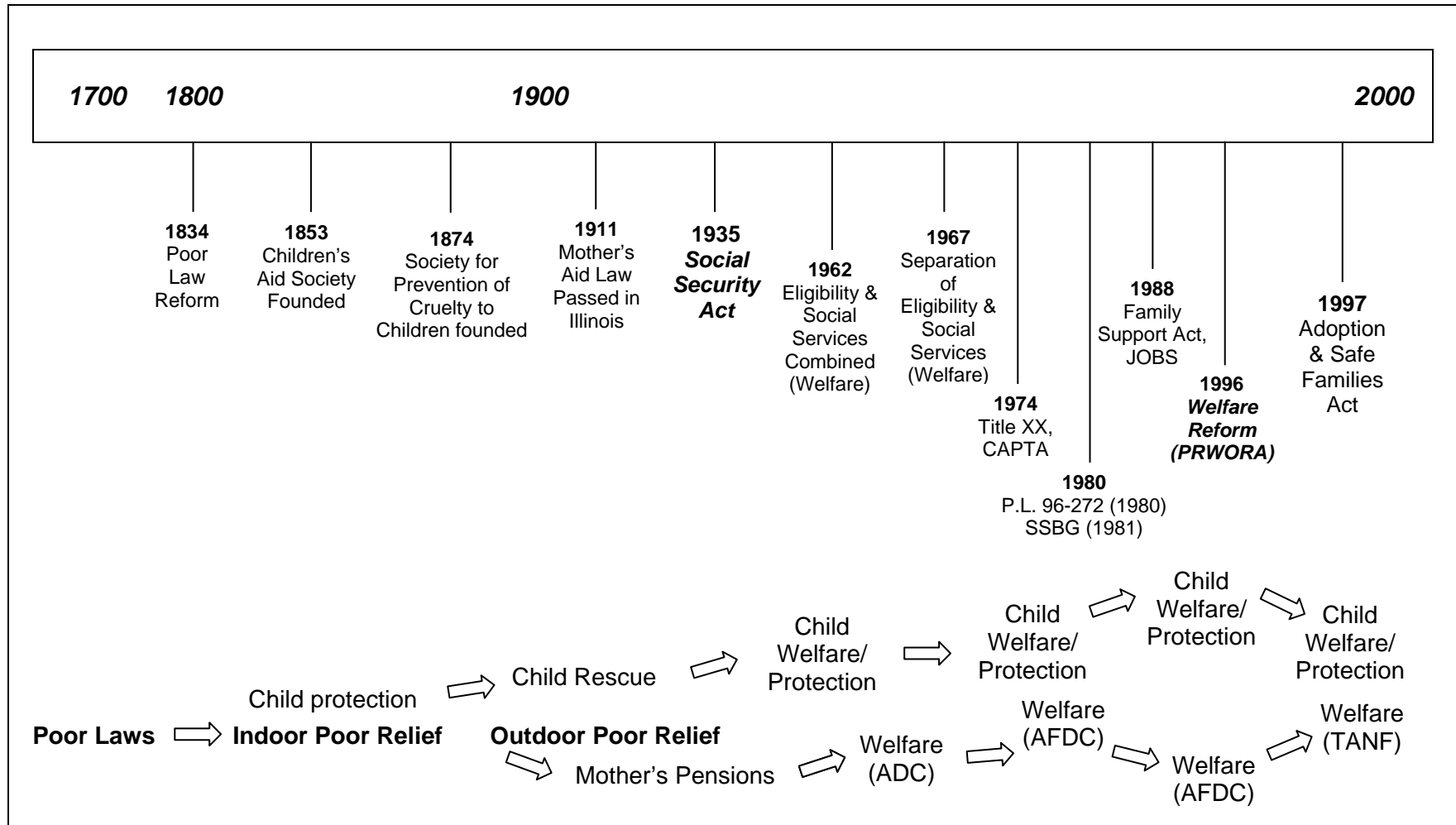
From a family-centered standpoint, the key result of President Roosevelt's "New Deal" was a theoretical guarantee of assistance through a welfare package similar to mother's pensions. In addition to "finally supplanting the poor laws as the primary means of alleviating destitution" for many families (Giovannoni & Becerra, 1979, p. 44), the 1935 passage of the Social Security Act formalized the separate definition and administration of welfare and child protection social institutions (this separation is evident in Figure 4.2, which broadly describes the institutional trends over time). While state and local widow's pensions had prevented the removal of some children from their indigent homes, the Great Depression had created a financial need too great for the states to fill without federal assistance. The Social Security Act of 1935 contained, in addition to Title I (*Aid to the Blind*), Title II (*Unemployment Insurance*), and Title III (*Old Age Insurance*), Title IV—which established Aid to Dependent Children (ADC). In the original Act, Title IV provided cash grants, while Title V reestablished Maternal and Child Welfare Services (based upon the 1921 Sheppard-Towner Act, which had been repealed in 1929) and assigned the Children's Bureau¹ to oversee a new set of child welfare services (Costin et al., 1996). In later years, two sections of Title IV would

¹ The Children's Bureau had been established in 1912 under the Department of Commerce and Labor.

outline income maintenance and other child welfare services programs: the original Title IV (which became, in the 1960s, Title IV-A) made ADC a cash grant program to assist children without fathers; Title V (later known as the Title IV-B *Child Welfare Services Program*) specified that the Children's Bureau would be responsible for the administration of grants for maternal child health programs, services to disabled children, and services "for the protection and care of homeless, dependent and neglected children or those in danger of becoming delinquent" (United States Department of Labor, Children's Bureau [USDLCB] 1940a, p. 80).² The Social Security Act not only cited the importance of furnishing financial assistance, but also "rehabilitation and other services, as far as practicable under the conditions" of each state (United States Department of Health, Education & Welfare [USDHEW], 1963b, p. 31)—and thus, while the income maintenance function of ADC would predominate, the provision of social services to aid recipients would continue for many years. The varying nature of these social services, their auspices, scope, and function, would become a point of administrative debate. Whether as part of ADC (later AFDC) or the present Temporary Aid to Needy Families (TANF), the character of these social services would retain a link between welfare and child protection, embodying the question of how to best improve the lives of poor parents: is cash assistance sufficient, should work efforts be required, and/or do poor parents need comprehensive "rehabilitation" due to lifestyles deemed unsuitable?

² In continued response to the Depression, the food stamp program was begun in 1939, although it was discontinued in 1943 due to food scarcity, and not reinstated until 1964.

Figure 4.2 Trends in the Relationship Between Income Maintenance and Child Protection



The original intent of the ADC program was to provide short-term support to a select group of needy children, those of “deserving” women (primarily White widows), and the program was initially uncontroversial to the public (Coll, 1995; Gordon, 1994). African American mothers were prevented from receiving ADC not in the federal legislation directly, but through a racial divide ensured by the Southern congressmen who chaired key Social Security Act committees and insisted upon states’ rights to determine eligibility criteria (Abramovitz, 1988; Quadagno, 1994). The Social Security Act did *not* specify that aid would be given only to children of suitable homes, nor did it create a state obligation to “maintain levels of health and decency.” Thus,

these two omissions meant that the partnership between the state and dependent mothers implicit in the “suitable home” clauses of Mothers’ Pension statutes [that the state would provide financial support, while mothers would be “fit” and proper caregivers] had no status in federal law (Bell, 1965, p. 29).

However, Congress soon clarified that states could take into consideration the “moral character” of the parents or caretakers when determining a child’s eligibility. States took this option, with dire consequences for many poor (particularly minority) families. Given there were no guidelines on how to assess moral character, “welfare workers tended to fall back on the tried and tested status attributes of birth and color” (Bell, p. 42). A 1942 study by the Bureau of Public Assistance of 16 state ADC programs found that while eligibility conditions nowhere *explicitly* excluded nonwhite and illegitimate children, the latitude with which the suitable home policies were interpreted made such discrimination “endemic” (Bell, p. 42).

It was not until 1940 that the first federal “suitable home” policy was issued, in which states were “urged to develop objective criteria of ‘suitability’ and to assign this task to social workers qualified in family and child welfare work” (Bell, 1965, p. 187).

According to Bell, because of the feeling that such policies in many states

obscured the income-maintenance intent of Title IV, encouraged quasi-authoritative, destructive relationships with dependent families, and many communities into the complacent conviction that ADC could adequately discharge community responsibility for providing social services to families in their own homes (Bell, p. 188),

the federal government issued an attempt at their repeal, in a 1945 policy (Bell, p. 188).

But states continued to outline the boundaries of welfare policy according to local moral standards, and “succeeded one time after another in outwitting the federal government in devising policies that fell most heavily on Negro and illegitimate children, and no doubt in the process they warded off some public criticism” (Bell, p. 189). Thus, the 1948 Handbook of Public Assistance Administration, a briefer version of the 1945 paper, acted as the last federal policy statement on the issue of “suitable home” policies until an administrative directive (the Flemming Ruling, to be discussed later) was issued in 1961.

In the intervening years, since the federal government had not declared the “suitable home” provisions illegal, states enjoyed great leeway in determining the meaning of “suitability” and in defining other restrictive policies such as the related “substitute parent” provisions which proliferated during the 1950s. Bell argues that the

implicit purpose of these “suitable home” and related “substitute parent” policies was twofold: (a) to restrict the caseload growth (the original goal was *not* to cast a very wide net of public support); and (b) to prevent Black children and those born out of wedlock from receiving funds, “who because of their family composition were more apt to qualify than were white children with two able-bodied parents in the home” (1965, p. 175).

At the time of the Social Security Act’s passage, it was believed that ADC would become obsolete as the recipient population gradually qualified for the social insurance programs of the Social Security Act (e.g., unemployment compensation, social security, Medicare, worker’s compensation; DiNitto, 1991). Instead, the opposite process occurred: Due to substantial social and demographic shifts between 1940 and 1950, the number of families on ADC increased from slightly over 1 million to 2 million (Handler & Hasenfeld, 1991). From 1951 to 1961, the number of children receiving AFDC rose by about 60%, and assistance expenditures nearly doubled (USDHEW, 1963b, p. 10); from 1970 to 1993 the number of recipients increased 91%, and expenditures rose 44% (Committee on Ways and Means, 1994).

Initially, income maintenance had the desired impact, as many White children remained at home who would likely have been removed several years earlier. Although in 1938 the Social Security Board believed the ADC program was failing to reach all the needy, the numbers far surpassed those anticipated and by 1939, about 718,000 children were receiving ADC (Coll, 1995). By the end of the 1930s, corresponding with the impact of ADC, the number of children maintained in their own homes was reportedly higher than those in foster or institutional placements (Davidson, 1994). Still,

the population of children placed out-of-home reportedly hit its peak in the 1930s, when it was estimated that over 144,000 children were in institutions and another 100,000 were in other forms of out-of-home care (Davidson; Pelton, 1989). Placement rates had increased from 4.3 per 1,000 U.S. children in 1910, to 5.3 in 1923, and 5.8 in 1933 (Pelton). The orphan population was declining, though, and dropped from about 750,000 in 1920, to 450,000 in 1930 and 60,000 in 1954 (Pelton). From the '30s on, the child protection foster care population would steadily decline until about 1961, when it would again increase until 1980, experience a temporary decline following permanency planning legislation in the early '80s, and then rise again through the '90s (Barth, Courtney, Berrick, & Albert, 1994; Pelton).

It is important to acknowledge that the historical link between “unsuitability” (as assessed by public welfare workers) and the removal of children is certainly not seamless: It depended upon a variety of factors including the availability of out-of-home care. In the mid-1940s, social workers pointed out that

Rarely in any of the local programs were children actually removed from “unsuitable homes.” The more frequent consequence was either outright refusal of public aid or referral to general assistance where such programs existed...the wholesale application of this eligibility requirement so confused welfare workers in their attempts to differentiate between the exceptional situation in which a child was actually neglected and the more typical situation in which communities objected to supporting certain groups of families, and hence defined their homes as “unsuitable,” that the likelihood of individualization was small indeed. The

result was that children were neglected by parents and community alike and were left with little hope of protection or financial aid. The regional advisors predicted that until the income-maintenance function became the primary, if not the sole, task of ADC, neither child welfare nor assistance functions could be performed adequately (Bell, 1965, pp. 49-50).

Within the new policy context of the Social Security Act, the concept of child welfare as a social concern was viewed broadly as “a composite of the social and economic forces in community life which make it possible for a child’s own family to nurture him,” (USDLCB, 1940a, p. 2). During June 1938, the Title IV-B program served more than 43,000 children in approximately 500 counties, and the following problems were identified:

The need for care and protection of children who were neglected or mistreated or who were born out of wedlock predominated.... Next in number were children who were in danger of becoming delinquent because of their environment or whose conduct was a source of trouble in school or community. More than 1,200 children accepted for service during the month were in need of special care or treatment because of physical handicaps.... Almost 600 of the children received for care were mentally defective or were in need of diagnosis to determine their mental condition and to obtain for them the protection and training needed (USDLCB, pp. 3-4).

Yet the federal report acknowledges a debate over the efficacy of casework methods in a post-depression era:

The question may be raised as to what purpose is served by having a children's worker go into a community where child neglect, dependency, and delinquency for the most part spring from basic economic problems about which the worker can do nothing. The answer, it would seem, is that...only as our children are made visible do we have the evidence which is needed, if, as a Nation, we are to attack the basic causes which produce child dependency and neglect (USDLCB, 1940a, p. 5).

One legacy of the Great Depression was a distinct awareness of the effects of family poverty. The 1940 White House Conference on Children in a Democracy identified as disadvantaged, those

children who are crippled, blind, deaf, mentally deficient, or affected with certain physical or mental ailments...the orphans happily a diminishing group—the neglected and abandoned children, and the delinquents.... There are hundreds of thousands of such children (USDLCB, 1940b, p. 9).

The report from the conference goes on to identify as most numerous,

the children whose families are in economic distress. Prior to the depression there may have been hundreds of thousands in this category—underfed, ill-clothed, driven and anxious, slowly losing the vitality and hope that are childhood's right. With the depression, however, they not only became more numerous than the others, but made up a large proportion of the total body of American children (USDLCB, p. 10).

It was hoped that much of child poverty could be managed through ADC, although the poverty experienced by Black families was largely invisible to those in the Roosevelt Administration:

southern blacks in the 1930s seemed a world apart to the northern elite whites who dominated the national welfare discourse. The meanings of “single mother” in the depression and of “dependent children” in the Social Security Act were shaped by the white experience (Gordon, 1994, p. 35).

During the 15-year period following the passage of the Social Security Act, few changes were made in the ADC program—the first major change did not occur until 1950, when heads of households (parents or guardians) were made eligible (DiNitto, 1991). However, the composition of recipient families changed dramatically during the first 30 years of the ADC program. For example, Black families grew in overrepresentation on the welfare rolls in the postwar years,

although the absolute number of whites remained larger...black families accounted for two-thirds of the increase in ADC rolls between 1948 and 1961, rising from 31 percent of the case load in 1950, to 48 percent in 1961. The addition of non-white Hispanics to the rolls produced a non-white majority in the sixties, although nearly 42 percent of the ADC recipients nationwide were white (Abramovitz, 1988, p. 321).

As the effects of the Great Depression receded from the public consciousness, child welfare concerns shifted dramatically, away from economic concerns and towards emotional ones. The predominant theme of the mid-century White House Conference

on Children and Youth (Richards, 1950) was the “healthy personality development” of the country’s children, and it was stated that “material factors affecting children, such as physical health and economic needs, for example...would be viewed in their relationship to personality development and social adjustment” (Richards, p. 16). No longer was the sting of economic depression foremost in the minds of the public or child advocates. Postwar concerns were for the spiritual and emotional development of children and fostering the responsibilities of citizenship (Richards). Despite this interest in the immaterial well-being of children, the poverty experienced by children and families had not been eliminated: During this period, the welfare rolls were steadily increasing (Handler & Hasenfeld, 1991).

The ‘60s Through the ‘90s

Child Maltreatment Regains Visibility

As reflected in the relative absence of emphasis on child abuse in the above discussions, most historical accounts suggest that child maltreatment faded from the public view and consequently that child “rescue” efforts more or less disappeared between the years 1910 and 1962. According to Costin et al. (1996),

By the 1920s, the anti-cruelty movement had lost its momentum, changed its purpose, and become less visible. During the New Deal of the 1930s and the War on Poverty of the 1960s, child abuse and neglect were footnotes in the major policy tracts written by Progressive, and later, liberal politicians, and the social welfare literature from the early 1900s through the 1950s reflects a sharply

diminished discussion of child abuse as a specific condition requiring intervention by community agents (p. 8).

It is the publication of an article, *The Battered-Child Syndrome*, by pediatric radiologist C. Henry Kempe and colleagues that is frequently cited as the date of “discovery” or “rediscovery” of child abuse in the United States (Kempe, Silverman, Steele, Droegmueller, & Silver, 1962). In actuality, Kempe’s work followed on the heels of similar publications by pediatricians Caffey (1945, 1956) and Wooley and Evans (1953), pathologist Adelson (1961), and roughly coincided with that of social workers Elmer (1960) and Boardman (1962). But in terms of public impact, Kempe’s work triumphed, perhaps because of the numerous popular articles published almost immediately in magazines like *Time* and the *Saturday Evening Post* (Nelson, 1984).

The battered child was identifiable in a social context where casework services were being offered to welfare recipients and where parenting was therefore under more detailed scrutiny. In 1960, Urie Bronfenbrenner suggested that parenting behaviors had undergone several major shifts in the preceding 25 years, along with accompanying changes in child behavior. Specifically, the trends identified since 1935 were summarized as: greater permissiveness “toward the child’s spontaneous desires;” “freer expression of affection;” increased reliance on psychological versus physical discipline; a “narrowing of the gap between social classes” such that middle-class values around child-rearing became more of the “compelling” standard; and a shift in parenting related to gender roles, or the increasing affection of fathers and more common role of mothers as disciplinarian (p. 2).

The preceding decade's emphasis on emotional neglect was continued and the classless nature of the problem asserted as in the reference papers associated with the 1960 White House Conference:

Many children today are reared in homes which provide all the physical advantages common to middle and upper-middle income families but lack adequate emotional nurture. These children are as severely neglected as, and may be more permanently damaged than, those who have suffered through physical neglect and abusive treatment" (Mulford, 1960, p. 211).

In terms of legal definitions of neglect, the report's author states that "[W]hile it would be hard to find specific reference to psychological or emotional neglect in these statutes, it is thereby implication since physical, emotional, and social development are interdependent" (Mulford, p. 212). Such implications may have been made easily, given the vagueness of the neglect laws, which continued to reference the "depravity" of parents as reasons for unfitness (e.g., New York), or the absence of "moral care and discipline, or growing up under conditions...damaging to a child's sound character development" (e.g., Massachusetts; cited in Mulford, p. 212). However, child neglect continued to be held against the welfare baseline by which physical care was met, and it was understood that "children who live in families receiving public assistance, although there may be economic problems present, are not neglected, but would have been were public assistance not available," and casework services were viewed as preventive, as well (Mulford, p. 213). Finally, the same report suggests that the

child whose parent fails to provide adequate food, clothing and shelter but whose behavior makes the child feel loved and wanted can bear this deprivation providing his health is not seriously impaired, but the child who feels that he is not being fed and clothed because of his parent's indifference or lack of affection carries a scar which may seriously affect his emotional growth and future development (Mulford, p. 217).

Physical abuse would gain greater prominence in the next several years, but this emphasis on a child's emotional needs was having another effect. The work of John Bowlby (1969), and child welfare researchers Maas and Engler (1959) had demonstrated the emotional challenge faced by children upon separation from their parents. Thus, the 1960 report reminded caseworkers to also assess the emotional import of a child's relationship to his/her primary caregivers, and to "carefully evaluate what value the child's own home has for him even though it does not meet all of the ideal physical standards. Experience has clearly shown that separation of a child from his parents can be...a difficult and painful process" (Mulford, 1960, p. 218).

Eligibility and the Casework Model

While these shifts were occurring in the realm of child protection, income assistance programs for families would experience dramatic change during the decade of the '60s. With the poverty-focused activism of the early '60s and publications such as *The Other America* (Harrington, 1962) expanding the view of poor people's needs, the public and political leaders had been sold on the idea of "rehabilitating" the poor through counseling and social services (Bane & Ellwood, 1994). The concept of offering

services in addition to cash assistance within welfare had been included in the 1956 Amendments to the Social Security Act, encouraging (but not requiring) states to provide services by specifying them as reimbursable costs (at 50% federal match) for the first time (Coll, 1995). According to Coll, the preamble to Title IV of the original 1935 Act stated: “For the purpose of enabling each State to furnish financial assistance so far as practicable under the conditions in each state, to needy dependent children” (p. 197), whereas the 1956 Amendments added the purpose of “encouraging the care of dependent children in their own homes or in the homes of relatives,” as well as to “help maintain and strengthen family life and to help such parents or relatives to attain or retain capability for the maximum self-support and personal independence consistent with the maintenance of continual parental care and protection” (cited in Coll, p. 195). Thus, the goals of welfare were dramatically expanded. Although the legislation also included appropriations for social worker training (given the shortage of adequately trained staff), “the result was brief euphoria in social worker ranks, but no appreciable change in state and local practice” (Coll, p. 196).

The War on Poverty offered little to child welfare specifically, with the exception of Head Start programs (Costin et al., 1996). Title XIX, passed in 1965, authorized Medicaid, thus ensuring health care for low-income elderly, SSI, and AFDC recipients, and in 1967, new funds were made available through Title IV-A, resulting in an expansion of daycare for the working poor (Costin et al., 1991). But the changes most crucial to the welfare/child protection relationship began with the 1961 and 1962 Amendments to the Social Security Act. In response to concerns that the ADC program

negatively influenced family structure (by purportedly encouraging unemployed fathers to desert their families), the ADC-Unemployed Parent (ADC-UP) program was enacted in 1961, allowing payments to two-parent families where the traditional breadwinner was unemployed (Costin et al., 1991; DiNitto, 1991). In 1962, the ADC program was again amended, with an accompanying program name change from ADC to AFDC (*Aid to Families with Dependent Children*). This change emphasized the family unit and considered a second unemployed or incapacitated adult eligible in states with AFDC-UP programs (DiNitto)³ Also new was the amendment to Title V that defined daycare as a child welfare service (Costin et al., 1991). These liberalizing moves in welfare policy were accompanied by the expansion of services to welfare recipients.

In contrast to the 1956 legislation, the 1962 Amendments both required and provided for greater federal participation in the cost of services to AFDC recipients (Coll, 1995; Shyne & Shroeder, 1978). Federal support to the states was increased from 50 to 75% of the cost of providing casework, job training, and other services to welfare recipients (Bane & Ellwood, 1994; DiNitto, 1991). In order for states to qualify for the higher matching rate, each of the 2.8 million children on AFDC was required to have a “social study” completed by a social worker—an assessment of that child’s mental and physical condition and school progress—and the development of a plan to resolve any evident problems (Bane & Ellwood). The “social study” was most often conducted in the client’s home and workers were also encouraged to make collateral contacts in completing their evaluation.

³ Only half the states would voluntarily adopt these unemployed parent provisions, until 1988, when the Family Support Act required them.

The social study which resulted from the 1962 Amendments was intended to lead to services that would help families improve a broad array of conditions, in part to avoid the need for out-of-home placement. Early in the history of ADC, the variety of “suitable home” provisions had ensured the link between the public assistance and child protection systems. Although the original Social Security Act had not in itself contained any suitable home provisions or specified parental fitness, the broad discretion allowed to the states (and to individual social workers) followed on the tradition established by promoters of mothers’ pensions, regarding the granting of relief to “nice families” (Coll, 1995). The range of interpretations of “suitable home” policies led to some confusion between welfare and child protection agencies, however. The 1945 State letter on “suitable homes” stressed the impossibility of precise definition of such a home and noted that

cutting off benefits to the mother was not an immediate and direct help to the children. If the home presented a danger such as neglect or abuse of the child, protective services through child welfare agencies and the courts should be utilized. On this basis, the bureau recommended deletion of the suitable home provisions from public assistance laws. In the interim, welfare agencies were urged to reexamine their policies with a view to separating the protective from the eligibility function. Fifteen states did repeal their suitable home provisions, but five others passed new suitable home laws. By 1960 almost half the states had such laws. (p. 187)

Separation of child protection from welfare eligibility may not have clarified which agency was responsible for ensuring that children were being cared for in suitable homes, however. The “eligibility function” referred to above was extended, in some states, to include “moral aspects” such as the following 1952 Georgia policy on ADC benefits which stated:

1. A family is not eligible unless the home is suitable.
2. Children are not deprived of support if they have an able-bodied father or stepfather living in or in-and-out of the home.
3. Birth of an illegitimate child raises a question in regard to both the suitability of the home and the presence of a substitute father. (Coll, p. 187)

This tripartite policy effectively reduced the ADC rolls, especially among African Americans who had begun to gain a more proportional share of the caseload over time (Bell, 1965).

In Florida during the same period, six of seven legal conditions defining unsuitability

named commonly recognized neglect factors, such as abuse, failure to provide acceptable physical needs, lack of parental supervision, or repeated convictions of the parent for disorderly conduct, alcoholism, or prostitution. The seventh was similar to other state laws: “Failure...to provide a stable moral environment for the child, by engaging in promiscuous conduct either in or outside the home, or by having an illegitimate child after receiving an assistance payment..., or by otherwise failing to demonstrate the intent to establish a stable home (Coll, 1995, p. 188).

Most striking were the three alternatives available to Florida welfare recipients who failed to meet these standards:

1. If there was reasonable hope of improvement within a 6-month period, a final decision could be postponed so that the ADC grant and whatever social services the welfare agency could provide might assist families to meet the standards;
2. If homes were felt to be hopeless, parents could “voluntarily” release their children for placement; or
3. If they refused, or an acceptable relative’s home was unavailable, the agency can file neglect charges so that the court could place the children in foster homes. (Bell, 1965, p. 130).

Within the first year of the policy (beginning June, 1959), 81% of homes were declared “unsuitable,” and faced with the above choices, many families withdrew from assistance (Bell). The Florida ADC caseload dropped dramatically (Bell; Coll, 1995).

These ideas were resurrected in 1961, in a small New York town called Newburgh. In response to demographic shifts leading to a local welfare budget overload (one sixth of the city budget), ADC and general assistance (public welfare to adults not qualifying for other established programs such as ADC, SSI, or Unemployment) came under attack. As reported by Coll (1995), the city manager wrote 13 welfare rules including the following:

Prior to certifying or continuing any more Aid to Dependent Children cases, a determination shall be made as to the home environment. If the home environment is not satisfactory, the children in that home shall be placed in foster care in lieu of welfare aid to the family adults” (New York Times, 1961).

Although Newburgh’s attempt at welfare reform was halted by the courts, it foreshadowed the 1962 Amendments to the Social Security Act. In response to public

demand, “rehabilitative, preventive, and protective services” provided by greater numbers of social workers with graduate education were promoted as the answer to the growing “welfare problem” of the late ‘50s across the United States (Coll, p. 218). Simultaneously, a new door was opened for poor children to enter the foster care system through the avenue of *ending* “suitable home” provisions.

During the same year as the Newburgh crisis, the state of Louisiana created one of its own, which would ultimately stimulate change in the “suitable homes” regulations. In the summer of 1960, 6,281 families with 23,459 children were suddenly dropped from ADC, because of the “unsuitability” of their homes. Among the offenses, 90% of these adults had become pregnant or given birth to an illegitimate child after receiving their first welfare check (Bell, 1965). Ninety-five percent of the children were African American. Publicity about the resulting poverty of so many of Louisiana’s families finally led the Social Security Administration to review the state’s conformity to Title IV. Several months later the commissioner of Social Security “reluctantly” ruled that Louisiana could not be found in noncompliance (Bell). The day after the commissioner’s ruling (on January 17, 1961), a decision by the departing Secretary of Health Education and Welfare, Arthur Flemming, directed state agencies to no longer uphold “suitable home” criteria for ADC eligibility. The “Flemming Rule” was based upon the Secretary’s opinion that:

when a needy child who otherwise fits within the Aid to Dependent Children program of the State is denied the funds that are admittedly needed to provide the basic essentials of life itself, because of the behavior of his parent or other

relative, the State plan imposes a condition that bears no just relationship to the...program (Flemming, 1961, cited in Pappas, 1996).

The Flemming Rule barred states from withholding cash assistance from homes deemed unsuitable, and although it did not *directly* address the issue of moral judgement (Abramovitz, 1988), it was substantively an effort to protect poor families from having their aid cut off, for moral (or racist, or sexist) reasons. In order to write a sound administrative policy outlawing the “suitable home” criteria, it makes sense that Flemming needed to include a provision for cases which were, indeed, unsuitable (or unsafe) for children. The first alternative involved social service efforts to improve the problematic conditions of the home, but the ultimate provision was of course, foster care. In the effort that followed to transform Flemming's regulation into law, “emergency legislation” was presented to Congress by a Task Force on Health and Social Security, and signed by President Kennedy in May of 1961. The result was two temporary Amendments to Title IV (to run for 14 months), which included: assistance for the support of children of unemployed parents living at home (at state option), and assistance for children in foster homes (Coll, 1995). Thus, the first federal support for poor children in foster care was the outgrowth of liberalizing policy in the ADC program. Federal matching for the cost of children in foster care was made permanent in the 1962 Public Welfare Amendments, the same legislation promoting the casework model.

Division of Responsibilities for Child Protection

Another key element of the 1962 changes to the Social Security Act was originally promoted as “integration of child welfare services under the Children's Bureau

with family social services under the Bureau of Public Assistance,” which although they both reported to the commissioner of Social Security, had heretofore practiced separately in most larger agencies (Coll, 1995, p. 219). According to Coll, child protection was reluctant to integrate with welfare, in part because Title V for Child Welfare Services “made no distinction regarding the material status of the child,” but also because the Children’s Bureau heads “could see the skills of their better trained staffs dissipated if they moved into public family services as envisioned by the new look in public welfare” (Coll, p. 220). In 1954, the Social Security Administration (under USDHEW) had brought together joint state and regional groups from the Bureau of Public Assistance and the Children’s Bureau, to examine “the increasing interest and concern about the social problems of many families receiving aid to dependent children and the necessity for...social services,” and to discuss “how cooperative activities of the two Bureaus could help in the development of more adequate services” (USDHEW, 1961, p. 1). A summary of the discussions was published by USDHEW following the 1956 Amendments to the Social Security Act (which encouraged the development of services within ADC).

The summary report from these meetings reflects confusion among the States regarding the goals and functions of services in public assistance, vis-a-vis child protection and widely varying implementation practices. This was, in part, related to the comparative level of professional training for workers in the two programs:

One primary source of confusion seemed to be the tendency in many places for the nature and extent of services to be determined by the numbers and

competence of public assistance staff rather than by the definition of sound program objectives. Shortages of public assistance staff, the severity of problems in aid to dependent children cases, and the limited number of public assistance workers with professional preparation for giving casework services were all cited as realities which have tended to shift responsibility for services, which by definition should have been developed within the aid to dependent children program (USDHEW, 1961, p. 12).

At the same time, “the reality that child welfare services coverage was in no sense adequate in all States and counties” meant that “aid to dependent children workers had in some instances to assume responsibility for providing services to children that would ordinarily be considered the function of the child welfare staff” (USDHEW, p. 13). Further, it is reported that “clarification of the respective functions of public assistance and child welfare was thought to be a fundamental necessity in overcoming some of the difficulties in program planning and in the delineation of services in aid to dependent children” (USDHEW, p. 13). The meaning of “services” in ADC and the extent and scope of those services in relation to eligibility determination was part of the confusion. This was further complicated by the need for coordination between ADC and child welfare services administration. It was reported that in one case:

a State in which both programs were coordinated within a single Statewide agency reported that caseworkers carrying both public assistance and child welfare cases were more alert to the special needs of children in aid to

dependent children families as a result of their experience with other child welfare cases (USDHEW, p. 21).

The report summarizes the following “problems in handling cooperative cases”:

(1) inadequate staff due to lack of administrative funds and also shortage of trained staff; (2) lack of a positive concept of services; (3) procedural difficulties in referrals; (4) lack of clarity in procedural guides; (5) lack of clarity of the role of the public assistance and child welfare service field staffs; and (6) inadequate training of public assistance and child welfare service field staffs in the use of criteria and the knowledge of both programs (USDHEW, p. 23).

During the '50s, some states managed these problems by experimenting with specialized caseloads or with rotating intake functions between public assistance and child protection workers. In the above case, “the county director made the decisions regarding assignment of the case. If children’s problems seemed to predominate, the case was assigned to the child welfare worker who performed all services, including eligibility determination,” rather than having two workers on the same case (USDHEW, p. 37). Similarly, during this period both public and voluntary child protection agencies were in the business of providing social services to unmarried mothers, with regard to “the immediate problem of pregnancy out of wedlock, or focused on rehabilitation and prevention of future problems” (USDHEWCB, 1962, p. 43). Although there was tremendous variation among states “in the proportion of unwed mothers who are reached and the types of services that they receive (in) all parts of three quarters of the States, help for unmarried mothers in making plans for themselves and their babies is

provided through a public child welfare office” (USDHEW, 1962, p. 43). Even in parts of the country where services were more developed, it was noted that many services, including maternity homes, were not nearly as available to African American as White women. In addition to unwed mothers, child welfare services were provided to children “neglected, abused, or exploited by their parents,” children having “troubles or conflicts in their families or who are in need of guardians or permanent homes through adoption,” those with behavior problems, illness or handicaps, or “suffering from emotional difficulties,” and “those who have problems arising out of special home conditions, such as employment of the mother or her absence from the home...for other reasons” (USDHEW, 1963a, p. 5).

Thus, through the early 1960s the line between public assistance and child protection remained fuzzy. From the 1961 DHEW report, it appears that as long as income maintenance functions were distinct from casework services in terms of policy, administration, and implementation, welfare departments could maintain some clarity of purpose. With the increasing expectation that services beyond income support be provided within the public assistance realm, however, departments were faced with the confusing task of differentiating the needs of a “welfare” family from those of a “child welfare” (or “child protection”) family. Did children need protection from economic instability or from their parents? A substantive difference between these families is not evident in the document. Rather, the demarcation was made based upon availability of staff with graduate education—staff who were given the apparently higher-risk, child protection cases.

In light of the apparent overlap between agencies during the '50s, it is interesting that the ensuing 1962 legislation required child protection services to provide for coordination with ADC, but did not result in joint planning by the Bureau of Family Services (BFS) and the Children's Bureau (in spite of the opening up of service provision within welfare). President Kennedy's 1962 bill had the following explicit purpose:

This measure embodies a new approach—stressing services in addition to support, rehabilitation instead of relief, and training for useful work instead of prolonged dependency. This important legislation will assist our States and local public welfare agencies to redirect the incentives and services they offer to needy families and children...to prevent or reduce dependency and to encourage self-care and self-support—to maintain family life where it is adequate and to restore it where it is deficient. (Cohen & Ball, 1962, pp. 9-10, cited in Coll, 1995)

The actual implementation of this services mandate would become far more complicated, however. The policies and procedures manual "State Letter No. 606" which "ran for sixty-eight single-spaced typed pages," still did not specifically define social services (Coll, p. 233). Instead of listing social services which qualified states to receive their 75% match, problems were listed, and the result was "so exhaustive" that "the 75% match was all but guaranteed when the family caseworker engaged in any word or deed that was not exclusively eligibility determination" (Coll, p. 233). Although many states moved to develop service plans, the staffing and financing limitations were quickly apparent. Thousands of caseworkers were hired as a result of the new

legislation, but the number of positions far exceeded the population of graduate level social workers and training was insufficient; also inadequate in number were the “hard services” programs to which caseworkers could actually refer clients (Bane & Ellwood, 1994). Thus, “the goal of promoting self-sufficiency with a network of professional caseworkers remained elusive” (Bane & Ellwood, p. 11).

During the period preceding the 1961 and 1962 Amendments, it appears there was wide variability in States’ implementation of child protective services. Many services were still provided by private child protection agencies, and although Mulford (1960) states there was a trend toward public agency responsibility,

in some States it is clear that legislation does not give the public welfare agency specific responsibility for providing protective service. In other states, there are provisions that give overlapping responsibility to the courts and public welfare agencies. In still other states, the legislation is permissive and does not require the public welfare agency to set up protective services (p. 218).

The limited availability of protective services paralleled the limited government funds for the out-of-home placement of children. A national study by Jeter (1963), completed in 1961, reports that “while the States with few exceptions reported neglect, abuse, or exploitation as the principal problem in the largest number of cases, there was less unanimity in principal service given and protective service was by no means the most frequent” (p. 72). Foster care was a commonly used service by both public and private agencies, and the question of “who pays for foster care?” was part of Jeter’s study. The result: of children placed by public agencies, 7% went unpaid for, 3% were funded by

parents, less than 1% by relatives, 30% by county funding, 34% by state monies, 24% through “a combination of parents, relatives, county, and State,” and 2% by voluntary agencies” (Jeter, p. 83). Foster care, a chief child welfare service, received no direct federal support through the original Social Security Act until it was amended following the Flemming ruling in 1961.

Federal Support for Child Welfare

In 1961, the first federal dollars were allocated to assist states in paying for foster care through IV-A (Committee on Ways & Means, 1996), and from 1961 to 1980, Title IV-A was the mechanism supporting foster placement for AFDC-eligible children (Costin et al., 1996).

This appreciably increased the funds available for foster care in at least some states, but it tied this major child welfare service to income level. Furthermore, a child could be placed in AFDC-funded foster care only if the removal from the child’s home was “a result of judicial determination to the effect that continuance therein would be contrary to the welfare of the child,” a requirement that could reduce the possibility of parental resumption of care (Shyne & Shroeder, 1978, p. 8).

Prior to this change, at the time of the 1961 study, child welfare services under Title IV-B:

were available, to the extent they were funded, on the basis of a child’s need regardless of economic status. Modest federal appropriations assisted states to finance the costs of administering a range of services.... Federal funds were

insufficient to meet the costs of foster care, which were borne by the states and local governments” (Shyne & Shroeder, p. 7).

In that year, approximately 400,000 children received public child welfare services including, but not limited to, foster care. Jeter (1963) estimated that in the same year another 125,000 children received “casework services” from voluntary child welfare (child protection) agencies. “In addition to these specialized services, social services from public assistance units were available to the 2.8 million children and their families who were recipients of AFDC” (Shyne & Shroeder, p. 7). The decision to base foster care funding on a child’s poverty status would have significant consequences for the foster care population, although the 1962 Public Welfare (Social Security Act) Amendments simply continued funding child welfare services in the form of closed-end appropriations (Coll, 1995). Thus, simultaneous to the increasing availability of federal dollars for casework services to the AFDC population (which placed welfare mothers under greater scrutiny as to their “fitness”) a bridge was established by the opening up of IV-A dollars for poor children in need of foster placement. If social workers provided services and mothers were deemed “unfit,” federal monies essentially continued to be available to the *child* (through foster care), but were withdrawn for the mother.⁴

The widespread provision of social services through welfare would last only 5 years, however. Additional amendments and judicial decisions in 1967 and 1968 fundamentally altered the degree to which welfare recipients were actively monitored in

⁴ Such implications for the shifting use of federal funds foreshadowed the current “child only” provisions of welfare reform in PRWORA, as the withdrawal of benefits to mothers is conditioned upon their behavior. Whether this will also result in higher foster placement rates is yet to be seen.

terms of their behavior as mothers. Early in the history of ADC and AFDC, the “man-in-the-house” or “substitute parent” rules had stipulated that in few circumstances could a woman collect aid while involved with an able-bodied man—whether the father of her children or not. In order to insure that no adult males resided in the recipient’s home, “midnight raids” were conducted by social workers to identify this form of welfare fraud (DiNitto, 1991); a practice that was determined illegal in a 1967 California Supreme Court ruling (Trattner, 1989). The Supreme Court decision in *King v. Smith* (1968) invalidated the “absent father” rules, so that mothers could no longer be denied benefits for “cohabiting” with a man (Pappas, 1996). This was reiterated in the 1970 *Lewis v. Martin* decision (Sosin, 1986). These legal precedents significantly protected the privacy of welfare recipients, although they did not completely remove the element of surveillance from welfare. While “suitable home” policies were stipulated as unlawful eligibility conditions, state agencies were still expected to offer services to improve home conditions or place children in foster care (Courtney, 1997; DiNitto, 1991).

As early as 1967, it was apparent that the welfare casework model of 1962 was not living up to its promise: The caseload was increasing, not decreasing, and the federal government responded with a directive that states reorganize and separate welfare eligibility from service provision (Bane & Ellwood, 1994). Ultimately, this separation was “mandated by DHEW in 1969, based on the conviction that caseworkers could provide more effective services if not responsible for administering financial aid, and that aid should not appear to be conditional on acceptance of service” (Shyne &

Shroeder, 1978, p. 8)⁵. These changes, accompanied by increased application for benefits and legal appeals promoted through welfare rights organizations, led to a dramatic expansion in welfare caseloads between 1967 and 1972 (from 5 to 10.9 million; Sosin, 1986). In spite of the apparent separation of income from service provision within *welfare* in the late '60, Shyne and Shroeder reported that:

Simultaneously...federal regulations prescribed the integration of services for child welfare and AFDC cases. Ideally, implementation of this seemingly logical step could have meant upgrading service for AFDC families to the level of service for child welfare service recipients. In fact, the opposite is believed to have occurred, with the specialized services, small caseloads, and professionally trained staff characteristic of the former child welfare service units lost in the new, large, multi-functional agencies. (p. 9)

Thus, along with the 1967 Amendments to the Social Security Act, which separated eligibility from social services within *welfare*, the administration of child welfare/child protective services and AFDC were placed under a single unit at the state and county levels, an action that was intended to increase coordination and service planning (Costin et al., 1991). As stated in a 1969 guide to the federal regulations,

The purpose of this legal mandate is to assure a unified program of services in both AFDC and CWS without any differences in the quality of a particular service to AFDC and CWS cases. This means there may be no duplicate staffs

⁵ Others have stated that an administrative order in 1968 "separated services workers from those who determined eligibility, but few states complied for two or three years" and that the hiring of professional workers with greater sensitivity was associated with expanded applicant acceptance and grant increases (Sosin, 1986, p. 271).

separately providing the same services to AFDC and CWS cases.... A single unified program of services in AFDC and CWS does not preclude differential assignments of staff in state and local single organizational units for specialized family and child welfare services, e.g. protective service, foster care, adoption service, or services for seriously disordered families, provided such staff equally relate to both AFDC and CWS cases requiring such services (USDHEWCB, 1969, pp. 2-3).

While it is difficult to ascertain from historical documents exactly how the service responsibilities played out in 1969, it appears that as the welfare services function was being separated from eligibility, at the same time, the welfare department was drawn closer to the purview of child protection. Thus, some mothers and their children would continue to receive casework services, for as welfare eligibility and social services diverged, welfare and child protection administratively converged.

A New Child Protection Agenda

In the 1970s, as the welfare system would move away from the personalized, casework model toward increasing bureaucratization (Bane & Ellwood, 1994), casework interventions in child protection would intensify. Later in the decade, the sexual and physical abuse of children began to appear on the agenda of child protection professionals and the public (Finkelhor, 1986). This continued the trend whereby forms of abuse, more than neglect, were identified as the central forms of maltreatment, and attention by the Children's Bureau and other advocacy groups led to the development of mandatory reporting laws, enacted in every state by 1973 (Pelton, 1989). The Child

Abuse Prevention and Treatment Act of 1974 (PL 93-247) formalized the mandate that states provide systems for the reporting of child abuse and neglect, and further intended to “provide financial assistance for demonstration programs for the prevention, identification, and treatment of child abuse and neglect, and to establish a National Center on Child Abuse and Neglect” (Child Abuse Prevention and Treatment Act Report, 1983, as cited in Pecora et al., 1992, p. 13). The passage of Public Law 93-247 dramatically increased the numbers of children reported for abuse and neglect and the rates of children in foster placement soared. From 1967 to 1977, the number of child abuse reports increased from approximately 10,000 to 838,000 (rates of 0.1 to 13 per 1,000 children; McCurdy & Daro, 1993, cited in Lindsey, 1994) and from 1965 to 1977 the numbers of children in out-of-home placement climbed from 283,300 to 503,000 (rates of 4.1 to 7.6 per 1,000 children; Pelton, 1989). The combination of public awareness, legal mandates, and broad definitions of what constituted “reportable” abuse exponentially increased the number of children identified for protective services, forcing the child protection system to increasingly respond from an investigative standpoint. The 1974 CAPTA also provided the first federally sanctioned definition of child maltreatment:

Child abuse and neglect means the physical or mental injury, sexual abuse, negligent treatment, or maltreatment of any child under the age of eighteen by a person responsible for the child's welfare under circumstances which indicate the child's health or welfare is harmed or threatened thereby (Public Law 93-247, section 2, cited in Barnett et al., 1993).

The inclusion of child neglect in this definition was controversial (Barnett et al.), and additionally, the passage of P.L. 93-247 involved politicians' endeavors to represent child abuse as a "classless" phenomenon, minimizing evidence for the correlation between poverty and maltreatment (Pelton, 1978, 1981). In their 1978 review of the federal child welfare services program, Shyne and Shroeder suggested that the passage of CAPTA, with its emphasis on child protection, "may have diverted attention from the need for other services to children in their own homes" (pp. 8-10). The increasing child welfare focus on abuse and child protective interventions (including the use of foster care) occurred within an environment that, compared to the previous decade, dramatically de-emphasized social services under the auspices of family welfare.

While the numbers of potential child protective services clients were growing, the funding structure of welfare and child protection would change in the early '70s. Between 1962 and 1974, federal and state social services spending had soared, for although income and services had been separated in 1967, the federal government still paid at the 75% matching rate for welfare-related services (Coll, 1995; Gilbert, Specht, & Terrell, 1993). States recognized the opportunity, and the result was "state fiscal relief rather than more and improved social services for the poor" (Coll, p. 254). The federal government responded by capping services grants and limiting state shares of the funds, first in 1972, and more formally in 1974 under Title XX (Coll). Title XX combined the provisions originally financed under Titles I, IV-A, X, and XIV of the Social Security Act into block grants, transforming social services into a capped federal entitlement to

the states (at \$2.5 billion annually), along with certain requirements such as spending at least 50% of Title XX funds on people in public assistance programs (including AFDC and SSI; Gilbert et al., 1993)⁶.

As much of child protection's federal support once came through Title XX, whose value in real dollars would decline through the 1990s, switching to capped block grants would have a dramatic effect on child protection funding (Costin et al., 1996). In the child protection field, those

seeking to compensate for the loss of Title XX revenues looked to other provisions of the Social Security Act, but these too were disappointing. For example, Title V (redefined as Title IV-B in 1967) provided funding for "any social service necessary for the well-being of children." Because Title IV-B was not connected to a particular constituency of child and family service, however, the program did not expand and has never accounted for more than 5 percent of federal funds for children's services (Costin et al., p. 110).

Thus, developing a response to the increasing number of child maltreatment reports was the job of the states. The Child Abuse Prevention and Treatment Act (P.L. 93-247) of 1974 did not fund interventions; it only created a greater identifiable need. From a child protection standpoint, the provision of services under a separate umbrella, using an ever-shrinking source of funds, would mean that parenting could no longer be

⁶ Other changes during the decade included a new federal emphasis on child support obligations, begun in 1974, and intensified a decade later in the Child Support Enforcement Act of 1984 (DiNitto, 1991), and the 1972 Amendments to the Social Security Act, which established Supplemental Security Income (SSI) by combining prior cash assistance programs to the poor blind, elderly, or disabled (including children) (Costin et al., 1991). Additionally, in 1974, the Juvenile Justice and Delinquency Prevention Act (P.L. 93-415) funded alternatives to reduce detention of juveniles and encourage state initiatives in prevention and treatment of delinquency and status offenses (Costin et al.).

peripherally monitored through the welfare system, but that more of the responsibilities of child protection would fall to the child protection institution. In 1981, the ability of states to design social services (including child protection services) would increase in terms of flexibility, but would be restricted by the conversion of Title XX into the Social Services Block Grant (SSBG), capped at \$2.8 billion—an entitlement, yet not indexed for inflation (Costin et al.). Thus, the response to child abuse and neglect would rely upon limited funds through IV-B and Title XX/SSBG, and open-ended matching funds for federally eligible foster care, adoption, and training (Costin et al.).

