CL Citizens League Report

Does the System Maltreat Children?

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CITIZENS LEAGUE REPORT

DOES THE SYSTEM MALTREAT CHILDREN?

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EXECUTIVE SUMMARY

Thousands of Minnesota children are maltreated every year.¹ In 1986, the last year for which statewide statistics are available, county child protection agencies investigated over 16,000 reports of child maltreatment involving over 23,000 children. Of these, over 6,000 reports involving 8,360 children were substantiated.



Maltreated children enter a large and complex public system where they may encounter law enforcement and child protection agencies, be placed in foster care, referred to juvenile court, and, in a few cases, adopted. In this study, a Citizens League committee was directed to examine the adoption and foster care systems in order to:

recommend state intervention strategies aimed at increasing the likelihood that every child will have an opportunity to live in a safe, permanent home environment without abuse, neglect, or placement in foster care for long periods of time.

Early in our study it became apparent that viewing the adoption and foster care systems in isolation would not be useful. Adoption and foster care are tools used by the public child protection system to respond to cases of child maltreatment, which, as shown in the figure below, endanger the lives of children.

It also was obvious that child maltreatment is a problem that government alone cannot solve: the welfare of children is everyone's business. The problem of child maltreatment and its possible solutions illustrate clearly the theme of a 1989 Citizens League report: interdependent people participating together in a "community" can be a powerful resource for solving problems.²

We concluded that the child protection system largely exists to serve adults, and that its stated goal of serving the "best interests of the child" is observed frequently in the breach. We recommend four approaches that we've found to be most promising:



² Citizens League, Community: A Resource for the '90s, 1989.

¹ Minnesota criminal statutes define four types of child maltreatment: physical abuse, sexual abuse, emotional maltreatment, and neglect.

- preventing child maltreatment;
- improving the goals, effectiveness, and efficiency of the child protection system and the courts;
- increasing the supply and quality of foster care; and
- making more effective use of adoption.

PREVENTING CHILD MALTREATMENT

Researchers have found that parents who rear productive children generally have:

- realistic expectations about parenting;
- a social support system;
- the ability to read and respond to the signals children send; and
- resolved issues about maltreatment experienced by the parent, if maltreatment occurred.³

Conversely, researchers have identified characteristics of families of children likely to suffer maltreatment. Author Lisbeth Schorr, a nationally recognized expert on the topic, writes:

Research has documented what common sense has taught: Economic stress, lack of social support, and other protective factors, a fragile, impaired, or immature parent, and sometimes a difficult infant can combine, in the absence of outside help, to create an environment so bad that it prejudices the normal development of the child.

Healthy growth is threatened when the baby is in the care of someone who is incapable of responding because of alcoholism, drug addiction, or mental illness, because her own life experience has left her defeated or otherwise impaired. The chances of harm increase when the impaired parent is responsible for a baby who is -- for any number of reasons -particularly difficult to care for.⁴ All agree that preventing child maltreatment is preferable to intervening after it has occurred. How can child maltreatment be prevented? We focused on three approaches:

- preventing teenage, unintended pregnancies;
- intervention, parenting education, support networks; and
- more involvement by individuals.

Preventing teenage, unintended pregnancies: Experiences with high school clinics in several cities have shown that they are effective in reducing the rates of pregnancy and childbirth. In addition to birth control counseling, these clinics provide a broad range of services to high school children, including prenatal care for pregnant teens, physicals for athletes, and immunizations.

Intervention, parenting education, support networks: Families and neighbors aren't always around to lend support to young parents. Programs in several cities provide regular visits to pregnant women and new mothers to give them social support and encourage their use of prenatal care and other community services.

Support networks link new parents with a paraprofessional or volunteer. Parenting education programs provide new parents with nurturing skills, more realistic expectations about parenting, and access to supportive persons. All children should learn about child development and parenting during their public school years.

More involvement by individuals: Years ago, individuals or the community cared for children in need. Calling on government was rare. A social worker at St. Joseph's Home for Children put it this way:

There was a time when, if Miss Jones had hard times, say she had trouble with liquor, the water was shut off, she had no food, well, Miss Jones had pride, the community had pride. Mrs. Smith would come over and take care of the kids and try to help. Now if your neighbor has a problem, you

³ Remarks to the committee by Marty Erickson, Ph.D., University of Minnesota, May 9, 1989.