A New Emphasis on Employment

Along with the increasingly identifiable problem of child maltreatment would come increasing dissatisfaction with the state of welfare. As the view of welfare as a dependency trap grew, efforts to encourage self-sufficiency gained prominence (Bane & Ellwood, 1994), and a new model of “service” or rehabilitation had been born. With the 1969 establishment of the Work Incentives Now (WIN) program, “the care of children by mothers in the home, the original *raison d’être* for AFDC, was thus bluntly repudiated” (Coll, 1995, p. 243), and where prior services had been designed to improve parenting and the home environment, WIN services were intended to improve employability. States were required to provide employment assistance under WIN, thereby helping recipients leave welfare through work (Bane & Ellwood). But the program had numerous shortcomings, including the limited resources actually available to assist people in gaining employment (Ellwood, 1988; Pappas, 1996), and day care was not guaranteed by WIN (Coll). The new model of workfare, intended to replace casework services as

the method for exiting the welfare rolls, was a nearly complete failure: only 10% of the adult caseload enrolled in the first phase of WIN, and only 3% of those enrolled were employed by July 1, 1972 (Coll). The WIN program was revised in 1972, removing welfare workers' discretion in referring recipients and requiring registration for the program (with some exemptions, such as women with children under 6 years old; Coll). In spite of an increase in program participation, WIN still did not result in a large number of work-related exits from welfare: by the end of the decade, the number of AFDC families had grown to more than 6 million (Coll).

Although WIN did not live up to expectations, "the strong pro-work statement...would lend itself to modification—not repeal—as time went on" (Coll, 1995, p. 256), and workfare philosophy would grow in popularity. In the early 1980s, several states experimented with welfare-to-work programs, with varying degrees of success (Bane & Ellwood, 1994). The Family Support Act of 1988 substantially revised the education and training requirements by replacing WIN with the Jobs Opportunities and Basic Skills (JOBS) program, and included a requirement that states guarantee childcare for JOBS participants (Committee on Ways and Means, 1994); it also required states to have an AFDC-UP program (DiNitto, 1991). JOBS was an unusual program because it included an explicit recognition that substantial services, education, and training would often be needed to move clients to work and required participating clients to engage in those activities or lose a portion of their benefits. However, the Family Support Act and JOBS did not lead to widespread transitions from welfare to work, in spite of the requirement that recipients participate, not just register, with the program

(Bane & Ellwood). The recession of the late '80s did not help states provide the 40% of cost required to support the JOBS program, and many recipients—especially those with substance abuse problems or other disabilities—were exempted from the requirement to participate (Bane & Ellwood). The size of the AFDC caseload continued to rise.

The Shift Toward Family Preservation in Child Protection

Just as the welfare rolls had grown, so had the foster care caseload—in part, related to the increased emphasis on child maltreatment reporting and investigations. Recognition that too many of these children drifted in foster care for years contributed to the 1980 passage of the Adoption Assistance and Child Welfare Act (P.L. 96-272) (Lindsey, 1994). The Act was an attempt to reform the child protection system through procedural changes, service delivery guidelines, and a value-shift toward permanency planning (Pecora et al., 1992). Through the newly created Title IV-E of P.L. 96-272, the original foster care funding through IV-A was transferred to IV-E and states were given incentives to minimize these costs. If states remained under an imposed spending ceiling on foster care payments, IV-E funds could then be shifted toward use for preventive or restorative services (through Title IV-B), with greater flexibility in spending (Committee on Ways and Means, 1996)⁷. Significant program reforms and procedural standards were required through PL 96-272 in order for states to receive maximum federal financial participation, including: developing systems for tracking the status of children in foster care; providing “reasonable efforts” to prevent child placement; offering reunification and permanent planning services; and meeting guidelines for case

⁷ This feature of IV-E has, however, been of little use because of the steady growth in foster care.

planning, review, and placement in the “least restrictive environment.” In the “permanency planning” vein, the act offered adoption subsidies for children with special needs and low-income children—a significant inclusion, given the high long-term foster care rates for such children, and the documented difficulty in adopting those children out of the system (Pecora et al., pp. 22-23). By 1990, some observers declared the efforts of P.L. 96-272 a reserved success, as evidenced by the implementation of reasonable efforts, declining lengths of stay in foster care, and improvements in the likelihood of successful adoptions (Barth & Berry, 1990; Barth et al., 1994). Nonetheless, the numbers of children in foster care would continue to climb (many of whom were AFDC-eligible children, due to the IV-E funding structure), as would the number of families receiving public assistance.

Welfare Reform Begins a New Era

In 1995, 1 year prior to the federal welfare reform bill, Aid to Families with Dependent Children (AFDC) provided approximately 5 million families with monthly benefits, at a cost to the federal government of \$22 billion (Committee on Ways & Means, 1996). In California, during January 1996, a single-parent family with two children received a maximum monthly AFDC grant of \$607 and an additional \$245 in food stamps to reach 79% of that year’s federal poverty guideline (\$12,980 annually or \$1,082 monthly; Committee on Ways & Means). The majority of AFDC families rented private housing with no subsidy (Committee on Ways & Means). AFDC was an entitlement: all families with children could receive basic income supports based upon need and deprivation of the child, and yet the child poverty rate remained high (22.7% in

1993; Hernandez, 1997). Welfare attempted to insure food and shelter for families with children within a strained and uncomfortable family economy.

But as the 1990s began, public dissatisfaction with welfare rose to new heights along with increasing antipathy toward the recipients of aid. In 1996, Congress passed and the President signed P.L. 104-193, the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA), which removes the open-ended entitlement to family income assistance and replaces AFDC, JOBS, and Emergency Assistance (EA) with Temporary Assistance to Needy Families (TANF) through a block grant to the states. In short, the major changes encompassed by the new legislation include a shift from lifetime eligibility for aid to time-limited cash assistance for needy families, with most recipients required to work; changes to childcare and the Child Support Enforcement Program, restrictions on benefits for legal immigrants, reductions in the Food Stamp Program, a narrowing of SSI eligibility for children; modifications to the child nutrition program; and reductions in the Social Services Block Grant (SSBG; Kamerman & Kahn, 1997). Changes specific to TANF include:

- Families who have received federally funded assistance for 5 cumulative years (or less at state option) would be ineligible for federally funded cash aid. States are permitted to exempt up to 20% of the caseload from this time limit. Block grant money transferred to Title XX can be used to provide non-cash assistance to families after the federal time limit.
- As part of their state plan, states must demonstrate that they will require families to work after 2 years on assistance. To count toward the work requirement, beginning July 1, 1998, single-parent families are required to participate at least 26 hours per week and two-parent families 35 hours per week in unsubsidized or subsidized employment, on-the-job training, work experience, community service, up to 12 months of vocational training, or provide childcare services to individuals who are participating in community service.

- Individuals convicted of drug-related felonies are prohibited for life from receiving benefits under the TANF and Food Stamp programs. States may opt out of this provision or limit the length of the sanction.
- Unmarried teen parents are required to live with an adult or in an adult-supervised setting and participate in educational and training activities in order to receive Federal assistance.
- Family Caps—states may deny additional benefits to families with the birth of another child.
- Recipients may be sanctioned for their child's lack of school attendance, failure to obtain immunizations for their children, non-cooperation with paternity establishment, welfare fraud, and nonparticipation in welfare-to-work requirements.
- The law establishes a bonus for states that demonstrate that the number of out-of-wedlock births and abortions that occurred in the state in the most recent 2-year period decreased compared to the number of such births in the previous period. (United States Department of Health and Human Services [USDHHS], 1997a)

While the passage of PRWORA and TANF does little to change child protection funding and service structures directly, the legislation is expected to have several indirect effects. These include: diminished ability to collect federal reimbursement for foster care and adoption assistance payments as fewer children qualify under the old AFDC income eligibility standards (since the old eligibility standards will not be indexed for inflation, over time eligible children will need to be poorer); reduced SSBG funding for child welfare prevention and case management services; reduced numbers of children who qualify for SSI; and the possible loss of IV-E payments for immigrant children who no longer qualify (Geen & Waters, 1997). It is anticipated that changes may, in some states, reverse the prior incentive to states to support children in kinship care with AFDC child-only grants, shifting those costs instead to IV-E foster care payments (which remain uncapped) and thereby increasing benefits to kinship providers (Geen &

Waters). Some benefits may accrue to child welfare/child protection agencies and their clients if flexible use is made of TANF dollars for the purposes of supporting child protection case plans (including, but not limited to, substance abuse, mental health treatment, and child care). Questions are also raised about the potential long-term effects of welfare reform on the incidence of child maltreatment concurrent with increased poverty, as families face TANF sanctions due to time limits, work requirements, or drug felonies (Geen & Waters).

The more restrictive tenor of welfare reform, with its explicit intent to cut the rolls, coincides with child welfare legislation making it easier for parental rights to be terminated in some cases. The November 1997 passage of the Adoption and Safe Families Act (P.L. 105-89) makes the following changes to existing child welfare law:

Amends Title IV part E (Foster Care and Adoption Assistance) of the Social Security Act (SSA) to emphasize that, in meeting the “reasonable efforts” requirement of family preservation and reunification, the paramount concern of a State plan for foster care and adoption assistance shall be the health and safety of the child. States that [make] reasonable efforts to preserve and reunify the family shall not be required [to do so] on behalf of certain parents, including those who have murdered or committed felony assault against another child, or who would otherwise pose a serious risk to a child’s health or safety. Declares that nothing in such Act shall be construed as precluding State courts from exercising their discretion to protect the health and safety of children in individual cases, including cases other than those described in the Act (Thomas, 1997).

The emphasis on safety is outlined in Section 103 of the Act, which “delineates circumstances compelling a State to file a parental rights termination petition and concurrently initiate selection of a qualified adoptive family for certain children in foster care or under State responsibility,” and also in Section 302, which changes the yearly dispositional hearing for a child in foster care to an annual permanency planning hearing—effectively speeding up the permanency planning timelines. Additionally, Title II of the Act contains incentives to states for providing permanent families for children by requiring a “case plan for a child for whom the State’s goal is adoption or placement in another permanent home to document State agency efforts to accomplish that goal” (Thomas, 1997). Other measures include studies (albeit unfunded ones) to examine “(1) barriers that result in delays to adoptive placements for children in foster care; (2) the impact of parental substance abuse problems upon the placement of children⁸; (3) kinship care; and (4) performance-based financing for child welfare services,” Thomas). Finally, the Act further authorizes federal funds for family preservation and support services for 1999 through 2001, “including family reunification, adoption promotion and support services” (Thomas).

Thus, recent legislative reforms may be creating a pressure-cooker for poor families who struggle with their parenting—and consequently, the links between welfare and child protection may become more apparent. While the impact of welfare reform cannot be predicted—either on poor families in general, or upon the demand for child

⁸ The policy context regarding substance abuse and child welfare shifted in 1990 with the passage of California’s SB 2669. Prior to this legislation, some California counties removed children on the basis of risk accompanying evidence of maternal substance abuse. SB 2669 stated that “a positive toxicology screen at the time of the delivery of an infant is not in and of itself a sufficient basis for reporting child abuse and neglect” (SB 2669).

protective services specifically, Courtney (1997) suggests that “the financial benefits of work are likely to be marginal for most families that enter the work force as a result of reform, whereas the economic consequences of program sanctions for affected families may be devastating” (p. 18). Although the exact manner in which poverty influences parenting is unclear, there is an undeniable ecological correlation between poverty and child maltreatment (e.g., Drake & Pandey, 1996; Garbarino & Kostelny, 1992; USDHHS, 1996). Thus, it is reasonable to suspect that TANF-related sanctions which lead to a loss of financial support may also lead to an increase in the demand for child protective services, including out-of-home placement (Courtney). At the same time, elements of TANF that may increase a family’s involvement in the positive aspects of work, that provide greater access to child care, and that serve as a disincentive to drug use may help reduce the conditions that foster poor parenting.

It remains to be seen whether states will implement welfare reform plans which allow for “judicious use of incremental financial sanctions as opposed to abrupt termination of benefits” which would “lessen the likelihood that children will be placed in desperate situations,” and the degree to which state child protection/child welfare programs will creatively use kinship care, supportive services, and a proactive plan to handle those families who are denied benefits (Courtney, 1997, p. 26). As Collins (1997) notes, there is an inherent conflict between the new welfare law and federal child welfare policy: “no protection from severe economic hardship, but protection from child maltreatment” (p. 5). Resolution of this conflict will require a united effort. Indeed, in the National Center for Children in Poverty’s framework for analyzing the implications of

welfare reform for child protection, one suggested state strategy for managing the issue of children living with a minor parent is: “The welfare office and the child protective office in the state can work closely together to collaboratively determine when a minor parent is at risk in the home” (Knitzer & Bernard, 1997, p. 14). Such service collaborations, while ideal in theory, will require a great deal more cooperation on the case level than currently occurs in most states or localities. The trickle-down of welfare policy changes will depend upon the dedication of both administrative and practice energies. For welfare reform to have an impact upon individual clients, workers would have to actively communicate the intent of policymakers. In a recent (1993-1994) study of the implementation of California’s Work Pays demonstration program by “street-level bureaucrats,” it was expected that to accomplish the above, “workers would have engaged in transformational transactions that sought to change, rather than merely sustain, the clients with whom they interacted daily” (Meyers, Glaser, & Macdonald, 1998, p. 18). Instead, worker/client transactions were found more consistent with claims-processing, eligibility enforcement, and resource rationing—in spite of workers’ expressed support for ideas about self-sufficiency (Meyers et al.).

As the TANF provisions begin to take effect over time, a number of consequences are possible for child protection. In terms of out-of-home placement, an increase in the use of both formal and informal kinship care is likely as the financial resources of nuclear families become tight. Given the current demographics of kinship care, welfare reform is likely to disproportionately impact minority families (Shook & Testa, 1997). An additional consequence may involve the welfare-related functions of

the child protection system's casework model: "whatever its limitations, the previous public assistance system complemented the child welfare services system: it provided minimal financial support to poor families regardless of whether parents chose or were able to work" (Courtney, 1997, p. 25). Interestingly, the movement (during the late '80s and early '90s) toward family preservation models of child protective intervention has included an increasing emphasis on the provision of concrete supports. Cash assistance, help with housing, food, and utilities have become more accepted as the child protection system acknowledges the impact of poverty on the lives of its clients. Whether this welfare-like function of the child protection system will intensify, as clients increasingly feel the impact of TANF reforms, remains an open question. A further question has been posed by Courtney about whether "provision of assistance to poor families by the child welfare system may in some cases undercut the work-related sanctions of welfare reform programs..." (p. 25).

The proportion of families who cannot work upon reaching their time limit, or upon being sanctioned in some form, is also likely to include the mentally ill or those addicted to substances who are not receiving SSI. Thus, the reform of AFDC raises a crucial question: "will poverty re-emerge as a form of child maltreatment?" (Shook & Testa, 1997). If the identification of child maltreatment (physical and emotional neglect, physical and sexual abuse) has historically rested upon the assumption that mother's pensions provide the baseline income supports, the removal of welfare as an entitlement could again lead to a blurring of lines between poverty and child neglect. As Shook and Testa state, "with the demise of AFDC, states will be hard-pressed to

defend the distinction between child dependency and child neglect” (p. 7). For this reason, it is necessary to briefly examine what is known about the relationship between neglect and poverty.

CHILD NEGLECT AND CHILD POVERTY: THE DIFFERENCE

Child neglect has always existed in close relation to child poverty, although in various periods economic loss has been attributed to different main causes (e.g., predominantly parental death, desertion, or changing family structure) and inadequate parenting has been variously defined (e.g., laziness, immorality, intemperance, emotional cruelty, neglect, physical or sexual abuse). Conceptualizations of child poverty have shifted with changing family structure, and thus for over a century children’s poverty has been viewed in relation to single motherhood. While children have continued to be viewed as “deserving” poor relative to adults, their poverty has remained adjunct to their parents, and thus the concept of poverty as an individually based problem with moral and psychological roots dominates today’s welfare reform. This is compounded by negative stereotypes of welfare recipients that are heavily laden with racially charged rhetoric and children of color continue to be subjected to a disproportionately greater degree of child welfare intrusion and lesser degree of income support (see Quadagno, 1994). The threshold of harshness that many children must reach prior to “deserving” economic intervention is fairly high, since their mothers must meet tests of moral or behavioral fitness to “deserve” assistance.

Concepts of child maltreatment have altered even more dramatically over time. During the years of the poor laws, through the mid-19th century, the conditions of

children rested on the necessities of life (food, clothing, shelter), which in turn relied upon their parents' health and ability to provide for them. In the Progressive Era, children's rights expanded and parental rights contracted slightly, such that child labor became exploitative, physical abuse began to be identified as harmful, and the effects of parental immorality on children grew into a concept distinct from poverty. To be sure, it was poor parents who were under scrutiny, but the relevant point is that "neglect" began to be identified as separate from destitution. Giovannoni and Becerra (1979) argue that it was the growing unacceptability of child removal (as a generalized solution to child-related problems) that led to the increasing identification of neglect:

As long as children could be removed for these reasons only [poverty and economic dependency of the parents], there was no need for further legal definition of the parental unfitness that could rightly provoke removal. Economic dependency equaled "unfitness" (p. 37).

As poverty became theoretically "preventable" through the advent of the modern welfare state in the 1930s, the type of parental acts labeled as maltreatment would become increasingly specific. This effect was not immediate, for child abuse and neglect were not in the forefront of the public mind during the Depression years and World War II. As the nation returned to prosperity, however, society had the relative luxury of examining children's treatment by caregivers.

With the entry of physical and sexual abuse to the public consciousness and an increasingly psychological view of child maltreatment, the threshold of harsh parenting required for intervention would become easier to attain: children's physical and

emotional need for protection now warranted a quicker, more intensive public policy response. In 1995, child protection systems across the United States received nearly two million reports of child maltreatment and investigated approximately 1,675,000 of these reports (in 48 states), resulting in a disposition of either substantiated or indicated child maltreatment in 36% of investigations (USDHHS, 1997b). Public and private agencies provided a variety of social services to ameliorate these harmful conditions of family life. In California, the out-of-home placement caseload grew to 98,589 children in 1996 (Needell, Webster, Barth, Armijo, & Fox, 1997). The majority of the children receiving these interventions were identified for reasons of neglect. In California in 1996, nearly half of the 706,918 child maltreatment reports were for reasons of neglect (general neglect, severe neglect, or caretaker incapacity), with roughly a third for physical abuse, and about 16% for sexual abuse (Needell et al.). These distinctions are crucial, for they have not always existed—indeed, the differentiation between abusive and neglectful parents was first made in 1964's *Wednesday's Children* by Leontine Young, a study of families known to child welfare agencies (Rose & Meezan, 1997).

Recent efforts to clarify definitions of neglect have emphasized its distinction from other more overt forms of maltreatment (e.g., Giovannoni, 1989; Rose & Meezan, 1997). Some debate over the definition of neglect involves the question of “omission” versus “commission,” how to best assess the interaction between child and caregiver, and whether parental intentionality is an essential aspect of neglect (Giovannoni; Rose & Meezan). Some argue that intentionality is irrelevant and that the standard should instead be set by evidence of negative effects on children (e.g., Goldstein, Freud &

Solnit, 1973). Rose and Meezan point out that state legislation in the 1970s “solidified the idea that the lack of adequate food, clothing, shelter, medical care and supervision, or abandonment were the cornerstones of a definition of neglect” (p. 15). They also note that while there is “almost universal agreement” that basic physical care is the responsibility of parents, definitions of neglect since the 1960s and 1970s have decreasingly emphasized parental immorality (p. 18). Whether viewed as acts of the parent or effects on the child, however, it is clear that poverty is an important contributing factor to cases of neglect.

The association between low socioeconomic status and reported cases of child neglect is well documented, and the ecological relationship is an undeniably powerful one: in fact, chronically neglecting families may be among the poorest of the poor (Giovannoni & Billingsley, 1970; Nelson, Saunders, & Landsman, 1993; Wolock & Horowitz, 1979). The correlation holds true on the aggregate, community level (Garbarino & Sherman, 1980; Steinberg, Catalano, & Dooley, 1981), as well as at the case level (USDHHS, 1996). Such evidence, taken along with the high rates of child poverty in the United States, has led some authors (e.g., Lindsey, 1994) to argue that poverty is, by definition, a form of societal neglect—just as it has been argued that most children removed for reasons of neglect are actually removed because of poverty (Pelton, 1989). Financial deprivation alone, however, has not been found to cause poor parenting or child maltreatment (Vondra, 1993), suggesting the interaction of other parental characteristics. Studies of neglecting parents have identified a number of characteristics (in addition to economic conditions) including, most notably, social

isolation and loneliness, clinical depression, apathy, and a sense of futility (Polansky, Chalmers, Battenweiser, & Williams, 1981). Psychological and relational resources may differentiate the poor neglecting from non-neglecting families, although this remains complex. In Gaudin and Dubowitz's (1997) review of five studies, family members' self-reports of family functioning did not differentiate neglectful from non-neglectful families; instead, these families were best differentiated by poverty, education of caregivers, family size, stability and composition, caregiver relationship skills, and sense of parenting self-efficacy. On observational measures, neglectful families were rated less organized, less cohesive, more conflicted, and less positive and nurturing toward their children. Not all poor families neglect their children, and it has been argued that significant variability exists among the poverty population (Daro, 1988). In fact, Polansky et al. specify that "quality of child care is adversely related to poverty, but is separable from it" (p. 80).

A variety of theoretical models have been proposed to explain the relationship between poverty and parenting. Most broadly, poverty may act as both an acute and chronic stressor that not only creates individual distress but affects all relationships within a family (including marital and parent/child), as well as increases the likelihood of living in a dangerous, resourceless environment, and the occurrence of discrete financial crises (such as job loss and the need for uninsured medical care; Vondra, 1993). In a similar vein, the width of a family's economic margin—the distance between their current existence and complete destitution—has been characterized as a sort of buffer zone around other parental problems, such as interpersonal conflicts, cognitive

limitations, and substance abuse (Pelton, 1978). Thus, poor parents have little room for error in their parenting—whereas a middle-class parent can be careless with money, at times, without disastrous consequences. Economics may interact with interpersonal skills and social resources so that poor parents who are unable to stimulate and sustain both supportive relationships and employment security further narrow their margin and increase risk to children (Vondra). In this view, “poverty potentiates risk” and reduces the likelihood of protective factors being present; risk factors are also more likely to accumulate over time where poverty is chronic and pervasive (Halpern, 1990). A parent’s psychological status may also impact their socioeconomic status via their role “in garnering resources for themselves and their families or in creating and maintaining stress” (Vondra, p. 131). In McLoyd’s (1990) empirically based ecological model of the relationship among economic hardship, family process, and child socioemotional problems, parental psychological stress acts as a major mediating variable.

THE ROLE OF SUBSTANCE ABUSE

Substance abuse has been reported to be involved in at least half of the maltreatment cases served by local CPS agencies (Child Welfare League of America, 1997, cited in Gardner & Young, 1997; Herskowitz et al., 1989, cited in Goldberg, Lex, Mello, Mendelson, & Bower, 1996); and is a factor in as many as 70 to 90% of new cases (Feig, 1998; Gardner & Young, 1996; Magura & Laudet, 1996; National Committee for the Prevention of Child Abuse [NCPCA], 1989, cited in National Center on Child Abuse and Neglect [NCCAN], 1993). Several studies of abuse- or neglect-related child fatalities have reported high rates of parental substance involvement,

ranging from 25% (Fontana, 1983, cited in Magura & Laudet), to 40% (Coltoff & Alfaro, 1996), to 73% (Besharov, 1989). In Illinois, reports of substance-affected infants increased dramatically from 177 in 1985 to 2,720 in 1992; with a parallel increase in the number of these children placed in out-of-home care (from 31 to 695 during the same years; Goerge & Harden, 1993). Over 90% of those infants in the Illinois child protection/child welfare system had been exposed to cocaine, with the remainder exposed to other drugs and alcohol. Research on over 7,000 parents using a National Institute for Mental Health sample and a self-report method of identifying child maltreatment has found substance abuse to be a strong predictor of both physical abuse and neglect, after controlling for social and demographic, as well as psychiatric disorder variables (Chaffin, Kelleher, & Hollenberg, 1996).

The child protection population appears to have a higher rate of substance abuse problems than the welfare population in general. In Zuravin and Grief's (1989) comparison of maltreating and nonmaltreating ("normative") mothers who received AFDC, nonmaltreating mothers were significantly less likely to report problems with alcohol or hard drugs (heroin, cocaine, LSD, PCP) than CPS-involved mothers. Alcohol binges were reported by 6% of normative mothers, compared to 19% of maltreating mothers; only 2% of normative mothers reported hard drug use compared to 8% of maltreating mothers. According to Feig (1998), most studies find 10-20% of welfare recipients to have a problem with alcohol or other drugs; an (unnamed) 1994 study through Health and Human Services found 4.9% of adult female AFDC recipients to have a significant functional limitation related to substances, with another 10.6%

somewhat impaired. A Maryland study of 206 female AFDC recipients found a prevalence rate of alcoholism and drug abuse ranging from 16.1 to 20.8%, and an additional 20.8 to 31.4% experienced some type of social problems related to substance use (Sisco & Pearson, 1994). It has also been reported that mothers receiving AFDC are “three times more likely to abuse or be addicted to alcohol and drugs than mothers not receiving AFDC (27% compared to 9%),” a factor identified as one of the most serious barriers to joining the workforce (National Household Survey on Drug Abuse, 1991; cited in National Center on Addiction and Substance Abuse [NCASA], 1994) and underlying some of the emphasis on substance abuse treatment in the new welfare reform law. Kaestner (1998), however, recently examined data from the National Longitudinal Survey of Youth to determine whether self-reported drug use was correlated with welfare participation. Although he found a positive relationship between marijuana use and welfare participation, the effect was modest: if marijuana use was reduced to the level of non-welfare recipients, welfare participation would decline by only 3 to 5%. No relationship was found between past year cocaine use and welfare participation, although the author attributes this in part to the young age of the sample, which may predate onset of cocaine use.

Rates of child maltreatment and child protective services involvement have also been estimated from samples of parents with documented drug use histories, including women in treatment. Feig (1998) reports that nationally, one third of clients in drug treatment are women, and in California 18% of clients were women raising children; of these women, 67% received AFDC. Of the female clients with children, half reported

that parenting concerns were an important factor that led to their treatment, and it is also reported that 3-5% of substance abuse agency clients receive their referrals through child protection or social services. The Department of Health and Human Services states that in California, 25% of children born to Medicaid families in which the mother or child received a substance abuse diagnosis around the time of pregnancy/birth spent most of their first year in foster care (Feig). Another study tracked cases of maltreatment among a sample of 513 infants born exposed in-utero to illicit substances, and found that 30.2% were later reported as maltreated (Jaudes, Ekwo, & Van Voorhis, 1995). Of these, 65.8% were subsequently substantiated: 72.6% of them for neglect, 15.7% for physical injury, 5.9% were exposed to illicit drugs after the neonatal period, three were sexually molested, and three died of neglect. Overall, the rate of substantiated maltreatment was found to be two to three times that of the general child population living in the study area (south side of Chicago), as well as higher than the national estimate (40-53% of reported cases); the authors state that this “may reflect the seriousness of the allegations of neglect for these children and/or the overwhelming evidence of neglect by the mothers who continue to use drugs” (Jaudes, et al., p. 1072).

Another approach involves measuring substance abuse in child maltreatment samples. Two of these studies have found that 43-50% (Murphy et al., 1991) and 67% (Famularo, Kinscherff, & Fenton, 1992) of court-adjudicated child maltreatment cases involved substance abuse. In the first study, parents with documented substance abuse problems were more likely to have previous CPS involvement, to be rated by court investigators as presenting a “high risk” to their children, to reject court-ordered

services, and to have their children permanently removed (Murphy et al.). Although no figures are reported on the specific association between neglect and drugs in either sample, the Famularo et al. study revealed associations between alcohol and physical abuse, and cocaine with sexual abuse. A recent study in an urban California county found neglect to be the most frequent type of maltreatment among a sample of cases referred for court intervention (44.4%), with almost half (45.3%) of these cases involving confirmed drug abuse and 16.8% confirmed alcohol abuse (Gilbert, Lawrence Karski, & Frame, 1996); another study in the same locality found maternal substance abuse to be one of the strongest predictors of failed reunifications (Frame, Berrick, & Lim Brodowski, 1997). Finally, parental substance abuse has been identified as a predictor of both poorer family functioning among CPS cases and repeated reporting to child protection agencies (Wolock & Magura, 1996).

During the mid-1980s many child protection agencies responded to this evident problem with the widespread removal of infants from substance-abusing parents, however this response not only became costly but received heavy criticism. While in many states parental substance abuse is considered a critical risk factor in assessment, and positive drug toxicology tests may lead to a child protective services report, agencies in California are now advised that positive toxicology tests are not sufficient basis for legal action or the involuntary removal of children (National Association of Public Child Welfare Administrators [NAPCWA], 1991; SB 2669). As NAPWA advises in its guiding principles for working with substance abusing families:

(P)arents abuse substances to varying degrees. When substance abuse significantly interferes with parental responsibility and causes harm to the child, these failures of parental duty provide the basis for substantiating a finding of abuse or neglect.

Thus, neither the use of substances while pregnant nor parental substance abuse per se legally constitute child maltreatment. While the strong correlation between substance abuse and child maltreatment is fairly clear, causal connections are not (Kelley, 1992; Sheridan, 1995; Tracy, 1994). It has been noted that the literature addressing the interaction between substance abuse and child maltreatment is relatively scant and

underscores the continued failure of professionals within specialty fields to extend themselves beyond the limits of their specialty...experts have been identified in chemical dependency, child abuse, and violence, but cross-fertilization in these highly correlated fields seldom occurs (Blau, Whewell, Gullotta, & Bloom, 1994, p. 84).

As a result, “women’s parental and caregiving roles have not traditionally been the focus of substance abuse treatment, even though substance abuse clearly has an impact on a woman’s ability to parent” (Tracy & Farkas, 1994, p. 61). Similarly, since child protection agencies typically provide little training on substance abuse, treatment referrals may be inconsistent or ineffective, and cases involving relapse are problematic (Feig, 1998). At minimum, “bringing substance abuse treatment more clearly into focus early in the [child welfare legal] process could help to prevent the serious time delays and repeated mistreatment” (Murphy et al., 1991). The paucity of research on the relationship

between substance abuse and child maltreatment in general hinders appropriate resource allocation and service delivery (Tracy, 1994). Thus, work toward a more successful integration of child protection and substance abuse services is a vital goal if the needs of child protection populations are to be met (Azzi-Lessing & Olson, 1996; Blau et al., Gardner & Young, 1996, 1997; Goldberg et al., 1996; Kelley; Magura & Laudet, 1996; Olsen, Allen, & Azzi-Lessing, 1996; Sheridan; Tracy; Tracy & Farkas; Wolock & Magura, 1996).

The research specifically focused on substance abuse and neglect is even more limited, in spite of the fact that these cases likely comprise one of the largest pieces of the child protection pie. For very young children with special medical needs, often those born prenatally exposed to drugs, the risk of neglect appears higher due to the interaction between impaired child functioning and limited parenting abilities (Magura and Laudet, 1996). Although the potential for immediate and long-term consequences of prenatal cocaine exposure is a somewhat uncertain and controversial topic (Barth, 1993), infants who do suffer congenital deficits may elicit parental reactions that place them at higher risk, in part due to a disrupted process of attachment when parenting stress is higher and babies are irritable and difficult due to drug withdrawal (Kelley, 1992). Magura & Laudet note the conflicting evidence for long-term developmental delay resulting from prenatal drug exposure, but conclude that it is fair to characterize drug-exposed children as “at risk,” whether due to maternal substance use and/or other environmental factors. These “at risk” characteristics are hypothesized to interact with a substance-abusing parent’s lifestyle, stressors including poverty, and pre-existing

parenting difficulties to create conditions which support a higher incidence of violence and child maltreatment.

In general, substance abuse by parents may compromise their capacity to provide consistent, responsive caregiving. In describing her interactive model of the relationship between poverty, stress, depression, and maltreatment, Dore (1993) suggests that substance abuse may be both

a direct strategy for coping with overwhelming stress and...an effort to self-medicate for the depression that results from stress overload. However, some mood-altering substances, for example alcohol, also increase depressive symptoms, which may in turn heighten already aversive parent-child interactions (p. 550).

There is no evidence as yet of the specific impact of parenting by drug users on developmental outcomes (Zuckerman, 1993), although there is a clear association between poverty and a host of negative outcomes for children, including impaired health and physical growth, motor and cognitive development, verbal ability and school achievement, social and behavioral adjustment, and emotional well-being (Hanson, McLanahan, & Thomson, 1997; Huston, McLoyd, & Coll, 1994; McLeod & Shanahan, 1993; Smith, Brooks-Gunn, & Klebanov, 1997). Poverty may influence these outcomes through many possible pathways; however, for very young children in particular, parents constitute the primary environment (Halpern, 1990). The parent/child relationship is likely to be more challenging in cases of poverty, given that both children and their caregivers are more likely to be stressed or otherwise compromised. In sum, both the

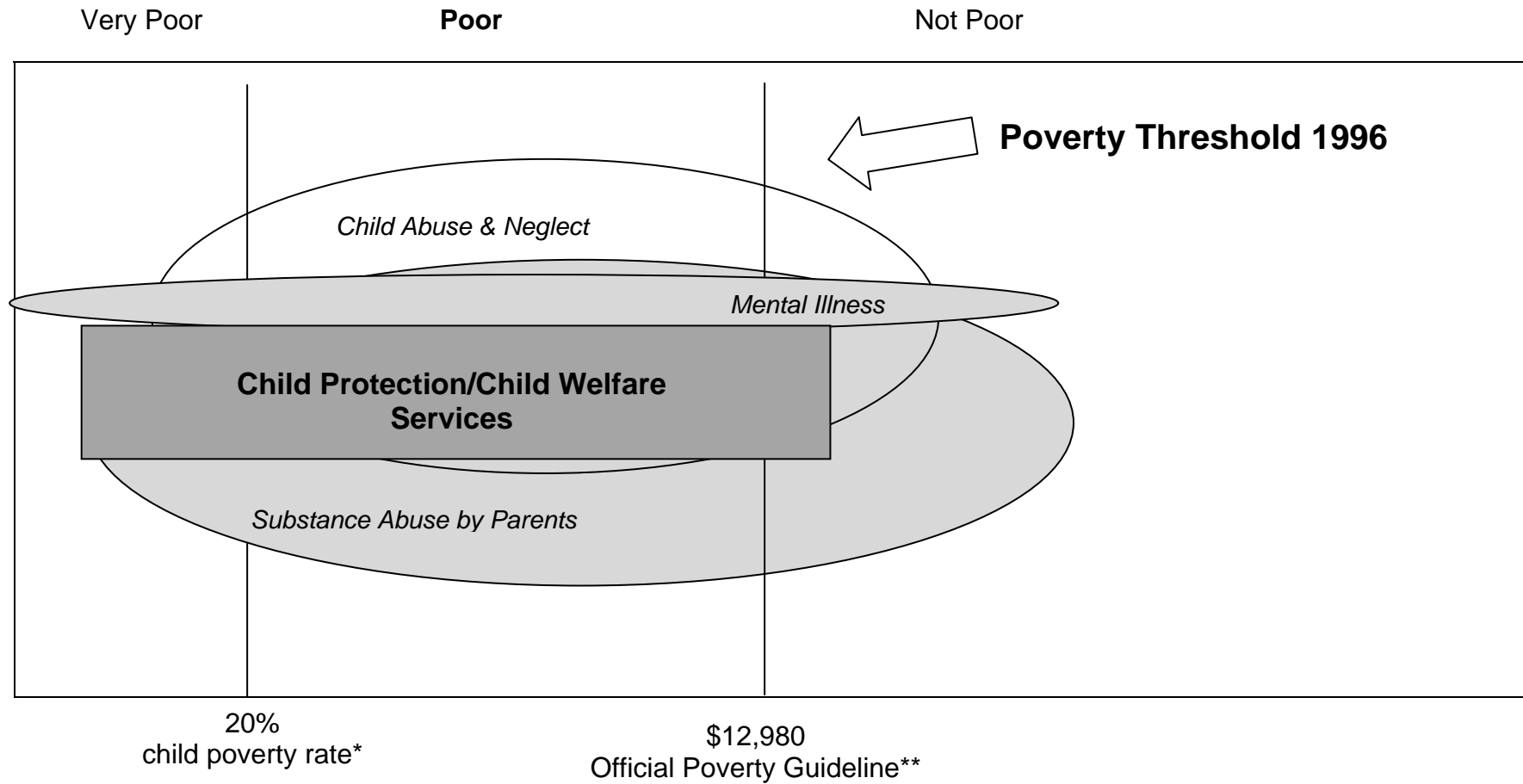
poverty and the neglect research suggest a complex relationship, one in which parents may be major mediators of the conditions of poverty, and substance abuse may only aggravate otherwise difficult conditions. Economic stress in many cases can impact a parent's capacity to be emotionally responsive, cognitively stimulating, and a consistent provider of supervision and the physical necessities of life. To treat poverty and neglect as equivalent, however, is to design ill-fitting, one-size-fits-all policy for children and families.

The hypothesized relationships between child maltreatment, child poverty, substance abuse, and child protective services are outlined (in rough form), in Figure 4.3. Due to the limitations of administrative data systems to date, little is known about the actual degree of overlap between the welfare recipient population and the child protection population—except that AFDC has been the income source for many child protection clients and that at least in one city (Chicago), reports of child maltreatment are twice as common among the welfare as the non-welfare population (Besharov & Laumann, 1994). Less is known about the welfare recipients not involved with child protective services and the ways in which they differ from families who come to the attention of the system (Zuravin & Grief, 1989). Likewise, while Figure 4.3 suggests a strong relationship between the problems of poverty, substance abuse, and child maltreatment, less is known about the poor families who positively parent their children or substance-abusing families who manage to remain outside the child protection system. Nonetheless, many of the families involved with child protective services may be among the poorest and lowest functioning of the welfare population—a suggestion

that has grave implications for the provision of child protective services under welfare reform. If, indeed, poor protective services clients are more likely than the average welfare recipient to have a mental illness, to be impaired by regular use of drugs or alcohol, and/or for interpersonal reasons to be less employable, the sanctions imposed under TANF may place these parents under even tighter restrictions than were faced by child protection clients during the previous decades. Parents struggling to reunify with their children and to parent safely will now be simultaneously expected to demonstrate a relatively high level of economic self-sufficiency. Furthermore, in the context of recent legislation creating shorter reunification timelines and increased efforts to concurrently plan for reunification and adoption, the pressure upon parents in the child protection system is intensifying. This is especially true for parents with substance abuse problems. The potential effectiveness of a deterrence approach—“get clean quicker, or lose your children sooner”—remains to be seen, particularly for those parents who simultaneously face a loss of income support. Perhaps, for some parents, this approach will motivate and speed the process of recovery. It may also lead to greater numbers of failed reunifications, more children in foster care, more relinquishments, and/or greater pressure on kin to care for children outside the child protection system. All of this is speculative, however, and the actuality may depend upon the degree of proactive system response to the changes ahead.

Figure 4.3

Poverty, Child Maltreatment, and Child Protection: How Do They Overlap?



* Approximately 20% of America's children have lived in poverty during any given year since 1989. Source: Brooks-Gunn, J., Duncan, G., & Maritato, N. (1997).

** Source: Committee on Ways and Means, U.S. House of Representatives. (1996).

SUMMARY AND CONCLUSION

What does an historical review of welfare and child protection policy offer that may enlighten the child welfare practitioner, administrator, and policy maker as welfare reform begins? Several themes are highlighted. First, it reiterates that the welfare and child protection systems of the past 30 years, familiarly viewed as separate institutions for different groups of people, are intricately linked in both philosophy and practice. To view them as distinct in aim and purpose is to miss the inevitability of their mutual influence.

Within each of these domains of child welfare policy the role of government vis-a-vis the family has varied over time, reflecting society's ambivalence over whether and how poor children and their parents should be supported, particularly single mothers and ethnic minorities; value conflicts over the relationship between work and motherhood; and confusion over the difference between child poverty and child neglect. Much of 20th century children's policy has been guided by the philosophy of *parens patriae*, wherein government actions have substituted for the role of the parent. In income maintenance, this was seen in the establishment of the AFDC program where financial support from the government substituted for the economic loss of a paternal breadwinner (Abramovitz, 1988). In child protection, orphanages and later foster parents provided food, shelter, and supervision to children as substitute forms of care when parents had engaged in especially nefarious acts toward their offspring. In more recent years, a family-focused approach has been adopted in both income maintenance and child protection. Welfare programs have attempted to encourage economic self-

sufficiency among parents in order to reduce the role of the state in supporting children; and child protection programs have focused largely on modifying parenting behavior in order to maintain children in their homes whenever possible. As welfare reform creates a new model of family-focused social rehabilitation, child protection's role may shift toward further insulating children from the labor market.

The contemporary view of welfare is *not* one of AFDC (or TANF) being a means of keeping children out of foster care. Foster care and child welfare services, today, are viewed as protective while income maintenance is palliative. Child protection and foster care are directed at specific defects of parenting. While AFDC was designed to help children by mediating the effects of the market on their parents, mothers' pensions have once again become (as they were before the Social Security Act) principally concerned with correcting parental character and behavior—much like child protective services. Still, the child protection system has over time remained a subsidiary of the welfare system and the institution of last resort. In other words, the child removal and placement system has always taken over for families in poverty when other alternatives were depleted. Whether this function is viewed as coercive or benevolent, and regardless of the social reasons by which child removal has been justified, many families have been otherwise sustained and preserved through systems of welfare such that child removal could be avoided.

Welfare has never been able to solve the social and psychological problems some families bring to public aid, and efforts toward replacing welfare with work have historically met with negligible success. With the growth of the social work profession

came methods of welfare casework, intended to remediate the underlying causes of poverty—either through friendly visiting, moral teaching, psychological support, job training, or referrals to community supports. Since widows' pensions and later AFDC grants were intended for the support of children, parenting “naturally” fell under the scrutiny of the welfare system. At certain historical moments, the critical eye on parenting has been sharply turned on families participating in AFDC. At other times, welfare practice has been more concerned about adult self-sufficiency through employment, and meanwhile, child protection has been far more residual in scope.

Whether poor children's well-being is best monitored through the welfare system or the child protection system remains unclear. However, in planning for welfare reform in the millennium, a review of the events of the '50s and '60s may offer guidance. The early parts of those decades witnessed flagrant violations of the privacy of welfare recipients, justified through established codes of conduct to which it was, for many recipients, impossible to adhere. The '60s saw sweeping changes in the nature of welfare, with initial intentions to blend the casework and eligibility functions, similar to the reforms of the present. The effect of those efforts on the functions of child welfare/child protective services workers and the relative functioning of child protection clients is unknown. It is evident, however, that the expectations of an income maintenance system to provide casework services were unrealistic. Insufficient training for staff coupled with high performance demands made workers' jobs extremely difficult. These performance demands often involved the regulation of mothering and the personal or sexual behavior of women—thus, in some ways, performing a child

protection monitoring function and scrutinizing the “quality” of parenting in recipients’ homes. In other ways, this regulation involved a level of moral judgment that was unrelated to child protection per se, and more about racial discrimination and the imposition of dominant “family values” on single mothers. Welfare was acting in an inappropriately expanded and intrusive child protection role. Cultural shifts and legal changes may preclude a repeat of these particular mistakes; however, some of the same behaviors monitored in the 1950s and 1960s (such as school attendance, enforced paternity establishment, and work participation—see Abramovitz, 1988) have been revived and new behaviors have been identified as worthy of monitoring by the changed welfare system (e.g., illegal drug use and full immunizations for children).

The structure of existing social institutions and their accepted “functions” can help or hinder the definition of social problems. When the income maintenance functions of welfare have been linked both philosophically and practically with the social service needs of welfare recipients, as in 1961 and again in 1996, this system of welfare has appeared more similar to the child protection system. Given the complexity of poor families’ needs, the blending of eligibility with services in welfare has historically made it more difficult to discriminate between families who need one service versus another. When the income maintenance functions of welfare have been formally separated from social services (as in 1935 and again in a more detailed fashion in 1967), the systems become ideologically and practically more distinct. Should welfare reform in the 1990s at all resemble the blending of eligibility and service functions in the 1960s, this institutional overlap may again blur the lines between child protection and welfare

clients, their needs and problems, and the services they receive. However, if the shifts in welfare services more closely resemble the prior workfare approaches of WIN and JOBS than the services approach of 1962, the separate functions of the welfare and child protection systems may be easier to comprehend. These points are at the conceptual level, however. The clarity with which policy is interpreted and expectations are communicated to caseworkers will impact the scope of workers' responsibilities.

The continuing relationship between welfare and child protection reflects a concern, albeit an ambivalent one, for the welfare of poor children, and also speaks to society's reticence to completely eliminate some form of safety net. To date, the safety nets designed for children and families have included (a) cash assistance, (b) social services, and (c) out-of-home placement. All have their problems and none alone is sufficient. Cash assistance is perhaps the most publicly reviled, yet it is unlikely to be replaced fully by an alternative system of support. Out-of-home placement, while recognized as an unappealing alternative from a child's perspective, is generally viewed as an acceptable, and sometimes necessary, safety net. Public attitudes are ambivalent, as well, about the idea of services to the poor, and equally unclear about whether they should function as a tool of surveillance or assistance. Inherently appealing as rehabilitation, public social services remain of dubious effectiveness in resolving problems of financial dependency, child maltreatment, or other associated problems of substance abuse, homelessness, and mental illness.

Given that none of these three safety nets cover the needs of all children or are seamlessly effective, their continued link ensures that when one approach fails, another

will be available to catch the children who fall through the cracks. What is not clear is how many people are left unserved or are improperly served during times of increased systemic overlap (such as during the early 1960s and under the present welfare reform approach). Particularly at the federal or state level, categorically designed social programs are often more efficient, and more clearly translated into practice. When welfare has tried to do the job of child protection (such as through enforcing suitable home standards), a morass of administrative and practice confusion has resulted. But most importantly, the “blended program” approach fails to acknowledge that poverty is an economic problem, while inadequate parenting is a relational one. Economics and parenting are undoubtedly mutually influential, but their essentially different nature as social problems necessitate different social policy solutions. We cannot design social service bureaucracies that can effectively handle both problems at once, nor should we. To blend the purposes of welfare and child protection confuses the value bases for each. Social policy is never value free, and part of what has encumbered welfare reform for decades has been the complicated mix of values about the importance of work, economic self-sufficiency and the role of women, and the standards of appropriate childrearing behavior. Thus, the value-based decisions appropriate to welfare reform have been infused with questions of value more appropriate to child protection. To some extent, the field of child protection also struggles over differentiating neglectful caregiving from conditions of poverty. Child protection has begun providing a peripheral welfare function for some of the families it serves (by offering more concrete services and supports), recognizing that people cannot easily overcome their parenting

difficulties if overburdened by the stresses of poverty. However, if the welfare system limits its scope of responsibility for poor children, child protection may be faced with expanding needs which it cannot meet.

To distinguish between poverty and neglect is *not* to suggest that we ignore the poverty-related problems of neglectful parents, or vice-versa. Certainly a family's problems are not easily parceled into categories, and the categorization of social services leads to other problems, such as a lack of coordination at the service level. Practically, however, the broad-based casework model has not proven effective in either human or fiscal terms, and the blurring of boundaries between destitution and child maltreatment creates a variety of human and institutional concerns. With the removal of families' entitlement to a basic subsistence income, the definition of poverty is likely to shift, moving with it both the parameters of child neglect and the job of the child protection system. At a philosophical and a practical level, the welfare of children will be best served by attempts to clarify and gain some organizational consensus about the distinctions between child poverty and child neglect. For it is these neglect cases which already constitute the bulk of child protection's caseload and which create the most uncertainty about the relative roles of welfare and child protection. Successful adaptation to welfare reform will require a proactive effort to delineate which component of the social welfare system is designed to protect children from economic distress and which is to protect them from maltreatment.

QUESTIONS FOR DISCUSSION

1. What are the differences, if any, between child poverty and child neglect? On what are you basing your answer (personal values, research, changing historical constructions of the problem, other?). How does the role of existing welfare and child protection institutions shape your definition of the problem(s)?
2. When a family is both poor and neglectful, how should the government intervene?
3. When a family is poor but not neglectful, what should be the government's role?
4. When a family is neglectful but not poor, what should the government do?
5. If a family is homeless, should that be considered grounds for a finding of neglect?
6. How might your own socioeconomic status, both growing up and at present, affect your understanding of these issues?
7. If a parent is using drugs and/or alcohol, what should be the criteria for determining their capacity to parent appropriately? On what basis are you designing these criteria?
8. If a parent has a criminal history, what should be the criteria for determining their capacity to parent appropriately? On what basis are you designing these criteria?
9. Is there a relationship between a parent's capacity to get and keep a job and their ability to be an adequate or good parent? How do you know?
10. Does it make more sense for a social worker to help families with self-sufficiency and parenting problems or to just help them with one set of problems? Why? If you, the social worker, are faced with both sets of problems, which will you tackle first and how?
11. What are your views about the new emphasis on services and supports under CalWORKs? Knowing what you know about our previous efforts in history to blend eligibility with services, what challenges will welfare agencies face in implementing this approach?
12. What do you think the differences are between your role as a child welfare worker and your role as a CalWORKs worker? What are the similarities and differences?

CHAPTER V

OVERLAPPING WELFARE AND CHILD WELFARE POPULATIONS: A LOOK AT THE DATA

CHAPTER V

OVERLAPPING WELFARE AND CHILD WELFARE POPULATIONS: A LOOK AT THE DATA

INSTRUCTIONAL GUIDE

The following paper provides descriptive information regarding families who have been involved with both the welfare and child protection systems. It is based upon an analysis of administrative data from the California Children's Services Archive at the University of California, Berkeley. For a detailed discussion of the methods and data sources used for this chapter please see Appendix A.

The following discussion is divided into three main parts. *Part I: From Welfare to Child Welfare* focuses on the relationship between welfare and child welfare participation and begins by examining the characteristics of children who entered the AFDC program and their subsequent child welfare experiences, including foster placement. This includes data on the following:

- Characteristics of child AFDC entries (1988-1995).
- Transitions from AFDC to child welfare/child protective services.

Part II: Births to Teen Girls in the Foster Care System presents information regarding the vulnerable population of teens who became pregnant while in the foster care system during 1994. *Part III: Kinship Care and AFDC* presents information on the intersections between kin caregiving and the AFDC program. In particular this section looks at the magnitude and demographics of the older caregiver population in California as well as suggests implications of CalWORKs policy for this population.

This chapter of the curriculum is designed to help students, child welfare workers, and administrators (a) gain insight into the factors that may put TANF-eligible families at greater risk for child welfare involvement, including foster care; (b) use available empirical data to identify the potential impact of welfare reform on AFDC/TANF eligible kin caregivers; and (c) use this understanding to consider different policy options.

The central feature of this chapter is a series of tables and figures. We suggest that instructors familiarize themselves with this data and then select the sections that best meet the needs of their audience. An overhead of each table and figure is provided in Appendix D for classroom use. Also, each grouping of the data is accompanied by a summary that outlines the major interpretations and findings. These can be used by instructors as guides for their presentation or reproduced for students to use while viewing the figures and tables.

Questions for discussion are included at the end of the chapter. This chapter can be used to foster the following competencies for public child welfare work: 2.5, 3.2, 3.5, 3.12, 3.17, & 5.1.

PART I: FROM WELFARE TO CHILD WELFARE

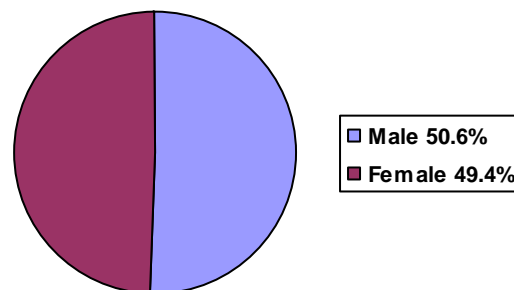
Characteristics of Child AFDC Entries (1988-1995)

As an initial step in understanding welfare and child welfare-involved families, some general characteristics of AFDC-recipient children are described below. Figures 5.1 through 5.4 provide a description of the children who entered AFDC for the first

time between 1988 and 1995. Examining Figures 5.1 through 5.4, the following can be seen:

- Approximately equal proportions of male and female children entered AFDC between 1988 and 1995.
- Children were most likely to enter AFDC as infants, with 48% of all entries occurring during the child's first year of life.
- Forty-two percent of the child AFDC entrants were Hispanic, 32% Caucasian, 16% African American, and 10% "Other" (Asian/Pacific Islander and American Indian/Alaskan Native). Comparison with a sample of births in California between 1988 and 1995⁹ revealed that African American children were almost twice as likely to enter AFDC (9% vs. 16%). By contrast, Hispanic children were approximately as likely (39% vs. 42%), and Caucasian children were significantly less likely (41% vs. 32%) to enter AFDC.
- Three quarters of the child AFDC entrants received AFDC-FG, a program primarily designed for single-parent AFDC families, and the remaining quarter received AFDC-U, a program targeted primarily to unemployed two-parent AFDC families.

Figure 5.1 Child AFDC Entries* by Child's Gender



**Includes 1988-1995 child AFDC entries*

⁹ For population comparisons, a random sample of 1 million births was drawn from the California Birth Statistical Master File (CBSMF). The sample was stratified according to birth year with equal random samples of 500,000 births taken from 1969-1987 and 1988-1995. This sampling frame allowed for best approximation of the ages of children in the AFDC sample.

Figure 5.2 Child AFDC Entries* by Child's Age at Entry to AFDC

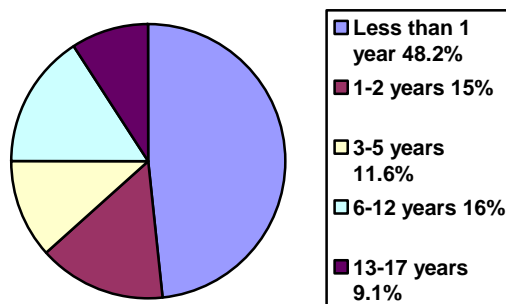


Figure 5.3 Child AFDC Entries* by Child's Race/Ethnicity

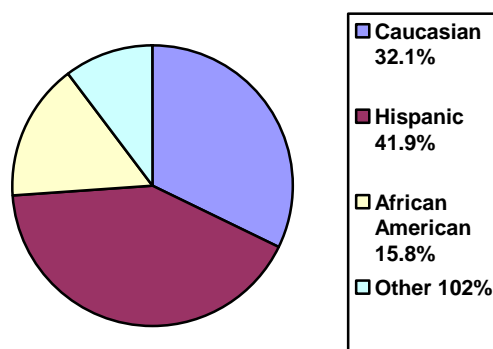
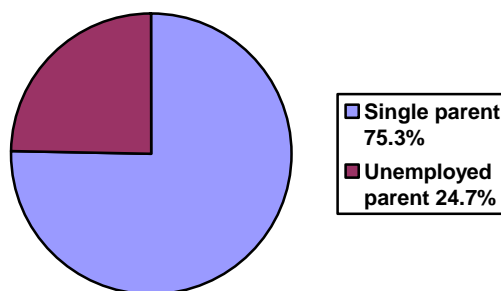


Figure 5.4 Child AFDC Entries* by AFDC Case Type

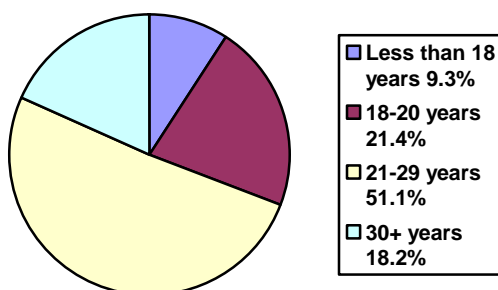


**Includes 1988-1995 child AFDC entries*

In addition to a description of the children receiving AFDC, some characteristics of families are provided in Figures 5.5 through 5.8. These figures show the following:

- More than two thirds of mothers were over age 20 when the child recipient was born and less than one third were age 20 or younger. Compared to a sample of statewide births in 1988-1995, children born to mothers under age 20 were more likely to enter AFDC than were children of older mothers. Specifically, approximately 18% of children in the general population were born to mothers under age 20 compared to 31% of children on AFDC. These young families bring special vulnerabilities when time limits and potential child welfare involvement are concerned.
- Similar to their distribution in the overall population, more than one third of all child AFDC entrants had mothers who were foreign born. Additional analyses (not shown) revealed that more than three quarters of children with foreign born mothers who entered AFDC were Hispanic.
- Overall, 37% of child entries to AFDC were first-born children and another 27% had only one sibling at the time of their birth (second born). Compared to the general population, child AFDC entrants were more likely to come from larger families, with 36% being the third or later child born to their mother compared to 28% in the general population.
- Most child recipients received at least some prenatal care. Only 10% received little or no prenatal care: 7% of children were born to mothers who did not begin prenatal care until the third trimester, and a smaller percentage (3%) received no prenatal care at all throughout the pregnancy. Children entering AFDC were approximately twice as likely to have received no prenatal care than their counterparts in the general population (3% vs. 1.5%).

Figure 5.5 Child AFDC Entries* by Mother's Age at Child's Birth



**Includes 1988-1995 child AFDC entries*

Figure 5.6 Child AFDC Entries* by Whether Mother Was Native- or Foreign-born

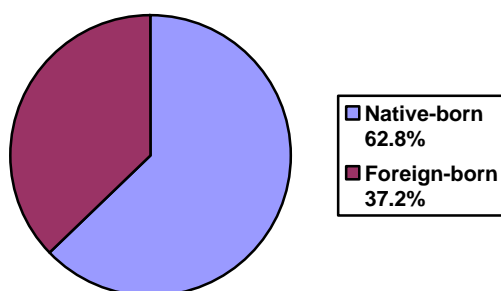


Figure 5.7 Child AFDC Entries* by Child's Birth Order

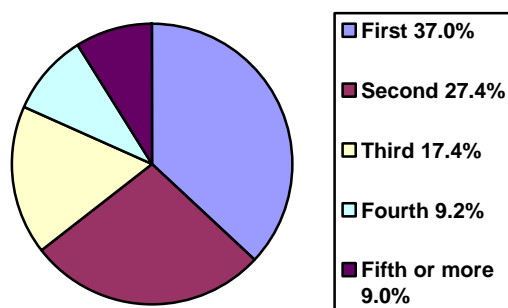
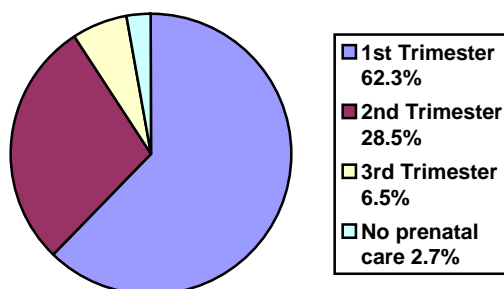


Figure 5.8 Child AFDC Entries* by Timing of Prenatal Care



**Includes 1988-1995 child AFDC entries*

Transitions From AFDC to Child Protective/Child Welfare Services

Child AFDC entries from 10 counties¹⁰ were examined to learn about the extent of child welfare contact for children in the welfare system. The overlap between welfare and child welfare populations is examined in terms of *child welfare contact for children on AFDC, demographic and case characteristics of child AFDC entrants with child welfare contact, and the likelihood of child welfare involvement for AFDC child entrants with certain characteristics.*

Child welfare contact for children on AFDC. Child welfare contact is defined as whether a child experienced a child maltreatment report, case investigation, case opening, or foster care placement for the first time by December 31, 1995. Figures 5.9a-d examine these events for children who entered AFDC in 1990. In addition to illustrating the overall rates of these events 5 years after entry to AFDC (Total), the figures also break out the percent who experienced child welfare events by each year. Appendix Table A.1 details the occurrence of these specific child welfare events and the year the event occurred for each of the 1990-1995 child AFDC entry cohorts. In examining the number of children on welfare who became involved with child welfare services within 5 years, the following can be seen:

- Twenty-seven percent of children who began aid in 1990 experienced a child maltreatment report within 5 years. Children were most likely to experience child maltreatment reports within the first 2 years, with nearly half (49%) of reports occurring within this time period (1990, 1991).¹¹
- Twenty-two percent had a case investigation within 5 years.

¹⁰ Counties include: Alameda, Contra Costa, Fresno, Orange, San Diego, San Mateo, Santa Clara, Santa Cruz, Sonoma, and Tulare. Includes 1990-1995 child AFDC entrants.

¹¹ Note that the low rate of investigation during the 1990 year may be due to a bias in the data since 1990 data were not available for all 10 counties.

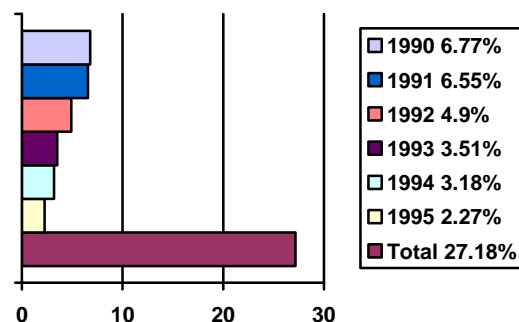
- Beyond the investigation stage, when case openings and foster placements were examined, the proportion of children who experienced these events dropped to 8% and 3% respectively. While nearly half (49%) of all case openings occurred within the first 2 years of entry to AFDC, foster placement often occurred after a greater delay, as only 40% of placements occurred in 1990 or 1991.

Because information on child maltreatment reports, case investigations, and case openings is not available statewide and because we do not have a longitudinal database for the entire child population, it is difficult to make comparisons to the overall 1990 child population. In order to provide an estimate of these population rates, we calculated the number of first occurrences of the specific child welfare events between 1990 and 1995 in these 10 counties, and then divided by the 1990 child population projections from the California Department of Finance. These estimates suggest that 24% of the overall child population in these counties had experienced a child maltreatment report, 17% had a child maltreatment investigation, 5% had child welfare cases opened, and less than 1% were placed in foster care for the first time within this 5-year period. When these estimated rates for the overall child population are compared to the rates for 1990 AFDC child entrants in these counties, AFDC children were somewhat more likely to have a child maltreatment report (27% vs. 24%), and nearly three times as likely to enter foster care (3% vs. 1%).

The possibility exists that the 10 counties for which complete child maltreatment case histories were available might not be representative of the entire state. Limited data make it impossible to test whether a county bias exists for child maltreatment reports, investigations, and case openings; however, full statewide data are available for foster care placement. Therefore to investigate possible bias, a similar *statewide*

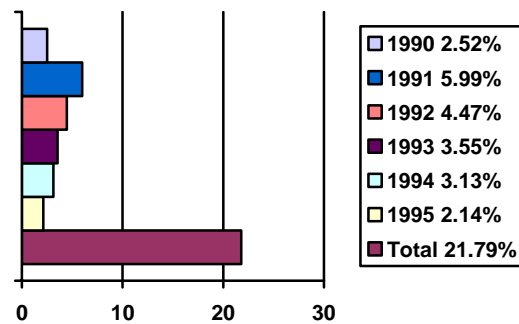
analysis of foster care entry was conducted for child AFDC entrants in all California counties (Appendix Table A.2 details the findings from this analysis). Specifically, the analysis examines foster care placement for up to 7 years following entry to AFDC, for children entering AFDC between 1988-1995 (focusing on the 1988 entries allows us to extend the follow-up period to 7 years). Findings revealed similar 5-year rates of transition to foster care as the 10 county analyses, with approximately 4.03% of 1988 child AFDC entrants transitioning to foster care within 5 years. This rose to approximately 5% by 7 years, suggesting relative comparability between the 10-county sample and the entire state. In summary, children on AFDC transition to foster care at rates of 3% (in the 10 counties, over 5 years) to 4% (statewide, over 5 years) to 5% (statewide, over 7 years).

Figure 5.9a Child AFDC Entries in 1990:
Percent of Entrants With Child Maltreatment Reports by Year



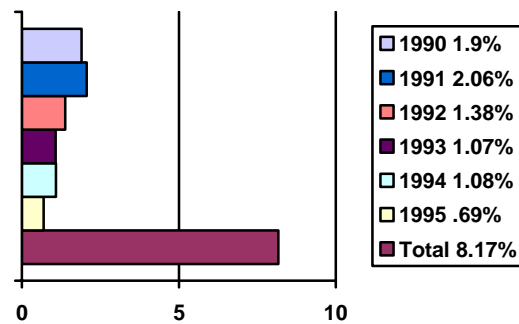
n = 8,809 with 2,394 child maltreatment reports by 1995

Figure 5.9b Child AFDC Entries in 1990:
Percent of Entrants With Case Investigations by Year



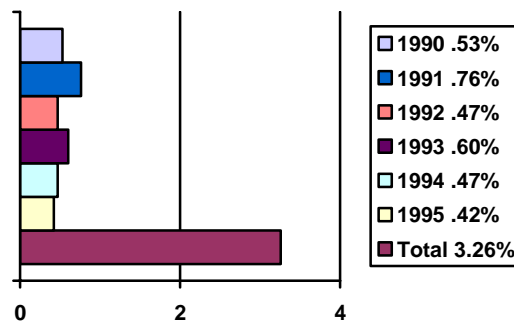
n = 8,985 with 1,958 case investigations by 1995

Figure 5.9c Child AFDC Entries in 1990:
Percent of Entrants With Case Openings by Year



n = 8,997 with 735 case openings by 1995

Figure 5.9d Child AFDC Entries in 1990:
Percent of Entrants With Foster Care Entries by Year



n = 9,056 with 295 entering foster care by 1995

Demographics and case characteristics of children new to aid with subsequent child welfare contact. Figures 5.10 through 5.15 examine the relationship between specific characteristics of 1990-1995 child AFDC entrants and the child welfare event experienced. The figures display the distribution of these characteristics both for the total child AFDC population (across the 10 counties), and for those children experiencing each type of child welfare event. The reader can therefore examine variations in the relationship between specific characteristics of interest and the particular child welfare events experienced as a child progresses through the system (from child maltreatment report to foster placement). Appendix Table A.3 provides further detail regarding the relationship between demographic characteristics and child welfare events.

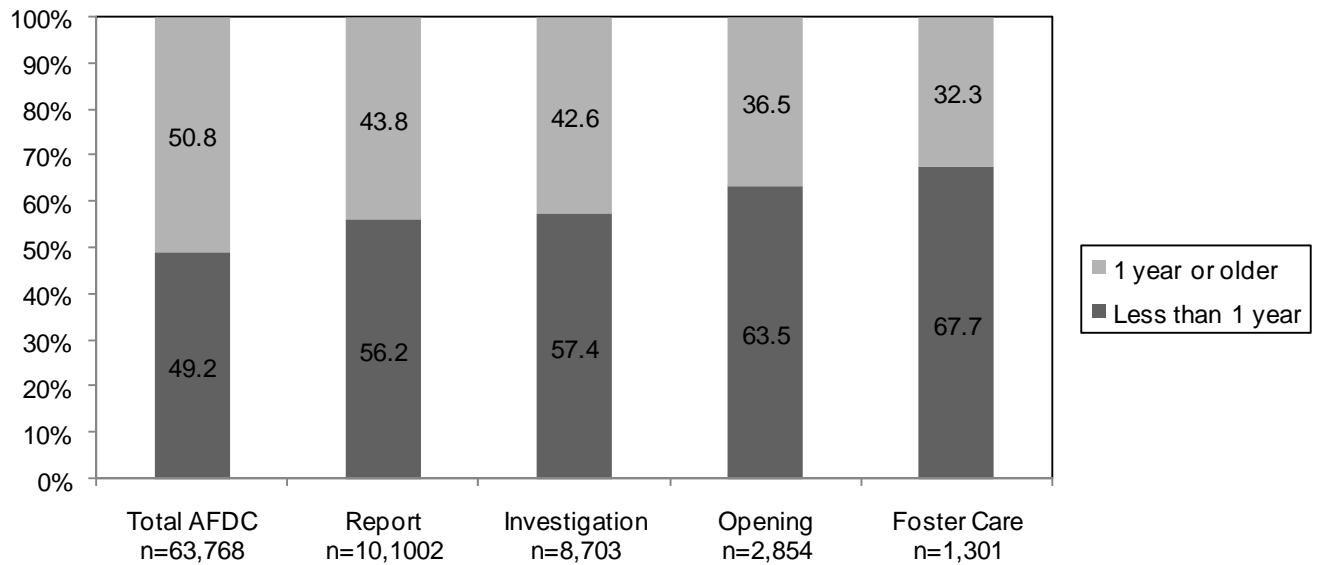
From Figures 5.10 and 5.11, the following can be seen:

- Children who entered AFDC as infants were more likely to experience child welfare events than children who entered at later ages. For instance, infants made up 50% of all children new to aid in the 10 counties, but they accounted for 56% of reports for suspected maltreatment. By contrast, 51% of children entered

AFDC at 1 year old or older, however this age group accounted for only 44% of all child maltreatment reports. These findings may indicate that children who enter AFDC as infants are born into poverty and raised within a context of poverty and its associated stressors. Children who enter at later ages, by contrast, may have grown up in relatively nonpoor households where parenting behaviors and coping mechanisms may have had time to develop without the additional stress of very low income.

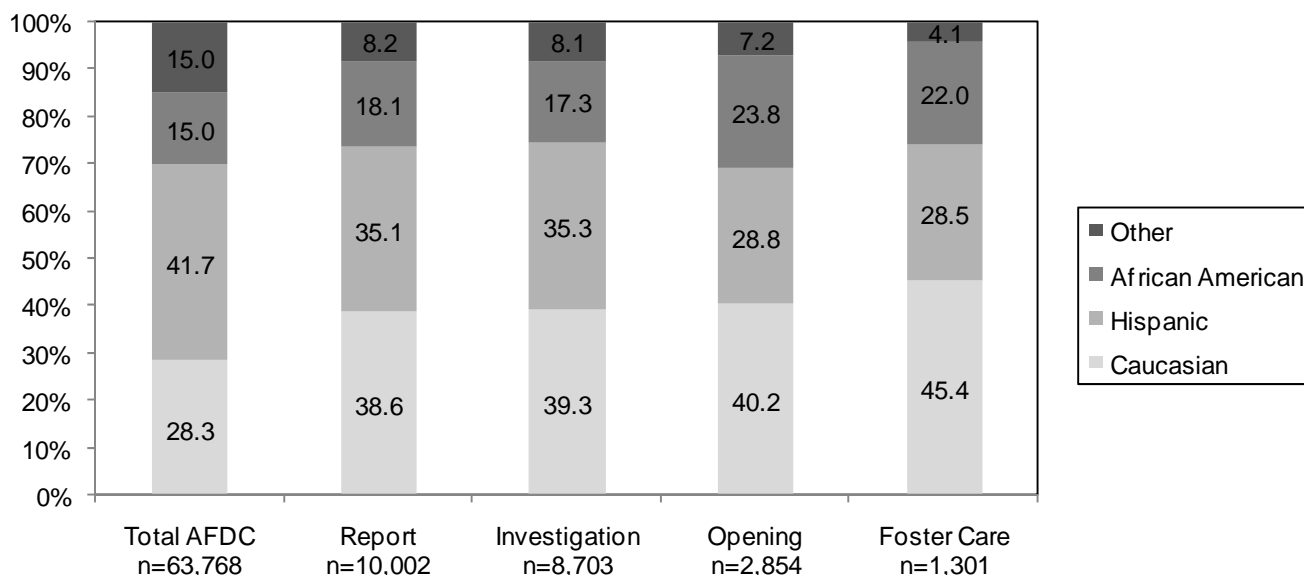
- Progressing through the child welfare system, the effect of age at entry became more pronounced. For instance, although children who entered AFDC as infants accounted for 56% of reports and 57% of investigations, when case openings and foster placements are examined, these proportions increase to 64% and 68% respectively. The greater proportion of infants experiencing child welfare events as one progress through the child welfare system may reflect actual higher rates of these events among infants or greater perceived risk to infants compared to older children by child welfare practitioners.
- Relative to their representation in the general AFDC population, Caucasian children were more likely to experience a child welfare event than children of other racial/ethnic groups. Specifically, Caucasian children accounted for only 28% of all child AFDC entrants, but comprised 39% of both child maltreatment reports and investigations, 40% of case openings, and 45% of foster placements.
- Although less extreme, a similar pattern existed among African American children. Specifically, African Americans accounted for 15% of the child AFDC entrants across 10 counties, but made up 18% of child maltreatment reports, 17% of investigations, 24% of case openings, and 22% of foster placements.
- In contrast, Hispanic children and children of "Other" racial/ethnic backgrounds were underrepresented in terms of child welfare events in these counties.

Figure 5.10 Child's Age at Entry to AFDC by Type of Child Welfare Event (%)*



* Includes 1990-1995 child AFDC entries

Figure 5.11 Child's Race/Ethnicity by Type of Child Welfare Event (%)*



* Includes 1990-1995 child AFDC entries

Figures 5.12 and 5.13 reveal the following:

- Children from single-parent (AFDC-FG) households were overrepresented in terms of child welfare participation; progressing through the child welfare system, this pattern became more pronounced. Specifically, single-parent households accounted for 71% of all children new to aid in the 10 counties but made up 79% of both maltreatment reports and investigations, as well as 83% and 84% of case openings and foster placements, respectively. These findings suggest that two-parent families may be better equipped to handle the pressures associated with childrearing in the context of poverty.
- First or second-born children were less likely than their later siblings (third or later birth to their mother) to experience child welfare events. This pattern also persisted across events and became more pronounced as children moved through the child welfare system. For instance, 65% of children new to aid were first or second-born compared to 59% of those with a child maltreatment report, 57% with a case investigation, 56% with a case opening, and 50% with a foster care placement. Generally, caring for more children is likely to be more stressful than caring for fewer children. Additionally, doing so in the context of poverty is likely to compound stress and may increase the likelihood of maltreatment.

Figure 5.12 AFDC Case Type by Type of Child Welfare Event (%)*

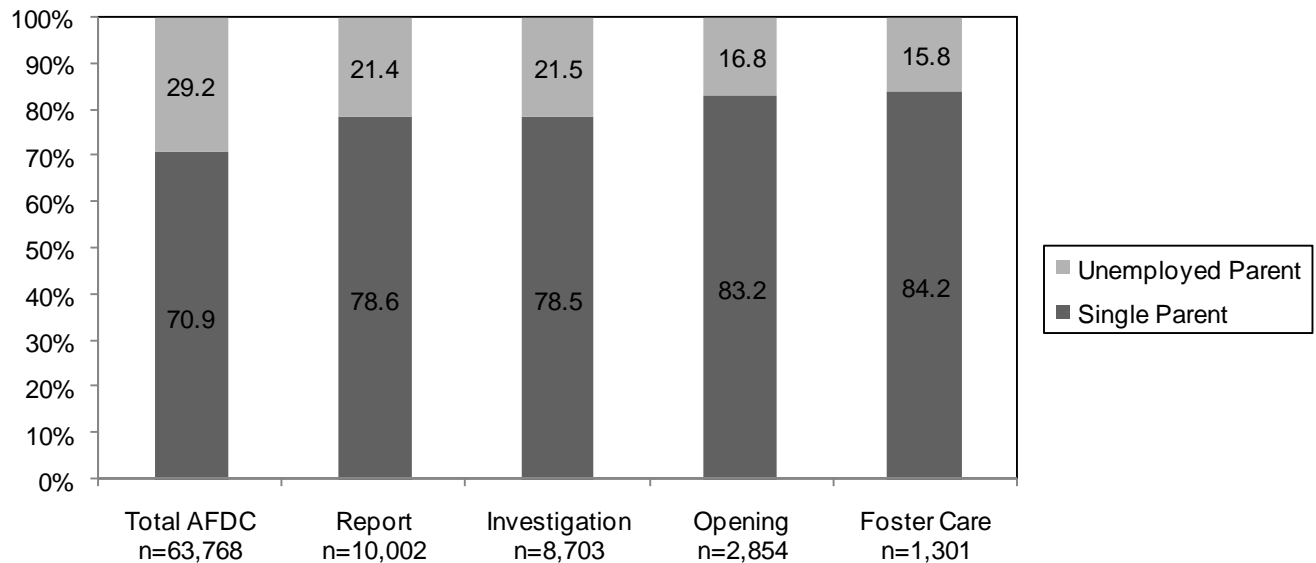
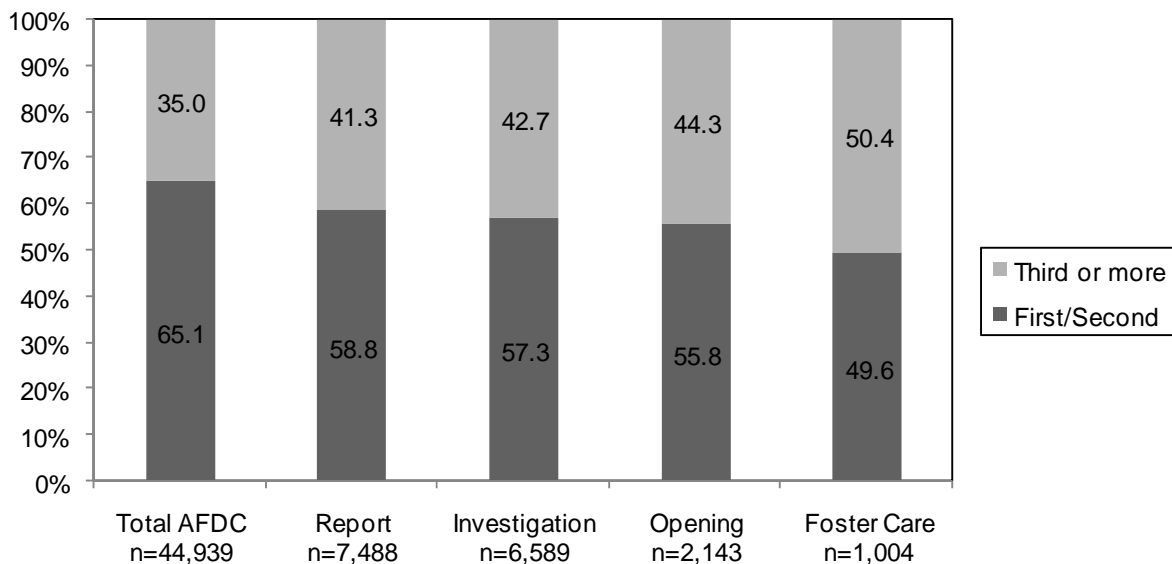


Figure 5.13 Child's Birth Order by Type of Child Welfare Event (%)*



*Includes 1990-1995 child AFDC entries

Examining Figures 5.14 and 5.15 we find that:

- Children whose mothers began prenatal care in the third trimester or who did not receive any prenatal care during pregnancy were more likely to experience a child welfare event than their counterparts with earlier prenatal care. Over time this pattern also became more pronounced. Specifically, while children with inadequate prenatal care made up only 10% of children new to aid, they accounted for approximately 11% of maltreatment reports and investigations, 13% of case openings, and 16% of foster placements. Delays in the start of prenatal care might indicate unwanted pregnancies or an indifference to the pregnancy on behalf of the mother, perhaps associated with substance abuse. The delays may also signal a mother who has fewer personal resources to access health care, which may foreshadow her ability to access resources as a parent. Thus, these mothers might be at greater risk for child maltreatment.
- As Figure 5.15 indicates, children of low birth weight (less than 2,500 grams) were overrepresented in terms of child welfare events. Progressing through the child welfare system toward foster care, these effects intensify. These high-risk children are generally more likely to require greater parental involvement, while at the same time their physical and behavioral characteristics might interfere with the developing infant/parent relationship or increase parental stress associated with caretaking, all of which might increase the risk of abuse and neglect. The increasing proportions of children with these problems found as one progresses through the child welfare system might suggest actual higher rates of these events or lower thresholds for action on the part of child welfare workers toward children with these characteristics.

Figure 5.14 Timing of Prenatal Care by Type of Child Welfare Event (%)*

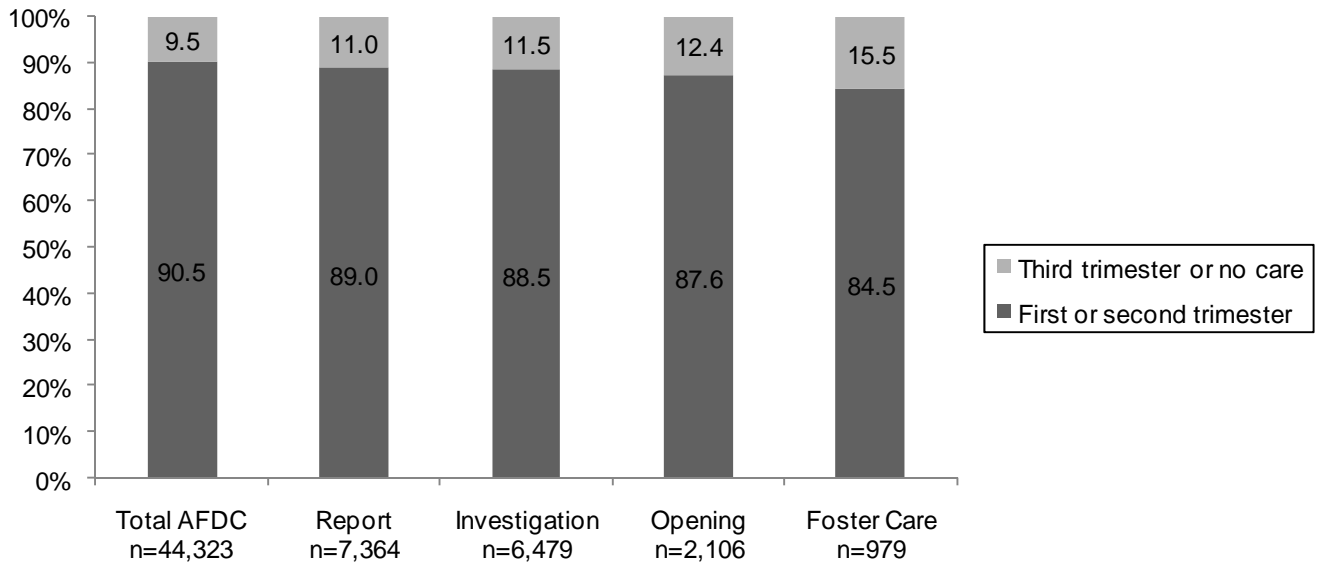
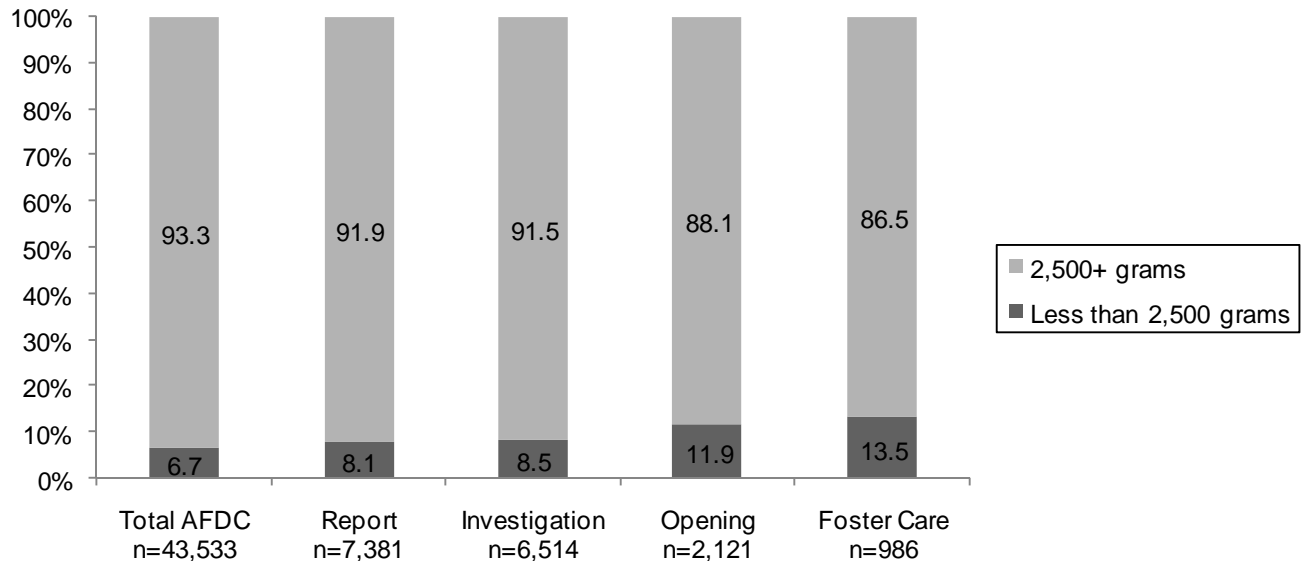


Figure 5.15 Child's Birth Weight by Type of Child Welfare Event (%)*



*Includes 1990-1995 child AFDC entries

The likelihood of child welfare involvement. Table 5.1 presents multivariate models for children new to aid in 1990-1995 in these 10 California counties who later experienced child welfare events. Separate models are presented for each of the four child welfare events: child maltreatment report, case investigation, case opening, and foster placement. In addition to the basic demographic and case characteristics examined within the previously discussed bivariate analyses, the multivariate models include several additional variables to characterize the child's AFDC participation, including the number of months on AFDC as well as breaks in AFDC or MediCal participation.

Multivariate analyses allow for an examination of the independent effects of a variable on a specified outcome while controlling for or holding constant the effects of the other variables. For each variable in the model, we define a baseline category of comparison; this category is italicized. For instance, in Table 5.1 for the variable "AFDC case type" the baseline is children in unemployed parent households. We used a type of multivariate analysis called event history analysis, specifically the discrete time logit model. This type of regression procedure produces a statistic known as an odds ratio for each category of a variable in the model.

Odds ratios for baseline categories are set equal to 1.0. Odds ratios for other categories of the variable of interest are compared individually to the baseline category. Odds ratios above 1.0 indicate that children with those particular characteristics are more likely to experience the event of interest than the baseline category, when holding all other variables in the model constant. For instance, again using "AFDC case type" as

the example, we see that while holding all other variables constant in the model, children in single-parent households were 1.79 times as likely to experience a child maltreatment report than their counterparts from unemployed parent households. By contrast, odds ratios below 1.0 are interpreted as a lower likelihood of experiencing the event of interest (e.g., an odds ratio of .81 indicates a 19% decrease in the likelihood) while holding all other variables in the model constant.

In sum, these multivariate models suggest the following:

- Several characteristics are associated with the increasing risk of a child welfare event as children move through the system. These include: entering AFDC as an infant; being Caucasian; being from a single-parent home (AFDC-FG) as opposed to a two-parent, unemployed household (AFDC-U); being born into a larger family; being born with low birth weight; and having late or no prenatal care.
- After controlling for the number of spells on AFDC, the total time a child spent on AFDC was positively associated with experiencing all child welfare events.
- Breaks in Medi-Cal receipt¹² were associated with child welfare events in general. As the severity of the child welfare event increased, however, breaks in MediCal were not as strongly associated with the likelihood of that child welfare event. Specifically, even after controlling for time on AFDC as well as other factors, each break in Medical receipt was associated with a 48% increase in the occurrence of a child maltreatment report, and a 26% increase in the occurrence of foster care entry. In other words, if two children spent an equivalent amount of time on aid, but one child's participation was continuous while the other's was characterized by breaks, the child with breaks would be more likely to experience a child welfare event than the child with no breaks. Such breaks in the receipt of aid might signify greater family instability or other factors associated with child maltreatment.
- Breaks in AFDC receipt while MediCal was retained¹³ were also positively associated with all child welfare events except case openings.

¹² A break in MediCal refers to a period of 3 or more months during which the child was not receiving either MediCal or AFDC.

¹³ A break in AFDC while MediCal was retained refers to a period of 3 or more months during which the child was not receiving AFDC but was still receiving MediCal.

Table 5.1 Odds Ratios for Child Welfare Events

	Report	Investigation	Opening	Foster Care
Child's age at entry to AFDC				
<i>Less than 1 year</i>	1.00	1.00	1.00	1.00
1-2 years	0.99 ns	0.97 ns	0.91 ns	0.82 ns
3-5 years	0.91 *	0.87 **	0.70 ***	0.56 ***
6-12 years	0.94 ns	0.86 **	0.64 ***	0.36 ***
13-17 years	0.88 ns	0.68 ***	0.60 **	0.65 *
Child's race/ethnicity				
<i>Caucasian</i>	1.00	1.00	1.00	1.00
African American	0.70 ***	0.65 ***	0.91 ns	0.62 ***
Hispanic	0.48 ***	0.47 ***	0.39 ***	0.33 ***
Other	0.36 ***	0.35 ***	0.38 ***	0.19 ***
Child's gender				
<i>Male</i>	1.00	1.00	1.00	1.00
Female	1.01 ns	1.02 ns	0.97 ns	1.04 ns
Year of AFDC entry				
<i>1990</i>	1.07 ns	0.97 ns	1.23 **	1.07 ns
<i>1991</i>	1.00	1.00	1.00	1.00
1992	0.99 ns	1.04 ns	1.07 ns	1.15 ns
1993	0.95 ns	1.01 ns	0.97 ns	1.17 ns
1994	0.97 ns	1.01 ns	0.97 ns	1.46 **
1995	0.98 ns	1.15 *	0.97 ns	1.39 *
AFDC case type				
<i>Unemployed Parent</i>	1.00	1.00	1.00	1.00
Single Parent	1.79 ***	1.83 ***	2.39 ***	2.70 ***
Months on AFDC	1.02 ***	1.02 ***	1.02 ***	1.03 ***
Breaks in Medi-Cal	1.48 ***	1.43 ***	1.30 ***	1.26 ns
Breaks in AFDC Spells	1.21 ***	1.26 ***	1.10 ns	1.30 **
Child's birth order				
<i>First</i>	1.00	1.00	1.00	1.00
Second	1.44 ***	1.49 ***	1.45 ***	1.78 ***
Third or more	2.09 ***	2.23 ***	2.05 ***	3.11 ***
Child's birth weight				
<i>2,500+ grams</i>	1.00	1.00	1.00	1.00
1,500-2,499 grams	1.23 ***	1.31 ***	1.71 ***	1.81 ***
<i>Less than 1,500 grams</i>	1.58 ***	1.49 **	2.01 ***	2.36 ***
Mother's age at child's birth				
<i>Less than 18 years</i>	1.70 ***	1.70 ***	1.43 ***	1.94 ***
18-20 years	1.22 ***	1.27 ***	1.07 ns	1.21 ns
21-29 years	1.07 ns	1.09 *	1.04 ns	1.10 ns
30+ years	1.00	1.00	1.00	1.00

Table 5.1 Odds Ratios for Child Welfare Events (cont'd)

	Report	Investigation	Opening	Foster Care
Timing of prenatal care				
First trimester	1.00	1.00	1.00	1.00
Second trimester	1.06 *	1.10 **	1.16 **	1.44 ***
Third trimester	1.18 ***	1.19 ***	1.36 ***	1.83 ***
No Prenatal Care	1.30 ***	1.41 ***	1.68 ***	2.23 ***

Notes:

Discrete Time Logit Models

*ns p> = 0.5, * p<.05, ** p<.01, *** p<.001*

Report: 7,223 events, 126,245 censored -2 log likelihood Intercept only 56180.937, Intercept and covariates 53668.051, Chi-Square for covariates 2512.886 with 98 DF (p=0.0001)

Investigation: 6,376 events, 132,839 censored -2 log likelihood Intercept only 51775.937, Intercept and covariates 49654.591, Chi-Square for covariates 2121.346 with 98 DF (p=0.0001)

Opening: 2,074 events, 147,625 censored -2 log likelihood Intercept only 21869.036, Intercept and covariates 20590.054, Chi-Square for covariates 1278.982 with 98 DF (p=0.0001)

Foster Care: 959 events, 152,694 censored -2 log likelihood Intercept only 11648.846, Intercept and covariates 10774.791, Chi-Square for covariates 874.055 with 99 DF (p=0.0001)

Potential Implications of CalWORKs Implementation for Child Welfare

In addition to providing baseline rates of child welfare contact in 10 counties, this section has identified the demographic and case characteristics of families most at risk for child protective/child welfare involvement. These findings have several potential implications. Specifically:

- More than 1 in 4 children new to aid in 1990 in these 10 California counties had some child welfare contact within 5 years, and approximately 1 in 30 entered the foster care system. Given these already high rates of child welfare contact among the AFDC population, it is critical that policymakers monitor the impact of CalWORKs on child maltreatment.
- More than 20% of AFDC families were reported for child maltreatment. To the extent that this event is an indicator of families' struggles with barriers that may affect their ability to work (such as substance abuse and mental illness), this suggests that a significant proportion of the aid population may need additional services and assistance in a CalWORKs environment. In addition, given the relatively high proportion of families experiencing a maltreatment report, there is a need to determine the extent to which these families overlap with the families

who will qualify for exemptions from the 5-year limit for aid, an exemption category that is supposed to be capped at 20%.

- Although foster care placement was found to be more common among child AFDC entrants statewide than in the general child population, even among poor children, foster care placement is a relatively rare event. Specifically, 1 in 20 children statewide who entered AFDC in 1988 had transitioned to foster care by 1995. Despite this relatively low rate, the earlier results suggest that some children are more at risk of placement than others. Policymakers and practitioners must make special efforts to evaluate the impact of CalWORKs on this population.
- While welfare receipt is associated with increased risk of child maltreatment, the majority of AFDC recipients do not abuse their children. Rather, this analysis revealed several characteristics associated with increasing risk of child welfare events. These included: entering AFDC as an infant, being Caucasian or African American, being in the AFDC-FG program as opposed to the AFDC-U program, going off AFDC but later returning to the rolls, being born into larger families, being born of low birth weight, and having late or no prenatal care. Families with some of these characteristics may be placed at additional risk under CalWORKs. For instance, parents of children in large families are likely to have a more difficult time complying with CalWORKs due to the more extensive coordination required to obtain childcare and ensure their children's school attendance. Continued research to identify additional risk factors and to evaluate the impact of welfare reform on children with the aforementioned risk factors can assist service providers to develop preventive interventions and target them to those most in need.
- The considerable overlap between the welfare and child welfare populations also suggests the need for increased cross-training for practitioners as well as multidisciplinary case management for families coping with their involvement in two service systems.

PART II: BIRTHS TO TEENAGE GIRLS IN THE FOSTER CARE SYSTEM

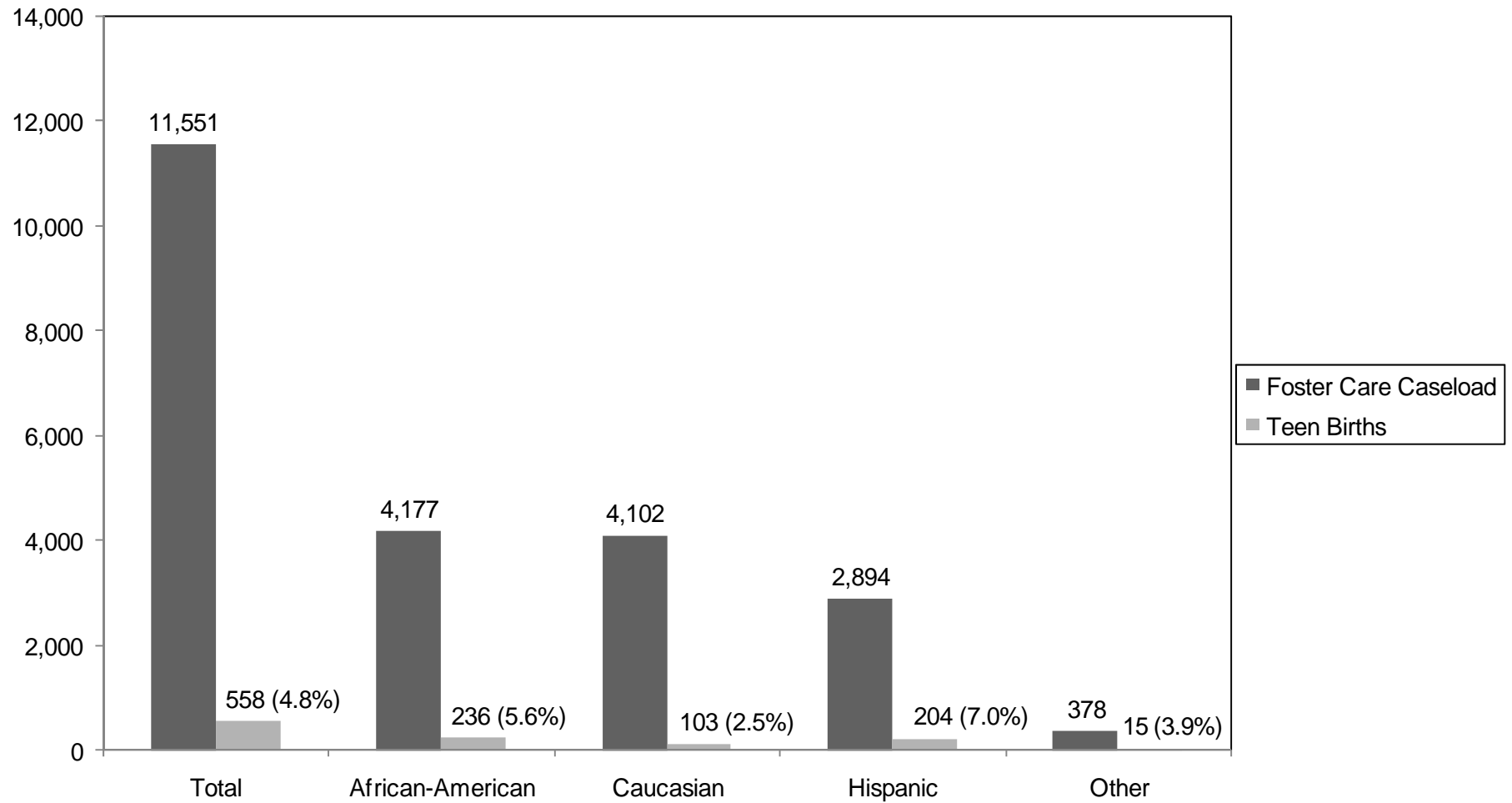
This section examines a subset of the overall foster care caseload, a population thought to be at particular risk for future dependence on income assistance programs: girls who become parents while in out-of-home placements. Specifically, this section analyzes the proportion of adolescent girls in the 1994 foster care caseload who become parents while still in care. Figure 5.16 shows the following:

- Hispanic teenage girls have the highest birthrate among all teenage girls in foster care at 7.0%. They are followed by African American girls with a birthrate of 5.6% and girls of “Other” racial/ethnic backgrounds at 3.9%. Caucasian girls have the lowest birthrate at 2.5%.
- When compared to statewide data for the general population of 15- to 18-year-old girls, the rates observed in the foster care population are not unusual. Specifically, statewide, Hispanic girls have a birthrate of 7.5%, African American girls have a rate of 5.6%, and Caucasian girls have a rate of 2.0% (Ventura, Curtin, & Mathews, 1998).