⁴ Lisbeth Schorr, Within our Reach, 1988.

FAMILY SUPPORT: WHAT WORKS

Successful family support programs are widely diverse in approach, based on particular community needs, but share a belief in prevention and empowerment of families by promoting their strengths. Lisbeth Schorr has identified certain practices that are common to these programs:

- they invest substantial resources in outreach;
- they offer a range of learning opportunities in an accepting, culturally sensitive atmosphere;
- they are geared to promoting strengths and capabilities, personal growth, and empowerment in an individualized fashion;
- they remain available to families over an extended period of time;
- they take a comprehensive view of families and offer a broad spectrum of services, crossing traditional professional and bureaucratic boundaries;
- they see the child in the context of the family and the family in the context of the community;
- they are flexible in meeting individual family needs; and
- their services are coherent and easy to use.⁶

don't want to get involved, so you call the police.⁵

RECOMMENDATIONS

As we have shown above, some strategies have been demonstrated to be effective in helping to raise healthy children. We recommend that public and private organizations and agencies in Minnesota build on these successes and expand efforts to prevent child maltreatment by:

- reducing the incidence of teenage and unintended pregnancies;
- making adoption a more attractive alternative by providing information about it;
- providing child development and parenting education to all schoolchildren; and
- providing a variety of support alternatives for mothers and children at risk of experiencing child maltreatment.

Strategies for improving the adoption option are discussed in more detail below.

Implementing prevention programs will cost money, though we cannot say how much. For example, we don't know the price of teaching school children about child development and parenting. However, many programs serving children have demonstrated their cost-effectiveness here or elsewhere; their initial cost can be recovered from future savings. In other cases, it may be possible to reallocate funds spent in other parts of the child protection system.

We further recommend:

Individuals should become more involved in the lives of troubled children and their families by providing direct assistance or volunteering through private organizations.

IMPROVING THE CHILD PROTECTION SYSTEM AND THE COURTS

The public child protection system and the courts are charged with the protection of children who are maltreated, yet they frequently fall short. We found room for improvement in several different parts of the system.

Contradictory system goals: Every child should have the right to live in a safe, permanent, and nurturing home. In cases where a conflict exists between the best interests of the child and the rights or interests of the parents, the child's interests must be paramount.

⁵ Remarks by Avis Daniels in Bonnie Blodgett, "The Forgotten Children," *Twin Cities*, December 1988.

⁶ Lisbeth Schorr, *The Family Resource Coalition Report*, Vol. 8:1, 1989.

The child protection system attempts to achieve two sometimes contradictory goals: *family preservation* and serving the *best interests of the child*. As a result, the system is not clear about its goals and responsibilities toward children and families in the system.

Prior to determining whether preservation of the family is in the best interests of a child, child protection workers need a useful way to evaluate whether a given family is a healthy, nurturing setting for that child.

When family preservation is determined to be in the best interests of the child, child protection agencies and courts will need guidance in determining when and at what cost reasonable efforts occurred. Very young children cannot afford to wait because developmental periods are short. If healthy bonding does not occur early, it will be much more difficult in the future.

Delays in court: Child protection cases often take too long in the courts. They are resolved slowly for several reasons. First, when a case enters the court system, several new people become involved, including a *guardian ad litem* (a representative appointed by the court for the child), county attorney, and an attorney for the parents. Guardians ad litem are not always available; until one is, the child and the case wait.

Second, child protection cases are not a priority of the court system. Juvenile court is referred to disparagingly as "kiddy court." Most county attorney and public defender offices do not have lawyers who specialize in child protection cases. Similarly, few judges specialize in juvenile cases. Third, continuances are frequently granted in child protection cases.

Finally, termination of parental rights does not occur very often because it is a difficult legal procedure that can occur only after (1) the court finds that the county social service agency has made reasonable efforts to reunite the child with his family; and (2) the county attorney convinces the court that the child's parents will be unable to parent satisfactorily in the future. This standard of proof is very difficult to meet.

Confusion over when to prosecute abuse: Child physical abuse cases are rarely prosecuted. Not prosecuting child maltreaters who are the parents may be appropriate, since other methods (termination of parental rights, completion of treatment programs) are available to reduce future child maltreatment inflicted by parents. However, when maltreatment is inflicted by someone other than a parent, prosecution should be vigorous.