Potential Implications of CalWORKs Implementation for Child Welfare

While the birth rates for girls in foster care more or less mirror the rates for the state as a whole, they nonetheless raise concerns because these young parents may be more likely to transition to CalWORKs after emancipating from care (Cook, 1994). Furthermore, once on assistance, they are more likely to lack important familial and social resources and supports to help them transition off of aid, making them particularly vulnerable to reaching their lifetime limits at an early age. As a result, counties may want to consider developing special welfare-to-work programs for young parents in the foster care system.

Figure 5.16 Births to Teen Mothers in the Foster Care System



PART III: KINSHIP CARE AND AFDC

This section presents information on the intersection between kin caregiving and the AFDC program. In particular it examines the magnitude and demographics of the older caregiver population on welfare in California. The purpose of this section is to create a profile of the characteristics of older caregivers on AFDC in order to develop an understanding of the potential implications of welfare reform for grandparent caregivers. This section of the report is derived from a larger report, *The Impact of Welfare Reform on California's Grandparents Raising Grandchildren*, funded by the Public Policy Institute of California (Minkler, Berrick, & Needell, 1998).

Table 5.2 and Figure 5.17 examine the size and growth over time of the AFDC recipient older caregiver population. Specifically, the data show:

- From 1990 to 1996, the number of older caregiver households on AFDC grew from 8,674 to 19,069, comprising 1.3% of the AFDC population in 1990 and growing to almost 3% 6 years later (Table 5.2). This rate of caseload growth was more than twice that for younger caregiver households.
- The majority of older caregivers collecting AFDC for themselves and the children in their households are between the ages of 50-59, with a much smaller proportion of caregivers over age 60 (Figure 5.17).

Table 5.2 Caregiver Households on AFDC by Age of Caregiver and Year: 1990-1996

	1990		1991		1992		1993		1994		1995		1996	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Ages 18-49	533,914	98.4	613,442	98.4	647,499	98.2	705,069	98.1	730,972	97.8	716,695	97.5	666,786	97.2
Ages 50-59	7,320	1.3	8,590	1.4	9,848	1.5	11,875	1.7	14,078	1.9	16,051	2.2	16,980	2.5
Ages 60+	1,444	0.3	1,611	0.3	1,721	0.3	1,841	0.3	1,998	0.3	2,074	0.3	2,089	0.3
Total 18+	542,678	100.0	623,643	100.0	659,068	100.00	718,785	100.00	747,048	100.0	734,820	100.0	685,855	100.0
Total 50+	8,674	1.6	10,201	1.6	11,569	1.8	13,716	1.9	16,076	2.2	18,125	2.5	19,069	2.8

Figure 5.17 Growth in Older Caregiver Households on AFDC: 1990-1996

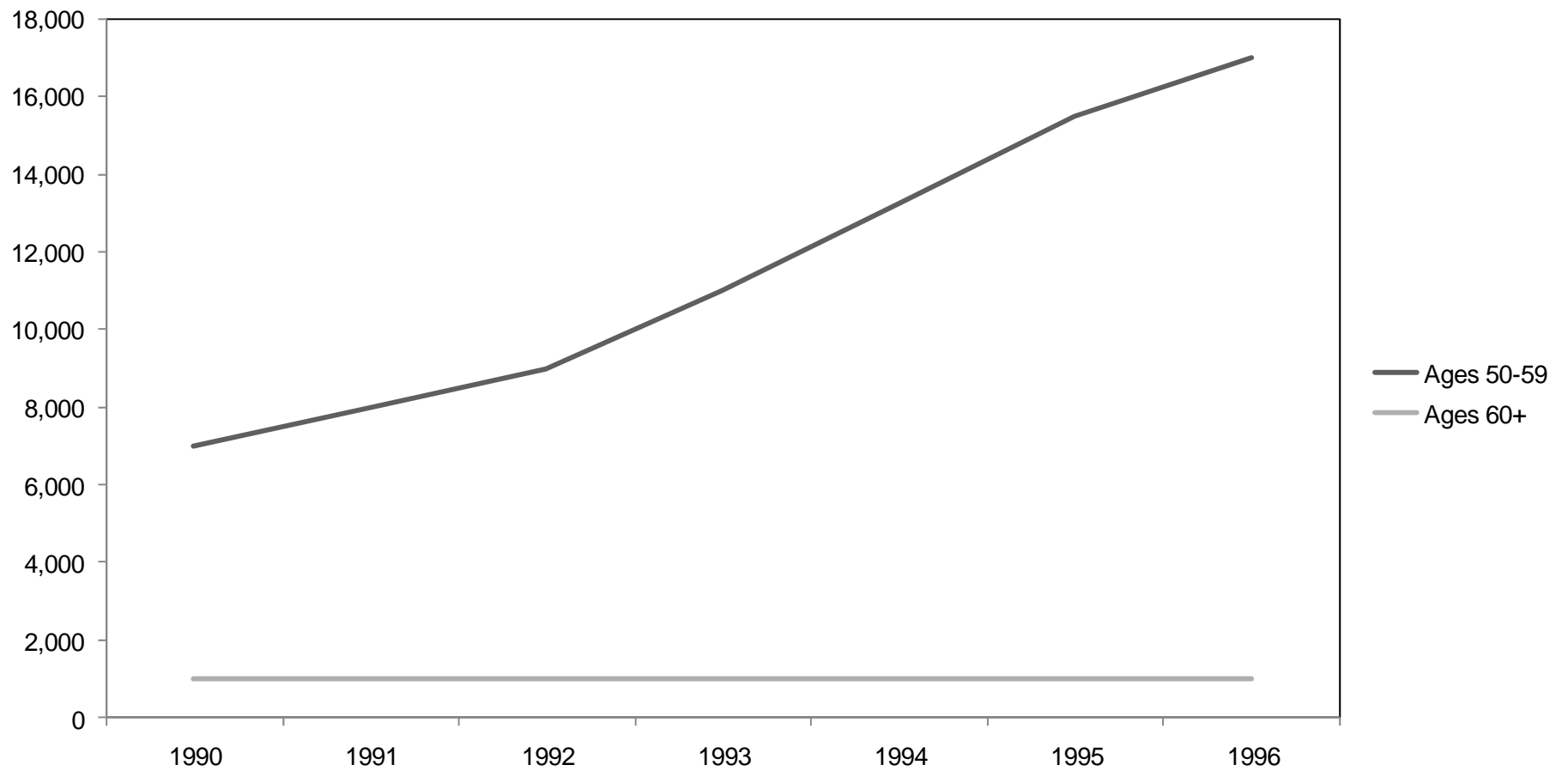


Table 5.3 and Figures 5.18 - 5.19 examine various characteristics of this group of caregivers including ethnicity and family size. These data indicate the following:

- The ethnicity of caregivers ages 18 - 49 is approximately 20% African American, 31% Caucasian, 39% Hispanic, and 10% "Other." Older caregivers ages 50+ are less likely to be African American (approximately 13%), less likely to be Caucasian (21%), somewhat more likely to be Hispanic (42%), and much more likely to belong to another ethnic group (23%; Figure 5.18).
- As Table 5.3 and Figure 5.19 indicate, although the majority of older caregivers are raising only one child on AFDC, many have a caregiving burden that is significantly greater.¹⁴ Approximately, 40% of caregivers have more than one child; almost 8% are raising four or more children. Sixty-four percent of households headed by 18- to 49-year-olds include two or more children; 14% include four or more children.

¹⁴ The database does not indicate whether these older relatives are raising more relative children outside of the AFDC system as well, as the database does not have a variable for family size.

Table 5.3 Family Size of AFDC Caregiver Households by Age and County Status: 1996

	1		2		3		4		5+		Total
	n	%	n	%	n	%	n	%	n	%	
California											
Ages 18-49	235,529	36.1	203,843	31.3	120,004	18.4	54,795	8.4	37,573	5.8	651,744
Ages 50-59	10,150	59.6	4,050	23.8	1,523	8.9	683	4.0	637	3.7	17,043
Ages 60+	1,238	60.9	458	22.5	192	9.4	73	3.6	73	3.6	2,034
Los Angeles											
Ages 50-59	5,965	57.2	2,486	23.8	1,029	9.9	465	4.5	486	4.7	10,431
Ages 60+	741	59.7	284	22.9	123	9.9	46	3.7	48	3.9	1,242
Outside LA											
Ages 50-59	4,185	63.3	1,564	23.7	494	7.5	218	3.3	151	2.3	6,612
Ages 60+	497	62.8	174	22.0	69	8.7	27	3.4	25	3.2	792

Figure 5.18 Ethnicity of Older Caregivers on AFDC by Age

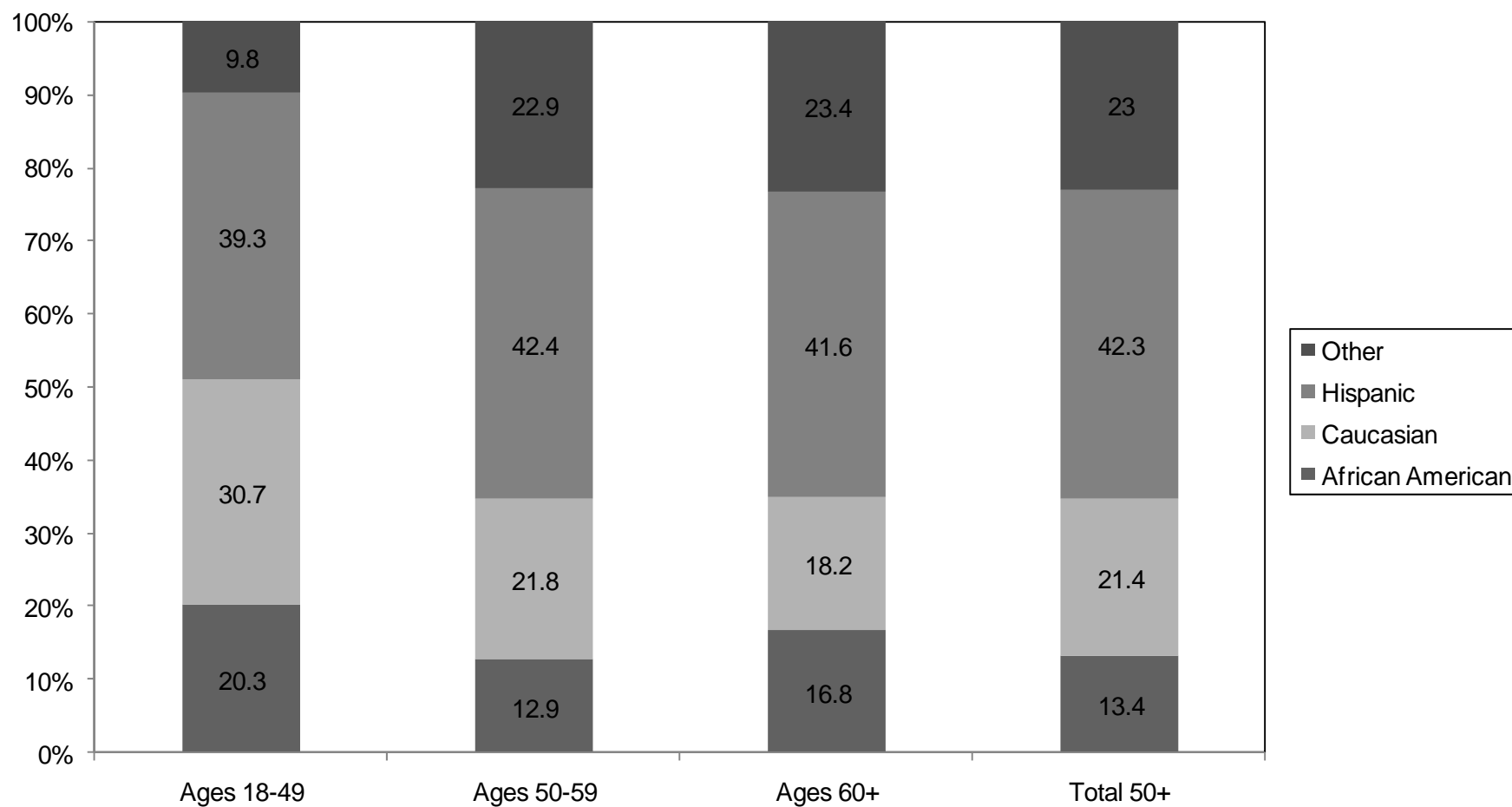
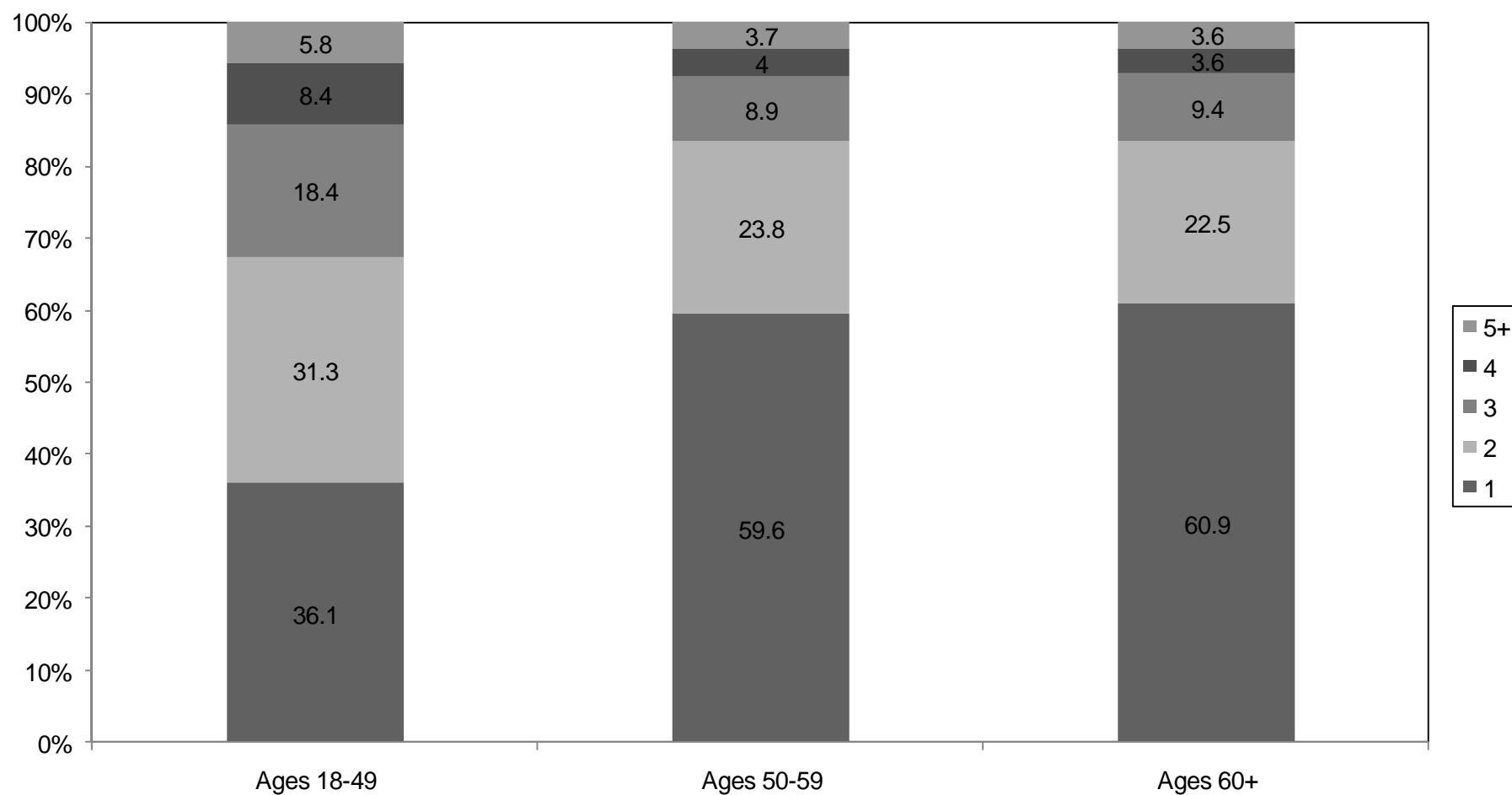


Figure 5.19 Family Size of AFDC Caregiver Households: 1996



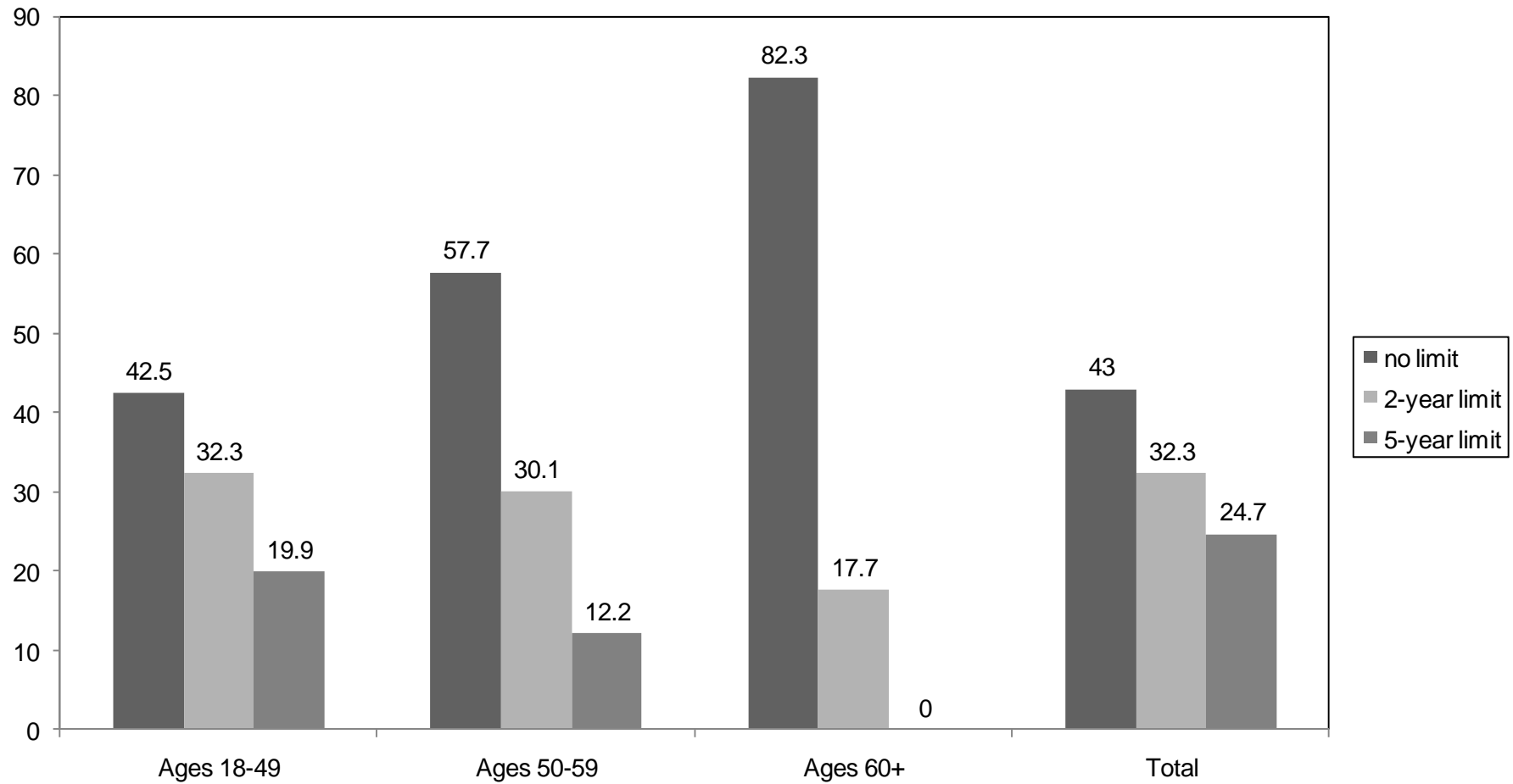
Finally, Table 5.4 and Figure 5.20 examine the likelihood these caregivers will encounter the 2- and 5-year time limits for aid receipt, respectively. These analyses indicate:

- Examining cumulative time on aid, we find that about 25% of caregivers ages 18-49 who began a spell on aid in 1988 or 1989 would have encountered a 5-year time limit, and 32% would have reached a 2-year time limit. Somewhat fewer older caregivers ages 50-59 would have reached a 5-year limit (12%) or a 2-year limit (30%), and few of the elderly caregivers ages 60+ would have encountered time limits at all (0% at 5 years and 18% at 2 years). There were no substantial differences by race/ethnicity.

**Table 5.4: Cumulative Time on Aid:
1988-89 AFDC Caregivers Reaching Time Limits**

	No limit		2-year limit		5-year limit		Total
	n	%	n	%	n	%	
Ages 18-49	29,907	42.5	22,763	32.3	17,638	19.9	70,308
Ages 50-59	915	57.7	478	30.1	193	12.2	1,586
Ages 60+	172	82.3	37	17.7	0	0	209
Total	30,994	43.0	23,278	32.3	17,831	24.7	72,103

Figure 5.20 Cumulative Time on Aid: 1988-1989 AFDC Caregivers Reaching Time Limits



Potential Implications of CalWORKs Implementation for Child Welfare

A review of the statewide data on AFDC recipients reveals a number of important findings regarding the size, demographics, and service utilization of needy older caregivers, a child welfare population who is experiencing changes under CalWORKs. This data helps clarify a number of issues raised by CalWORKs implementation as well as offers a basis for making several policy determinations. Specifically:

- The data suggests that there are only about 2,000 caregivers receiving AFDC statewide who were age 60 or older in 1996, although this rate had grown steadily for the past 6 years. In contrast, there were nearly 17,000 needy caregivers who were ages 50-59. Because the exemptions from work requirements and time limits only apply to older caregivers of advanced age (for work requirements) and age 60 and older (for time limits), these efforts to protect the older kin caregivers from the work and time provisions of welfare reform are unlikely to directly touch the majority of the older caregivers raising children in California.
- Given that counties have latitude to determine standards for exemptions to time limits and work requirements for most relatives, some may choose to broadly define the exemption category for relative caregivers. In addition, the state may choose to expand the exemption for older relatives caring for children to include those age 50+. Such an approach assumes little risk, as these older caregivers only account for approximately 3% of the AFDC caseload and they are unlikely to significantly impact the total 20% exemption cap. However, counties with very high rates of substance abuse, mental illness, kinship foster placement, or other serious concerns may have little room to offer an exemption to relatives when other populations press for relief from welfare restrictions. In addition, as welfare reform continues and the easier cases exit the welfare rolls, county administrators will face an increasingly complex welfare caseload, with many clients who will be challenged by the work and time requirements associated with aid. Counties may then be less able to allow this broader category of older relatives any special exemptions.
- One potential concern raised by providing exemptions to older caregivers is that the less restrictive CalWORKs environment for older relatives may create an inequity in the relationship between parents and older caregivers. The work and time limit exemptions may serve as an incentive for parents to move their children into the homes of relatives who are at less risk for sanctions and are therefore more economically secure. Since this older caregiver population is

dwarfed by the size of the younger aid group, even incremental movement of children from the regular AFDC population into the smaller, older caregiver population would have a significant effect. That is, very modest changes at the margins of the regular AFDC population (1% - 3%) could result in a doubling in the size of the older caregiver group. Changes such as these would still be quite insignificant for the AFDC population as a whole; yet, it would be important to track the pace of the transition rate over time as such changes might eventually result in profound changes in the configuration of poor families.

- If counties choose not to extend the special exemption status to all caregivers age 50 and older, they should be aware that the data on length of stay on AFDC for this age group suggest that a number of these caregivers may hit the 2- and 5-year time limits. While the data show that virtually none of the elderly caregivers (age 60+) reached a 5-year lifetime limit, a substantial portion of the older (50+) caregivers may be required to change their behavior or their circumstances. Our data showed that about 30% of older caregivers would have hit a 2-year time limit had welfare reform occurred previously and about 10% would have hit a lifetime restriction on aid.
- A further concern in assessing whether to extend exemptions to all caregivers age 50 and older is the impact sanctions will have on these caregivers were they to reach the 2- and 5-year limits on aid. Under CalWORKs, only the adult portion of the grant will be sanctioned allowing assistance units to continue receiving the children's portion of the grant. Because the grants increase by smaller and smaller increments for each additional member of an assistance unit, these adult sanctions will affect smaller assistance units more than larger ones. For example, the reduction in income from a three-person to a two-person family is \$109, whereas the reduction from a two-person to a one-person family is \$177. Since older caregivers (50+) are more likely to care for only one child than younger caregivers (approximately 60% of older caregivers and 36% of younger caregivers) they may face more severe economic constraints under the child-only provisions than younger caregivers who face sanctions.

QUESTIONS FOR DISCUSSION

Part 1: From Welfare to Child Welfare

1. Results of this analysis indicated a strong relationship between children's birth characteristics and the likelihood of child welfare contact. In particular, children who received inadequate prenatal care, were born low birth weight, were born into larger families, or were born to teenage mothers had significantly higher rates of child welfare contact than those children without these characteristics. This suggests that early intervention services targeted to mothers whose children

have these risk factors might be a helpful way to combat child maltreatment. Can you suggest several specific interventions that might be useful?

2. A growing series of authors have reflected on the possible impacts of welfare reform on child well-being in general and child welfare in particular (Aber, Brooks-Gunn & Maynard, 1995; Haskins, 1995; Meezan & Giovannoni, 1995; Wilson, Ellwood, & Brooks-Gunn, 1995; Zaslow, Moore, Morrison, Coiro, 1995; Collins & Aber, 1997; and Knitzer & Bernard, 1997). Essentially, all conclude that efforts to induce welfare mothers to self-sufficiency will have consequences for children. Whether these consequences are positive or negative depends in part upon what effect reforms have on family income and parental stress. Specifically, economic hardship related to loss of benefits or supports may strain a family's abilities to provide basic necessities such as food and shelter, causing increased neglect and homelessness. Furthermore, increased parental stress related to economic, employment, or childcare difficulties may also lead to increased rates of abuse. In contrast, positive changes in these areas may be beneficial to children and families. Given what you have learned about transitions from welfare to child welfare as well as the CalWORKs program, what consequences do you feel welfare reform might have for California's children?

Part II: Births to Teenage Girls in the Foster Care System

3. Consider the possible reasons why teen parents in foster care might be more likely to be involved with CalWORKs after emancipation than teen parents in the general population. Given these risk factors, what might be done to help prepare these girls for life after foster care?
4. Although the rates of teen births in foster care are similar to the rates outside of foster care, do you think the same or possibly different factors lead foster youth to become pregnant? Speculate on any possible differences. If there are special dynamics involved in the sexual activity and pregnancy decisions for foster youth, what sorts of prevention and intervention programs might be appropriate for this population?

Part III: Kinship Care and AFDC

5. Do you think exemptions for relative caregivers should be expanded to include those 50 and over, or continue to cover only those 60 years or older? Why or why not? Consider such factors as employability, the role of kin caregivers in child welfare, and length of time on aid given the likelihood of taking in multiple dependents over time.

CHAPTER VI

VOICES FROM THE FIELD: CHILD WELFARE STAFF PREPARE FOR CALWORKS

CHAPTER VI

VOICES FROM THE FIELD: CHILD WELFARE STAFF PREPARE FOR CALWORKS

INSTRUCTIONAL GUIDE

This paper reports the results of interviews and focus groups with child welfare workers and administrators across several California counties. These interviews (particularly those with child welfare administrators) were conducted very early in the welfare reform process when the implications of PRWORA were still a matter of speculation; yet they provided an essential springboard for the development of this curriculum. Child welfare practitioners in a variety of roles, from counties with widely varying approaches to welfare reform, identified the myriad ways in which the new federal and state policies are likely to impact their clients and themselves as professionals. Workers discussed the complex issue of differentiating between child poverty and child neglect, the ways in which these problems are handled pre- and postwelfare reform, and the areas in which further training is needed for both child welfare and CalWORKs staff. Questions for discussion are included at chapter's end.

This paper can serve as either background reading for the instructor or assigned reading for students. For child welfare practice classes, this paper may be a useful assigned reading as it offers case examples and a direct view from those practicing in the field.

This chapter can be used to foster the following competencies for public child welfare work: 2.2, 2.5, 2.6, 2.10, 3.2, 3.5, 3.10, 3.12, 3.13, 3.175.1, 5.3, 5.8, 6.2, & 6.7.

ISSUES IDENTIFIED IN INTERVIEWS WITH CHILD WELFARE ADMINISTRATORS

To understand the steps being taken by county agencies to address the impact of welfare reform on child welfare, interviews were conducted with managers in Alameda, Contra Costa, and San Mateo counties in November 1997. Because the interviews were conducted prior to the implementation of county welfare-to-work plans, the discussions provided a purely preliminary look at the potential impact of welfare reform and served to frame the questions for focus groups with child welfare workers. Managers outlined concerns for clients and for the agency, identified potential problem areas, and discussed possible proposals for managing the competing demands of welfare and child welfare in an era of reform.

Although managers repeatedly commented that the exact impact of welfare reform was unknown, they had several reservations, concerns, and predictions. While there was hope that people will move from welfare to work successfully, one manager noted the possibility that voluntary placements and relinquishments will increase as some parents will want to avoid work efforts, and that more relatives will enter the formal kin care arena for financial reasons. Concerns were expressed about workload increases in child welfare, including the longer hours needed to provide home visits to CalWORKs clients managing multiple responsibilities, increased numbers of referrals on welfare families due to intensified scrutiny, and expansion to the foster care caseload as families' resources are stretched beyond capacity. There were strong predictions of the need for additional respite care, substance abuse treatment, and other community services in order to promote success with both kinds of case plans.

Managers had questions about whether there should be mandatory CPS notification when a family reaches time limits and planned to examine ways of maximizing IV-E eligibility and the use of presumptive federal eligibility. They considered how to integrate child welfare and self-sufficiency case plans, the challenges to creating a truly cooperative case management team, the need for cross-training in both CalWORKS and child welfare, the need to increase the social work skills of CalWORKS workers, and the need to expand the person-in-environment focus of child welfare (to include fiscal issues). Similarly, they expressed a need to increase the integration of both child welfare and CalWORKS with drug treatment programs so that information can be adequately shared. A client's relapse in drug treatment has implications for both case plans and there should be a mechanism for communicating this information.

Some proposals to manage the competing demands of welfare reform and child protection include: co-location of child welfare and CalWORKS workers; consideration of county exemptions from welfare-to-work requirements for newly reunified parents, or alternatively, making clients eligible for welfare-to-work services 30-90 days prior to reunification. For parents involved with the Family Maintenance program whose children are then removed, one manager discussed the option of continuing CalWORKS services (e.g., job training, drug and alcohol treatment) on a case-by-case basis, although financial assistance will be discontinued. In sum, managers highlighted the complexity of planning for the changes welfare reform will bring.

ISSUES IDENTIFIED IN FOCUS GROUPS WITH CHILD WELFARE WORKERS

To identify training needs and practice tips for child welfare workers related to welfare reform, focus groups were held with staff in Alameda, Contra Costa, Orange, San Diego, San Mateo, and Sonoma counties. A total of 34 child welfare workers from all units (ER, Court, FM, FR, FP, LTFC, Adoptions, and various special focus units) participated in the 1- to 2-hour discussions in five counties. The focus group planned for one county was not attended by any child welfare workers, but was substituted by an exceptionally informative interview with the Program Analyst (formerly an eligibility supervisor) responsible for implementing welfare reform-related changes in child welfare. The meetings were cofacilitated by two Research Assistants following a semistructured questionnaire format. Confidentiality of the participants was assured, and to enliven the discussion, differences of opinion were encouraged.

Focus group participants had between 2 months and 28 years of experience in social services, many with over 15 years in child welfare, having filled a variety of social work roles (e.g., ER, FR, and LTFC). In nearly every group, one or more workers had been employed in eligibility or GAIN prior to entering the child welfare services program. They were generally *not* well informed about the changes due to welfare reform; many workers reported they were learning about CalWORKs from their clients and one said she felt the agency was leaving them “operating in a vacuum.” Topic areas covered in the discussions included: the similarities and differences between poverty and child neglect, the types of services traditionally provided by child welfare workers for poor families, views about the appropriate roles of caseworkers in the lives of welfare and

child welfare clients, the anticipated impact of welfare reform on clients and on worker job responsibilities, training needed and provided for both CalWORKs and child welfare staff, and potential challenges and opportunities for coordinating child welfare and CalWORKs case plans.

Differences Between Poverty and Neglect

Given the issues raised in Chapter IV concerning the historical confusion between child poverty and parental neglect, we sought to understand contemporary views of this issue. Workers were asked to discuss their views on the relationship between poverty and child neglect and to give relevant case examples. The universal initial response to this topic was that poverty and neglect are distinct concerns and that children are never removed for reasons of poverty alone: "Neglect is an act, whereas poverty is a state." Further discussion, however, usually brought to light areas of overlap and circumstances under which it can be difficult to differentiate the two. This question was illuminated further after a discussion of welfare reform-related changes in the lives of families.

Factors which were reported to differentiate neglect from poverty include *the attitude of the parent*, or an evident *willingness to make changes*. Whether parents cannot meet their children's needs, or are *unwilling to do so* is important in assessment, but both conditions may constitute neglect. Neglect can also involve a parent's *lack of recognition of problems* such as: children's hunger or poor hygiene, exposure to situations detrimental to their well-being (such as drugs or domestic violence). Workers look for *affection* in a family, in addition to whether the home is clean and presentable,

as most agreed that in neglectful families, a lack of both physical and emotional care is clearly evident. In addition to the parents' relationship with their children, the health of the children and the chronicity of the situation are also considered. Many workers spoke to the family's ability to cope with their poverty-related circumstances as a key. Conversely, they suggested that parents who have resources but deny their children access to them are neglectful. This theme was often noted in relation to substance abuse, as in cases of parents who *have* money, but use it for drugs instead of for their children (the power of substance abuse to influence parenting capacity was raised in every focus group). It was often pointed out that the wealthy can neglect their children, although these cases may be less visible, whereas many people live in poverty and manage their households and limited resources effectively. Within this framework, clear cases of neglect include homes with feces and garbage strewn on the floor; and children not properly cleaned, fed, clothed, supervised, or provided with necessary medical care. Additionally, some workers noted that some parents use poverty as an "excuse to neglect." For example, one client blamed her inability to comb her children's hair on the fact that she did not have any income: the worker commented that keeping hair combed does not require any income. In one county, workers said they view a client's failure to get aid, when eligible and needy, as possibly being the basis of neglect. In such a case, workers refer the client to public assistance programs, but wonder about the client's "motivation" and "disorganized life." In the face of all these complexities, some workers made it clear they often rely upon *legal guidelines* to help them distinguish between poverty and neglect; *community standards* were also noted

as a factor in defining the difference. In one county, the workers discussed the conservative political climate and relatively higher median income (which leads to a stronger parents' rights perspective in court) as influential in determining the threshold for neglect-based CPS interventions. There was an acknowledgement that a conservative approach to intervention in neglect cases is also related to substantial resource limitations in CPS. Even the family preservation programs available within some county systems are not sufficiently funded; some workers expressed frustration with their lack of in-home services saying that a case had to be "bad enough for removal" in order to qualify for family preservation services. One worker said he felt only two options were available to him: child removal or case closure. He also felt that families at risk due to poverty were not a priority for preventive services.

Workers reported that not only had the "official" definition of neglect changed over time, but that during the course of their tenure in the agency, their personal definition had shifted as well. Many admitted that there was a difference between their personal standards and those of the agency or the courts (with their personal standards of parenting quality set higher than the law), but that they consciously set their personal standards aside as they learned what were considered appropriate criteria for intervention. Similarly, it was noted that "10 different workers might make 10 different decisions" on a case. During one focus group, staff clarified that poverty does not occur in isolation from other social problems; rather, it is complicated by other concerns such as racism, mental illness, and substance abuse and all these factors may come into play in neglect.

In describing cases of poverty where neglect was *not* an issue, workers stated that despite low incomes, most poor parents do not neglect children's basic needs, rather "they do the best they can with what they have." When a parent is aware of the problem and are doing the best they can by requesting services, workers typically do not find neglect. Examples include:

- A family with four children where the mother and father were low functioning and limited to the income public assistance could provide, but they were able to keep their children in school, ensure that they were clean, and had food to eat.
- In another case, a worker was called to investigate because the child had been sent home from school with lice. When the worker questioned the mother, she learned that the mother was conscious of the lice problem but was unable to treat it until she could get some money for shampoo. Because the mother was aware of the problem and could identify the necessary steps to solve it, the worker did not feel the neglect was substantiated.

In a household with roaches, dirty children, tattered clothing and little food, one worker said she would evaluate whether or not there was evidence of cooking, chronic messiness (or problems such as a broken toilet), and whether the interaction between the children and the mother suggested a loving relationship. Several participants agreed that in such cases, the family's public assistance status would likely be taken into consideration. Specifically, participants would differentiate between cases where the identified problems occurred at the end of the month when a recipient might be waiting for an AFDC check, or at the beginning when cash is more readily available.

Examples of cases where the difference between poverty and neglect were *less* clear included those in which workers must determine, for example, whether children are getting themselves ready for school because their parent cannot get out of bed in the morning, or because the parent must be at work at 6:00 AM. A child may be

unsupervised due to drug use or due to a single mother's work-related need for childcare that she cannot find. Similarly, a parent who is developmentally delayed may or may not be operating at his or her highest possible level of functioning. In such cases, workers often take into account the age and developmental level of the child and the level of dangerousness of the situation. For example, one worker removed a child who she felt suffered more from poverty than neglect, yet safety concerns existed. A family with a 2½-year-old child had been evicted and was living in a garage. The worker felt that electrical wires, tools, and knives lying around created a danger to the child, and he was removed.

Additional examples which illustrate some workers' criteria for assessment include the following:

- A nurse made a report of neglect (for a newborn) based upon the information that the mother and three other children were living in a motel with no cooking facilities. The worker decided that the report was unfounded and that no neglect existed because the mother was adequately caring for her children and was connected to other services in the community.
- A worker had clients with three small children who lived in substandard housing with no running water. Each morning the father would fill a bucket of water from outside, which would be heated in a microwave before washing the children. The worker assessed that this family had good coping skills to deal with their situation. They were well organized and trying to make their situation better. The worker decided this was not a case of neglect.

The majority of the above comments relate to assessment and investigation. Continuing services workers mentioned that although poverty was not a reason to remove children, it often presented problems during the reunification process. In particular, courts often placed restrictions on parents (e.g., that they have a telephone) but sometimes the income of the family made the accomplishment of such standards

very difficult or impossible. Similarly, homelessness—while not a reason to remove children—can present barriers to reunification.

Workers were asked to discuss the language they use in a court report, given the relative difficulty in obtaining a detention order based upon neglect (compared to abuse). Most agreed that they use language that implies *motivation*, differentiating between parents who are unwilling and those who are unable. “Unwillingness” applies in cases where, despite services being offered and resources given, the parent is unwilling to care for the child and to take corrective action. For example: “the parent knew or should have known of the spouse’s substance abuse but failed to act.” When the case involves mental illness, developmental disabilities, or active substance abuse, there may be willingness but little ability. In such cases, workers might use language such as “due to mental illness the mother is incapable of caring for and supervising the minors.” Alternatively, continuing workers might state that the family “appears to be economically challenged but is sufficiently managing,” the children are “sufficiently cared for,” or the situation is “a lifestyle and the family has been surviving in this context.”

In one focus group, a worker described the difficulty of making a referral to the court unit based upon circumstances which might look like poverty alone. As an example, the worker described a family of five young children and two adults who shared a one-bedroom house:

- The mother was mentally ill. The house was piled floor to ceiling with black trash bags full of junk and the house was full of roaches. The children were naked, had no diapers, and were hungry at the time of the investigation. They were unable to move within the house because of the bags that surrounded them. The children were removed primarily for neglect, yet the worker felt she was required to

describe this situation “very clearly” to the court unit to prevent the case from being dismissed as poverty and yet another dirty home.

Other workers in the group disagreed, however, as they viewed the case as one of poverty compounded by mental illness that led to neglect, beyond that of a “dirty home.”

Although legal guidelines are helpful, they do not prescribe action for every case and the issue of homelessness offers a prime example. Workers were very clear that homelessness was not grounds for removal, but it might be grounds for an investigation. Because poverty and homelessness usually mean multiple moves and general instability for a family, multiple reports may be filed on a family from the various schools attended by a child. In such a case, one worker detained a child on the basis that the child was “not getting what they need” in terms of education or stability.

Pre-TANF Child Welfare Practice With Poor Families

When asked what action they typically take in cases where the primary problem is poverty, but not child neglect, most workers stated that they assessed the family’s resources and often made any necessary referrals. These included referrals to public assistance, food banks, and shelters. Workers varied, however, as to whether they regularly ask their clients questions about income. One reported that she “stays away from” asking about income unless she needs to know for other reasons (such as scheduling issues), but others said that a family’s status on public assistance is often identified by intake screeners when the case is referred. Another worker said she “always asks about finances” because this is important to the assessment of a family’s capacity to cope with poverty. For example, near the end of the month, a worker would

be less likely to expect a household well stocked with food. Other workers agreed, stating they would have different expectations of the clients' lifestyles depending upon the household income, including the possibilities for supervision when families cannot afford daycare. Interestingly, in one focus group, the question was posed as to whether the definition of neglect itself might shift, vis-a-vis poverty, given that income eligibility would no longer be a guarantee with welfare reform: "Well," said one worker, "if kids are not getting fed we'll have to either take them into foster care, or let them die—I think we'll see a lot of anger in response."

CalWORKs Training

At the time of the focus groups, workers had received little or no training on CalWORKs generally, or on the impact of CalWORKs upon child welfare specifically (with the exception of one county, where workers had received a mandatory 2½-hour training on CalWORKs). In nearly every group, workers reported that clients were educating social workers about welfare reform and it was mentioned that clients were experiencing some anxiety about the changes in welfare. Most workers felt that a general training on the structure of CalWORKs and program requirements, services available, and client responsibilities would be helpful, although some (particularly Emergency Response and Court workers) made it clear they did not need extensive knowledge of the CalWORKs system. Of particular interest to some was information about timelines and other sanctions, whether age limits exist for childcare payments, whether child welfare clients would qualify for exemptions (and how), and what services might be distributed through a voucher system.

The child welfare workers agreed that CalWORKs staff should clearly understand the nature of child welfare services, including the importance of court orders, the type of referrals which are responded to by CPS, and the concepts behind a treatment plan. Workers hoped that CalWORKs staff could come to view child welfare as a necessary force in some families' lives, rather than the "enemy." Although many workers expressed concern over the ability of eligibility workers to become social workers, one Program Analyst (a former eligibility supervisor) somewhat disagreed. Although some former eligibility workers are not equipped to handle these responsibilities, for many CalWORKs case managers, she said, this new model reflects the type of work they have always hoped to be doing, to have the time and authority to really listen to their clients and help them with their needs.

Interactions Between Child Welfare and Income Maintenance

Some of the more experienced workers in one county stated that when eligibility workers made home visits in the past, more cases were referred to CPS—but they were unsure whether this would again occur under CalWORKs. In some counties, child welfare workers reported minimal and primarily negative prior contact with eligibility workers. Several said their only interactions with the public assistance system occurred when they requested eligibility workers hold clients' checks in an attempt to track them down. They attributed this communication problem to the absence of an organized relationship between the two agencies, a different set of "missions" with clients, a disrespect for clients by eligibility workers, and a lack of understanding about the role of CPS. As an example of such misunderstanding, one worker discussed an inappropriate

referral to CPS: the eligibility worker was suspicious of her client's address and made accusations of drug abuse; the case was referred to the worker as potential neglect. The worker reported he had to go to the welfare building, pull the woman and her children out of line, and "investigate welfare fraud." A couple of workers disagreed, suggesting that eligibility workers were eager to keep children at home and that GAIN workers, especially, had been cooperative concerning reunification issues. Participants did feel, however, that eligibility workers would require special training to appropriately complete job readiness assessments, recognize substance abuse, and to learn to dig deeper: to "get to know clients."

CalWORKs' Impact on Child Welfare

Child welfare workers anticipate that CalWORKs will have a broad human impact related to increased poverty, an effect on clients of both systems because of competing priorities, and an impact upon workers' job responsibilities. The most frequently stated concerns involved the likely increase in volume of clients entering the child welfare system and competition between child welfare and CalWORKs case plans.

Focus group participants could imagine some families benefiting from CalWORKs, especially those who are higher functioning and for whom the structure of the new welfare-to-work program might be beneficial. Generally, most agreed that employment and training were important components of getting families on their feet and should be part of long-term child welfare case planning when possible. But these families may not constitute the bulk of the child welfare population. Many noted that a significant proportion of child welfare clients are incapable of working due to

developmental disabilities, while others cannot do so until their substance abuse problems are addressed. Additionally, many clients have significant criminal records that might pose barriers to employment. Barriers such as child care and housing costs might also prevent people from obtaining gainful employment. One worker noted that he often gets calls from parents, curious about the age at which a child can be left home alone legally (there is none). The worker felt these calls are indicative of the crisis in obtaining daycare, which many families already face. Concern was expressed that if childcare is inadequate or inaccessible, many parents might leave children unsupervised in order to meet CalWORKs requirements. This could contribute to increased reports of children being unsupervised and thereby neglected. Workers were unsure whether referrals from eligibility workers would increase, generally, but wondered whether the teen mother referrals might overwhelm the system.

Regarding ongoing child welfare cases, other participants added that even when a client successfully deals with her problems and reunifies with her children, the family often must return to a poor and unsupportive environment for reasons related to the cost of housing. Finally, they noted that even if a family manages to reunify, the local district attorney's office is likely to seek reimbursement for foster care costs—extremely difficult for those on public assistance. One worker suggested that the juvenile court's demands on parents might change as a result of CalWORKs, noting that although at present child welfare workers are required to verify that parents have the ability to meet basic needs through legal means, typically the court has treated this as a formality. However, this may change if CalWORKs sanctions result in a loss of income for some

families who then resort to illegal means of obtaining income. One worker wondered whether the new paternity establishment rules might lead to greater involvement of fathers in child welfare cases.

Nearly all workers worried about the difficulty for some clients in managing the additional stress and mandated responsibilities of CalWORKs. Families who are already “on the edge” might break under the new welfare rules and set in motion a series of negative outcomes associated with the child welfare system as well. For example, a drug-using mother of two children under age 3, who managed to “squeak along” on AFDC, could face more serious impairment of her parenting ability if her income is lowered due to TANF sanctions. If the combined effects of increased poverty and substance abuse lead to her children being removed, then the family faces the damage and stress associated with separation, perhaps making the mother’s coping skills worse and reducing the likelihood of successful reunification. One worker felt that the strict nature of CalWORKs might force a certain segment of the client base to take more responsibility for their choices, including the choice to have children—although other workers disagreed about whether in fact some women have children simply to receive welfare monies.

Increases to the child welfare caseload were predicted as incomes decline and fewer families can adequately support their children or they turn to substance abuse as a coping mechanism. Although there was disagreement among workers about the likelihood of increased voluntary placements or relinquishments, one worker reported that a client had already told her if the state cut off her aid, she would return the children

to CPS because she would not be able to afford them. A specific concern was expressed for older children in foster care who are emancipated but developmentally delayed or otherwise disabled. As one worker understood it, under welfare reform these children will be forced to endure a 1-month delay between emancipation and the receipt of SSI benefits, highlighting the responsibility of the system to sufficiently prepare foster youth for independent living. Also anticipated is an impact on community resources, including the likelihood that if welfare reform “fails” and poverty increases, child welfare clients will have to increasingly compete for already limited resources. Concerns were also expressed for the future of residential treatment programs, which depend upon clients to cover bed costs with their welfare benefits. Several workers felt that the potential for CalWORKs to have a positive impact was limited by a general failure of society to deal with the problem of substance abuse and the inability to treat it effectively. In most cases where CPS efforts fail, they asserted, substance abuse is a factor and CalWORKs may confront similar complications: as one participant stated, “what will kill CalWORKs is if substance abuse isn’t addressed—our success rate with treatment is terrible.”