Lack of public information: We found little current information about the extent of maltreatment. Similarly, public agencies do not have useful summary data on the characteristics of maltreaters and their victims, or on the use and effectiveness of services by those agencies or private agencies under contract with the county. Additional information is needed about the activities of child protection agencies.

Because of statutory privacy protections, neighbors and relatives who report child abuse are not informed of the outcome of the investigation that follows. We question whether Minnesota's Data Practices Act serves the best interests of the child. Instead, the law may serve to frustrate persons who are concerned about the child because they are unable to determine whether any progress is being made.

Respect for ethnic diversity: As shown below, one-fourth of reportedly maltreated children in Minnesota are of minority ethnic or racial heritage. Yet, few child protection investigators are members of minority groups. Government and private agency employees need to be more aware and respectful of racial/ethnic differences between them and families entering the child protection system.



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Availability of home-based services: Home-based services to families of maltreated children have been shown to be effective in preventing out-of-home placements. However, they are not available in many parts of the state.

Two models of home-based services are provided: (1) a professional model, providing intensive services centering around family therapy to prevent placement and improve family functioning; and (2) a paraprofessional model, providing services focusing on home management, budgeting, and parenting skills.

RECOMMENDATIONS

□ The Legislature should direct county child protection agencies to fulfill the best interests of the child in all cases. Family preservation should be secondary to meeting the best interests of the child.

Furthermore, the Legislature or the Department of Human Services should develop guidelines to help county workers evaluate whether a child can be safely returned to his family. Guidelines should also be prepared to evaluate the amount of effort -- time or money -- that counties should expend in "reasonable efforts" to reunite families.

□ To increase the responsiveness of the courts in child maltreatment cases:

the Legislature should: change the rules for termination of parental rights by eliminating the requirement of proof of future inability to parent; encourage outstate counties to form district-wide juvenile courts consistently presided over by one judge; and disallow granting continuances in child protection cases if the continuance is not in the best interests of the child; and

county governments should: encourage specialization in child protection cases by county attorneys and public defenders; and increase efforts to recruit guardians ad litem in order to fill the shortage.

□ The Legislature should direct county attorneys to prosecute

vigorously child maltreaters who are not the child's legal parents.

- □ The Legislature should authorize the Minnesota Department of Human Services to collect new information about child maltreatment cases, and require the department to compile and publish useful summary information about child maltreatment within a reasonable time after it is collected.
- □ The Legislature should authorize and direct county child protection workers to discuss child protection cases with persons who report the suspected maltreatment if the reporter is willing to abide by the Data Practices Act.
- □ The Legislature should order an external review of the effectiveness of county child protection agencies and other organizations delivering services to families and children.
- □ The Legislature should require that home-based services be available to all county child protection agencies and should assist counties in financing those services.
- □ To increase awareness of and respect for racial/ethnic differences, county child protection agencies should increase training for child protection workers. Furthermore, they should directly hire or contract with private social service agencies serving minority communities to increase the number of minority employees.

In its 1990 session, the Minnesota Legislature enacted several measures that further these recommendations. For example, it inserted the standard "best interests of the child" in several sections of the child protection law. However, our reading of the law as now amended suggests that the best interests of the child are still presumed to be served by staying in the family home. The Legislature should reassess this presumption in 1991.

In 1990, the Legislature also limited the granting of continuances in child protection cases and directed a study of how data practices laws are applied to abuse cases. The Supreme Court was asked to study the issue of training for juvenile court judges, and the Attorney General and Department of Human Services were directed to study data practices issues in the child protection system.

INCREASING SUPPLY AND QUALITY OF FOSTER CARE

Foster care is a central part of the child protection system, yet we found many problems with its availability and quality.

Supply: Foster homes are in short supply in the Twin Cities area. According to one source:

More than 1,200 requests for foster care will be made this year in Hennepin County, which has 606 licensed foster homes. That compares with 860 requests in 1986, when demand began climbing. In Ramsey County, nearly 600 requests are expected this year, compared with 341 in 1986. The county has 311 foster families, two less than in 1986.⁷

The absence of a large pool of available foster parents makes it very difficult, if not impossible, for county child protection workers to meet the best interests of the child while working toward preservation of the family. No one is well served if a child is placed in a foster home where he feels uncomfortable, where long distances make visitation by parents difficult, where schooling is disrupted, and where the foster parents feel they are unable to meet the child's needs.