While most workers hoped for cooperation between CalWORKs and child welfare, many foresaw possible “turf wars” and some worried about the possibility of certain clients using organizational confusion resulting from competing case plans to avoid their responsibilities. Most often, though, workers were concerned that for families working on reunification plans, introducing CalWORKs requirements could be catastrophic. They predicted the courts would be unhappy as well about the possibility

of a family's reunification being held up due to TANF sanctions. For this reason, members of several focus groups felt a sequential rather than concurrent approach to case plan implementation will be necessary, one in which priority is given to Family Maintenance or Reunification plans, over the CalWORKs requirements. In this vein, workers were interested in the potential for child welfare clients to be deferred from CalWORKs in order to fulfill court-ordered child welfare responsibilities on a case-by-case basis. Workers foresaw cases where CalWORKs and child welfare case plans would complement each other well, but also cases in which CalWORKs exemptions due to child welfare-related circumstances would be fair. A blanket exemption did not seem appropriate; rather they felt that coordination at the case level would be more important. For instance, it wouldn't make much sense for a client to job search 2 days a week and complete other child welfare-related service requirements on the other 3 days, because if the job was obtained, it would make completion of all the other requirements impossible. Participants also noted that the new Adoption and Safe Families Act regulations of a 6- to 12-month reunification timeline would be placing parents under added pressure and stress.

Some workers imagined monitoring client compliance with CalWORKs case plans, but only on a "need to know" basis—as relevant to their child welfare case plan, but not for CalWORKs' own sake. One worker said she would quit if asked to monitor client adherence to CalWORKs case plans—feeling this was too much added responsibility. Many felt increased caseloads, coupled with the time required to document cases on the new CWS/CMS system, would leave workers less able to

respond to cases and predicted that as the system becomes increasingly stressed, standards for “acceptable” parenting would decline further. One worker feared that she would be forced to turn a deaf ear, more frequently: “I won’t want to get engaged in a case if there is no help I can offer.” In general, workers had mixed feelings about the role of child protection workers in the lives of welfare recipients, with some suggesting that ideally the child welfare agency should be notified when a family is sanctioned (due to the increased risk associated with poverty), but noting that resource constraints would make investigation of these cases unlikely—families should both be referred and investigated on a case-by-case basis. Several workers expressed regret that through CalWORKs families would be “set up” to come into the child welfare system and that this would become another example of the child welfare system being used as a “last resort” when other systems such as schools, mental health, and now public assistance fail poor families.

PLANNING FOR THE FUTURE

In order for the clients of both child welfare and CalWORKs systems to succeed, workers uniformly agree that communication and cooperation will be necessary. In several groups, it was suggested that this interdepartmental relationship be modeled after the existing relationship between the child welfare and probation departments. In a couple of counties, child welfare workers and probation officers meet to compare case plans and prioritize client responsibilities and services. Workers felt that this arrangement could be beneficial in that regular contact and monitoring of families could be provided along with the potential for CalWORKs funding to support needed services.

In addition to case planning meetings, workers felt that regular updates on individual clients would be useful—perhaps in the form of short reports from the CalWORKs case manager regarding a client's progress and responsibilities. One county has identified confidentiality as a major concern; one preliminary procedure involves clients obtaining a copy of their case plan from the child welfare agency and personally delivering it to their CalWORKs worker.

Some workers pointed out that typically the reason a client is not working is the same reason they are not parenting well (in most cases, this underlying issue is substance abuse). Thus, under ideal circumstances the efforts toward employment and family reunification could ultimately complement one another. However, they also believed that families who had recently reunified require time to stabilize their relationships and that sudden and immediate participation in CalWORKs requirements could prohibit this: few could imagine, for example, a client managing a 20-hour-per-week job, paying for child care, and simultaneously handling their newly reunified family. Thus, a model of coordination between CalWORKs and child welfare would take into account not only long-term timelines but weekly time available for clients to complete their individual case plans. Some participants felt that the CalWORKs clock should stop ticking for child welfare families until they were able to effectively participate in the program; others suggested that families be exempted from CalWORKs requirements until family priorities were sufficiently stable.

The approach taken by at least one county involves a taskforce of interested parties: division managers from the CalWORKs program and from child welfare

services, direct services workers from both agencies, and individuals from the fiscal division. To date, this group has identified four major areas of overlap between child welfare and welfare: nonparent caregivers, minor parents (under AB 908, the “teen pregnancy disincentive”), substance and mental health issues, and domestic violence (school attendance has also been identified as an area of potential overlap, but is not presently being addressed). The group has drafted departmental protocols for each of these situations and is planning to conduct a series of cross-trainings. CalWORKs workers will receive training on mandatory reporting and making a “viable referral” as well as training on substance abuse and mental health issues. The local battered women’s association will be providing training on domestic violence assessment for both groups of workers. The county also plans to have mental health, substance abuse, and domestic violence specialists who will rotate among CalWORKs employment offices to provide special on-site assistance with case assessment and referrals.

CONCLUSION

With welfare reform in its infancy, child welfare workers remain largely uninformed about the nature of the changes to welfare and the likely impact of these changes upon their clients—although fears abound that life will become more difficult for people living an already strained existence. As living conditions worsen for poor people and welfare reform creates new bureaucratic requirements, social workers also fear their jobs will become unmanageable. Most workers feel that the spheres of responsibility for welfare and child welfare ought to be separate but cooperative in nature, given that child poverty and child maltreatment are different but overlapping

problems. Traditionally, workers have relied upon the standards and guidelines of the agency to make these distinctions. In spite of their clarity about how to distinguish a neglectful parent from a poor, non-neglectful one, child welfare workers also acknowledged that their criteria are not fixed; that they are influenced by changing standards in the agency, the community, and the courts. Thus, the changes related to welfare reform necessitate planned, cooperative relationships between CalWORKs and child welfare workers and efforts to clearly delineate the roles and responsibilities of each agency.

CHAPTER VII

IMPLICATIONS OF WELFARE REFORM FOR CHILD PROTECTION AND CHILD WELFARE PRACTICE

CHAPTER VII

IMPLICATIONS OF WELFARE REFORM FOR CHILD PROTECTION AND CHILD WELFARE PRACTICE

INSTRUCTIONAL GUIDE

This section is designed as an aid for the classroom instructor and as reference materials for practitioners. Materials are provided as handouts for students (instructors have permission to copy and distribute) and can act as an outline of case considerations for the child welfare worker in a specific arena of practice. The impact of CalWORKs requirements on child welfare clients is discussed separately for each of eight major domains of child welfare practice and each domain addresses its intersection with CalWORKs provisions, sanctions, and exemptions. The case vignettes following most subsections include questions for the student or practitioner to consider and may be used in classroom discussion. As these “practice tips” were designed in the early stages of welfare reform and counties will have different implementation practices, instructors and students of child welfare may also want to consider updates based upon their experience.

While each of these eight subsections constitutes a basic child welfare “decision point” intersecting with CalWORKs policy, some of them deliberately overlap in content so that each can stand alone as a document. This chapter, designed primarily for child welfare workers or students training to become workers, is complemented by the next chapter on administrative issues. It is recommended that instructors and students review both chapters in order to obtain the broadest perspective on welfare reform’s effects.

This chapter can be used to foster the following competencies for public child welfare work: 2.1, 2.2, 2.4, 2.5, 2.6, 2.10, 3.2, 3.5, 3.10, 3.12, 3.13, 3.17, 4.9, 5.1, 5.3, 5.8, 6.2, 6.6, & 6.7.

PRACTICE TIPS: HOW CALWORKS REQUIREMENTS MAY IMPACT CHILD WELFARE CLIENTS

Intake

A reporting party may or may not be calling with a referral directly related to CalWORKs, but nonetheless the parent's involvement with CalWORKs may be affecting the parent's functioning and the children's well-being. Intake screeners may wish to consider the following when speaking with a reporting party (for the purposes of gathering information, and/or making a decision to investigate):

CalWORKs Provisions

- If a parent is involved with CalWORKs and participating in job readiness, work requirements, mental health, domestic violence, or substance abuse treatment alternatives, how are the children being cared for?
- If the parent has been experiencing difficulty obtaining child care (e.g., the referral is for lack of supervision), has the parent been able to access child care services through CalWORKs?

CalWORKs Sanctions and Penalties

For each of the following sanctions or penalties, intake screeners should consider: *"how this is related to the allegations of maltreatment?"* In itself, the underlying reason a parent is removed from a CalWORKs grant may not suggest anything about their parenting ability and would unlikely serve as sufficient reason to investigate. The nature of the sanction or penalty and its impact, however, may have implications for the welfare of children in the home.

- If a parent has received a sanction or penalty, how much of their monthly check did they lose?
 - How long have they been off aid?
 - What kinds of family support do they have?
 - How does the caller expect the loss of income to impact the family?
- If a parent has received a sanction or penalty, what is the reason for the sanction or penalty? (*Again, this may or may not be related to the allegations of maltreatment. Consider the relevance of this information to the parent's ability to care for their child(ren).*).
- If the parent is sanctioned for not completing *work requirements*, what is the reason for the noncompliance? As noted above, what does this tell you about the parent's abilities and limitations?
- If the penalty is due to children's *irregular or non-attendance of school*, what are the reasons for poor attendance?
 - What is the extent of the non-attendance?
 - Are the reasons related more to the parent's inability to get the child to school or the child's refusal (particularly if over age 16)? Are there any related health and safety issues?
- If the penalties are due to *lack of immunization* for preschool children, why might the parent be unable or unwilling to obtain it?
 - Are there any transportation or cultural issues related to immunizations?
 - Is the parent in need of advocacy or referrals?
- If the family's immigration status related to their welfare eligibility?
 - Are there language or cultural barriers to be aware of that will affect the choice of child welfare workers to respond?
- If a parent or guardian is being penalized for noncooperation with the *Child Support Enforcement process*, what are her reasons?
 - Are these reasons in any way related to the safety of the child(ren)?
 - Might an unwillingness to identify the child(ren)'s father suggest domestic violence?
 - If so, does the mother have a need for domestic violence support services?

- Has she accessed these services through CalWORKs or does she need your assistance doing so?
- For reduced grants resulting from ineligibility related to *felony drug convictions*, the parent's status vis-à-vis criminal justice (e.g., probation, jail) may be relevant to the decision to investigate a referral.

CalWORKs Exemptions

- If a referral is made upon a *minor parent (AB 908)*, intake screeners may need to generate two referrals for investigation. *CPS is mandated to investigate* or assess a situation of pregnant or parenting minors who are living independently (not in the home of their parents, legal guardians, or suitable adult relatives) when the following situation exists (all constitute reasonable suspicion of neglect or abuse):
 - The minor parent alleges that she, or her child, would be at risk of maltreatment in the home of her parent or guardian; or
 - The minor parent has no parent or legal guardian who is living, or his/her whereabouts are unknown; or
 - The minor parent has no legal/guardian who will allow the minor to live in their home; or
 - The minor has lived apart from his/her parent(s) or guardian(s) for a period of at least 1 year before either the birth of the child or before the minor parent applied for aid.
- If a referral is made upon a family exempted from or not participating in welfare-to-work requirements for any of the following reasons, are any of these circumstances affecting the safety and well-being of the child(ren)? Are the parents participating in any form of treatment?
 - Domestic violence
 - Sexual assault (of parent)
 - Substance abuse (by parent)
 - Mental illness (of parent)

Vignette for Discussion

A mandated reporter who teaches kindergarten calls to report that one of her students and his sibling are constantly dirty and are known to be unsupervised after

school; the older sibling in elementary school is a constant problem because he steals lunches from other children and seems constantly hungry. The caller says this has been an issue for a while now, but it seems to have gotten worse in the past 3 months. In the past, the school has worked with the mother to try and manage the older sibling's behavior, but she no longer is showing up for parent/teacher conferences. The caller knows from a conversation with the mother that she recently lost her portion of her CalWORKs grant because she failed to complete her welfare-to-work requirements, and the mother reportedly was surprised—said she didn't have any idea this would happen, and that her monthly income is suddenly much lower. She thinks the mother has “some kind of mental illness” but doesn't know what it is. You check the files and learn that three prior referrals have been received for general neglect: in each case, the same basic allegations were made (head lice, dirty clothing, child misbehavior, and lack of supervision); two were investigated and none resulted in court action. The investigating worker on the last referral, 6 months ago, wrote that there was insufficient evidence to substantiate general neglect, that the mother had an odd affect but that the children were getting their basic needs met. Do you assign this new referral for investigation? Why or why not? What kind of outcome would you expect?

Investigation

During the course of a child maltreatment investigation, information about the parent's involvement with CalWORKs may be relevant to assessing the parent's functioning and the children's well-being. Child protection workers may wish to consider the following during an investigation in order to understand the circumstances and

stressors faced by the family and the parent's skills and coping ability. This information will help workers to make appropriate referrals, and to determine the need for further child welfare involvement.

CalWORKs Provisions

Is the maltreatment referral directly or indirectly related to a parent's participation in CalWORKs requirements?

- If a parent is involved with CalWORKs and participating in welfare-to-work activities, how are the children being cared for?
 - If the parent has been experiencing difficulty obtaining childcare (e.g., the referral is for lack of supervision), has the parent been able to access child care services through CalWORKs?
 - Is the parent appropriately accessing their CalWORKs case manager and services?
 - Is advocacy needed?
- If the parent is involved with mental health, domestic violence, or substance abuse treatment as a welfare-to-work requirement, what is the nature and extent of their mental health, domestic violence, and/or substance abuse problem?
 - How successful have they been in treatment and for how long?
 - If the parent has a mental health and/or substance abuse problem, in what way(s) is this impairing their capacity to parent?
 - If the parent has been involved in a battering relationship, how has the violence affected the children? Has the nonviolent parent been protective of the children and in what way?
- If it is determined that the parent suffers from a mental health, domestic violence, or substance abuse problem, yet she or he is not accessing related services through CalWORKs, can the child welfare worker obtain these needed services through case consultation with a CalWORKs staff member?
- If the allegations of maltreatment are directly related to the parents' income and a CalWORKs lump sum diversion payment could help the family stabilize and parent safely, consideration should be given to this option. Child welfare workers might encourage clients to examine the pros and cons of such a payment (lump sum diversion payments count toward the 5-year time limit) and advocacy or

consultation with the CalWORKs case manager may be appropriate. Workers may want to exercise caution with respect to lump sum diversion payments for clients who actively abuse substances and are not in recovery.

CalWORKs Sanctions and Penalties

- If a parent has received a sanction or penalty, how much of their monthly check do they stand to lose?
 - How does the parent expect this to impact the family?
 - How do they plan to manage their limited funds?
 - How does the parent handle stress and how does this added stress impact their parenting?
 - How can relatives or social networks be utilized to assist the family?
- If a parent has received a sanction or penalty, what is the *reason for the sanction or penalty*?
 - What does this tell you about the parent's level of functioning in general? Again, the reason for the sanction or penalty may or may not be related to the maltreatment referral or the caregiving ability of the parent.
- If the sanction is because the parent has not completed *work requirements*, what is the reason for the noncompliance?
 - What does the parent say about their noncompliance?
 - What are their plans?
 - Do they see any way in which their noncompliance will affect their children's welfare?
 - If the parent is not participating in welfare-to-work requirements, is it possible they are experiencing domestic violence, substance abuse, or mental health problems which have not been identified by the CalWORKs worker? If so, is advocacy needed for relevant CalWORKs services?
- If the penalty is due to children's *poor school attendance*, what are the reasons for poor attendance?
 - What is the extent of the non-attendance?
 - Are the reasons related more to the parent's inability to get the child to school or the child's refusal (particularly if over age 16)?

- If the penalties are due to *lack of immunization* for preschool children, why might the parent be unable or unwilling to obtain such services?
 - Are there any cultural issues to consider related to immunization?
 - What kinds of assistance might they need in order to obtain their immunizations (and have their welfare eligibility reinstated)?
- If a mother is being penalized for *noncooperation with Child Support Enforcement*, why?
 - What is the quality of the support available to the mother from family, partner, friends, or other people?
 - Does the mother have concerns about the safety of her children from their father and is she hiding information in order to protect them?
 - Is she hiding information in order to maintain distance from him and thereby protect herself? If so, are there domestic violence issues which might be addressed through CalWORKs-supported services? Is advocacy needed?
- For sanction related to lifetime (60-month) limits, what other resources does the family have?
 - How significantly will their monthly budget be impacted and do they face loss of housing or other survival needs as a result?
 - What is their plan for managing the loss of income?
 - Should they qualify for an exemption? If so, how might the child welfare worker assist the parent in obtaining that exemption or advocate with CalWORKs?
- For ineligibility related to *felony drug convictions*, the parent's status vis-a-vis criminal justice (e.g., incarceration) may be relevant to the decision to place a child in foster care. Also, a parent's involvement with probation or parole may provide useful collateral contacts.

CalWORKs Exemptions

- Under AB 908 (see *Practice Tips: Intake*) child welfare agencies are mandated to investigate or assess a situation of *pregnant or parenting minors who are living independently* (not in the home of their parents, legal guardians, or suitable adult relatives) due to conditions that constitute reasonable suspicion of neglect or abuse. If verified by CPS, these conditions allow an exemption to the requirement (for welfare receipt) that the minor parent live in the home of her parent or guardian. According to the legislation, county social workers have 20

calendar days from receipt of a referral to determine whether the physical or emotional health or safety of the individual or child would be jeopardized by living with the senior parent or adult relative or if the minor parent can safely live independently of adult supervision.

Thus, the child welfare worker is in a position not only to:

- Investigate maltreatment of the minor parent (by the senior parent), and
 - To assess whether the minor parent poses any risk to the child(ren), but also
 - To essentially validate the minor parent's claim of endangerment, thereby making them eligible for welfare benefits as an exemption to the AB 908 requirements. If the referral is unfounded with respect to the minor parent's allegations (against the senior parent), then the eligibility worker may require the minor parent to return to the home of the senior parent (or another legal guardian, adult relative, or in another adult-supervised supportive living arrangement) as a condition of welfare receipt.
 - On any referral received pursuant to AB 908, CPS may want to contact the minor parent's CalLearn case manager to find out additional information about the minor parent's circumstances.
 - If either the minor parent's independent living situation poses a risk to the child(ren) or the senior parent poses a risk to any of the minors, then a child welfare case and/or referrals for service may be appropriate.
 - If there is no evident risk to the child(ren) and the minor parent meets the criteria for an AB 908 exemption (including no living parent or guardian; no parent or guardian who will allow them to live at home; risk in the home of the parent or guardian; a period of at least 12 months where the minor has lived independently; or legal emancipation), the CalWORKs worker will be notified. The CPS worker may need to develop a safety plan for the independently living minor parent in the process of investigation.
- If a referral is made on a family exempted from or not participating in welfare-to-work requirements for any of the following reasons, are any of these circumstances relevant to the safety and well-being of the child(ren)?
 - Domestic violence
 - Sexual assault (of parent)
 - Substance abuse (by parent)
 - Mental illness (of parent)

Vignette for Discussion

A 28-year-old father has been raising his two children, ages 8 and 10, for the past 4 years since their mother died of breast cancer. Immediately following his wife's death, he began receiving AFDC for himself and the children and was recently assessed by his CalWORKs worker as needing treatment for his alcoholism as he has not been able to successfully complete job search requirements. The father has refused treatment, saying he does not have a problem. The CalWORKs worker made the referral to CPS, reporting that the children basically care for themselves because their father is incapacitated a good deal of the time; she further notes that the CalWORKs grant will be cut immediately and wonders how he will cope. How would you approach this investigation?

Placement

If a child welfare worker faces the decision to place a child in out-of-home care due to abuse or neglect, the following CalWORKs-related issues may warrant consideration:

CalWORKs Provisions

- If a parent is involved with CalWORKs and participating welfare-to-work activities including treatment for domestic violence, mental health, or substance abuse problems, how will out-of-home placement and the subsequent loss of CalWORKs eligibility affect their functioning, (overall and specifically as a parent)?
 - Assessment of the likely impact of loss of *both* welfare benefits and CalWORKs services may require consultation with the CalWORKs case manager who knows the parent. If it appears that limits on CalWORKs eligibility through child removal will have a detrimental impact upon the parent's functioning, the decision to place the child may not change—but it may suggest a need for flexibility achieved through case planning and coordination with CalWORKs programs.

- If a parent is currently receiving substance abuse, domestic violence, or mental health treatment as part of their CalWORKs case plan and this treatment will become incorporated into the child welfare case plan, consideration should be given to choosing placements that allow for appropriate visitation.
- In light of welfare reform, foster parent recruitment materials will need to be revisited and updated. Foster parents' previous ability to obtain priority childcare slots no longer exists. However, foster parents who wish to become childcare providers for other children may do so and receive CalWORKs childcare payments directly.
- In arranging for the placement of a child with kin caregivers, it will be important to help kin understand the advantages and disadvantages of TANF versus Foster Care funds and their status vis-a-vis the child welfare system. These pros and cons are summarized in the table below:

Advantages and Disadvantages of AFDC-FC vs. TANF Funding for Kin

	Foster care \$\$\$	TANF \$\$\$
Child welfare supervised cases	<ul style="list-style-type: none"> • Higher monthly payments* • Supportive services provided through child welfare agency • Less control over case outcomes (must deal with courts and social workers) and must meet expectations of child welfare agency or risk losing child to another placement or formal reunification • No time limit per se, but possible pressure to adopt or transition to TANF (through legal guardianship) after 18 months 	<ul style="list-style-type: none"> • Lower monthly payments* • May be exempted from time limits and work requirements • May experience financial gain if later elect adoption • Access to CalWORKs services • Higher priority eligibility for child care subsidy if needy parent (Stage I or II)
Cases diverted from child welfare	<ul style="list-style-type: none"> • Not applicable 	<ul style="list-style-type: none"> • Lower monthly payments* • Services through CalWORKs do not face conflicts with or protections of court • May or may not be exempted from time limits and work requirements • Will not face pressure to change legal status of child
*See comparison of AFDC-TF to TANF rates in <i>Administrative Issues</i> section (Table 8.1).		

CalWORKs Sanctions and Penalties

- When exploring alternatives for kinship placement (prior to utilizing non-kin foster care), a relative caregiver's CalWORKs eligibility status may impact their willingness to house another child.
 - If a caregiver has already been sanctioned and currently receives child-only grants (and the placement would result only in another child-only grant or an AFDC-FC payment), this may impact the overall family budget differently from the incentive to a relative caregiver who has full eligibility (child and adult grants). Workers should discuss these issues with potential caregivers.
 - Similarly, a relative's ability to provide ongoing child care may depend upon their own current involvement with CalWORKs requirements (if they are unavailable due to work, job readiness, or some form of treatment), and their access to CalWORKs subsidized childcare.
 - Alternatively, a relative caregiver may be eligible for the kin caregiver welfare-to-work exemption if a court-dependent child is placed with them and the child's care requires extraordinary effort. Again, these pros and cons should be discussed up front with caregivers in addition to discussing children's current and eventual legal status with kin caregivers prior to placing a child in their care.
 - If a kinship caregiver has herself been sanctioned or penalized, what was the reason for the sanction or penalty? Is this at all relevant to her ability to act as an appropriate foster caregiver?
 - A mother's non-cooperation with paternity establishment, if for reasons related to the safety of the child(ren), may suggest that placement with the father is inappropriate. Are there any domestic violence issues which may suggest risk to the children?

CalWORKs Exemptions/Provisions

- If during an investigation for an AB 908 minor parent case, the minor parent's independent living situation poses a risk to the child(ren), the minor parent's reason for exemption (from the adult-supervised living requirement) may be relevant to the identification of appropriate kinship caregivers.
 - If a minor parent claims endangerment in the home of the senior parent and therefore is eligible for exemption from the supervised living requirement but conditions in the home of the minor parent suggest a need for placement of the child(ren), the senior parent will be an unlikely candidate for providing foster care.

- If the minor parent is claiming an AB 908 exemption due to emancipation, the senior parent may indeed be suitable (given that there are no allegations of neglect or abuse against the senior parent).
- If an AB 908 investigation determines that both the minor and senior parents are a risk to the children, then both the minor parent and the child(ren) may need to be placed in foster care.

Vignette for Discussion

A woman who needs substance abuse treatment as part of her CalWORKs case plan has to make a choice between temporary placement of her child and a day treatment program which seems unlikely to sufficiently address her treatment needs. The waiting list for residential treatment (where she could take her toddler) is months long. She fears the child welfare system and foster care because she has been told by friends that she could lose her child forever if she doesn't succeed with treatment. Her mother is willing to take the child but insists she will only do this if she is provided with sufficient financial support (she wants to receive foster care payments, not TANF). How would you handle these placement and treatment-related decisions? How would you work with the CalWORKs worker in the process? What confidentiality issues will you face, with which agencies, and how might these be resolved? What concurrent planning issues need to be discussed with the woman and her mother? What eligibility issues need to be discussed with the woman and her mother?

Dependency Investigation/Court Unit

In conducting an assessment and preparing court reports for the purposes of detention, jurisdictional, and/or dispositional hearings, information about the parent's involvement with CalWORKs may be relevant to assessing the parents' functioning and the children's well-being. Additionally, the development of initial court-ordered case

plans may be more likely to succeed if coordinated with existing CalWORKs case plans (whether the initial plan is for Family Maintenance or Family Reunification). Court workers may wish to consider the following during their assessment and case planning:

CalWORKs Provisions

- If the parent has an existing CalWORKs case plan, what types of assessment and services have they already received?
 - What needs have been identified by the CalWORKs staff and in what ways are these needs relevant to their ability to parent (e.g., mental health, substance abuse, domestic violence, other)?
- In what areas might the parent's welfare-to-work-related service needs conflict with their parenting-related service needs and in what ways might they complement one another (e.g., is it practical to accomplish all these service needs simultaneously)?
 - What is needed from the CalWORKs case manager and/or other service providers in order to establish a workable integrated case plan?
- If a parent is involved with CalWORKs and participating in job readiness, work requirements, mental health, domestic violence, or substance abuse treatment alternatives that are also appropriately included in the child welfare case plan, which agency will pay for the services (including childcare)? What are the agency policies for determining this responsibility?
- Would a lump-sum diversion payment help a family to keep their children at home safely? The child welfare worker should coordinate with the CalWORKs case manager, insuring clients understand the pros and cons of this option (diversion payments count against CalWORKs lifetime time limits). If the client has already received a lump sum diversion payment, their eligibility for a second one may be affected.
- Would some child welfare services impact the CalWORKs case (e.g., if child welfare services provided one month's rent or a refrigerator to a family)? What sort of ramifications might occur?

CalWORKs Sanctions and Penalties

- If a parent has been subject to a CalWORKs sanction or penalty, what is the *reason for the sanction or penalty, and what are its effects?*

- This *may or may not* be relevant to their ability to parent and/or to complete the expectations of the juvenile court and the child welfare agency.
 - Are there any domestic violence, substance abuse, or mental health issues which have not been identified through CalWORKs, and for which the parent might receive services through CalWORKs?
 - If information about sanctions or penalties relates to the parent's level of functioning (in general and/or because of the effects of additional financial stress), what are the implications for concurrent planning? Will the financial sanction or penalty make reunification more difficult for any reason? *Without holding the parent accountable in juvenile court for their failures to meet CalWORKs requirements, the child welfare worker may want to consider the relevance of these factors to the likelihood of successful reunification.*
- If a parent is not functioning well *and* is operating on a very restricted income, how can the child welfare agency best support their efforts toward reunification? What kinds of concrete services might best assist the family in succeeding in their reunification efforts?
 - For ineligibility resulting from *felony drug convictions*, the parent's criminal history may in some cases shed light upon their parenting capacity or the allegations of maltreatment (e.g., drug-related neglect). The parents' involvement with probation or parole may necessitate some cooperative case planning in addition to providing some useful collateral contacts.

CalWORKs Exemptions

- If a minor parent is involved with the CalLearn program and therefore exempt from the welfare-to-work requirements of CalWORKs, case planning may be more successful if coordinated with the minor parent's CalLearn case manager.
- Consideration should be given to attaining a good cause deferral of participation¹⁵ in welfare-to-work requirements for parents who have some, but not all, children removed from their home (thereby placing them simultaneously under CalWORKs and child welfare supervision. This may require advocacy by the child welfare worker and/or cooperation of the CalWORKs case manager and should probably be determined on a case-by-case basis. In some instances,

¹⁵ Good cause for failure or refusal to participate in welfare-to-work activities may be approved in situations determined by the county to constitute substantial or compelling impairments to the individual's participation, including: domestic violence, necessary supportive services, or child care is unavailable.

continued participation in CalWORKs welfare-to-work requirements may be beneficial to the family, while in other cases the pressures may become unmanageable.

- If the parent has received an exemption or good-cause deferral of participation in welfare-to-work for reasons of domestic violence and/or sexual assault, substance abuse, or mental illness, these issues may impact their parenting ability and therefore should be considered for inclusion in the child welfare case plan.
- If the parent has been exempted from welfare-to-work requirements for reasons of disability, consideration should be given to the extent that the disability impairs their parenting ability (or not), if any form of assistance and/or rehabilitation would improve their ability, and whether these services would be more appropriately provided by CalWORKs or child welfare.

Vignette for Discussion

A family of seven with a long history of CPS involvement has reached the court unit after the youngest three children (ages 2, 3, and 5) were removed. The two older children were removed previously and returned; they were with relatives at the time of this referral. This time, the police were called by a neighbor who grew tired of watching the children, saying that the parents had left them with her and not returned for 2 days. The investigating worker writes that there is strong suspicion of a crack addiction for both parents, but you have no proof of drug use. The TANF grant was reduced immediately upon the 18-month time limit for reasons unknown to you. Will the CalWORKs case plan be relevant to your dependency investigation? How? How will you approach this issue with the family and the former CalWORKs case manager, if at all? In terms of concurrent planning, what factors will you consider in assessing the likelihood of reunification?

Family Maintenance

In child welfare cases where children are maintained at home with social worker supervision, a parent's involvement with CalWORKs will undoubtedly affect their lifestyle and functioning and may impact the well-being of their children. The nature of this effect will vary from case to case and will be based upon the parents' abilities and the supports available to them. The repercussions will also depend upon the ability of the child welfare and welfare agencies to prevent any impediments to their clients' success. Family maintenance workers may wish to consider the following:

CalWORKs Provisions

- Given the parenting-related problems identified by the child welfare worker, what are the recommendations for service?
 - What are the provisions of the existing CalWORKs case plan?
 - In what areas might the parent's welfare-to-work-related service needs conflict with their parenting-related service needs, and in what ways might they complement one another (e.g., is it practical to accomplish all these service needs simultaneously)?
 - What is needed from the CalWORKs case manager and/or other service providers in order to establish a workable integrated case plan?
- If a parent is involved with CalWORKs and participating in job readiness, work requirements, mental health, domestic violence, or substance abuse treatment alternatives that are also appropriately included in the child welfare case plan, which agency will pay for the services?
 - How will childcare needs be managed and paid for if the child remains at home during court-ordered services?
 - Child welfare workers should be familiar with procedural mechanisms to resolve these issues between agencies so that clients' progress is not hindered.
- Would a CalWORKs lump sum diversion payment be more useful to the family than ongoing monthly receipt of welfare benefits and would it assist the family in safely keeping their children at home?

- Would the family have another source of ongoing income?
- Careful consideration of these alternatives (and the family's status vis-a-vis lifetime limits on aid) and consultation with the CalWORKs case manager would be advisable. During the period of diversion, the family should remain eligible for Medi-Cal and childcare assistance (Stage 3).

CalWORKs Sanctions and Penalties

- If a parent has been subject to a CalWORKs sanction or penalty, *what is the reason for the sanction or penalty and what are its effects?*
 - This may or may not be relevant to their ability to parent and/or to complete the expectations of the juvenile court and the child welfare agency.
 - Are there any domestic violence, substance abuse, or mental health issues (or other “good cause” reasons for not meeting welfare-to-work requirements) that have not been identified by the CalWORKs case manager? If the child welfare worker believes the family should not have been sanctioned or the parent has needs which were not assessed through CalWORKs, advocacy may be appropriate.
- If a parent has been subject to a CalWORKs sanction or penalty, how does their limited income affect their ability to care for their children?
 - How does the reason for the sanction reflect upon their capacity to parent?
 - Are there any services or supports (including relatives, community resources, and concrete services through the child welfare agency) available to help the family with income-related stress?

CalWORKs Exemptions

- If a minor parent is involved with the CalLearn program and therefore exempt from the welfare-to-work requirements of CalWORKs, case planning will be most successful if coordinated with the minor parent's CalLearn case manager.
- Although families with children at home under court supervision may still qualify for a welfare-to-work exemption under any of the other categories (e.g., pregnancy, one-time care of infant), consideration should be given to good cause reasons for not meeting welfare-to-work requirements for parents under child welfare supervision. This may require advocacy by the child welfare worker and/or cooperation of the CalWORKs case manager and should probably be determined on a case-by-case basis. In some cases, continued participation in

CalWORKs welfare-to-work requirements may be beneficial to the family, while in other cases the expectations of both service systems may be impossible to meet simultaneously.

Vignette for Discussion

After removal of a toddler for reasons of physical abuse by the father and nonprotection by the mother, the child was returned when the mother filed for divorce. The mother has been caring for the child at home for the past 9 months. The father has not consistently participated in reunification efforts and it appears unlikely that he will succeed. The mother sought employment following promises by her ex-husband that he would increase his financial support for childcare if she did so. Upon obtaining a part-time minimum wage job, the mother felt great, as she had been longing for a sense of self-sufficiency. When she told her ex-husband about the new childcare costs, however, he refused to pay them and insisted that she find a lower-cost childcare agency. The mother would prefer to quit her new job rather than change childcare providers as she finally found one near her home that she feels good about—she also worries about the safety of her children in lower-cost centers she has visited. How would you work with these parents? What considerations related to CalWORKs might you include in your discussions? Can you provide any advocacy and/or referrals that might be helpful?

Family Reunification

Reunification cases will likely face some of the greatest challenges as welfare reform and child welfare policy collide. The need for a family income, the need to meet participation requirements in CalWORKs and to comply with judicial mandates, and the

need to race against reunification timelines in child welfare will force families to cope quickly. Family reunification workers may wish to consider the following:

CalWORKs Provisions

- During the process of working toward reunification, families will have lost all or part of their welfare benefits (depending upon whether all or some of their children were removed). Questions to consider as a child welfare worker include:
 - How has the family coped with this loss of income?
 - To whom and what have they turned for help?
 - Has their housing been affected by this change?
 - How successful are they in managing to complete case plan requirements under this stress?
 - What referrals do they need?
- As a family prepares to reunify, CalWORKs may also impose work-related requirements on the parent. In consultation with the parents' CalWORKs worker, child welfare staff should assess the following:
 - Does it appear that it would be most beneficial for the parent to embark upon her CalWORKs requirements simultaneous to her children's return—or would it be best for her to attempt to show good cause for not meeting her work requirements so that she can work on reunification and then later begin her welfare-to-work activities? Some families might benefit from the increased structure of the simultaneous approach; however, some are likely to find it impossible to successfully negotiate requirements from two service systems. This may require advocacy by the child welfare worker and/or cooperation with the CalWORKs case manager.
 - It is important to remember that throughout this process, the adult client's CalWORKs lifetime eligibility clock continues and after a total of 60 months, their eligibility will run out (unless determined to be exempt). For this reason, it is to their benefit to increase their potential employability by making use of CalWORKs services.
 - If an adult's lifetime eligibility for benefits runs out, they may have the option (depending upon county policy) to continue participation in CalWORKs services such as welfare-to-work activities. Child welfare workers may want to look into these options if it might be helpful in the effort to reunify.

- To what degree are the requirements of the child welfare case plan consistent with what the parent needs to increase their employability (e.g., substance abuse recovery)? What is needed from the CalWORKs case manager and/or other service providers, in order to establish a workable integrated case plan?
- If a client is working on simultaneous case plans and there is a conflict between the client's court-ordered child welfare case plan and their CalWORKs requirements, child welfare workers should know and understand the mechanisms by which these conflicts will be resolved; ideally, cooperative working relationships will be established between case managers, which will facilitate this process.
- If a parent is involved with CalWORKs and participating in job readiness, work requirements, mental health, substance abuse, or domestic violence treatment alternatives that are also appropriately included in the child welfare case plan, which agency will pay for the services?
 - Child welfare workers should be familiar with what procedural mechanisms are in place to resolve these issues so that conflicts do not hinder client progress.
- In consultation with the CalWORKs case manager and the client(s), consideration should be given to the pros and cons of a CalWORKs lump sum diversion payment.
 - Such a one-time payment might be used, for example, as a deposit to secure housing—if it appears likely that the client will not need cash aid for the number of months corresponding to the value of the lump sum payment.
 - Caution should be exercised, however, since reapplication for aid within that time frame may result in a requirement to pay back a prorated amount of the funds.
 - Similarly, the amount of funds counts toward the client's CalWORKs lifetime limit on aid.
 - Additionally, workers may want to exercise caution with respect to lump sum diversion payments for clients with significant substance abuse problems who are not actively in recovery.

CalWORKs Sanctions and Penalties

- If a parent has been subject to a CalWORKs sanction or penalty prior to their child's removal, how does their limited income affect their ability to care for their

children upon reunification? How does the parent cope with budgeting and other financial matters, and to what extent does this impact their parenting?

- Why was the parent sanctioned or penalized? Has the reason for the sanction or penalty (e.g., refusing treatment) changed? Should the parent be eligible for CalWORKs again?

CalWORKs Exemptions

- Welfare-to-work requirements will not apply to reunifying parents during their child's out-of-home placement (unless some children remain in the home and the family continues to seek welfare benefits). Rather, welfare-to-work exemptions or good-cause deferrals will become relevant at the point of reunification. Thus, *workers should plan ahead for reunification and the implications related to CalWORKs so that no confusion results for the client (e.g., sudden expectations by CalWORKs that a parent participate in welfare-to-work activities when benefits are reinstated at reunification).*
- As mentioned above, consideration should be given to good cause for not meeting welfare-to-work requirements for parents under child welfare supervision. This may require advocacy by the child welfare worker and/or cooperation of the CalWORKs case manager, and should probably be determined on a case-by-case basis. In some cases, continued participation in CalWORKs welfare-to-work requirements may be beneficial to the family, while in other cases the expectations of both service systems may be impossible to meet simultaneously.
- If a child is placed with kin during the reunification process, workers should be aware that the family may perceive the advantages of a kin placement as a disincentive to reunification (kin caregivers may receive TANF funds while being exempted from welfare-to-work requirements and time limits). For this reason, some may prefer an arrangement that allows for sufficient visitation between parents and children and does not substantively shift the legal relationship between parent and child, with relatives acting as primary caregivers. Child welfare workers may wish to discuss these pros and cons with families.

Vignette for Discussion

A mother whose children were placed in foster care upon her 5-month incarceration for a drug-related crime has been working to reunify since her release several months ago into a drug treatment program. Prior to being jailed she had been

receiving TANF and had not successfully found work, but was assessed by the CalWORKs worker as needing substance abuse treatment. Her stay in the residential program recently ended and she has been living with friends while participating in day treatment; her living situation is making her recovery precarious and yet she cannot afford her own apartment. How will these circumstances affect her reunification efforts, and how will you assist her?

Long-Term Foster Care

In cases involving long-term foster care, CalWORKs requirements may affect both foster caregivers and the minors directly. Social workers supervising long-term foster placements may want to consider the following:

CalWORKs Provisions

- Kinship caregivers receiving TANF funds who are caregivers of children “at risk of foster placement” are exempt from welfare-to-work requirements. They may, however, still benefit from involvement with CalWORKs services (including child care, job readiness, and mental health supports). The potential for CalWORKs services to support the stability of the foster placement should be examined with the foster parent and the CalWORKs case manager.
- Kinship foster parents who are receiving TANF funds for their relative children are still required to ensure school attendance, obtain immunizations, and cooperate with paternity establishment.
- At the time of this writing, non-kin foster caregivers under TANF no longer enjoy priority childcare slots and will need to compete to obtain childcare with other caregivers. This may need to be discussed with foster parents.
- Minor parents in foster care are required to participate in the CalLearn program in order to receive TANF benefits for their child. Child welfare workers should examine the potential for CalLearn services (and access to CalWORKs case management) to be helpful in preparation for independent living.

CalWORKs Sanctions and Penalties

- For minor parents in kinship foster care where the relative caregiver receives CalWORKs (rather than AFDC-FC funding), CalLearn nonparticipation may lead to penalties on their caregiver's grant.
- Since children leaving foster care are at high risk of entering the AFDC population at some point and of then reaching their time limit at a very young age, the need for thorough, quality independent living services and assistance toward economic self sufficiency is reinforced. Given that many youth emancipating from foster care reestablish contact with their kin, the importance of family supports may warrant further exploration, as well (Courtney, 1998).

Guardianship/Adoption

For social workers who are involved in the development of permanent plans, the new dimensions of welfare reform may affect case planning in the following areas, for both relatives and non-relatives:

CalWORKs Provisions

- The benefits of adoption include the assurance of a permanent, legal tie between children and caregivers, in addition to an adoption subsidy and removal of agency oversight. For many relatives there is either no perceived need for legal adoption or the termination of parental rights would be unacceptable. While guardianship provides an appealing legal compromise for many caregivers, the lack of a subsidy leaves them reliant upon regular TANF funds—a lesser monthly income than AFDC-FC with which to support children)¹⁶. Additionally, the time-limited nature of TANF funding may act as a disincentive to obtaining guardianship and entering the CalWORKs system. See Table 5.1 for details.
- For kinship caregivers receiving TANF funds and who are exempt from welfare-to-work requirements because of their role as caregivers of children “at risk of foster placement” (and whose responsibilities create an impediment to work), there may be little incentive to obtain guardianship through the child welfare system because they would lose their special exempt status, while their benefit levels would not change. Adoption Assistance Payments might provide a

¹⁶ Some counties allow kin to take guardianship while keeping their child welfare case open—permitting them to continue receiving foster care dollars and child welfare services.

financial incentive to adopt, although kin would likely still face the loss of their CalWORKs exemption status. Again, see Table 5.1 for details.

- For non-kin foster caregivers, the transition from foster care to adoption or guardianship often involves slightly different considerations. In the absence of prior family ties, the incentive to create a more permanent legal arrangement may be especially strong, even though it entails the loss of foster care funding (but is substituted by Adoption Assistance Payments). Again, this is no different than under prior AFDC rules—except that low-income foster parents who apply for CalWORKs benefits for their adopted children (or those for whom they become guardians) will also need to participate in welfare-to-work requirements and will be eligible for child care assistance through CalWORKs.

CalWORKs Sanctions and Penalties

- If a potential guardian or adoptive parent has lost their portion of a CalWORKs grant due to a sanction, penalty, or ineligibility, does this reason for this loss of aid (e.g., felony drug conviction, lack of school attendance) reflect in any way upon their ability to act as an appropriate caregiver?

CalWORKs Exemptions

- Although some non-kin foster parents may qualify for CalWORKs exemptions for other reasons, it may be appropriate for workers to advocate for CalWORKs welfare-to-work, time limit exemptions, or good-cause deferrals when it supports the family in transitioning to adoption or guardianship.

Vignette for Discussion

A grandparent caregiver who has been providing care for his two young granddaughters is considering obtaining legal guardianship. The children's mother has repeatedly taken the children away from him, only to return them eventually, with the children suffering in the process. He has been receiving AFDC, and now TANF, on and off for years. As you discuss the alternatives with him, what are the financial incentives and disincentives to consider for guardianship and for adoption? How will his age and work history affect the CalWORKs participation requirements?

Table 7.1: Comparison of Monthly Per-Child Grant Amounts for TANF/CalWORKs, Foster Care, and Adoption Assistance Payments for Kinship Providers¹⁷

	TANF/CalWORKs¹⁸ (11-1-98)	AFDC-FC (1998)¹⁹	AAP^{20, 21} (1995)
1 child	\$302	\$365.70 (\$345) ²²	\$345
2 children	\$493	\$731.40	\$690
3 children	\$611	\$1097.10	\$1035

¹⁷ These comparisons are hypothetical, since both Adoption Assistance Payments (AAP) and AFDC-FC payments vary depending upon the child's circumstances. Child welfare workers are cautioned against drawing conclusions about the relative benefits and advantages to a particular kinship caregiver based upon these data. The table is intended, however, to provide a broad-brush comparison of the financial supports involved in foster care (TANF-supported, or AFDC-FC-supported), guardianship (TANF-supported), and AAP. The method used to calculate the AAP amounts is described below. While these amounts are calculated based upon pre-TANF data on adopted children, this should provide an apt enough comparison given that eligibility for foster care payments is based upon old AFDC standards. Some California counties are experimenting with guardianship subsidies and legislation is pending to this effect. At the present in California, however, kin who elect to obtain guardianship are potentially eligible only for TANF grants and will then be subject to other CalWORKs requirements.

¹⁸ Assuming child-only grants. Needy adult caregivers may also be included on the assistance unit. TANF grant amounts are actually based upon the total number of eligible persons (adult or child) in the assistance unit.

¹⁹ These payment rates are based upon a per-child Basic Foster Care funding rate for a child ages 0-4 years (comparable to the median age of child used to calculate the AAP rate, below). These rates do not include Special Care or Medically Fragile subsidies or clothing allowances. The Basic Rate listed for one foster child reflects the most recent increase to the rate in California (effective 7/1/98), per Assembly Bill 1391.

²⁰ AAP subsidies were created for the purpose of promoting special needs children's security and the stability of permanent homes. At least 75% of adopting families receive some level of AAP payments. The amount of financial payment is currently determined based upon documentation of the costs to be incurred to an adoptive parent, due to the child's qualifying condition, as well as some consideration of family income. For most low-income caregivers, the qualifying AAP rate is essentially similar to the child's AFDC-FC rate. According to the California State Department of Social Services:

In part, negotiation of the amount of the AAP cash benefit is guided by the income level of the family. If the family's income is below the statewide median income, the family may qualify for an amount up to the State-approved basic foster care rate plus any State-approved specialized care increment for which the child would be eligible to receive if in foster care. If the family's income is above the statewide median income, the family is assumed to be able to meet normal and usual childrearing costs, unless actual family expenses prevent meeting these needs without subsidy. Regardless of income level, the family may qualify for benefits based on the State-approved specialized care increment the child would be eligible to receive if in foster care.

Source: California Department of Social Services, Children and Family Services Division. (1998, August 11). *Adoption Assistance Program*. Retrieved from: <http://www.childsworld.org/Pages/Adhowto.htm>

²¹ Source: Allphin, S. (1998, August 11). Personal communication. Analysis based upon data from the California Children's Services Archive, Child Welfare Research Center, University of California, Berkeley.

These calculations are based upon administrative data on a sample of children formally placed with kin in California in 1995. The median child age at official placement was 4.91 years; children ranged in age from newborn to 18 years old. The median initial AAP payments for these children (n=314) were \$345/month (mean AAP \$378.66/month), with an AAP ranging from \$0 (MediCal only cases) to \$893/month; with the 95th percentile ranging only to \$564/month. In contrast, the actual median foster care payments for these children (n=251), just prior to adoption, were also \$345/month (mean AFDC-FC payments were \$407.99/month). AFDC-FC payments ranged from \$224/month (MediCal only) to \$2,067/month (to cover group home costs), with the 95th percentile reaching \$675/month.

Thus, on average, the monthly grant amounts differ very little between AFDC-FC and AAP. This is because the AAP subsidy rate is based upon the AFDC-FC payment rate for a child of the same age; eligibility for a specialized care increment is not impacted by the parental income (Simmons, B., & Barth, R. P. (1995). *Legal guardianship and child welfare in California: An empirically based curriculum*. Berkeley: University of California, Berkeley: Child Welfare Research Center).

Because the AAP amount varies with the needs of the child and the resources of the parent, it is difficult to calculate the "median" increase in AAP monthly amounts based upon the adoption of additional children. Thus for the purposes of this table, it is assumed that the same hypothetical "average child" is adopted and the adoptive family receives the same benefit for each additional child.

²² This figure (\$345) is included as an actual comparison to the 1-child AAP grant amount (\$354) calculated above for a sample of children adopted by kin in 1995. It may include specialized care additions to the subsidy and reflects a different time period. It is therefore different from the current-year (1998) AFDC-FC payment rates listed in this column.

CHAPTER VIII

ADMINISTRATIVE ISSUES FACING CHILD WELFARE VIS-À-VIS WELFARE REFORM

CHAPTER VIII

ADMINISTRATIVE ISSUES FACING CHILD WELFARE VIS-À-VIS WELFARE REFORM

INSTRUCTIONAL GUIDE

This section of the curriculum is designed to provide an overview of administrative issues raised by the altered interface of income assistance and child welfare under the new CalWORKs program. While some administrative recommendations and examples of actual county innovations are included, this chapter is mainly intended to provide a framework for discussing and designing public policy. This chapter was primarily written for child welfare administrators or students interested in program management; however, child welfare workers will be impacted by these policies and thus we recommend using this chapter with all audiences.

The chapter can be given as assigned reading or used by the instructor for background. The chapter is designed so that the three sections can stand alone or be addressed together. Discussion questions are included at the end of the chapter.

Since our attempt to outline administrative issues for child welfare occurred during the early phases of CalWORKs implementation, instructors and students are encouraged to include any additional examples of program innovations they are aware of or unforeseen areas of program overlap.

This chapter can be used to foster the following competencies for public child welfare work: 2.5, 3.2, 3.5, 3.12, 3.13, 3.17, 5.1, 5.3, 5.4, 5.8, 6.2, 6.5, 6.6, 6.7, and 6.12.

INTRODUCTION

As a result of welfare reform, the relationship between child welfare services and income assistance has been altered profoundly; however, the ways in which this will become evident are still largely a matter of speculation. Despite this uncertainty, it is clear that while many of the alterations in the interface between child welfare and CalWORKs services will happen at the individual client and worker level, these interactions will largely be determined by administrative policies, creating both opportunities and challenges for child welfare administrators. Through our discussions with child welfare and CalWORKs administrators, we identified several ways the impacts of welfare reform are already being felt and addressed in terms of policy. These have formed the basis of this portion of our practice tips. First of all, CalWORKs' inclusion of extensive behavioral requirements has created a new demand for coordination between child welfare and income assistance when serving dually involved families. In addition to requiring service coordination, welfare reform has given counties new latitude to create special policies or programs for CalWORKs recipients who are also involved with the child welfare system, such as relative and non-relative caregivers and parents working to retain or regain custody of their children. Furthermore, welfare reform has created a new source of flexible Temporary Assistance for Needy Families (TANF) funds that counties can use to strengthen, serve, and support families involved with, or at risk for involvement with, the child welfare system.

In each of these three areas, child welfare administrators face a series of important opportunities for program innovation. This chapter presents new possibilities

for coordinating and funding services and for working with dually involved clients. Actual practice innovations form the core of the discussion. Each of the topics is further subdivided for greater specificity. The first topic, service coordination, is divided into three parts: (a) cross-training CalWORKs and child welfare staff, (b) developing coordinated case management models, and (c) addressing confidentiality concerns. The second topic, service funding, is covered in two subsections: (a) the relative benefits of TANF and IV-E funding for child welfare services and (b) innovative uses of TANF funds for child welfare clients. The third topic, child welfare-involved recipients, includes two subsections: (a) a discussion of work participation and time-limit exemptions for these recipients and (b) creative welfare-to-work activities for dually involved recipients. For further information on the programs described in the curriculum, please see Appendix C for a list of county contacts.

SECTION I: COORDINATING CHILD WELFARE AND CALWORKS SERVICE DELIVERY

Cross-Training for CalWORKs and Child Welfare Staff

Under welfare reform, child welfare and CalWORKs staff will be required to work more closely than was required under the AFDC and GAIN programs. Clients involved in both systems will now have two case managers, two case plans, and two potentially conflicting sets of required activities. Given this potential overlap of welfare-to-work contracts and child welfare case plans, communication and coordination between case managers in each program will be essential to provide effective and efficient services to clients involved with both systems. In addition, given their more involved relationships with families, CalWORKs staff are more likely to encounter reportable instances of

neglect and abuse. As such, they may need training regarding when and what they are mandated to report to child protective services. Conversely, child welfare workers serving low-income families need to understand the intricacies of CalWORKs in order to effectively assess, advocate, and plan services for these families. To this end, cross-training staff about the requirements and policies of each program will help increase communication and understanding between child welfare and CalWORKs workers.

However, feedback solicited from several child welfare agency managers has emphasized that cross-training needs to include a values-clarification component. These administrators have pointed out the divergent agency cultures from which eligibility/employment services specialists and social workers in child welfare have originated and the potential difficulties in cooperation and communication which may result. Specifically, welfare workers and child protection workers have traditionally operated under different value systems, sets of assumptions regarding the needs of families, and views of the “client system.” In spite of the longstanding overlap between agency purviews, there are also essential differences. Whereas welfare has primarily focused on the needs of adults, child protection has emphasized the safety of the child. Welfare workers and child protection workers may hold different views regarding standards for adequate parenting and with respect to the most appropriate services to remedy family problems. Child protection workers may see the needs of poor families differently from workers in eligibility and employment. Differing levels and types of education between former eligibility workers and child welfare workers (e.g., BA versus MSW) may create communication difficulties and tensions. If true collaboration is to

occur, workers in both fields will need to be encouraged to take a more holistic view of families while clearly delineating their specific roles and responsibilities as workers. Mechanisms for ongoing dialogue about these issues will need to be created so that problems can be worked out as they arise. Several counties have already begun to cross-train their staff. The approaches in Santa Cruz and Stanislaus Counties provide useful illustration of ways administrators may want to design their cross-training efforts.

Santa Cruz County

While some counties are reclassifying eligibility workers as social workers or employment specialists, Santa Cruz County chose to keep these responsibilities separate. As a result, eligibility workers remain responsible for tracking and monitoring clients' eligibility and compliance with welfare-to-work plans. An employment and training unit provides employment readiness and job referral services. Finally, the CalWORKs administrators hired former child welfare workers to provide assessment, referrals, and social services to special needs CalWORKs clients in an intensive services unit. Families who are experiencing especially challenging circumstances are referred to this unit. In this way, knowledge of child welfare issues has been incorporated into the CalWORKs program and can be disseminated through discussion and cooperation between the different members of the CalWORKs program team.

In addition to bringing a social work influence into the welfare-to-work units at the worker level, Santa Cruz has instituted a generalized staff training for the child welfare and CalWORKs programs. Administrators combined the training units for the two divisions, creating a single office that designs more general staff development curricula

and offers agency-wide trainings. This approach acknowledges the importance of each division's policy and practice information for the other and facilitates more open communication between the two staffs.

Since not all training topics are appropriate for the integrated trainings, the Human Resources Agency still holds division-specific trainings. However, they have continued their efforts to educate child welfare and CalWORKs staff about each other's programs by opening these division-specific trainings to workers from both sides of the house. This serves to increase awareness of the resources, requirements, and service philosophy of the respective divisions while furthering their efforts to facilitate communication between the two divisions.

Stanislaus County

Unlike Santa Cruz County, which chose to keep the new social service tasks required by CalWORKs separate from the eligibility tasks, Stanislaus County has chosen to train CalWORKs eligibility workers to provide these new social services. To this end, they initially promoted a program manager and then a Child Welfare Services supervisor with an extensive background in child welfare to the CalWORKs administration to help structure and run the new welfare-to-work program. She has focused on training the former eligibility workers in strengths-based approaches to working with families. The county's efforts to increase the social work skills of the CalWORKs staff have included trainings traditionally provided only to child welfare staff. For example, they have received trainings from child welfare professionals in the Family Unity Model (designed by Jim Nice, Oregon State), which promotes involving extended

family in decision-making and service planning, and motivational interviewing techniques (developed by David Haapala, Washington State), which is designed to empower clients to come up with their own solutions to their identified problems.

In addition to improving the social work skills of eligibility workers, Stanislaus County has worked to bring child welfare workers up to speed on CalWORKs policy and program requirements by offering CalWORKs trainings to this staff. Furthermore, like Santa Cruz County, Stanislaus has also opened trainings designed for particular divisions to workers from other divisions and agencies. For example, the Family Unity Model and motivational interviewing trainings were open to mental health and child welfare staff. Finally, Behavioral Health staff who are located with child welfare and eligibility workers help train social workers and eligibility specialists in the areas of domestic violence, substance abuse, and mental health. While our contact in Stanislaus County acknowledged that there was some initial hesitance about this level of cross-training and mixing between child welfare and CalWORKs staff, the result has been new levels of openness, communication, and cooperation between the two divisions.

Summary

These two counties have taken different approaches to meeting the new demands of CalWORKs. One county chose to transform eligibility workers into social workers while the other chose to keep the old separation of duties and instead hire on social workers to provide the social services required by CalWORKs. Thus, counties may choose to reclassify eligibility workers (diversifying individual workers' tasks) or retain the previous classifications but incorporate social workers (diversifying their staff).

However, either way there will be a need to cross-train child welfare and CalWORKs workers because of increased requirements for cooperation and communication between workers serving families in common. Possibilities include:

- Creating generic agency-wide trainings;
- Opening specialized trainings to staff from other service divisions;
- Hiring staff with background in other programs to create worker-level communication and sharing of expertise; and
- Hiring administrators with background in other programs to facilitate training of staff.

Developing a Coordinated Case Management Model

As CalWORKs and child welfare interface at the client level, a major issue that is likely to arise is the potential for conflicting case plans. As a result, administrators will need to consider how conflicts between the client's court-ordered case plan and their CalWORKs requirements will be resolved. In addition, if administrators opt to coordinate case plans, they may wish to develop policy regarding which of the involved agencies will take the lead managing the case. Developing policies to address these complexities of service overlap and coordination provides administrators with an opportunity for service delivery innovation. The following examples from several California counties offer some models for innovation.

Santa Cruz County

Santa Cruz County noticed that about 60% of their child welfare caseload came from the public assistance population. In response, they decided to try to serve these families in a more preventative, coordinated fashion with the goal of building healthy, self-sufficient families. They felt that fostering a team environment between child welfare

and CalWORKs was an essential part of serving families in this fashion. As a result, they began holding regular “cross-over” case conferences. These meetings occur every other week and currently include child welfare and CalWORKs staff. County administrators plan to expand the number of stakeholders at these meetings, hoping to eventually include probation and CalWORKs contract agencies (e.g., mental health, domestic violence, or drug treatment providers) as well.

The cross-over meetings focus primarily on families who had contact with the child welfare system in the previous year but who were not served by child welfare (their case may have been closed due to insufficient evidence, only opened for a short time, or referred out to other services) or who appear at risk for child welfare involvement. They may also hold cross-over meetings for families in the Emergency Response or Family Maintenance phase of child welfare services. Finally, once CalWORKs sanctions and time limits begin to be reached, families who are going to be losing benefits will be discussed at the cross-over meetings and assessed for possible CPS home visits.

The case conferences function like a multidisciplinary team (MDT) meeting and usually hear five to six cases at a time. The goal is to develop a final welfare-to-work plan that encompasses each agency’s requirements in an attempt to avoid service duplication on the one hand and clients falling through the cracks on the other. Once the unified case plan has been developed, an agency is chosen to take the case management lead on the case. In general, if the client is no longer being served by child welfare, then the CalWORKs case manager takes the lead on the consolidated case plan; if the family has an open child welfare case, child welfare takes the case

management lead. In this way, resources are maximized and the clients are not left overwhelmed or torn between conflicting requirements.

Merced County

While Santa Cruz County is well on its way to implementing a coordinated case management model, most counties are just beginning to consider these issues and design responses. Merced County, for example, is discussing building an MDT for CalWORKs clients. Similar to the plans for the cross-over conferences in Santa Cruz County, these meetings will include representatives from CalWORKs eligibility, employment and training, child welfare, and other social service agencies (e.g., mental health, and drug and alcohol treatment providers). They plan to design criteria for selecting the clients who will be considered at these meetings but have not yet settled on what these will be. The team will be organized by child welfare supervisors and will assess families, create a plan that includes referrals for appropriate services, and follow up on the families' progress. In creating these plans, the team will decide who is the appropriate lead agency for clients involved in more than one service system. Similar to Santa Cruz County, the goal is to have the team function in a supportive, preventative fashion, regardless of which agency takes the lead.

Stanislaus County

Rather than coordinating individual cases, Stanislaus County has taken a more generalized approach involving administrative-level coordination of child welfare and CalWORKs services. For the last year, public assistance and child welfare have met to troubleshoot possible overlaps, conflicts, and issues; to discuss how to communicate

better; and to develop ways to design the CalWORKs Family Action Plans so they do not conflict with child welfare plans and vice-versa.

This approach has resulted in some interesting innovations at the direct service level. First of all, Stanislaus County has involved public assistance, child welfare, and employment and training in developing opportunities for coordinated, user-friendly case plans. For example, CalWORKs administrators are working with contracted service providers to certify them as work experience sites so that these contract agencies can also provide work experience positions for clients. For example, clients will be able to do their welfare-to-work placement at the same agency they go to for their court-mandated drug treatment. This will be more accessible for the client who will only need to take one bus and can use one convenient childcare provider. It also consolidates workers' tracking and monitoring tasks with one agency contact.

Stanislaus has also created workload efficiencies and enhanced cooperation by locating eligibility workers in the foster care unit. These workers handle TANF cases for families in the pre- or postcourt phase of child welfare services. This improves workload efficiency because the foster care eligibility workers can access the child welfare computer system (CWS/CMS) as a secondary user (this limits them to less sensitive screens). This access allows them to make direct online changes to basic information for the family's social worker.

This co-location of eligibility and child welfare social workers has also led to greater cooperation between the two service providers and more cohesiveness in service delivery. For example, the eligibility workers for the foster care unit go on home

visits and share information with the family's social worker. The county has found that clients were often telling different stories to their two workers. Now that workers are sharing information, these inconsistencies are noted and the clients are approached with the conflicting stories. The county feels that this improves services because both sides get better information, clients get a sense of having a single provider rather than having to deal with multiple agencies, and services are more consistent overall.

Stanislaus has also organized case-level case management coordination. They have been holding MDTs involving mental health, public health, child welfare, and probation that focus on high-risk infant substance abuse cases. After CalWORKs was implemented, they started to find that the MDT was coming up with plans that conflicted with the clients' CalWORKs plan. In response, they created an eligibility liaison to the team who helps bring the MDT's plans in line with the welfare-to-work program requirements. Due to the county's reworking of services at the administrative, staff, and case levels, Stanislaus provides an example of multilevel case management coordination.

San Mateo County

San Mateo County has been coordinating case management for clients who are involved with both child welfare and income maintenance services since before CalWORKs implementation. The county had already been focusing its income assistance program on achieving self-sufficiency under a state waiver. The county's welfare program, named SUCCESS, includes family self-sufficiency teams (FSSTs). These teams are staffed by supervisors from child welfare and CalWORKS as well as

representatives from probation, mental health, and other community-based organizations. Any family that is identified by a participating organization or agency as experiencing barriers to self-sufficiency (e.g., domestic violence, substance abuse problems, child welfare concerns, or mental health issues) can be referred to the FSSTs. The referring worker presents the case to the FSST and the team then assigns a primary case manager who will oversee the plan for services and treatment. These teams are well established in the county and form a fundamental part of the county's CalWORKs program.

Butte County

Butte County has some unique approaches to coordinating case management. For instance, they are in the process of identifying several child welfare and CalWORKs workers who will staff a specialized team that will handle all cross-over cases (e.g., CalWORKs recipients participating in voluntary or nonvoluntary family maintenance services). This team will assign an appropriate lead case manager and attempt to coordinate services and case plans between the two divisions. In fact, the county has a history of coordinating case plans under the GAIN program. For the last 2 years, parents' GAIN activities were regularly incorporated into their court-ordered child welfare plan if the parents were dually involved. Under CalWORKs, this will continue to be true. This coordinated case planning extends beyond child welfare and CalWORKs services. The county also has what they call Hope Calendars. Under this program, court cases for all members of a family are heard as one. For example, if a parent is facing charges for drug sales while one of her older children has a probation hearing and her

young child has a dependency hearing, all cases will be heard together. In addition, one social worker will be identified as the lead case manager and will be responsible for developing a family case plan that includes delegation of service provision to the case workers from other involved agencies. The Hope Calendar in tandem with the inclusion of CalWORKs plans, in court-ordered child welfare plans, should provide an extensive degree of coordination of planning and service provision for families involved with multiple agencies.

Summary

Counties will inevitably face the problem of overlapping and potentially conflicting service plans for families who are being simultaneously served by CalWORKs and the child welfare system. While many welfare-to-work and court-ordered activities may be similar, there are sure to be instances when the scope or nature of the activities make it unrealistic for parents to successfully complete both sets of requirements. As a result, service coordination between these two agencies will be essential to helping families become independent of both service systems. As we've seen, this coordination can occur in a variety of ways and involve different levels of agency staff. Possibilities include:

- An emphasis on administrative coordination, involving troubleshooting possible areas of conflict, and designing policy to both prevent and resolve service overlaps;
- Assigning specialized eligibility workers to serve dually involved families;
- Holding regular conferences between child welfare and CalWORKs to coordinate case plans and case management for a broadly defined set of CalWORKs recipients who have been, currently are, or are at risk of becoming involved with child welfare;

- Holding MDTs only for a specialized group of cross-over recipients (e.g., recipient families with substance-exposed infants);
- Holding MDTs that coordinate services for families facing barriers to self-sufficiency with child welfare risk only one of many criteria for families being referred;
- Creating special teams of child welfare and CalWORKs workers who handle all cross-over cases; and
- Involving the courts in coordinating services and planning for dually or multiply involved families.

Confidentiality Concerns

While counties are exploring and implementing some exciting innovations in service delivery coordination, the efforts to coordinate case management raises complex concerns over protecting clients' confidentiality on the one hand and being able to share meaningful information on the other. While all the county administrators we spoke to are still struggling with aspects of this issue, they also have come up with unique ways of approaching confidentiality and configuring useful releases of information.

Santa Cruz County

Santa Cruz County has developed a client consent form for CalWORKs clients that allows workers to share information with child welfare. As they begin to include contracted service providers in the cross-over case conferences, administrators acknowledge that information sharing will get more complicated. Nonetheless, they have come up with two possible solutions. First, for some contracted agencies (e.g., mental health or vocational rehabilitation), the right to share information may be included in the language of the service contract. Second, the county has also referred to

Welfare and Institutions Code (WIC) 10850.1 that allows members of an MDT “engaged in the prevention, identification, and treatment of child abuse” to share information that would otherwise be confidential as long as the information is believed to be relevant to achieving the above goals.

Merced County

Merced County has developed a universal release and referral form for child welfare. In designing this form, they use the criteria of the agency with the highest standard for sharing information so that the release will be sufficient for all involved agencies. This is the same design they plan to use in their MDTs once they are up and running. However, this universal release will probably not be sufficient for mental health or drug and alcohol treatment providers who usually adhere to stricter confidentiality rules than the other service agencies. As a result, the county is trying to find ways to include these providers without requiring this sort of blanket release of information. One possibility they have considered is designing a form that would let these providers release very specific information. Another possibility is for these providers to come to the MDTs to listen and receive referrals, but not share client specific information. While the MDTs usually follow up on client progress, they may decide that information as to whether the client is continuing to receive services is sufficient from these providers.

Stanislaus County

As in Santa Cruz County, Stanislaus County’s child welfare services has clients who are involved with multiple providers sign a universal release. Administrators also refer to WIC 10850.1’s rules for confidentiality in MDTs (explained in the description of

Santa Cruz's confidentiality policies) to justify sharing information in their multi-agency case conferences. Unlike other counties, they have not run into problems sharing information with mental health and substance abuse treatment providers under this provision as child welfare issues remain the major focus of their case conferences. Furthermore, our contact noted that in Stanislaus County, these providers tend to feel that these information-sharing teams are in the families' best interest and thus are more willing to participate.

San Mateo County

San Mateo County, like the other counties discussed, relies on a combination of the WIC 10850.1 rule for confidentiality and generic releases of information for their Family Self-Sufficiency Teams. Like Stanislaus County, they have not faced difficulties sharing information with mental health and drug treatment providers as long as these providers have had the client sign a release. This cooperation and communication results partly from the county's inclusion of a memorandum of agreement addressing the terms for sharing information when they wrote the mental health services contract for the Behavioral Health Department. As a result, they have not encountered the difficulties with confidentiality reported by Merced and Santa Cruz Counties.

Summary

Whether counties formally coordinate case management of dually involved families through regular case conferences and MDTs or whether individual workers are left to coordinate their clients' services informally, confidentiality is sure to be an issue. While many counties have established consent forms that allow communication

between child welfare and CalWORKs or have found WIC 10850.1 to be sufficient grounds for information sharing between these agencies, many have not yet developed releases that will bring mental health and substance abuse providers to the table. One county has been able to incorporate these providers but they rely on their good working relations with these professionals rather than having resolved these agencies' different standards for confidentiality. In another county, they were able to resolve these differences through their CalWORKs contract for mental health service provision. Nonetheless, there are some useful possibilities for county administrators to explore in trying to develop information sharing and case management coordination between the newly diversified array of providers of services to dually involved families:

- Develop generic CalWORKs and child welfare releases that meet the standards of the outside agency with the most strict guidelines for information sharing.
- Where child welfare concerns are central, educate community providers on the WIC 10850.1 rule for MDTs to create freer flows of information.
- Promote the value of the multidisciplinary approach to local providers of substance abuse treatment and mental health services. Building positive working relationships between agencies may be the most essential part of opening up communication.
- Incorporate terms for information sharing into the contracts for mental health and substance abuse treatment provision.

SECTION II: RETHINKING CHILD WELFARE SERVICES FUNDING

The Relative Benefits of TANF and Title IV-E Funding

The passage of the Personal Responsibility and Work Opportunity Act of 1996 converted a formerly rigid, open-ended, matched funding stream (Aid to Families with Dependent Children [AFDC]) into a more flexible and accessible, but limited, block grant (TANF). This has created an opportunity to rethink the ways counties fund their child

welfare services for TANF-eligible families. This section evaluates the relative benefits of utilizing TANF and Title IV-E funds for various child welfare services. The benefits are weighed in terms of fiscal incentive at the federal, state, and county level and the expected impact on service availability.

Fiscal Incentives

Public assistance block grants have given states a new source of funds for services that promote child well-being and family preservation. This juncture in public policy has also inspired many child welfare administrators to rethink the ways they provide funding to kin and non-kin caregivers for children in formal and informal out-of-home placements. The past and present fiscal incentives for the use of income assistance (AFDC and now TANF) or traditional child welfare funding streams to pay for the provision of board and care to children placed in out-of-home care and for the provision of supportive and placement prevention services are evaluated in this section.

Board and Care. Prior to welfare reform, placements of AFDC-eligible children with non-relative foster parents were paid through Title IV-E AFDC-FC funds.²³ The Title IV-E foster care program is a federally funded open-ended entitlement program that requires a 50% match from the states. In California, that 50% match is shared between the state and county with the state providing 40% of the match amount and the county providing 60%. About 60% of formal kin caregivers also receive Title IV-E AFDC-FC if a child in their care was removed from his/her home as a result of a court decision, the child was not already living outside of his/her parent's home at the time of the court

²³ All nonrelative foster parents receive AFDC-FC funds; however, federal matching funds for this program are only available to AFDC-eligible children.

ordered removal, the relatives' home is considered licensable, the child was receiving or was eligible to receive Title IV-A AFDC at the time of placement, and the application for AFDC-FC was made within 6 months after the placement of the child.

Due to the strict eligibility criteria for the Title IV-E AFDC-FC program, some formal kin caregivers were not eligible for the Title IV-E payments or were eligible but were themselves needy and thus received part or all of the funding for the children in their care through the Title IV-A AFDC program (also an uncapped, state-matched, federal entitlement). In this case, there were three payment options. If the adult was not needy (did not qualify for an AFDC grant herself) she could receive a child-only AFDC grant. In this case, the payment was an AFDC grant for the number of eligible children in her care. However, if the caretaker was needy, she could receive an AFDC grant that counted her as part of the assistance unit.²⁴ Finally, a needy kin caregiver who was eligible to receive foster care payments (AFDC-FC) for the children in her care could also receive a regular AFDC grant for herself. Relatives who provide informal, non-court-ordered care for children have never been eligible for AFDC-FC payments. They have, however, been able to access both child-only, or if they too were needy, adult and child, Title IV-A AFDC grants. Due to the different funding streams and matching rates for each of these arrangements, there were varying incentives favoring one or the other of these payment strategies at the federal, state, and county levels.

²⁴ The recent *Capitola v. Land* Supreme Court decision may require California to pay all kin foster parents an AFDC-FC payment for the children in their care. This case is still being examined in the state administration for possible interpretation and implementation.

While 50% of both AFDC and AFDC-FC payments were paid by the federal government, differences in the grant amounts and the state and county shares for these two programs should have created a fiscal incentive for the federal government and county child welfare agencies to discourage relative caregivers from supporting children in their care with AFDC-FC payments.²⁵ As of July 1997, the single-child-only monthly AFDC rate in California (\$279.)²⁶ was nearly half as much as the rate for AFDC-FC (\$589.34)²⁷ Furthermore, counties, who were responsible for carrying out child protection placements, had to pay 30% of the AFDC-FC payments and only 2.5% of the AFDC costs. Thus, there has been a fiscal incentive for the federal government (due to lower grant levels) and the county government (due to lower grant levels *and* a lower cost-sharing ratio) to favor providing as much placement support as possible through the regular AFDC program. The state government, however, has had an incentive to favor AFDC-FC payments because, despite higher grant levels, the significant county share made this program a bit less costly for the state (See Table 8.1 for a synopsis of federal, state, and county shares in AFDC-FC and income assistance before and after TANF was enacted).

²⁵ At the individual level, however, workers often attempted to maximize the kin caregivers' income by accessing AFDC-FC payments in spite of the fiscal burden this presented to counties (Berrick, Needell, & Barth, 1995)

²⁶ The 1998-1999 Budget Act for California included an increase in TANF grant amounts. As a result, starting November 1, 1998, the maximum aid payment for a family of three will increase \$46 to \$611 per month in high-cost counties and will increase \$44 to \$582 per month in low-cost counties. While these rate changes would have affected the pre-TANF fiscal incentives, they do not impact the post-TANF incentives.

²⁷ Assumes average cost of a child in foster family care. California Department of Social Services (1997, June). *Public welfare in California: Information Services Bureau statistical services*, PA3-453.

Now that the past AFDC program is gone and a new, significantly different stream of funds for income assistance has been created, these fiscal incentives need to be re-evaluated for possible changes in direction or magnitude. Under welfare reform, the *federal* incentive to maximize the number of kinship caregivers supported through TANF is substantially increased. Since the TANF block grants are a preset amount that are being paid to the states automatically, any kin caregiver who is paid a TANF grant instead of an AFDC-FC payment (Title IV-E AFDC-FC was not changed by welfare reform legislation), saves the federal government the full amount of its 50% share in the foster care subsidy without adding any additional federal costs. Thus, whereas the federal government had a net saving of \$155.17 per month (the federal share of the monthly AFDC rate which is \$139.50) for each child transitioned or diverted from AFDC-FC to AFDC before welfare reform, this saving has increased to \$294.67 under TANF.

Table 8.1
Comparison of Pre- and Post-TANF Fiscal Incentives for Funding Kinship Care Through Title IV-A/TANF at the Federal, State, and County Levels

	PRE-TANF			POST-TANF		
	Sharing ratio	Monthly payment (1 child)	Incentive to use IV-A vs. IV-E	Sharing ratio ²⁸	Monthly payment (1 child)	Incentive to use IV-A vs. IV-E
Title IV-A AFDC & TANF		\$279.00 ²⁹			\$279.00	
	Federal: 50%	\$139.50	Yes: \$155.17	Federal: 55.5%	\$155.00	Yes: \$294.67
	State: 47.5%	\$132.52	No: \$14.65	State: ³⁰ 42.4%	\$117.80	Yes: \$117.87 ³¹
	County: 2.5%	\$6.98	Yes: \$19.82	County: 2.2%	\$6.20	Yes: \$176.60
Title IV-E AFDC-FC		\$589.34 ³²			\$589.34	
	Federal: 50%	\$294.67		Federal: 50%	\$294.67	
	State: 20%	\$117.87		State: 20%	\$117.87	
	County: 30%	\$176.80		County: 30%	\$176.80	

²⁸ The sharing ratios for the TANF program are a theoretical construct. Unlike under AFDC where funding was restricted to monthly income assistance payments such that there was a real federal, state, and county share of each individual grant, under TANF this is not so. Instead the federal block grant is matched by the state at 80%; the state passes 5% of this share on to the counties. While these sharing ratios exist at the level of overall TANF funding, these funds will pay for a wide array of services and programs such as the Social Services Block Grant, the Child Care and Development Block Grant, substance abuse treatment, and innovative family support programs. As a result, the overall share ratios may not translate into parallel shares of TANF funds spent on monthly assistance grants. For the purposes of this table and this section, however, we sidestepped this possibility and assumed that these overall share ratios would be mirrored in the funding for each individual grant.

²⁹ Assumes a child-only payment in a county with high costs. California Department of Social Services (1998, January). *Public assistance facts and figures*. Retrieved from: <http://www.dss.cahwnet.gov/isb>

³⁰ Assumes the state chooses to match the federal TANF block grant at 80%.

³¹ This incentive only exists if there are sufficient TANF dollars to cover assistance to all recipients. If the state depletes its federal block grant funding, the state and counties will have to create waiting lists for assistance or provide the full cost of monthly assistance to additional families. If the state chooses the latter, the incentive reverses, with it actually costing the state \$147.18 more to fund a child through TANF than through Title IV-E AFDC-FC payments.

³² Assumes average cost of a child in foster family care. California Department of Social Services (1997, June).

The *county*, like the federal government, continues to have a financial incentive to pay for as many children placed in kinship care as possible through the public assistance program (TANF) rather than the IV-E foster care program. This is especially true if the county's primary goal is county cost containment. (If, however, the county's principal goal is to maximize the total dollars available for supporting families, it might choose to move as many children as possible into AFDC-FC in order to draw down federal funds.) Like the federal government, the county has to pay their TANF match regardless of the number of TANF recipients. As a result, they do not incur any new costs when a child is transitioned or diverted from AFDC-FC to the TANF program. Thus, they stand to save the full value of the per child, per month AFDC-FC rate for each child paid through TANF rather than AFDC-FC (\$176.80). However, due to the counties' low share of AFDC (2.5%)—and now TANF (2.2%)³³—expenditures, welfare reform has had little impact on the magnitude of this incentive. Whereas prior to welfare reform the county saved \$169.82 per month for each child paid by AFDC rather than AFDC-FC, under TANF this has only risen by \$6.78.

Welfare reform's impact on the *state's* incentive to favor IV-E funding of relative placements is a little more difficult to determine as it depends heavily on TANF caseload dynamics. Similar to the federal and county governments, the state budgets a set amount for the CalWORKs program each year. (The state is required to provide at least an 80% match of the federal TANF block grants each year, 5% of which they pass on to the counties.) Since these funds are budgeted regardless of the number of TANF

³³ See explanation of post-TANF sharing ratios in Table 8.1.

recipients, any kin caregiver who receives a TANF grant instead of a IV-E payment could save the state the full amount of their share of the IV-E grant (\$117.87). However, the state faces a gamble in encouraging counties to maximize use of TANF payments for relative caregivers. If there are more eligible recipients than can be supported by the federal TANF block grant and the state's match, the state will be responsible for 95% (assuming a 5% county share), or \$265.05 per child per month, of all additional grants. This is far more expensive than the state's share of AFDC-FC payments (\$117.87). Thus, the state has a strong financial incentive to encourage TANF support of children in kin care as long as TANF funds are abundant; however, should these funds become depleted, the state faces the unappealing alternatives of creating waiting lists for TANF grants or covering the full costs of assistance for additional families. Nonetheless, as long as the state is fairly sure that TANF funds will be sufficient to cover all eligible families, the fiscal incentive to maximize TANF funding for relative child welfare placements is now quite strong at the state, county, and federal levels.

These incentives to transfer support of formal kin caregivers from the Title IV-E program to TANF by either transitioning them to guardianship or initially diverting them towards informal caregiving are based on comparing payment rates for the two programs in any given month. An underlying assumption is that lengths of stay in the two programs would be equivalent; however, this assumption may be inaccurate. In fact, if we approach this question of incentives by looking at individual cases over time, we see that the magnitude of the incentive to maximize TANF payments is actually increased. Specifically, data on the utilization of AFDC-FC for formal kin caregivers

shows that children may remain in foster care up to twice as long as they would if they were supported through public assistance (Berrick & Needell, in press). Comparable data on welfare spells for informal relative caregivers are currently unavailable. Thus, children whose support is paid for by a TANF grant rather than an AFDC-FC payment not only save the federal, state, and county governments money each month they are in out-of-home-placement, but they also may require financial support for a shorter period of time.

The federal, state, and county governments all have strong financial incentives to promote the use of TANF rather than AFDC-FC for payments to relative caregivers, whether through transitioning AFDC-FC-eligible kin caregivers out of the formal child welfare system or diverting new cases away from court involvement. Yet, in reality, these practice decisions are based on far more than financial gain. This is evidenced by the fact that counties, who were responsible for investigation, court, and placement services to families and who stood to gain the most from diverting or transitioning families from AFDC-FC, continued to maximize kin caregivers' access to AFDC-FC funds under the previous AFDC program. Likewise, under TANF, child welfare administrators will have to balance these financial incentives with their standards for best child welfare practice. To the extent there are families for whom fiscal and best practice considerations coincide, however, TANF holds the promise of savings for all levels of government.

Supportive Services

While funding for board and care comprises the majority of child welfare costs, supportive services are another essential area of spending that has the potential to be significantly impacted by welfare reform. The spectrum of child welfare supportive services includes prevention efforts before a family needs child protection as well as services to families striving to remain together or reunify after child welfare agencies have become involved. They include concrete services such as payments for rent, utilities, clothes, or transportation as well as “soft” services such as counseling, drug treatment, respite childcare, and parent training classes. As with board and care, the fiscal incentives to switch funding of these services away from traditional child welfare funding streams to the newly created TANF block grants vary at the federal, state, and county levels.

Prior to welfare reform, supportive child welfare services were paid for through diverse funding streams. Programs receiving a federal match included Title IV-B Parts I and II, the Child Welfare Services Program and the Promoting Safe and Stable Families Program (both capped entitlements requiring a 25% state match); the Title XX Social Services Block Grants (SSBGs) to the states (100% federally funded), and the Title IV-A Emergency Assistance (EA) program (an open-ended funding stream requiring a 50% state match). At the state level, some additional funds were reallocated from AFDC-FC through legislation (AB 558 in 1988 piloted this program and AB 948 in 1991 made it statewide) or were available through the Children’s Trust Fund. Finally, counties also

used General Fund dollars to pay for some services, such as securing beds in drug and alcohol treatment programs.

Welfare reform has profoundly altered this funding landscape by reducing the SSBG by 15% and folding the open-ended EA program into the TANF block grants. These changes are particularly significant because these two programs are thought to have provided more dollars in most states for child welfare supportive services than Title IV-B (Geen & Waters, 1998). Since states have the option of transferring up to 10% of their TANF dollars to their SSBG and since TANF encompasses the former EA program dollars, there is a built-in assumption that, to some extent, TANF will be used to pay for some supportive and preventative child welfare services. However, the extent to which TANF will be used to replace these previous funding sources or even to create new resources for supportive services depends partly on the financial incentives for using these dollars.

Federal Incentives. At the federal level, there is a strong incentive to transfer funding of family support and preservation services to the TANF block grants. The federal government will pay the state the set TANF amount, whether or not these funds are used for supportive services. Conversely, the IV-B funds are a capped entitlement for which the federal government pays 75% of the cost. As a result, the federal government stands to save their full contribution, \$0.75, for every dollar of services paid for by TANF instead of IV-B. Thus, there is a strong fiscal incentive at the federal level to promote *supplanting* IV-B funding of supportive services with TANF dollars.

If TANF funds are used to *augment*, rather than replace IV-B-funded services, the federal government does not gain or lose dollars, making this an apparently financially neutral option. However, in evaluating these financial incentives, it is necessary to look at a broader, more long-term picture. The principle behind family support and preservation programs is that they prevent the need for child protection services involvement or, if abuse or neglect has already occurred, they reduce or avoid the need for out-of-home placement. Since out-of-home placement is far more expensive for the federal government than maintaining a low-income child at home, to the extent these support services are successful in preventing out-of-home placement, the federal government has a financial incentive to encourage use of TANF funds to augment the supportive services paid for by IV-B Parts I and II.

State Incentives. Unlike the federal government, where there is an incentive to use TANF dollars to either supplant or augment IV-B-funded services, the state's fiscal incentives are more complex. As with the funding of board and care, the state's fiscal incentives for funding supportive services depends on the abundance of TANF dollars. Since the state must match the federal TANF block grant by at least 80% of its value, the state has a preset amount budgeted to the TANF program each year regardless of how the TANF funds are used. While the state's match rate for the IV-B programs is low (only 25%, one third of which they pass on to the counties), they still stand to save the full value of their IV-B contribution (17½ cents, for each dollar they *supplant* with TANF funding) as long as the TANF dollars are sufficient to support the state's CalWORKs program. Likewise, the state has a strong fiscal incentive to prevent child abuse and

neglect as well as out-of-home placements due to their large share in funding expensive child protective services and moderate share of Title IV-E foster care payments. As a result, to the extent these supportive services are successful in preventing child maltreatment and foster care placements, the state has a strong financial incentive to use TANF dollars to *augment* the IV-B and Family Preservation and Support Program-funded supportive services.

If the combination of federal, state, and county TANF contributions are not sufficient to cover the costs of the CalWORKs program, however, the state stands to incur great expense if they have to fully fund TANF expenditures after the federal match has run out. In this case, supplanting or augmenting IV-B funding of supportive services with TANF dollars is costly to the state. Unfortunately, many of the factors that would cause the costs of the CalWORKs program to exceed the budgeted amount are unpredictable (e.g., the economy). As a result, deciding whether to use TANF dollars to fund supportive services is a bit of a gamble for the state.

County Incentives. Individual counties' fiscal incentives to pay for supportive services through TANF are also complex. This is in part due to the varying levels of county funding of supportive services under traditional funding mechanisms. The state passes on one third of its share of IV-B funding to the counties so that of the 25% match, 17.5% is paid for by the state and 7.5% is paid for by the county. While the county match is fairly low, federal IV-B funding is capped and some counties consistently spend more than the allotted amount. When this occurs and the federal funds are depleted, supportive services are initially paid through a 70/30% split

between the state and county, causing the county's share in funding these services to jump from 7.5% to 30%. Furthermore, once the state money allotted to provide this back-up funding runs out, the county is responsible for the full cost of any additional supportive services. As a result, the county clearly faces an increasing incentive to use TANF funds to *supplant* IV-B funding of these supportive services as the federal, and then state resources get depleted. Because counties, like the state and federal government, pay for TANF regardless of its use for supportive services, the county stands to save the full value of its share in funding these services through IV-B or the back-up programs. The value of the savings for each dollar transferred to TANF varies as the counties' share in funding these services ranges from 7.5% to 100% as the county depletes the federal and then state matches. This incentive will clearly be stronger in counties that regularly overmatch the state and federal child welfare funding sources and thus consistently have to pay 30% or 100% of some portion of the supportive services they provide.

In terms of service augmentation, the counties also have an incentive to provide TANF-funded supportive services above and beyond those traditionally funded by the IV-B programs. As is the case for the state and federal government, the county savings gained by augmenting IV-B-supported services with ones paid for by TANF result from the fact that these services may prevent costly investigations and placements of children, saving counties the expense of child welfare services further down the line.

Unlike the state, which faces a gamble in using TANF dollars to either supplant or augment IV-B funding for supportive services, counties retain a mild incentive to use

TANF dollars regardless of whether the federal TANF funds have been depleted. Normally, the counties' share of TANF is low, only 5% of the states match. Should federal TANF dollars get depleted and the state be forced to cover the full costs of CalWORKs and other TANF-funded programs, the counties will have to budget an additional 5% on the dollar to cover their share of any TANF costs incurred after the federal TANF funds have run out. While this is a new county cost, the counties' 5% share of this state- and county-funded TANF supplement will still be slightly less than their 7.5% share of IV-B. Thus, counties, unlike the state, retain their incentive to use TANF to fund supportive services regardless of the abundance of TANF dollars.

Service Availability

In addition to possible fiscal impacts, using TANF dollars to fund child welfare services can be analyzed for the potential effect of these dollars on service availability, both in terms of access to and diversity of child welfare-related services. TANF block grants will remain at the same level over the next 4 years; yet, the future of the economy and the success of welfare reforms remain unknown. Therefore, there is a need to weigh the impact of using TANF to fund child welfare services in both the short and long terms. Furthermore, within each of these time frames, the use of TANF should be examined separately for the two types of child welfare services: board and care versus supportive services.

Short-Term Impact on Service Availability. Presently, to the extent counties are experiencing a surplus of TANF funds, there are fairly strong incentives to use these dollars to expand child welfare service availability. In terms of board and care,

supporting children in formal, child welfare- supervised kin placements through TANF gives these caregivers access to a new range of welfare-to-work services. For some relative caregivers, access to these employment support services such as childcare, job training, or job search assistance, may be worth the lower monthly payments and the possibility of time limits and welfare-to-work participation requirements.

There also appears to be an incentive to use TANF dollars to supplant or augment traditional supportive child welfare services. Using TANF dollars to supplant previous supportive services funding would increase service availability in two ways. First, it would free up traditional supportive service dollars to serve more families who are not eligible for TANF. Second, this would also release funding to make services that TANF cannot cover (e.g., staffing kin support centers or providing homemaker/homebuilder services) more available to all families, regardless of their income.

However, welfare reform not only changed the funding for income assistance, it also altered the funding mechanism for, and demands on, subsidized child care. As a result of these changes, child care is one service area where welfare reform may have created a need to increase service provision through traditional child welfare support service funding streams. While kin caregivers may be able to access CalWORKs-funded childcare in some counties (see Chapter II for more details), there is already concern that the childcare block grants are not sufficient to cover the costs of providing childcare for all the CalWORKs participants. In addition, child protective services clients whose childcare will be funded through the Stage III child care funds are likely to find access fairly limited, as this program, like the former subsidized childcare program it

replaced, will most likely not be sufficient to serve all qualifying families. As a result, counties may find themselves paying for respite and regular childcare for child welfare-involved families by tapping funding streams such as IV-B Parts I and II more frequently.

Long-Term Impact on Service Availability. The current TANF surplus creates an opportunity to use these funds to innovate in child welfare services. Yet, it is important to weigh the benefits of enhanced service availability in the short term with the need for preserving availability over the long term. In assessing the long-term picture, a number of factors must be considered. First of all, as the dollar amount of the TANF block grant will not increase over the next 4 years, the real value of the grant will decrease due to inflation over this time. As a result, unless the number of TANF recipients declines each year, the current surplus may disappear. While there is hope that the CalWORKs rolls will shrink over the next years, the probability of this occurring depends on the future of the state's economy and the success of welfare-to-work programs, both of which are unknown. Thus, there is a risk that, in the long term, counties will at best have just enough TANF funds to provide the minimal required income assistance and support services to eligible families and at worst, will be facing TANF shortfalls. In either of these cases, relying on TANF funds to provide child welfare services will not be sustainable over the long term. Furthermore, the possibility of these long-term outcomes sheds doubt on the prudence of spending current surpluses on supplanting funding for or augmenting child welfare services as opposed to setting

aside any surplus TANF funds in a “rainy-day” account.³⁴ Thus, administrators considering using TANF funds to increase current child welfare service availability should weigh the short-term gains in enhanced service provision against preserving the long-term availability of basic income maintenance services, often the front-line defense against child welfare involvement for poor families.

Innovative Use of TANF Funds by Child Welfare Services

Recognizing the possibilities for creative use of TANF funds, child welfare administrators in many counties have begun to tap this new resource to improve child abuse and neglect prevention efforts, increase service availability, and save their state and county money. This section presents some exciting examples (in California and elsewhere) of county efforts to utilize TANF dollars.

El Paso County, Colorado

Recognized nationally for their leadership in considering the implications of welfare reform for child welfare services, El Paso County deserves inclusion in this section due to the unique uses they have developed for TANF dollars. The Human Services Department Director sees most collaboration between child welfare and TANF programs in terms of developing ways TANF dollars can be used to support child welfare. The Department Director's view is that TANF dollars are more available, flexible, and cheaper than traditional child welfare funding mechanisms. As such, the county has defined TANF as the primary prevention program for child welfare by

³⁴ Counties can “roll over” any unspent TANF funds in any given year for up to 3 years. Since each year's excess funding can be rolled over for 3 years, counties essentially have an unlimited ability to preserve unspent dollars for harder economic times.

designing a welfare reform program that they consider supportive and strengthening to families. In addition, they have used TANF funds to provide children and relative caregivers who are TANF recipients with services traditionally provided only to child welfare-funded clients.

Support Services. For example, county administrators developed TANF-funded grandparent caregiver support services that are part of their welfare reform program. Recognizing that it saves the state and county money when relative caregivers receive child-only grants instead of AFDC-FC payments and believing that the philosophy and design of TANF is more conducive to providing flexible strengths-based services, the county uses TANF funds to hire child welfare and technical staff to provide supportive services to grandparent caregivers receiving child-only grants. The idea is to both prevent these caregivers from switching to IV-E-funded care and/or services and to create an incentive for IV-E-funded caregivers to switch to TANF. The services are voluntary and are developed around the family's unique needs. The social workers receive referrals from a range of sources (including the different child welfare units, TANF technicians, and community agencies), provide a family assessment, and create a service plan. These services are also paid for by TANF dollars and can be soft or concrete, short or long term, and crisis oriented or ongoing.

Guardianship. El Paso County is also using TANF funds to promote and support grandparent caregivers in attaining guardianship of the children in their care. Grandparents receive emotional support and advocacy through the guardianship process from the TANF-funded caseworkers. The TANF support service funds can also

be used to pay the guardianship filing fees. Furthermore, the county is in the process of developing a TANF-funded subsidy for grandparent guardians. By supporting families through what they consider to be a more preventive and supportive funding stream, the county hopes to promote strong, autonomous families.

Enhanced Independent Living Skills. In addition, El Paso County is planning to use TANF funds to support the transition to independence for adolescents in formal (including foster care and guardianship) and informal relative placements. They are currently developing an employment readiness program for teens who are preparing to emancipate from care. Services will include money management, goal setting, educational support, and self-sufficiency skills development. Similar to the federally funded Independent Living Skills Program for youth in foster care, this program will use TANF dollars to serve a wider range of youth preparing to transition to independence and provides a further support incentive to IV-E-funded families to transition to the TANF funded programs.

Merced County, California

Merced County is also viewing TANF as a resource to broaden their preventative child welfare programs. In particular, they are interested in using these funds to target educational outcomes for school-aged children. Their goals include preventing children from dropping out, increasing graduation rates, and improving academic competency levels. Their intent is to use TANF funds to provide school-based supportive services such as pull-out groups and activities to TANF-eligible school-age children. They are currently discussing creating a high-level TANF-funded administrative position to focus

child welfare services on prevention in general and support of the education system specifically. They hope to include county mental health and substance abuse treatment providers in this venture. Their goal is to begin the promotion of healthy families and future job readiness at an early age and preventative stage. In this way they will address county youth's current vulnerability for abuse and neglect and future risk for economic dependence.

Stanislaus County, California

In addition to using TANF funds to create new programs that promote children's welfare, administrators may wish to consider using these CalWORKs dollars to supplant or augment funding for traditional child welfare services such as concrete support, substance abuse, or mental health treatment. In fact, CalWORKs appears to offer child welfare significant opportunities for cost savings, more extensive service provision, and more thorough case monitoring. For example, Stanislaus County, like many other California counties, is using TANF dollars to pay for services to special populations (e.g., those with mental health needs, substance abuse problems, or victims of domestic violence) if these services address an issue that directly affects a client's ability to participate in welfare-to-work activities. Because they have minimal residential drug treatment availability in the county, the county is considering paying to have clients placed in residential facilities in other counties. However, it is likely that county child welfare and CalWORKs administrators will need to develop closer ties and increase communication so that policies can be developed regarding which division will pay for services required by both the client's CalWORKs and child welfare case plans.

Wisconsin

The Wisconsin Works (W-2) program has created a separate TANF-funded program for informal kin caregivers called Kinship Care. In order to be eligible, kin caregivers have to undergo an extensive assessment process. First of all, kinship care providers must contact their local child welfare agency. The child welfare agency has 3 months during which they must assess whether the child's parents pose sufficient risk to the child to warrant the kin living arrangement and whether living with the applicant relative is also in the best interests of the child. They also must complete a criminal background check of the relative and any other adults who live or work in their home and assess whether anything on their criminal records poses a threat to the child. If the child welfare assessment finds cause for the relative caregiving arrangement and feels it will be safe for the child, the kin provider is referred to the Child Support agency where she/he is required to cooperate with establishing paternity and a child support order. As long as the relative meets all other W-2 eligibility criteria, she/he will then receive \$215 a month for each child in kinship care without having to participate in work activities.

This TANF program is particularly interesting because it mimics the traditional AFDC-FC payments in most respects. While the payment rates per child are lower than typical AFDC-FC payments, unlike TANF—which increases grants incrementally with each additional member of the assistance unit—the Kinship Care program pays the full per-child grant amount for each additional child. The program also does not impose work requirements on the kin caregivers, similar to the Title IV-E funded foster care

program. In these respects, Wisconsin has used the flexibility of TANF to create approximately parallel programs for informal and formal kin caregivers.