To retain good foster parents and recruit new ones, we concluded that concerns of limited support, a lack of public recognition, and inadequate reimbursement must be addressed.

Agency support: We examined two major types of foster care settings. In *countyadministered* foster homes, foster parents are recruited, trained, and serviced by the county. *Privately-administered "treatment" foster homes* are recruited, trained, and serviced by a private, nonprofit or for-profit organization. These foster homes are called "treatment" because they got their start by training foster parents in skills needed to deal with behaviorally needy children. County social workers servicing foster parents have very large caseloads so they

⁷ "Need for foster care outpacing the supply," *Star Tribune*, November 6, 1989.

are not always able to provide the support their foster parents need. Private agency social workers with much smaller caseloads provide a much higher level of service and support to foster families and children in foster care. Furthermore, additional training for foster parents is necessary to keep up with new ideas for caring for increasingly difficult children.

Reimbursement issues: Reimbursement paid to foster parents should be based on the types of children cared for and the services needed. Whether the home is serviced by the county or a private agency should not be a primary consideration.

Today, many of the children entering foster care require treatment, and the services provided by private foster parents and county foster parents are more similar than dissimilar. In addition, because of the shortage of foster homes, counties often place children who are not in need of "treatment" in private homes.

In either case, different rates are sometimes paid to county and private homes. This is unfair. Foster parents need to be paid rates reflecting the children's special needs. But private agencies should continue to receive fees for the training and support they provide to foster parents and children.

Creating new service options: It is very likely that foster care, as currently structured, does not meet the needs of some children coming into the system. As the children entering the system become more difficult to care for, because of drug addictions or other serious medical problems, most foster families will not be adequately prepared to meet their needs. At the same time, these children might not require the type of care currently offered at residential treatment centers.

The creation of new long-term settings for children may provide a partial solution for the needs of children who have experienced unsuccessful placements in family foster care, who enter foster care because of a failed adoption, who choose not to be adopted, or who need specialized care beyond what a foster family can provide. A new service option for those children would be a supervised grouphome setting that would be home-like, professionally staffed, and sensitive to the special needs of children from diverse cultural and racial groups. While some use the term "orphanage" to describe such a setting, what we are suggesting would be much different from the facilities that existed in Minnesota earlier in this century or those portrayed in novels by Dickens.

RECOMMENDATIONS

- □ To improve retention of good foster families, counties and private agencies should improve the job of foster parent by expanding training opportunities, improving agency support, and publicly recognizing the work of foster parents. They should also increase their foster parent recruitment efforts.
- □ The Legislature should undertake a study of reimbursement rates paid to foster parents. If appropriate, it should increase reimbursement to more reasonable levels and ensure that foster parents are compensated equally on the basis of the child's needs, regardless of whether the administering agency is public or private.
- □ The Legislature should explore the feasibility of alternatives to foster care, including the creation of specialized, supervised group home settings.

MAKING MORE EFFECTIVE USE OF ADOPTION

We think that adoption can more effectively meet two needs: finding homes for children with special needs and preventing maltreatment.

Adoption Options: Information about adoption should be easily accessible and affordable. The Wisconsin Adoption Information Center (described below) is an example of a state project to provide information about adoption.

A variety of adoption processes and knowledge about them is needed to increase the likelihood that birthparents will consider options and place children they are unable to parent for adoption. Minnesota adoption agencies have been increasing the flexibility of adoption processes available to birthparents for many years. But this flexibility is not well known. Among the options that have emerged are:

- independent adoptions, arranged outside of the traditional agencies; and
- open adoption, in which identifying information is exchanged between the birth parents and adoptive parents. This sharing of information is in contrast with the strict confidentiality that has characterized adoption in this country for decades.

Private agencies and the Department of Human Services are concerned about the use of independent adoptions because they fear "babyselling." These officials also point out that an independent adoption provides no assurance that children are placed with families that can meet their needs and provides no post-adoption services for adoptive families.

The controversy over independent adoptions may be working against children by not allow-

THE WISCONSIN ADOPTION INFORMATION CENTER

The Wisconsin Legislature established the Adoption Information Center (AIC) to provide free, confidential information about adoption. The center was established in an attempt to stem the tide of children being bom to and reared by teenage mothers. It has two major responsibilities: (1) to promote adoption to pregnant adolescents, and (2) to train professionals working with pregnant adolescents to understand adoption procedures.