SECTION III: POLICY CONSIDERATIONS FOR CHILD WELFARE-INVOLVED CALWORKS CLIENTS

Special Exemption Status

Given the historical overlap between income assistance and child welfare programs (Lindsey, 1994; Pelton, 1989), CalWORKs' policies will inevitably have an impact on child welfare-involved recipients. As such, child welfare administrators will want to advocate to have these policies set in ways that harness this impact so that the goals of child welfare policy are promoted, rather than disrupted, by welfare reform. At the same time, the goals of contemporary child welfare policy—to protect children, promote permanence, and support families—may conflict with welfare reform's primary goal of requiring economic self-sufficiency from families. As a result, tensions may arise between the two service systems around work requirement and time-limit exemptions for child welfare-involved recipients, whether they are relative caregivers or parents. Specifically, there may be a push to maximize these exemptions from the child welfare side and a push to minimize them from the CalWORKs side. Each county will need to resolve these issues in the way that best suits their needs and priorities. This section suggests some issues to consider in making these decisions for different types of child welfare-involved recipients.

Kin Caregivers

While CalWORKs includes some provisions to exempt kin caregivers from work and time requirements, the exemptions that are specific to the relative's caregiving

status are far from universal. These exemptions contain an important qualification stating that relative caregivers for children who are a ward of the court or are at risk of foster care placement are exempt from work requirements and time limits only if their caregiving responsibilities exceed normal parenting and impede their ability to participate in work activities (see Chapter III for more details). At minimum, counties are going to need to establish what constitutes “beyond normal parenting” and being “at risk for foster care placement” and decide what documentation will be required to prove this. However, counties may want to consider broadening this loophole either as a blanket exemption or as an administratively promoted case-level option for CalWORKs case managers. The following discussion raises issues that should be considered as part of developing policies regarding these special exemptions for child welfare-involved recipients.

When designing these policies, counties may wish to distinguish formal kin caregivers (those who have court-ordered responsibility for the children in their care) from informal kin caregivers (who are caring for children outside the purview of the child welfare system). Due to their different status vis-a-vis child welfare services, counties may wish to create a parallel distinction within CalWORKs. To this end, the county might choose to exempt formal kin caregivers from all work and time-limit requirements in recognition of their role in promoting the child welfare policy of giving preference to placing children with family members. Furthermore, if the county is choosing to promote funding formal kin placements through TANF rather than the more expensive IV-E AFDC-FC payments, they may want to give this option special consideration. As the

monthly payments to the family are already lower than what they would receive from AFDC-FC, the work-activity requirements and time limits add a further disincentive for kin caregivers to switch to, or remain on, TANF. Making kin caregiver's participation in welfare-to-work activities voluntary rather than obligatory and/or removing the specter of time limits might lessen the disincentive and make TANF a more attractive program to formal kin providers.

Counties may weigh exemptions for informal kin caregivers according to different criteria. These caregivers exist outside the child welfare system and are caring for children for a diverse array of reasons, not all of them involving parental incapacity. As a result, there seems to be some logic to treating them the same as birth parents in terms of work requirements and time limits by providing no special exemptions. However, counties may also want to consider, possibly on a case-by-case basis, the extent to which these caregivers are diverting children from expensive child welfare services. To the extent this is true, these family members are providing a voluntary public service which should be supported rather than penalized. In such instances, there seems to be good reason to make exemptions from welfare-to-work activities and time limits an option to these providers.

If counties choose to offer such an exemption, they will need to decide how to assess informal kin caregivers for eligibility. The prospect of determining which kin are caring for a child who would require child welfare services were she/he to remain at home may seem daunting. However, CalWORKs already guarantees an exemption to kin who are caring for a child that is a ward of the court or at risk of foster care

placement as long as their caregiving responsibilities exceed normal parenting and impair their ability to work. As a result, counties will have to develop ways to determine which children in informal kin care are “at risk of foster care placement” whether or not they choose to expand the exemption so that informal kin with routine caregiving responsibilities would also be eligible.

In developing an assessment process for these exemptions, there is a broad spectrum of possibilities. For example, in Los Angeles County, relative caregivers merely have to check off a box on their CalWORKs application if they believe the child in their care is at risk for foster care placement. While this method is inexpensive, convenient, and unintrusive, this sort of self-report assessment tool runs the risk of creating a wider loophole than intended. On the other end of the spectrum is Wisconsin’s W2 Kinship Care Program. All kin caregivers who apply for public assistance are referred to their local child welfare agency as part of the eligibility determination process. The child welfare agency assesses the family, determining whether there is a need for a relative placement and whether the particular placement is in the best interests of the child. While this ensures that the exemption will be accurately applied, it is clearly a much more expensive, time-consuming, and intrusive assessment method. While counties may not choose either of these examples, all counties will have to determine the best balance between effort and cost on the one hand and accuracy on the other in developing a process for determining which kin caregivers qualify for exemptions.

While there seems to be good reason to consider, at least on a case-by-case basis, the value of creating special exemptions for formal and informal relative caregivers, a final consideration for administrators is the potentially distorting influence such exemptions could have on family structure. Specifically, if relative caregivers, both formal and informal, are given blanket or easily gained exemptions from work requirements and time limits, there may be an incentive for biological parents to give up care of their children to extended family members in order to avoid these program requirements. While there is no way to be sure this would manifest in very many families, it gives further support to tying these exemptions to the child's actual or potential qualifications for child protective services. Thus, counties may want to consider the following policy options: (a) creating blanket work activity and time limit exemptions for formal relative caregivers; (b) providing similar exemptions to informal kin caregivers where there appear to be risks to the child in their families of origin; or (c) creating no special exemptions for informal relative caregivers for children who could safely live with one or both of their birth parents. Participation in CalWORKs services could remain a voluntary option for any kin caregiver exempted under the above policy configuration.

Adoptive Parents and Legal Guardians

Another group of child welfare-involved recipients who will be affected by welfare reform are low-income foster care providers (relative and nonrelative) who are considering adopting or establishing guardianship for the children in their care. If these caregivers are going to need income assistance once they gain a more legally

permanent caretaking status (and therefore lose their eligibility for foster care payments), they will likely be turning to CalWORKs for this support. It is at this point that a potential conflict between child welfare and CalWORKs policy arises. While child welfare policy seeks to encourage the transition to these more legally permanent arrangements, CalWORKs' welfare-to-work activity requirements and time limits may create a disincentive to adopt or assume guardianship for low-income foster parents and relative caregivers. Since the number of potential CalWORKs recipients who are likely to face this decision would be a minimal portion of all recipients, making a special time-limit exemption for these individuals would not have much impact on the 20% exemption cap (Barth, Brooks, & Iyer, 1995). As a result, child welfare administrators who wish to promote these families' successful transition to permanency by avoiding this disincentive may wish to consider advocating for such an option in their county.

Parents

The final, and perhaps most critical, group of clients who administrators should consider are the parents served by child protective services and CalWORKs simultaneously. The motivation for considering the impact of welfare reform on this group of recipients is to ensure that these reforms strengthen, rather than impede, these particularly vulnerable families in their efforts to remain intact. In particular, administrators may want to consider promoting the "good cause" exemptions from work activity as an option for parents who are either attempting to reunify with their children, who have their children in their care and are receiving family maintenance services, or have recently reunified with a child. The considerations will be slightly different for each

of these groups of parents. For this reason, the two groups are considered separately in the following discussion. Finally, administrators may want to create temporary deferrals of the 60-month time limit for child welfare-involved parents.

Family Maintenance (FM) and Reunification (FR) Services

Parents receiving either FM or FR services will be expected to meet a range of requirements under their child welfare case plan. The extent to which this will create a conflict with the requirements of their CalWORKs case plan depends greatly on the extent to which the individual county has coordinated case management and case planning between the two service delivery systems. In Section I, two levels of coordination were presented: (a) individual case plan coordination at the direct service level, and (b) coordination at the administrative level only. A third possibility is that counties will not have created any mechanisms for coordination. The likelihood of conflicts between a client's child welfare and CalWORKs case plans increases from the first to the third alternative. As a result, depending on the level of coordination the county has chosen, administrators may want to promote a broader or narrower use of the "good cause" exemption from welfare-to-work activities for parents participating in FR or FM services. For example, a county with no formal coordination of plans may want to train CalWORKs case managers to consider either waiving portions of the CalWORKs requirements or fully exempting parents while they are completing a child welfare case plan. Counties that have fairly extensive case-level coordination, however, should be able to avoid case plans that compete in such a way that clients will be unable to successfully accomplish both sets of goals and objectives. In such counties,

administrators may wish to train CalWORKs case managers to be more selective in dispensing good-cause exemptions for dually involved families.

Postreunification

Families who have recently reunified are often at a particularly vulnerable and stressful juncture. In light of this, administrators might consider ways to ensure that families who will benefit from the support and structure of CalWORKs services continue to receive them during this difficult time while those who need a brief respite to reunite with their children and stabilize their family life are able to access needed exemptions from work activities. Ensuring that these distinctions between individual family needs occur could be achieved in a number of ways. One possibility would be to train CalWORKs case managers to assess what is most likely to contribute to the family's long-term unity and self-sufficiency. Another option would be to create a referral pathway between child welfare and CalWORKs case managers so that the FM or FR case manager could provide a recommendation for work activity participation or exemption upon the family's successful reunification.

Temporary Deferral of the 60-Month Time

Child welfare administrators may also want to consider developing dialogue, training, or policy around temporary deferrals from the TANF lifetime limit for parents involved FM and FR services. It is neither realistic nor desirable to exempt all child welfare-involved parents from the lifetime limits on aid. A blanket exemption such as this may create a perverse incentive for parents to create a need for child welfare involvement in order to avoid losing their portion of the family's TANF grant. However,

counties may want to consider granting temporary deferrals from these time limits to families who are undergoing, or have just completed, FM or FR services. A temporary deferral would be short term, possibly providing a 1- to 6-month adjustment period for the family. It could also only be offered if the family's child welfare and CalWORKs case managers agree that the deferral would be in the family's best interest. Finally, it could depend on the family's successful stabilization and thus could not be prolonged by parental noncompliance. As long as the deferrals are temporary in nature, require professional assessments for eligibility, and reward improvements in parenting, this policy should not establish the undesirable incentives created by a limitless, blanket exemption. If one believes that the internal strengths of a family influence their capacity for economic success, offering these parents temporary deferrals from the 60-month TANF time limit so that they can focus on stabilizing their families without the added stress of economic destitution will support the fundamental goals of both the child welfare and CalWORKs systems.

Special Welfare-to-Work Activities

While it is important to consider ways to judiciously use work activity and time-limit exemptions to promote strong, healthy, and self-sufficient families, the complementary goals of child welfare and CalWORKs will also at times be best served by requiring full participation of child welfare-involved recipients. Kin caregivers may be eager to work and be likely to benefit from the job readiness and job search services available through CalWORKs. Likewise, a parent going through family reunification may be deemed ready and able to supplement their drug treatment with some work activity.

When this is determined to be the case, administrators may want to create some innovative opportunities for these clients to integrate their child welfare and CalWORKs roles and/or objectives. Only one county administrator with whom we talked had begun to address this level of service coordination, so this section also includes possibilities devised by the authors.

Stanislaus County

As mentioned in Section I, Stanislaus County is attempting to coordinate child welfare and work activity requirements in a client-friendly way. They are currently working to certify their supportive service contractors as job training providers. Once completed, this will allow clients to consolidate their requirements in a single location as well as provide an opportunity to offer a work experience that is both therapeutic and focused on building clients' self-sufficiency. The example given in Section I is a parent with a substance abuse problem who is able to perform her job training hours at the drug treatment program she is attending. Another example might be a parent who is receiving domestic violence services and is able to complete her work hours at the shelter where she and her children are staying. Creating such well-coordinated services will likely shrink the number of child welfare-involved CalWORKs parents who might need an exemption from welfare-to-work activities.

Kinship Support Centers

Another creative solution to work participation for child welfare-involved recipients targets relative caregivers. One possibility county administrators may want to consider is developing job training or community service positions in Kinship Support

Centers so that these caregivers can assist other relatives attempting to negotiate the child welfare (and possibly CalWORKs) system.

QUESTIONS FOR DISCUSSION

1. This section presented a number of counties' approaches to cross-training child welfare and CalWORKs staff. Which approach do you think would work best in your county and why? If your county is trying a different approach, what is it and how is it working? What do you see as the major barriers to cross-training? What do you see as the main benefits?
2. Most counties have faced difficulties incorporating substance abuse treatment providers into their multidisciplinary teams. Under welfare reform, the participation of these providers becomes even more essential. In the past, what has been your county's experience with including treatment providers in case conferences? What approaches might effectively build more open communication pathways? Do you think that information from drug treatment providers should be shared with child welfare and CalWORKs case managers? Why or why not?
3. Which of the alternative models for managing competing case plans presented in Section I seem most equitable and workable? Why? Do you think some might work better in urban versus rural counties? What kinds of special concerns might rural child welfare administrators face which would influence the design of their cooperative program? What about urban counties? How might demographic characteristics (e.g., ethnic and cultural makeup, family configurations) of a county, its local economy, and the availability of community support agencies affect which coordinated case management plan would be best suited for a county?
4. How large a role should the fiscal incentives discussed in Section II play in designing child welfare and CalWORKs policies? What other factors should they be balanced against? Are there some circumstances under which they might play a greater role in determining policy? Do you think it is more prudent to spend TANF dollars today to strengthen families or save for the future? How would your answer differ if the county has an urban or rural economy?
5. Of the innovative uses of TANF funds for child welfare services presented in Section II, which do you prefer? Why? In general, do you think it is wise for counties to create TANF-funded support services to retain relative caregivers in the informal placement sphere? If the *Capitola v. Land* court decision results in non-IV-E-eligible caregivers being supported through TANF at the higher AFDC-FC rates, would this change your answer? How and why?

6. For each of the groups of child welfare-involved CalWORKs recipients discussed in Section III (kin caregivers, adoptive parents or legal guardians, and parents) what, if any, special exemptions should be created? Under what circumstances and why? What do you see as the pros and cons of special exemptions in general?
7. What do you think is the most accurate and feasible method to assess the risk for foster care placement for a child living with a relative caregiver? If you know of any other counties' approaches to this question, what are they and how have they worked? What barriers might you face in trying to implement either of the two plans discussed in Section III (Wisconsin and Los Angeles County's approaches)?
8. Welfare reform is causing drastic changes for child welfare as well as CalWORKs workers in many counties. What strategies might administrators employ to ease this process for workers and facilitate positive responses to the additional upheaval? What do you see as a major barrier to easily-facilitated change in your county? What strengths can you identify that will help staff in your county adjust to serving families in the new welfare environment?

REFERENCES

- Abbott, G. (1938). *The child and the state. Volume I: Legal status in the family: Apprenticeship and child labor. Selected documents with introductory notes.* Chicago: University of Chicago Press.
- Aber, J. L., Brooks-Gunn, J., & Maynard, R. (1995). The effects of welfare reform on teenage parents and their children. *The Future of Children*, 5(2), 53-71.
- Abramovitz, M. (1988). *Regulating the lives of women: Social welfare policy from colonial times to the present.* Boston: South End Press.
- Adelson, L. (1961). Slaughter of the innocents. *New England Journal of Medicine*, 264 (26), 1349-1357.
- Azzi-Lessing, L., & Olsen, L. J. (1996). Substance abuse-affected families in the child welfare system: New challenges, new alliances. *Social Work*, 41(1), 15-23.
- Bane, M. J., & Ellwood, D. T. (1994). *Welfare realities: From rhetoric to reform.* Cambridge, MA: Harvard University Press.
- Barnett, D., Manly, J. T., & Cicchetti, D. (1993). Defining child maltreatment: The interface between policy and research. In D. Cicchetti & S. Toth (Eds.) *Child abuse, child development, and social policy* (pp. 7-74). Norwood, NJ: Ablex Publishing Corporation.
- Barth, R. P. (1993). Rationale and conceptual framework. In R. P. Barth, J. Pietrzak, & M. Ramler, (Eds.). *Families living with drugs and HIV: Intervention and treatment strategies* (pp. 3-17). New York: Guilford Press.
- Barth, R. P., & Berry, M. (1990). A decade later: Outcomes of permanency planning. In J. Kroll (Ed.). *The Adoption Assistance and Child Welfare Act of 1980: The first ten years.* St. Paul, MN: North American Council on Adoptable Children.
- Barth, R. P., Brooks, D., & Iyer, S. (1995). *Adoption in California: Current demographic profiles and projections through the end of the century.* Berkeley: University of California at Berkeley, School of Social Welfare, Child Welfare Research Center.
- Barth, R. P., Courtney, M., Berrick, J. D., & Albert, V. (1994). *From child abuse to permanency planning: Child welfare services pathways and placements.* New York: Aldine de Gruyter.
- Bell, W. (1965). *Aid to dependent children.* New York: Columbia University Press.

- Berrick, J. D., & Needell, B. (in press). Recent trends in kinship care: Public policy, payments, and outcomes for children. In P. Curtis, and D. Grady (Eds.), *The foster care crisis: Translating research into practice and policy*. Omaha: University of Nebraska Press.
- Berrick, J. D., Needell, B., & Barth, R. P. (1995). Kinship care in California: An empirically based curriculum. Berkeley: University of California at Berkeley, School of Social Welfare, Child Welfare Research Center.
- Besharov, D. (1989). The children of crack: Will we protect them? *Public Welfare*, 46(4), 7-11.
- Besharov, D., & Laumann, L. (1994). *Overlap among human service programs: Mapping social services in Illinois*. Washington, DC: American Enterprise Institute for Public Policy Research.
- Blau, G., Whewell, M. C., Gullotta, T. P., & Bloom, M. (1994). The prevention and treatment of child abuse in households of substance abusers: A research demonstration progress report. *Child Welfare*, 73(1), 83-94.
- Boardman, H. (1962). A project to rescue children from inflicted injuries. *Social Work*, 5(4), 98-102.
- Bowlby, J. (1969). *Attachment and loss*. New York: Basic Books.
- Bremner, R. (1971). *Children and youth in America: A documentary history* (Volume II: 1866-1932). Cambridge, MA: Harvard University Press.
- Bronfenbrenner, U. (1960). The changing American child. In *Reference papers on children and youth*. Committee on Studies for the Golden Anniversary White House Conference on Children and Youth, 1-8.
- Brooks-Gunn, J., Duncan, G., & Maritato, N. (1997). Poor families, poor outcomes: The well-being of children and youth. In G. Duncan & J. Brooks-Gunn (Eds.), *Consequences of growing up poor* (pp. 1-17). New York: Russell Sage Foundation.
- Caffey, J. (1945, 1956). *Pediatric X-ray diagnosis: A textbook for students and practitioners of pediatrics, surgery & radiology*. Chicago: Year Book Publishers.
- California Department of Social Services. (1997, June). *Public welfare in California: Information Services Bureau statistical services*. Sacramento: Author.

- California Department of Social Services. (1998, January). *Public assistance facts and figures*. Retrieved from <http://www.dss.cahwnet.gov/isb>
- Chaffin, M., Kelleher, K., & Hollenberg, J. (1996). Onset of physical abuse and neglect: Psychiatric, substance abuse, and social risk factors from prospective community data. *Child Abuse and Neglect*, 20(3), 191-203.
- Coll, B. D. (1969). *Perspectives in public welfare: A history*. Washington, DC: U.S. Department of Health, Education and Welfare, Social and Rehabilitation Services, Office of Research, Demonstrations and Training.
- Coll, B. D. (1995). *Safety Net. Welfare and Social Security, 1929-1979*. New Brunswick, NJ: Rutgers University Press.
- Collins, A. (1997). Anticipating the effects of federal and state welfare changes on systems that serve children. *Children and Welfare Reform. Issue Brief 2*. Columbia University: National Center for Children in Poverty.
- Collins, A., & Aber, J. L. (1997). *Children and welfare reform: Issue brief 1: How welfare reform can help or hurt children*. New York: National Center for Children in Poverty.
- Coltoff, P., & Alfaro, J. (1996, April). *Ensuring protection of children of drug addicted or alcoholic parents: Proposals to amend the New York State Family Court Act*. New York: Children's Aid Society.
- Committee on Ways & Means, United States House of Representatives. (1994). *Green book: Background material and data on programs within the jurisdiction of the Committee on Ways and Means*. Washington, DC: U.S. Government Printing Office.
- Committee on Ways & Means, United States House of Representatives. (1996). *Green book: Background material and data on programs within the jurisdiction of the Committee on Ways and Means*. Washington, DC: U.S. Government Printing Office.
- Cook, R. J. (1994). Are we helping foster care youth prepare for their future? *Children and Youth Services Review*, 16(3-4), 213-229.
- Costin, L., Bell, C., & Downs, S. (1991). *Child welfare policies and practice* (4th ed.). New York: Longman.
- Costin, L. B., Karger, H. J., & Stoesz, D. (1996). *The politics of child abuse in America*. New York: Oxford University Press.

- Courtney, M. E. (1997). Welfare reform and child welfare services. In S. B. Kamerman & A. J. Kahn, (Eds.), *Child welfare in the context of welfare "reform": Report V* (pp. 1-35). New York: Columbia University School of Social Work.
- Courtney, M. (1998, July). Outcomes for former foster youth. Presentation to University of California at Berkeley, School of Social Welfare, Center for Social Services Research.
- Daro, D. (1988). *Confronting child abuse: Research for effective program design*. New York: Free Press.
- Davidson, C. (1994). Dependent children and their families: A historical survey of United States policies. In F. H. Jacobs & M. W. Davies (Eds), *More than kissing babies? Current child and family policy in the United States*. Westport, CT: Auburn House.
- DiNitto, D. (1991). *Social welfare: Politics and public policy*. Englewood Cliffs, NJ: Prentice Hall.
- Dore, M. M. (1993, November). Family preservation and poor families: When "homebuilding" is not enough. *Families in Society: The Journal of Contemporary Human Services*, 545-556.
- Drake, B., & Pandey, S. (1996). Understanding the relationship between neighborhood poverty and specific types of child maltreatment. *Child Abuse and Neglect*, 20(11), 1003-1018.
- Drew, J. (1996). The new view of the child. In H. Gensler (Ed.) *The American welfare system: Origins, structure, and effects* (pp. 23-54). Westport, CT: Praeger.
- Early, B. P., & Hawkins, M. J. (1994). Opportunity and risks in emerging family policy: An analysis of family preservation legislation. *Children and Youth Services Review*, 16(5), 309-318.
- Ellwood, D. T. (1988). [Complete reference not provided.]
- Elmer, E. (1960). Abused young children seen in hospitals. *Social Work*, 7(1), 44-48.
- Famularo, R., Kinscherff, R., & Fenton, T. (1992). Parental substance abuse and the nature of child maltreatment. *Child Abuse and Neglect*, 16, 475-483.
- Faust, F. L., & Brantingham, P. J. (Eds). (1974). *The invention of the juvenile court*. [Complete reference not provided.]

- Feig, L. (1998, February 23). Policy and practice implications of welfare and child welfare reforms for substance abusing families and their service providers. Presented at the Child Welfare Grantee's Annual Conference, Washington, DC.
- Finkelhor, D. (1986). *A sourcebook on child sexual abuse*. Newbury Park: Sage Publications.
- Frame, L., Berrick, J. D., & Lim Brodowski, M. (1997, July). *Factors associated with successful family reunification*. Paper presented at the Risk Assessment Roundtable, American Public Welfare Association. Berkeley: University of California at Berkeley, Bay Area Social Services Consortium, Center for Social Services Research.
- Garbarino, J., & Kostelny, K. (1992). Child maltreatment as a community problem. *Child Abuse and Neglect*, 16, 455-464.
- Garbarino, J., & Sherman, D. (1980). High-risk neighborhoods and high-risk families: The human ecology of child maltreatment. *Child Development*, 51, 188-198.
- Gardner, S., & Young, N. (1996, November). *The implications of alcohol and other drug-related problems for community-wide family support systems*. Prepared for the Kennedy School Executive Session on The Future of Child Protective Services. Irvine, CA: Children and Family Futures.
- Gardner, S., & Young, N. (1997, June). *Bridge building: An action plan for state and county efforts to strengthen links between child welfare services and services for alcohol and other drug problems*. A report prepared for the Stuart Foundation. Irvine, CA: Children and Family Futures.
- Gaudin, J. M., & Dubowitz, H. (1997). Family functioning in neglectful families: Recent research. In J. D. Berrick, R. P. Barth, & N. Gilbert (Eds). *Child welfare research review: Volume 2* (pp. 13-27). New York: Columbia University Press.
- Geen, R., & Waters, S. (1997, November). The impact of welfare reform on child welfare financing. In *New federalism: Issues and options for states*, Series A, No. 1-16. Washington, DC: The Urban Institute.
- Geen, R., & Waters, S. (1998). *The impact of welfare reform on child welfare financing*. Retrieved from <http://newfederalism.urban.org/html/anfl6.html>

- Gilbert, N., Lawrence Karski, R., & Frame, L. (1996). *The emergency response system: Screening and assessment of child abuse reports*. Berkeley: University of California at Berkeley, Center for Social Services Research, Child Welfare Research Center.
- Gilbert, N., Specht, H., & Terrell, P. (1993). *Dimensions of social welfare policy* (3rd ed.). Englewood Cliffs, NJ: Prentice Hall.
- Giovannoni, J. (1989). Definitional issues in child maltreatment. In D. Cicchetti & V. Carlson (Eds.), *Child maltreatment: Theory and research on the causes and consequences of child abuse and neglect* (pp. 3-37). Cambridge, NY: Cambridge University Press.
- Giovannoni, J., & Becerra, R. (1979). *Defining child abuse*. New York: The Free Press.
- Giovannoni, J., & Billingsley, (1970). Child neglect among the poor: A study of parental adequacy in families of three ethnic groups. *Child Welfare*, 49, 196-204.
- Goerge, R. M., & Harden, A. (1993). *The impact of substance-affected infants on child protection services and substitute care caseloads: 1985-1992*. A report to the Illinois Department of Children and Family Services. Chicago: University of Chicago, Chapin Hall Center for Children.
- Goldberg, M., Lex, B., Mello, N., Mendelson, J., & Bower, T. (1996). Impact of maternal alcoholism on separation of children from their mothers: Findings from a sample of incarcerated women. *American Journal of Orthopsychiatry*, 66(2), 228-238.
- Goldstein, J., Freud, A., & Solnit, A. (1973). *Beyond the best interests of the child*. New York: Free Press.
- Gordon, L. (1994). *Pitied but not entitled: Single mothers and the history of welfare, 1890-1935*. New York: The Free Press.
- Halpern, R. (1990). Poverty and early childhood parenting: Toward a framework for intervention. *American Journal of Orthopsychiatry*, 60(1), 6-18.
- Handler, J. F., & Hasenfeld, Y. (1991). *The moral construction of poverty: Welfare reform in America*. Newbury Park, CA: Sage Publications.
- Hanson, T., McLanahan, S., & Thomson, E. (1997). Economic resources, parental practices, and children's well-being. In G. Duncan, & J. Brooks-Gunn (Eds), *Consequences of growing up poor* (pp. 190-238). New York: Russell Sage Foundation.

- Harrington, M. (1962). *The other America*. New York: MacMillan.
- Haskins, R. (1995). Losing ground or moving ahead? Welfare reform and children. In P. Chase-Lansdale & J. Brooks-Gunn (Eds), *Escape from poverty: What makes a difference for children* (pp. 63-86). New York: Cambridge University Press.
- Haynes, K. S., & Holmes, K. A. (1994). *Invitation to social work*. New York: Longman.
- Hernandez, D. J. (1997). Poverty trends. In G. J. Duncan & J. Brooks-Gunn (Eds.), *Consequences of growing up poor* (pp. 18-34). New York: Russell Sage Foundation.
- Huston, A. C., McLoyd, V. C., Coll, C. G. (1994). Children and poverty: Issues in contemporary research. *Child Development*, 65(2), 275-282.
- Jaudes, P. K., Ekwo, E., & Van Voorhis, J. (1995). Association of drug abuse and child abuse. *Child Abuse and Neglect*, 19(9), 1065-1075.
- Jeter, H. (1963). *Children, problems, and services in child welfare programs*. Washington, DC: USDHEW, Children's Bureau, Government Printing Office, #403.
- Kadushin, A. (1980). *Child welfare services* (3rd ed.). New York: Macmillan Publishing Company.
- Kaestner, R. (1998). Drug use and AFDC participation: Is there a connection? *Journal of Policy Analysis and Management*, 17(3), 495-520.
- Kamerman, S. B., & Kahn, A. J. (1997). Introduction. In *Child welfare in the context of welfare "reform". Report V*. New York: Columbia University School of Social Work, Cross-National Studies Research Program.
- Katz, M. (1989). *The undeserving poor: From the war on poverty to the war on welfare*. New York: Pantheon Books.
- Kelley, S. J. (1992). Parenting stress and child maltreatment in drug-exposed children. *Child Abuse and Neglect*, 16, 317-328.
- Kempe, C. H., Silverman, F. N., Steele, B. F., Droegmueller, W., & Silver, H. K. (1962). The battered child syndrome. *Journal of the American Medical Association*, 181(1), 4-11.
- King v. Smith*. (1968). 392 U.S. 309, 333-334.

- Knitzer, J., & Bernard, S. (1997). The new welfare law and vulnerable families: Implications for child welfare/child protection systems. *Children and Welfare Reform. Issue Brief 3*. Columbia University: National Center for Children in Poverty.
- Lindsey, D. (1994). *The welfare of children*. New York: Oxford University Press.
- Maas, H. S., & Engler, R. E. (1959). *Children in need of parents*. New York: Columbia University Press.
- Magura, S., & Laudet, A. B. (1996). Parental substance abuse and child maltreatment: Review and implications for intervention. *Children and Youth Services Review*, 18(3), 193-220.
- McLeod, J., & Shanahan, M. (1993). Poverty, parenting, and children's mental health. *American Sociological Review*. 58(3), 351-366.
- McLoyd. (1990). [Complete reference not provided.]
- Meezan, W., & Giovannoni, J. (1995). The current threat to protective services and the child welfare system. *Children and Youth Services Review*, 17(4), 567-574.
- Meyers, M. K., Glaser, B., & Macdonald, K. (1998). On the front lines of welfare delivery: Are workers implementing policy reforms? *Journal of Policy Analysis and Management*, 17(1), 1-22.
- Minkler, M., Berrick, J. D., & Needell, B. (1998). [Complete reference not provided.]
- Mnookin, R. H., & Weisberg, D. K. (1989). *Child, family, and state: Problems and materials on children and the law* (2nd ed.). Boston: Little, Brown & Company.
- Mulford, C. L. (1960). Neglected children. In *Reference papers on children and youth*. Committee on Studies for the Golden Anniversary White House Conference on Children and Youth, 211-220.
- Murphy, J. M., Jellinek, M., Quinn, D., Smith, G., Poitras, F. G., & Goshko, M. (1991). Substance abuse and serious child maltreatment: Prevalence, risk, and outcome in a court sample. *Child Abuse and Neglect*, 15, 197-211.
- National Association of Public Child Welfare Administrators. (1991). Working with substance-abusing families and drug-exposed children: The child welfare response. *Public Welfare*, 37-38.

- National Center on Addiction and Substance Abuse. (1994). *Substance abuse and women on welfare*. New York: Columbia University.
- National Center on Child Abuse and Neglect (NCCAN). (1993). *Understanding child neglect*. Washington, DC: Author.
- Needell, B., Webster, D., Barth, R. P., Armijo, M., & Fox, A. (1997). *Performance indicators for child welfare services in California: 1996*. Berkeley: University of California at Berkeley, School of Social Welfare, Center for Social Services Research.
- Nelson, B. J. (1984). *Making an issue of child abuse: Political agenda setting for social problems*. Chicago: The University of Chicago Press.
- Nelson, K. E., Saunders, E. J., & Landsman, M. J. (1993). Chronic child neglect in perspective. *Social Work*, 38(6), 661-671.
- New York Times*. (1961, June 24). [Complete reference not provided.]
- Olsen, L. J., Allen, D., & Azzi-Lessing, L. (1996). Assessing risk in families affected by substance abuse. *Child Abuse and Neglect*, 20(9), 833-842.
- Pappas, A. (1996). Welfare reform: Child welfare or the rhetoric of responsibility? *Duke Law Journal*, 45, 1301-1328.
- Patterson, J. (1986). *America's struggle against poverty. 1900-1985*. Cambridge, MA: Harvard University Press.
- Pecora, P., Whittaker, J., Maluccio, A., Barth, R. P., & Plotnick, R. D. (1992). *The child welfare challenge: Policy, practice, and research*. New York: Aldine de Gruyter.
- Pelton, L. (1978). Child abuse and neglect: The myth of classlessness. *American Journal of Orthopsychiatry*, 48(4), 608-617.
- Pelton, L. (1981). *The social context of child abuse and neglect*. New York: Human Sciences Press.
- Pelton, L. (1989). *For reasons of poverty: A critical analysis of the public child welfare system in the United States*. New York: Praeger.
- Polansky, N., Chalmers, M., Bittenweiser, E., & Williams, D. (1981). *Damaged parents: An anatomy of child neglect*. Chicago: University of Chicago Press.
- Postman, N. (1997). *The disappearance of childhood*. New York: Vintage Books.

- Quadagno, J. (1994). *The color of welfare: How racism undermined the war on poverty*. New York: Oxford University Press.
- Richards, E. (Ed.). (1950). *Proceedings of the midcentury White House Conference on Children and Youth*. Raleigh, NC: Health Publications Institute.
- Robertson, P. (1973). Home as a nest: Middle class childhood in nineteenth-century Europe. In L. deMause (Ed.) *The history of childhood*. New York: Psychohistory Press.
- Rose, S., & Meezan, W. (1997). Defining child neglect: Evolution, influences, and issues. In J. D. Berrick, R. P. Barth, & N. Gilbert (Eds.), *Child welfare research review, Volume II* (pp. 13-28). New York: Columbia University Press.
- Senate Bill 2669, California (Presley). *Perinatal services*. Approved September 30, 1990.
- Sheridan, M. J. (1995). A proposed intergenerational model of substance abuse, family functioning, and abuse/neglect. *Child Abuse and Neglect*, 19(5), 519-530.
- Shook, K., & Testa, M. (1997, August 15). *Kinship care in the context of welfare reform*. Presentation at the 1997 Annual Conference of the Child Welfare League of America.
- Shyne, A., & Shroeder, A. (1978, August). *National study of social services to children and their families*. Washington, DC: DHEW Publication No. 78-30150.
- Simmons, B., & Barth, R. P. (1995). Legal guardianship and child welfare in California: An empirically based curriculum. Berkeley: University of California at Berkeley, Child Welfare Research Center.
- Sisco, C. B., & Pearson, C. L. (1994). Prevalence of alcoholism and drug abuse among female AFDC recipients. *Health and Social Work*, 19(1), 75-77.
- Smith, J., Brooks-Gunn, J., & Klebanov, P. (1997). Consequences of living in poverty for young children's cognitive and verbal ability and early school achievement. In G. Duncan & J. Brooks-Gunn (Eds.). *Consequences of growing up poor* (pp. 132-189). New York: Russell Sage Foundation.
- Sosin, M. R. (1986). Legal rights and welfare change, 1960-1980. In S. H. Danziger & D. H. Weinberg (Eds.) *Fighting poverty: What works and what doesn't* (pp. 260-282). Cambridge, MA: Harvard University Press.

- Steinberg, L., Catalano, R., & Dooley, D. (1981). Economic antecedents of child abuse and neglect. *Child Development*, 52, 975-985.
- Thomas - U.S. Congress on the Internet. (1997, December 19). *Bill Summary & Status for the 105th Congress*. Retrieved from: <http://thomas.loc.gov/cgi-bin/bdquery/z?d105:HR00867:@@D>
- Tiffin, S. (1982). *In whose best interest? Child welfare reform in the Progressive Era*. Westport, CT: Greenwood Press.
- Tracy, E. M. (1994). Maternal substance abuse: Protecting the child, preserving the family. *Social Work*, 39(5), 534-540.
- Tracy, E. M., & Farkas, K. J. (1994). Preparing practitioners for child welfare practice with substance-abusing families. *Child Welfare*, 73(1), 57-68.
- Trattner, W. (1989). *From poor law to welfare state: A history of social welfare in America*. New York: The Free Press.
- United States Department of Health and Human Services. (1996). *Results of the third national incidence study on child maltreatment in the United States*. Washington, DC: National Center on Child Abuse and Neglect.
- United States Department of Health and Human Services. (1997a, December 19). *Major provisions of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104-193); and Comparison of Prior Law and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193)*. Retrieved from: <http://www.acf.dhhs.gov/news/welfare/aspesum.htm>
- United States Department of Health and Human Services, National Center on Child Abuse and Neglect. (1997b). *Child maltreatment 1995: Reports from the states to the National Child Abuse and Neglect Data System*. Washington, DC: U.S. Government Printing Office.
- United States Department of Health, Education, and Welfare. (1961). *Services in the Aid to Dependent Children program: Implications for federal and state administration (#925887)*. Washington, DC: Government Printing Office.
- United States Department of Health, Education, and Welfare. (1963a). *Child welfare services (#406)*. Washington, DC: Government Printing Office.
- United States Department of Health, Education, and Welfare. (1963b). *Dependent children and their families (#709214)*. Washington, DC: Government Printing Office.

- United States Department of Health, Education, and Welfare, Children's Bureau. (1962). *Social services for unmarried mothers and their children provided through public and voluntary child welfare agencies (#12)*. Washington, DC: Government Printing Office.
- United States Department of Health, Education, and Welfare, Children's Bureau. (1969, April). *Guides on Federal regulations governing service programs for families and children: Title IV. Parts A and B. Social Security Act (#350169)*. Washington, DC: Government Printing Office
- United States Department of Labor, Children's Bureau. (1940a). *Child-welfare services under the Social Security Act. Title V. Part 3. Development of Program, 1936-1938 (#257)*. Washington, DC: Government Printing Office.
- United States Department of Labor, Children's Bureau. (1940b). *White House Conference on children in a democracy: January 18-20, 1940. Final Report (#272)*. Washington, DC: Government Printing Office.
- Ventura, S., Curtin, S., & Mathews, T. (1998). *Teenage births in the United States: Nation and state trends, 1990-1996*. (National Vital Statistics System). Hyattsville, MD: National Center for Health Statistics.
- Vondra, J. (1993). Child poverty and child maltreatment. In J. Chafel (Ed.), *Child poverty and public policy* (pp. 127-166). Washington, DC: The Urban Institute Press.
- Wilson, J. B., Ellwood, D. T., & Brooks-Gunn, J. (1995). Welfare-to-work through the eyes of children. In P. Chase-Lansdale & J. Brooks-Gunn (Eds.), *Escape from poverty: What makes a difference for children* (pp. 63-86). New York: Cambridge University Press.
- Wolock, I., & Horowitz, B. (1979). Child maltreatment and material deprivation among AFDC-recipient families. *Social Service Review*, 53, 175-194.
- Wolock, I. & Magura, S. (1996). Parental substance abuse as a predictor of child maltreatment re-reports. *Child abuse and neglect*, 20 (12), 1183-1193.
- Wooley, & Evans. (1953). [Complete reference not provided.]
- Zaslow, M. J., Moore, K. A., Morrison, D. R., & Coiro, M. J. (1995). The family support act and children: Potential pathways of influence. *Children and Youth Services Review*, 17(1/2), 231-249.
- Zelizer, V. A. (1985). *Pricing the priceless child: The changing social value of children*. New York: Basic Books.

- Zuckerman, B. (1993). Developmental considerations for drug- and AIDS-affected infants. In Barth, R. P., Pietrzak, J., & Ramler, M. (Eds). *Families living with drugs and HIV: Intervention and treatment strategies* (pp. 37-60). New York: The Guilford Press.
- Zuravin, S., & Grief, G. L. (1989). Normative and child-maltreating AFDC mothers. *Social Casework*, 70(2), 76-84.

APPENDIXES

METHODS AND TABLES FOR CHAPTER V

PART I: FROM WELFARE TO CHILD WELFARE

A total of 287,103 children statewide who were less than 18 years of age and began AFDC receipt for the first time between 1988 and 1995 were identified in the Medi-Cal 10% Statewide Persons Longitudinal Database (LDB).³⁵ Probability matching software was employed to link AFDC histories for these children with birth records (CBSMF)³⁶, statewide foster care data (FCIS)³⁷, and child maltreatment reporting data (SSRS)³⁸ in 10 counties. The first section, a description of 1988-1995 child AFDC entries, details the characteristics of all 287,103 1988-1995 child AFDC entries. The second section, transitions from AFDC to child welfare/child protective services, examines child welfare contact among a subset of AFDC children in 10 California counties. Specifically, 63,768 children in these 10 counties who entered AFDC between 1990 and 1995 were followed to determine subsequent first child maltreatment reports, investigations, case openings, and foster care placements.³⁹

³⁵ UC Data Archive and Technical Assistance Longitudinal Database, 10% samples of persons from MEDS. Analysis sample size = 287,103 child entrants to AFDC between 1988 and 1995. Annual cohort size averages 35,000.

³⁶ Foster care histories taken from the Foster Care Information System (FCIS) and birth characteristics taken from the California Birth Statistical Master File (CBSMF).

³⁷ Foster Care Information System.

³⁸ Social Services Reporting System.

³⁹ The analysis is limited to those child welfare events that first occurred after initial entry to AFDC, therefore, it excludes children with previous child welfare histories as well as infants who entered the child welfare system at birth except in cases where a mother received AFDC while pregnant.

PART II: BIRTHS TO TEEN MOTHERS IN THE FOSTER CARE SYSTEM

To determine birth rates for teenage girls in foster care, probability matching software was employed to link foster care histories with birth records.⁴⁰ The analysis includes all females under age 18 in the 1994 foster care caseload.

PART III: KINSHIP CARE AND AFDC

Data for this part of the chapter were extracted from California's Medi-Cal Eligibility Data System (MEDS). This data source contains monthly aid codes for AFDC receipt, making it possible to track welfare participation over time. Findings on the growth in older caregiver households and caregiver characteristics are from these data; point in time data for December of each year (1990-1996) are presented, and recipients are grouped into cases. Findings regarding time on aid utilize age and ethnicity information for entry cohorts from the 10% persons sample from the Longitudinal Database, originally created by the Department of Social Services and UC DATA. The proportion of time on aid was calculated for all adults new to aid between 1988 and 1995 (as of December, 1995), and the percent reaching 2- and 5-year limits was estimated from the 1988 and 1989 entry cohorts.

We have designated an artificial age boundary of 50 or older to characterize those heads of household on AFDC who are probably relative caregivers. The age distinction misses grandparents or other relatives who may be younger than 50 and therefore probably underestimates the extent of relative-headed households on aid. All analyses include AFDC-FG and AFDC-U families combined unless otherwise specified.

⁴⁰ Foster care histories taken from the Foster Care Information System (FCIS) and birth characteristics taken from the California Birth Statistical Master File (CBSMF).

Table A.1: Type and Year of Child Welfare Event by Year of AFDC Entry*

<i>n</i> = 60,062		Maltreatment report		Year of maltreatment report				
Year of AFDC entry	No	Yes	1990	1991	1992	1993	1994	1995
1990	72.82	27.18	6.77	6.55	4.90	3.51	3.18	2.27
1991	78.10	21.90	-	5.20	6.05	4.28	3.45	2.92
1992	81.11	18.89	-	-	5.70	5.63	4.39	3.16
1993	85.15	14.85	-	-	-	5.28	5.57	4.00
1994	89.01	10.99	-	-	-	-	5.60	5.38
1995	94.21	5.79	-	-	-	-	-	5.79
Total	83.35	16.65	0.99	1.88	2.82	3.24	3.82	3.90

<i>n</i> = 61,222		Case investigation		Year of case investigation				
Year of AFDC entry	No	Yes	1990	1991	1992	1993	1994	1995
1990	78.21	21.79	2.52	5.99	4.47	3.55	3.13	2.14
1991	80.85	19.15	-	4.42	5.24	3.82	3.12	2.54
1992	83.57	16.43	-	-	4.74	4.83	3.96	2.89
1993	87.12	12.88	-	-	-	4.44	4.91	3.53
1994	90.57	9.43	-	-	-	-	4.69	4.73
1995	94.99	5.01	-	-	-	-	-	5.01
Total	85.78	14.22	0.37	1.67	2.45	2.87	3.40	3.45

<i>n</i> = 62,909		Case opening		Year of case opening				
Year of AFDC entry	No	Yes	1990	1991	1992	1993	1994	1995
1990	91.83	8.17	1.90	2.06	1.38	1.07	1.08	0.69
1991	94.31	5.69	-	1.46	1.34	1.10	1.08	0.71
1992	94.80	5.20	-	-	1.34	1.52	1.29	1.05
1993	96.18	3.82	-	-	-	1.46	1.41	0.95
1994	97.03	2.97	-	-	-	-	1.67	1.30
1995	98.45	1.55	-	-	-	-	-	1.55
Total	95.46	4.54	0.27	0.55	0.68	0.89	1.12	1.04

<i>n</i> = 63,768		Foster care entry		Year of foster care entry					
Year of AFDC entry	No	Yes	1990	1991	1992	1993	1994	1995	
1990	96.74	3.26	0.53	0.76	0.47	0.60	0.47	0.42	
1991	97.41	2.59	-	0.60	0.60	0.45	0.47	0.47	
1992	97.41	2.29	-	-	0.41	0.71	0.63	0.54	
1993	98.24	1.76	-	-	-	0.48	0.77	0.51	
1994	98.37	1.63	-	-	-	-	0.75	0.87	
1995	99.25	0.75	-	-	-	-	-	0.75	
Total	97.96	2.04	0.08	0.21	0.25	0.38	0.53	0.59	

**Includes 1990-1995 child AFDC entries*

Table A.2: Percent of Foster Care Entries and Year of Foster Care Entry by Year of AFDC Entry

<i>n</i> = 287,103		Foster care entry		Year of foster care entry						
Year of AFDC Entry	No	Yes	1988	1989	1990	1991	1992	1993	1994	1995
1988	95.07	4.93	0.81	1.03	0.64	0.51	0.54	0.50	0.50	0.42
1989	95.95	4.05	-	0.75	0.79	0.57	0.55	0.48	0.47	0.44
1990	96.52	3.48	-	-	0.62	0.76	0.54	0.57	0.54	0.44
1991	97.25	2.75	-	-	-	0.51	0.65	0.56	0.58	0.45
1992	97.68	2.32	-	-	-	-	0.49	0.70	0.60	0.51
1993	98.14	1.86	-	-	-	-	-	0.49	0.78	0.58
1994	98.64	1.36	-	-	-	-	-	-	0.59	0.77
1995	99.35	0.65	-	-	-	-	-	-	-	-
Total	97.37	2.63	0.09	0.20	0.24	0.29	0.35	0.42	0.52	0.53

**Includes 1988-1995 child AFDC entries*

Table A.3: Percent Distribution of Demographic and Case Characteristics According to Child Welfare Events*

	Child welfare event				
	Total	Report	Investigation	Opening	Foster care
Child's age at entry to AFDC					
Less than 1 year	49.2	56.2	57.4	63.5	67.7
1-2 years	14.8	14.8	15.0	13.1	11.9
3-5 years	11.3	10.5	10.5	8.7	6.5
6-12 years	15.4	14.2	13.3	11.0	9.7
13-17 years	9.3	4.2	3.8	3.6	4.2
Child's gender					
Female	49.9	50.3	50.1	49.2	49.1
Male	50.1	49.7	50.0	50.8	50.9
Child's race/ethnicity					
Caucasian	28.3	38.6	39.3	40.2	45.4
Hispanic	41.7	35.1	35.3	28.8	28.5
African American	15.0	18.1	17.3	23.8	22.0
Other	15.0	8.2	8.1	7.2	4.1
AFDC case type					
Single parent	70.9	78.6	78.5	83.2	84.2
Unemployed parent	29.2	21.4	21.5	16.8	15.8
County size					
Big county	100.0	100.0	100.0	100.0	100.0
Small county	-	-	-	-	-
Los Angeles County	-	-	-	-	-
Mother's age at child's birth					
Less than 18 years	8.9	9.6	9.4	9.0	9.3
18-20 years	20.7	19.9	19.7	18.2	17.5
21-29 years	51.6	51.5	52.0	52.7	52.3
30+ years	18.9	18.9	18.9	20.1	20.9
<i>n=</i>	45,021	7,504	6,600	2,149	1,005
Mother's education at child's birth					
No high school diploma	52.2	51.4	52.0	49.5	53.3
High school graduate	47.8	48.7	48.0	50.5	46.7
<i>n=</i>	34,315	5,741	5,126	1,736	841
Mother native- or foreign-born					
Native born	57.9	72.4	72.6	80.3	86.7
Foreign born	42.1	27.6	27.4	19.7	13.3
<i>n=</i>	45,021	7,505	6,601	2,148	1,003
<i>unless otherwise specified, n=</i>	63,768	10,002	8,703	2,854	1,301

* Includes 1990-1995 child AFDC entries

Table A.3: Percent Distribution of Demographic and Case Characteristics According to Child Welfare Events* (cont'd)

	Total	Child welfare event			
		Report	Investigation	Opening	Foster care
Child's birth order					
First	37.8	31.6	30.3	28.9	24.2
Second	27.2	27.2	27.0	26.8	25.4
Third	17.2	19.5	20.1	20.1	21.5
Fourth	8.9	11.0	11.2	12.0	14.1
Fifth or more	9.0	10.7	11.4	12.2	14.7
<i>n=</i>	44,939	7,488	6,589	2,143	1,004
Timing of prenatal care					
First trimester	64.0	61.5	60.5	59.0	52.6
Second trimester	26.4	27.5	28.0	28.6	31.9
Third trimester	6.4	7.1	7.2	7.8	9.6
No prenatal care	3.1	3.9	4.3	4.6	5.9
<i>n=</i>	44,323	7,364	6,479	2,106	979
Premature delivery					
No	88.5	86.6	86.4	83.7	81.9
Yes	11.5	13.5	13.6	16.4	18.1
<i>n=</i>	42,649	7,057	6,216	2,006	922
Child's birth weight					
Less than 1,500 grams	0.9	1.3	1.2	1.7	2.3
1,500-2,499 grams	5.8	6.9	7.3	10.2	11.2
2,500+ grams	93.3	91.9	91.5	88.1	86.5
<i>n=</i>	43,533	7,381	6,514	2,121	986
Birth abnormality					
No	96.3	95.9	95.7	94.9	93.6
Yes	3.7	4.1	4.3	5.1	6.4
<i>n=</i>	39,312	6,631	5,913	1,950	918
<i>unless otherwise specified, n=</i>	63,768	10,002	8,703	2,854	1,301

*Includes 1990-1995 child AFDC entries

LIST OF KEY INFORMANTS

Mary Lee Allen
Children's Defense Fund

Rikki Baum
California Policy Seminar
UC Berkeley

David Berns
Director
Department of Human Services
El Paso County, Colorado

Jennifer Bianchi
Children Services Bureau, California
Department of Social Services

Rosie Bianco
Program Manager
Children's Services Bureau
San Diego County

Todd Bland
Health and Welfare Division
Legislative Analyst's Office
State of California

Joanna Blaska
Program Manager II
Public Assistance Division
Department of Social Services
Stanislaus County

Glenn Brooks
Coastal Regional Advisor
Welfare-to-Work Division
California Department of Social Services

Jim Brown
Northern Regional Advisor
Welfare-to-Work Division
California Department of Social Services

Pam Calhoun
Welfare-to-Work Division
California Department of Social Services

Scott Carney
Contracts Unit
Social Service Department
Contra Costa County

Lynne Coyle
Human Services Agency
Santa Cruz County

Jim Cuniff
UC Data Survey Research Center
University of California at Berkeley

Kurt Childs
Assemblywoman Dione Aroner's Office
California State Assembly

Arlyce Currie
Bananas Child Care Information & Referral
Service

Marion Deeds
Program Planner Analyst
Family Youth & Children's Services
Human Services Department
Sonoma County

Diane Edwards
Director
Human Services Department
Sonoma County

Valerie Earley
Program Manager
Adult and Child Services
Health and Social Service Department
Solano County

Cecilia Espinola
Director
Human Resources Agency
Santa Cruz County

Dana Fabella
Assistant Director
Social Service Department
Contra Costa County

Nancy Fey
Program Manager
Children and Family Services
Alameda County

Joanne Gong
Child Care Law Center

Nina Grayson
Central Regional Advisor
Welfare-to-Work Division
California Department of Social Services

Bobbi Holme
Manager
Stage I Child Care Unit
CalWORKs Child Care Program
California Department of Social Services

Louise Katerlund
Program Manager
Department of Social Services
Orange County

Karen Kennedy
Welfare-to-Work Division
California Department of Social Services

Linda Ladimore
Welfare-to-Work Division
California Department of Social Services

Mark Lane
Division Director of Child Welfare
Human Resources Agency
Santa Cruz County

Terry Langoria
Chairperson
Children's Services Committee
County Welfare Directors Association of CA

Julietta Leon
Welfare-to-Work Division
California Department of Social Services

Julie Lopes
Welfare-to-Work Division
California Department of Social Services

Joe Magruder
Adoptions Branch
California Department of Social Services

Janet Malvin
Project Director
UC DATA Survey Research Center
UC Berkeley

Lynn Miller
Division Director
Job Opportunities and Benefits Division
Human Resources Agency
Santa Cruz County

Sherry Novick
Assemblywoman Dion Aroner's Office
California State Assembly

Stuart Oppenheim
Director of Youth and Family Services
Human Services Agency
San Mateo County

Lynne Osborn
Staff Development Officer
Department of Social Welfare
Butte County

Pam Phillips
Program Analyst, Social Service Department,
Contra Costa County

Greg Rose
Children's Services Branch
California Department of Social Services

Oshi Ruelas
Research Branch
California Department of Social Services

Rick Salata
Director
Children's System of Care
Health and Human Services Department
Placer County

Donna Salay
Department of Education
State of California

Del Sayles
Children Services Chief
Children's Services Branch
California Department of Social Services

Gordon Scott
Southern Regional Advisor
Welfare-to-Work Division
California Department of Social Services

Erica Shore
CalWORKs Liaison
Social Services Agency
Alameda County

Gretchen Test
Project Manager
National Association of Public Child Welfare
Administrators

Sue Toy
Welfare-to-Work Division
California Department of Social Services

Jackie Triplet
Foster Care Funding Systems Unit
California Department of Social Services

Hub Walsh
Deputy Director
Employment and Training/CalWORKs
Human Services Agency
Merced County

Charlene Welty
Foster Care Policy Unit
California Department of Social Services

Bill Weldinger
Social Services Department
Contra Costa County

Milton Yee
Employment Division
California Department of Social Services

LIST OF CONTACTS FOR CHAPTER VIII

Butte County

Lynn Osborn
Staff Development Officer
Department of Social Welfare
(530) 534-5921 (fax)

El Paso County, Colorado

David Berns or Roni Spaulding
Director
Department of Human Services
(719) 444-5532 or (719) 636-0000
(719) 444-5599 (fax)

Merced County

Hub Walsh
Deputy Director
Employment and Training/CalWORKs
Human Services Agency
(209) 385-3000, ext. 5600
(209) 383-6925 (fax)

San Mateo County

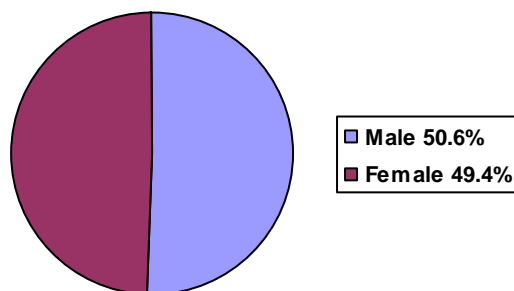
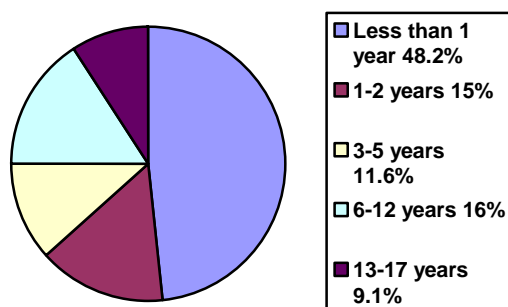
Stuart Oppenheim
Director
Youth and Family Services Division
Human Services Agency
(650) 595-7510
(650) 595-7516 (fax)

Santa Cruz County

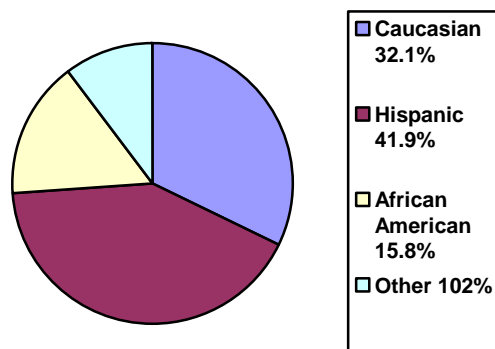
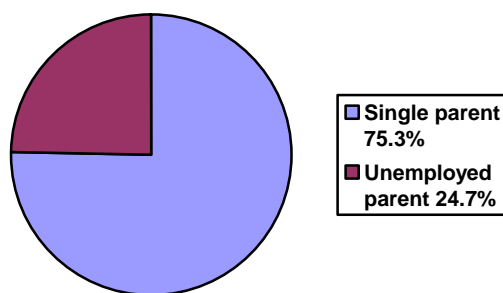
Lynn C. Miller
Division Director
Job Opportunities and Benefits Division
Human Resources Agency
(831) 454-4236
(831) 454-4092 (fax)

Stanislaus County

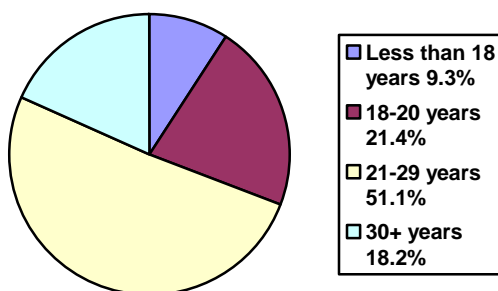
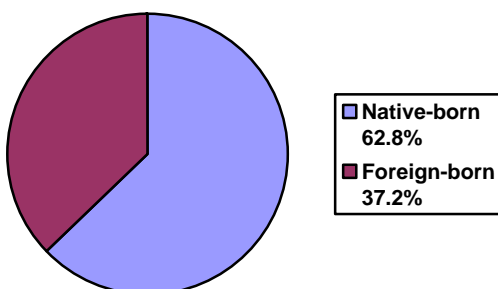
Joanna Blaska
Program Manager II
Child Welfare Services
Department of Social Services
(209) 558-2862
(209) 558-2343 (fax)

Figure 5.1 Child AFDC Entries* by Child's Gender**Figure 5.2 Child AFDC Entries* by Child's Age at Entry to AFDC**

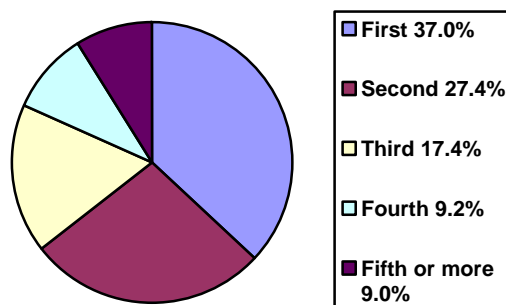
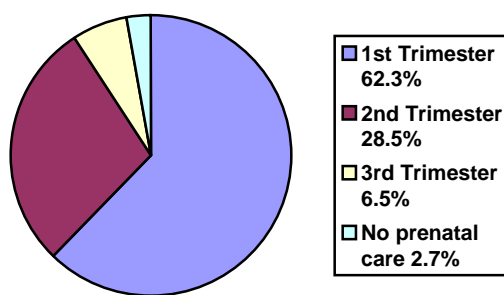
**Includes 1988-1995 child AFDC entries*

Figure 5.3 Child AFDC Entries* by Child's Race/Ethnicity**Figure 5.4 Child AFDC Entries* by AFDC Case Type**

**Includes 1988-1995 child AFDC entries*

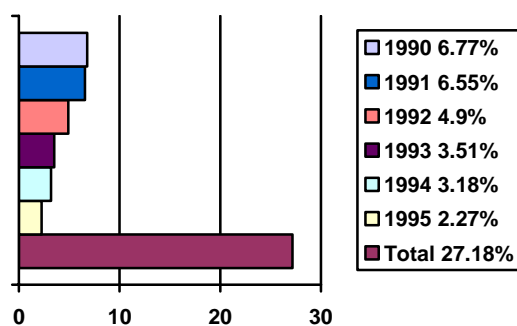
Figure 5.5 Child AFDC Entries* by Mother's Age at Child's Birth**Figure 5.6 Child AFDC Entries* by Whether Mother Was Native- or Foreign-born**

**Includes 1988-1995 child AFDC entries*

Figure 5.7 Child AFDC Entries* by Child's Birth Order**Figure 5.8 Child AFDC Entries* by Timing of Prenatal Care**

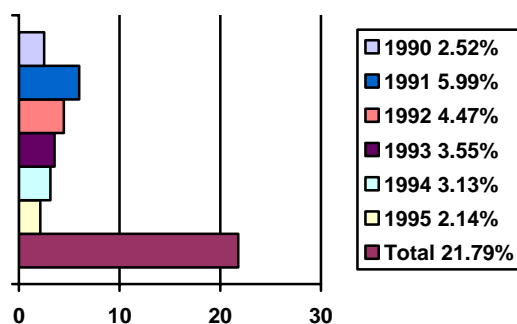
**Includes 1988-1995 child AFDC entries*

Figure 5.9a Child AFDC Entries in 1990:
Percent of Entrants With Child Maltreatment Reports by Year



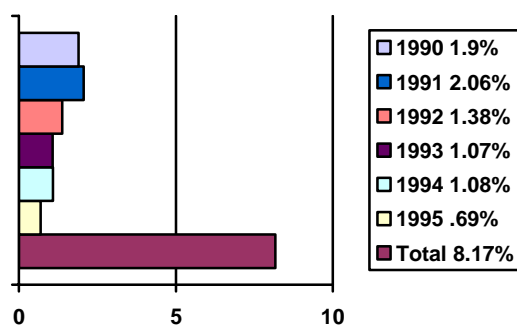
$n = 8,809$ with 2,394 child maltreatment reports by 1995

Figure 5.9b Child AFDC Entries in 1990:
Percent of Entrants With Case Investigations by Year



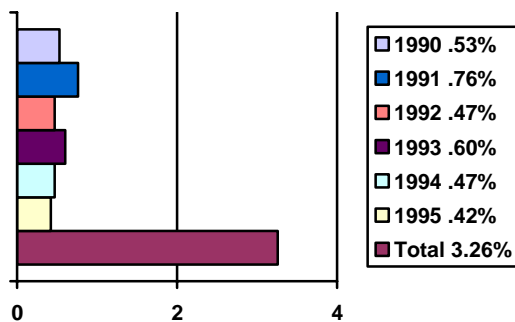
$n = 8,985$ with 1,958 case investigations by 1995

Figure 5.9c Child AFDC Entries in 1990:
Percent of Entrants With Case Openings by Year



n = 8,997 with 735 case openings by 1995

Figure 5.9d Child AFDC Entries in 1990:
Percent of Entrants With Foster Care Entries by Year



n = 9,056 with 295 entering foster care by 1995

Figure 5.10
Child's Age at Entry to AFDC by Type of Child Welfare Event (%)*

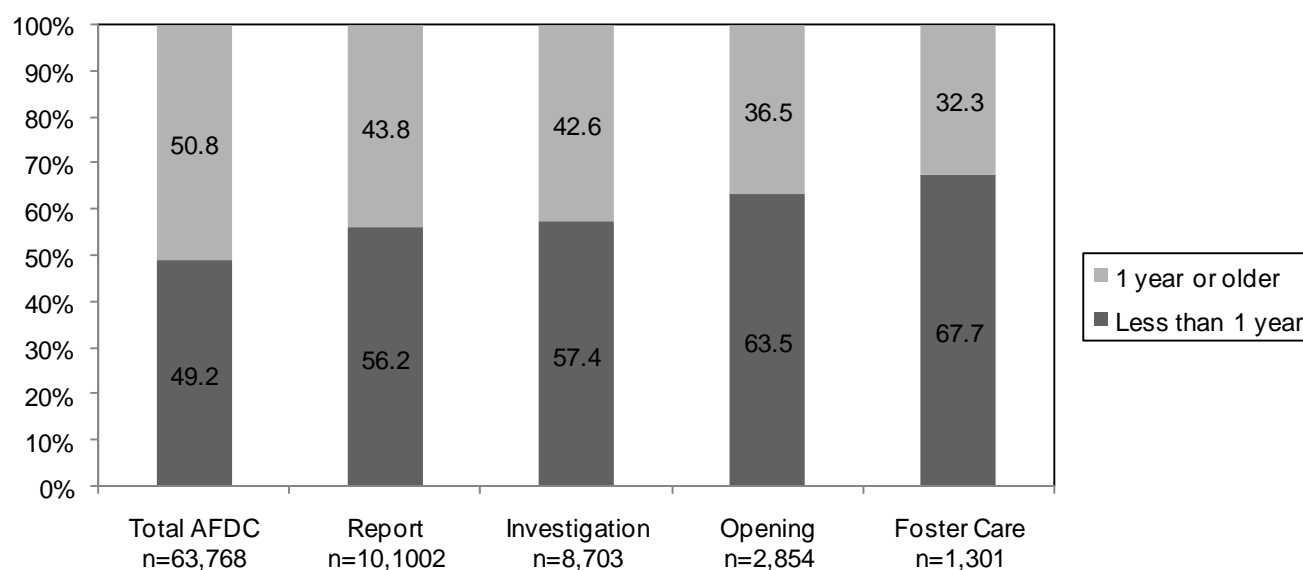
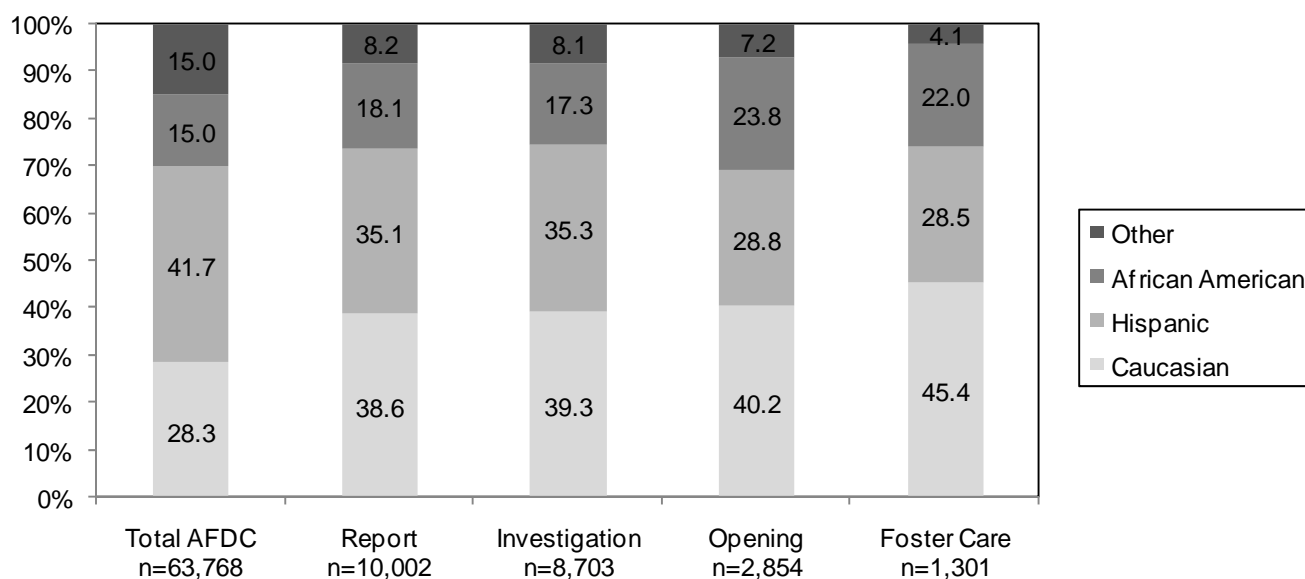


Figure 5.11
Child's Race/Ethnicity by Type of Child Welfare Event (%)*



* Includes 1990-1995 child AFDC entries

Figure 5.12
AFDC Case Type by Type of Child Welfare Event (%)*

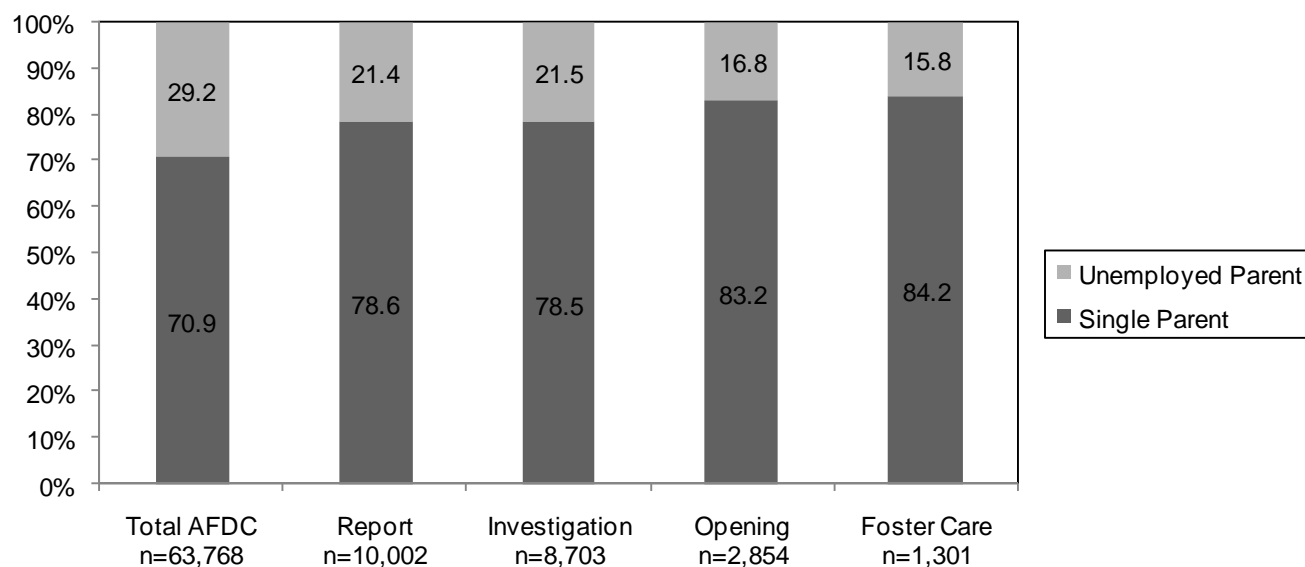
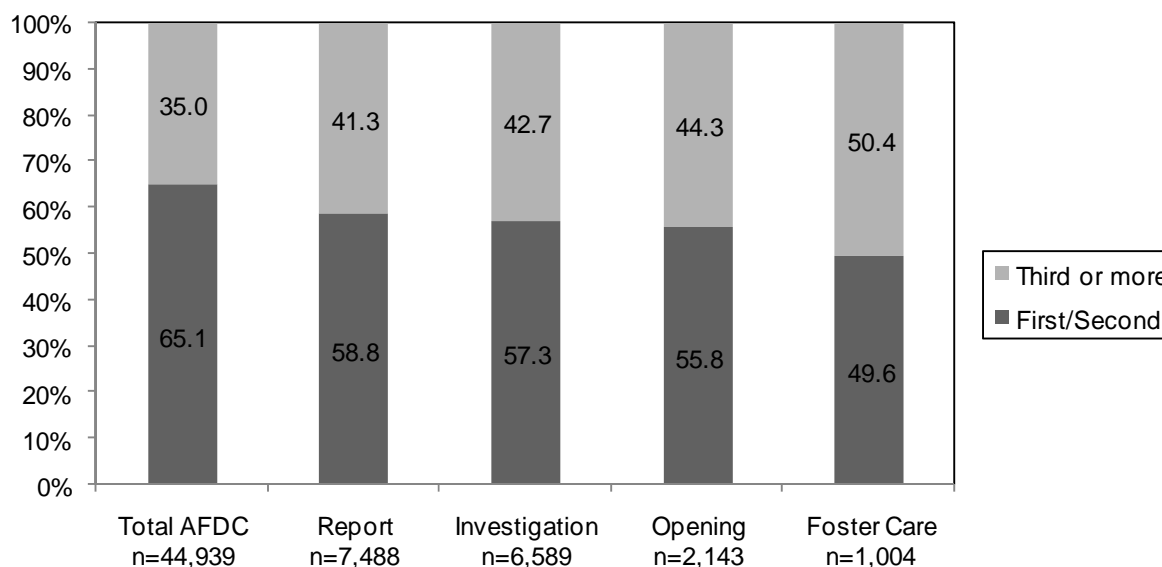


Figure 5.13
Child's Birth Order by Type of Child Welfare Event (%)*



*Includes 1990-1995 child AFDC entries

Figure 5.14
Timing of Prenatal Care by Type of Child Welfare Event (%)*

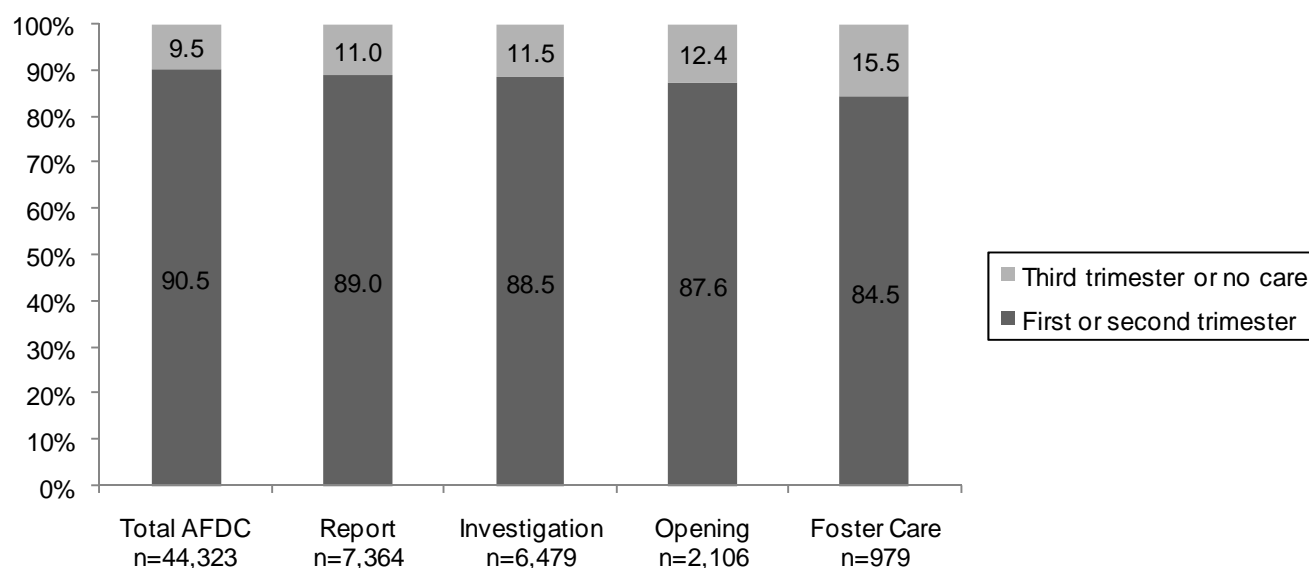
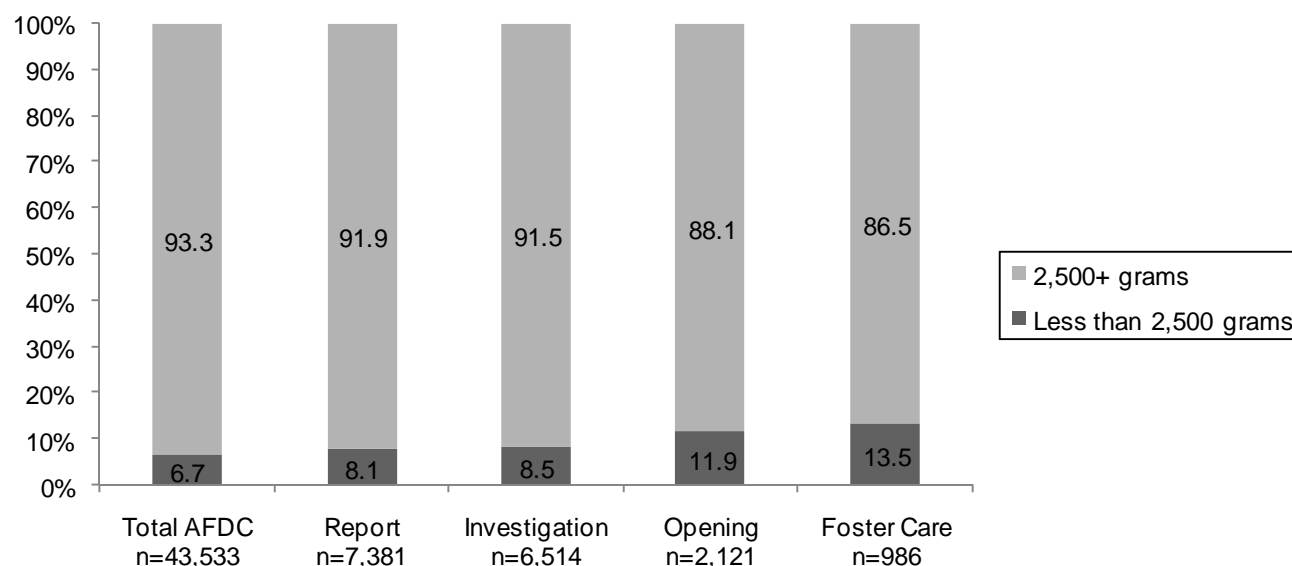


Figure 5.15
Child's Birth Weight by Type of Child Welfare Event (%)*



*Includes 1990-1995 child AFDC entries

Table 5.1 Odds Ratios for Child Welfare Events

	Report	Investigation	Opening	Foster Care
Child's age at entry to AFDC				
<i>Less than 1 year</i>	1.00	1.00	1.00	1.00
1-2 years	0.99 ns	0.97 ns	0.91 ns	0.82 ns
3-5 years	0.91 *	0.87 **	0.70 ***	0.56 ***
6-12 years	0.94 ns	0.86 **	0.64 ***	0.36 ***
13-17 years	0.88 ns	0.68 ***	0.60 **	0.65 *
Child's race/ethnicity				
<i>Caucasian</i>	1.00	1.00	1.00	1.00
African American	0.70 ***	0.65 ***	0.91 ns	0.62 ***
Hispanic	0.48 ***	0.47 ***	0.39 ***	0.33 ***
Other	0.36 ***	0.35 ***	0.38 ***	0.19 ***
Child's gender				
<i>Male</i>	1.00	1.00	1.00	1.00
Female	1.01 ns	1.02 ns	0.97 ns	1.04 ns
Year of AFDC entry				
<i>1990</i>	1.07 ns	0.97 ns	1.23 **	1.07 ns
<i>1991</i>	1.00	1.00	1.00	1.00
1992	0.99 ns	1.04 ns	1.07 ns	1.15 ns
1993	0.95 ns	1.01 ns	0.97 ns	1.17 ns
1994	0.97 ns	1.01 ns	0.97 ns	1.46 **
1995	0.98 ns	1.15 *	0.97 ns	1.39 *
AFDC case type				
<i>Unemployed Parent</i>	1.00	1.00	1.00	1.00
Single Parent	1.79 ***	1.83 ***	2.39 ***	2.70 ***
Months on AFDC	1.02 ***	1.02 ***	1.02 ***	1.03 ***
Breaks in Medi-Cal	1.48 ***	1.43 ***	1.30 ***	1.26 ns
Breaks in AFDC Spells	1.21 ***	1.26 ***	1.10 ns	1.30 **
Child's birth order				
<i>First</i>	1.00	1.00	1.00	1.00
Second	1.44 ***	1.49 ***	1.45 ***	1.78 ***
Third or more	2.09 ***	2.23 ***	2.05 ***	3.11 ***
Child's birth weight				
<i>2,500+ grams</i>	1.00	1.00	1.00	1.00
1,500-2,499 grams	1.23 ***	1.31 ***	1.71 ***	1.81 ***
<i>Less than 1,500 grams</i>	1.58 ***	1.49 **	2.01 ***	2.36 ***
Mother's age at child's birth				
<i>Less than 18 years</i>	1.70 ***	1.70 ***	1.43 ***	1.94 ***
18-20 years	1.22 ***	1.27 ***	1.07 ns	1.21 ns
21-29 years	1.07 ns	1.09 *	1.04 ns	1.10 ns
30+ years	1.00	1.00	1.00	1.00

Table 5.1 Odds Ratios for Child Welfare Events (cont'd)

	Report	Investigation	Opening	Foster Care
Timing of prenatal care				
First trimester	1.00	1.00	1.00	1.00
Second trimester	1.06 *	1.10 **	1.16 **	1.44 ***
Third trimester	1.18 ***	1.19 ***	1.36 ***	1.83 ***
No Prenatal Care	1.30 ***	1.41 ***	1.68 ***	2.23 ***

Notes:*Discrete Time Logit Models**ns p>= 0.5, * p<.05, ** p<.01, *** p<.001**Report: 7,223 events, 126,245 censored -2 log likelihood Intercept only 56180.937, Intercept and covariates 53668.051, Chi-Square for covariates 2512.886 with 98 DF (p=0.0001)**Investigation: 6,376 events, 132,839 censored -2 log likelihood Intercept only 51775.937, Intercept and covariates 49654.591, Chi-Square for covariates 2121.346 with 98 DF (p=0.0001)**Opening: 2,074 events, 147,625 censored -2 log likelihood Intercept only 21869.036, Intercept and covariates 20590.054, Chi-Square for covariates 1278.982 with 98 DF (p=0.0001)**Foster Care: 959 events, 152,694 censored -2 log likelihood Intercept only 11648.846, Intercept and covariates 10774.791, Chi-Square for covariates 874.055 with 99 DF (p=0.0001)*

Figure 5.16
Births to Teen Mothers in the Foster Care System

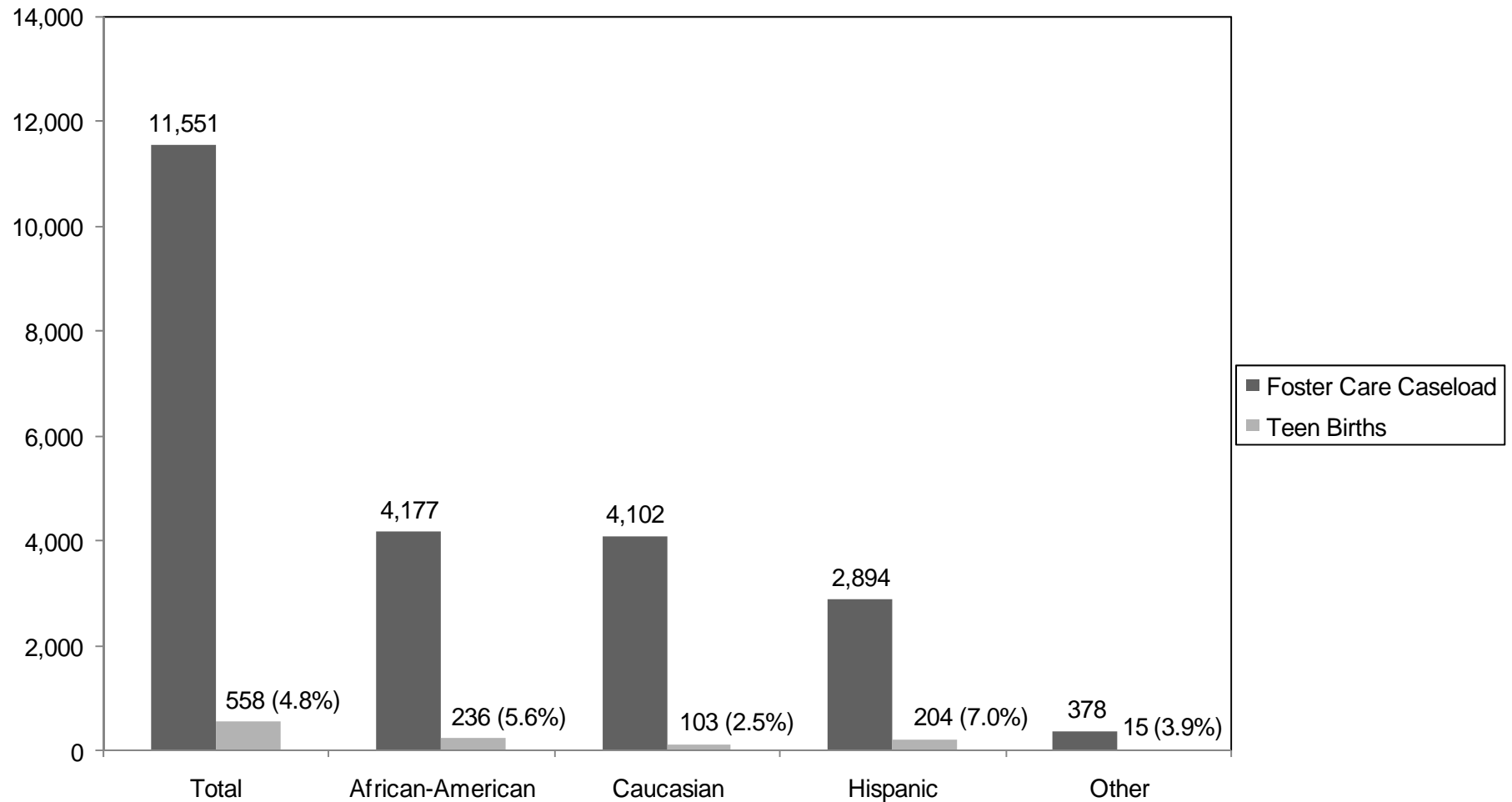


Figure 5.17
Growth in Older Caregiver Households on AFDC: 1990-1996

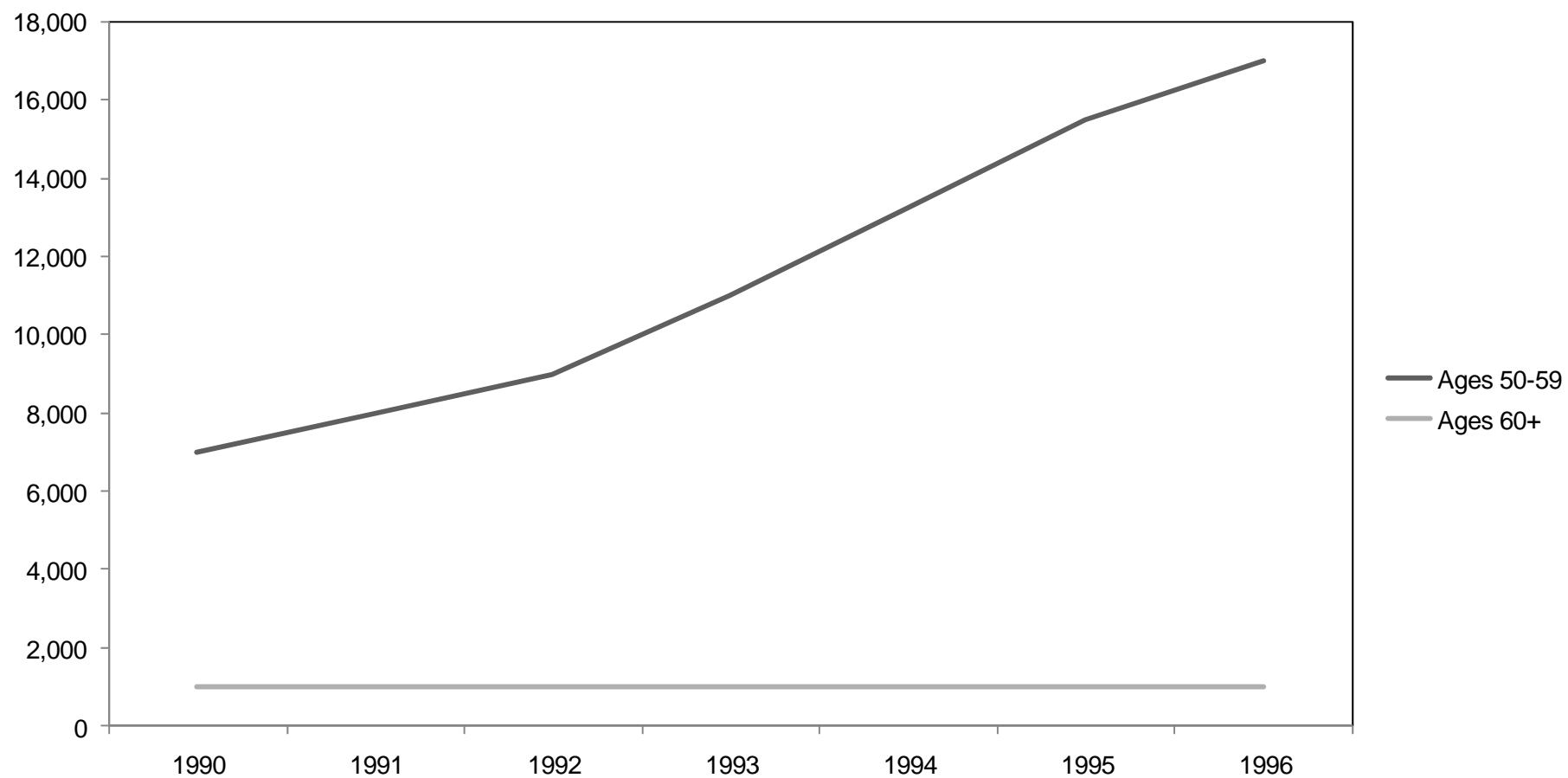


Figure 5.18
Ethnicity of Older Caregivers on AFDC by Age

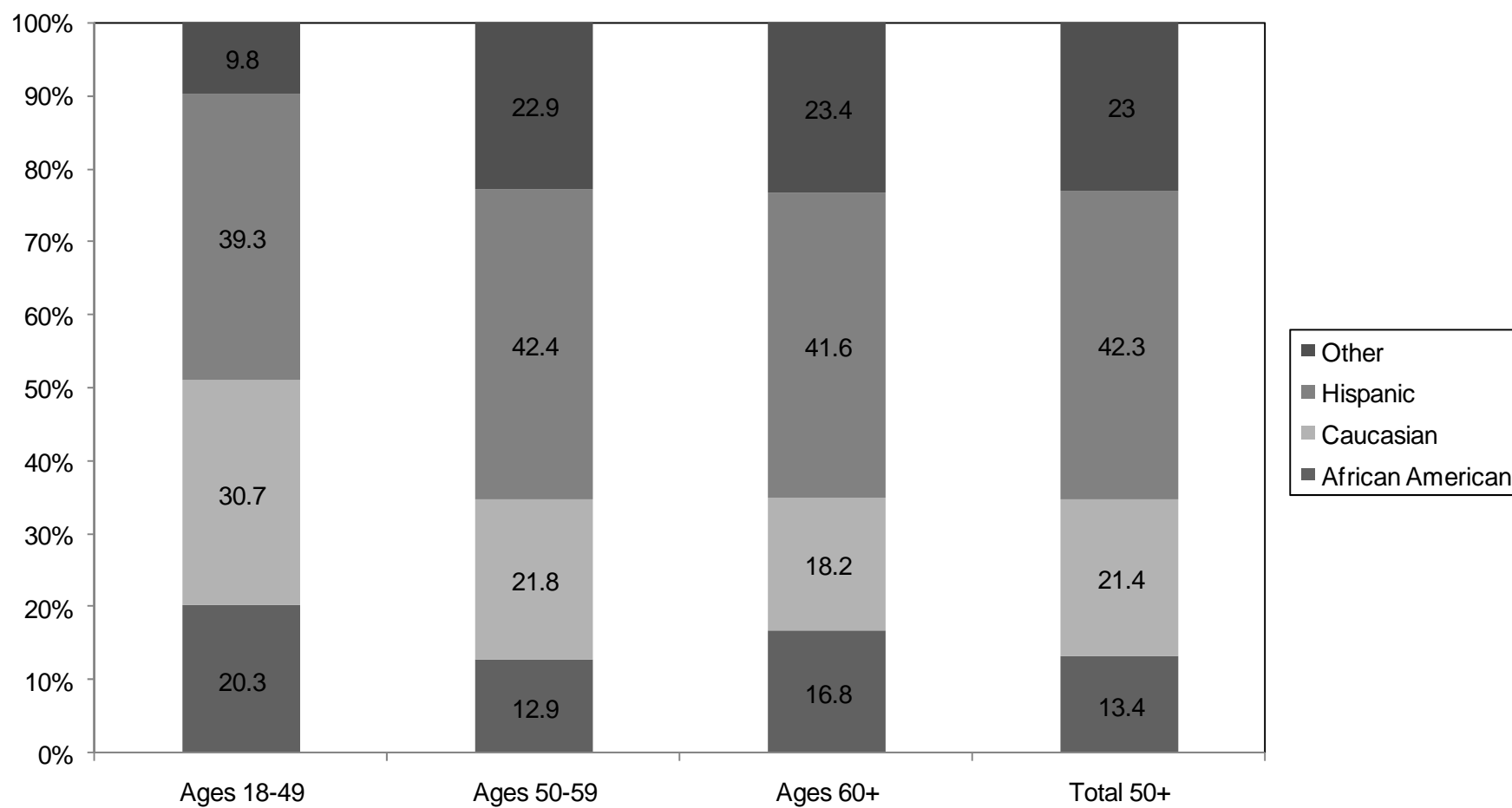


Figure 5.19
Family Size of AFDC Caregiver Households: 1996

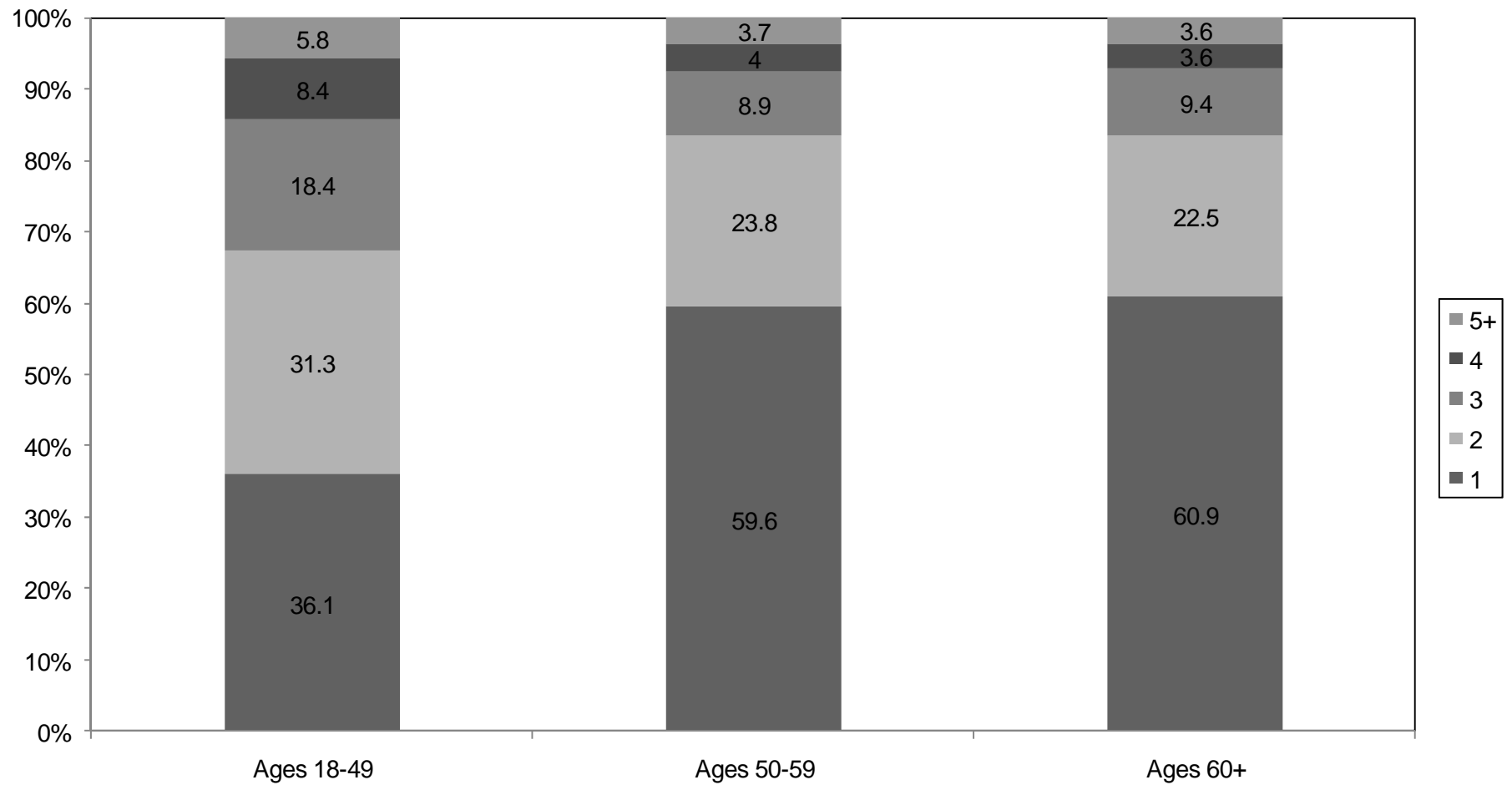


Figure 5.20
Cumulative Time on Aid: 1988-1989 AFDC Caregivers Reaching Time Limits