One of its first projects was the production of a 15-minute videotape about adoption, from the perspective of parents who had placed their children. The video was produced primarily for use in Wisconsin public schools. The AIC is also charged with undertaking a continual public information campaign to increase awareness and improve the public's image of adoption.

Another major service offered by AIC is a 24hour toll-free phone line persons can call to receive information about adoption. Since opening in July 1986, the center has experienced a steady increase in the number of inquiries it receives from pregnant individuals or others calling on behalf of pregnant individuals. The total number of children placed for adoption in the state has not yet increased. ing birthparents to consider this adoption alternative, or by requiring children to remain in foster care while the court system struggles to find a solution.

After adoptions occur, information about birthparents and families is difficult to acquire and not regularly updated. A small percentage of adoptees, birthparents, and adoptive families seek information about another party to the adoption years after the adoption occurs. Usually, they learn that Minnesota adoption agencies are not required to update information kept in files. So when information is sought and received, it is often outdated.

Minority Children: Timing plays a very important part in developing healthy attachments because a child's developmental stages are short. Unless every effort is made to provide permanent homes for children as quickly as possible, the child is likely to live with different caretakers, reducing the opportunity to form healthy attachments. As shown below, half of all children who are wards of the state wait more than one year for adoptive placement.

Minnesota law requires that a family of same race/ethnicity be sought first for children of minority race/ethnicity. Minority children often remain in the foster care system for long periods of time because existing agencies have difficulty finding adoptive homes for them.



Many potential adoptive parents who are of minority race/ethnicity are uncomfortable working with existing agencies and others cannot afford the fees charged. And cultural barriers are difficult to overcome if the agency is not staffed by similar race/ethnic professionals as those who seek adoption.

The goal of placing a child with a same race/ethnic family is important, but needs to be balanced against the goal of finding a permanent family for the child quickly. So while experts study and debate the effect of transracial adoptions, the developmental needs of children can be in jeopardy. The child's needs for a family must be paramount.

Creation of a minority-staffed adoption agency or adoption program in an existing agency would increase the opportunity to find families for minority children more quickly. It should also increase the opportunity to find families of similar race/ethnicity.

RECOMMENDATIONS

- Adoption agencies should make adoption processes as flexible and supportive as possible in order to facilitate the birthparents' decision to place a child.
- Independent adoption should be one of several types of adoptions available to birthparents.

However, the Legislature should require home studies for families seeking to adopt a child through a private attorney. Private agencies should be required to undertake the home studies as well as allow all families who adopt a child access to the post-adoption services their agency provides.

- □ The Legislature should authorize a state agency to begin the collection and maintenance of adoption records for future use by adoptees, adoptive parents, and birthparents.
- □ The Legislature should provide start-up capital and ongoing support for the creation of minority staffed adoption agencies/programs to serve minority children. At the same time, however, it should limit the search time for a same race/ ethnic home for a minority child.

EXECUTIVE SUMMARY

INTRODUCTION

Thousands of Minnesota children are maltreated every year. In 1986, the last year for which statewide statistics are available, county child protection agencies investigated over 16,000 reports of child maltreatment involving over 23,000 children. Of these, over 6,000 reports involving 8,360 children were substantiated. County child protection workers and recent news accounts agree that there have been large increases in the number of children experiencing maltreatment and entering county child protection systems since 1986.

As news coverage of the plight of some maltreated children has increased, public concern and frustration have grown. In this study, a Citizens League committee examined the adoption and foster care systems in order to:

recommend state intervention strategies aimed at increasing the likelihood that every child will have an opportunity to live in a safe, permanent home environment without abuse, neglect, or placement in foster care for long periods of time.

This study follows the themes of earlier Citizens League reports on families and children. For example, a 1988 Citizens League report, *Building Tomorrow by Helping Today's Kids*, recommended ways in which programs serving young children and their families could be structured and coordinated more effectively.

Early in our study it became apparent that viewing the adoption and foster care systems in isolation would not be useful. Adoption and foster care are tools used to respond to cases of child maltreatment. The child protection system, juvenile courts, and state and federal laws are very important components of the systems that deal with child maltreatment. Therefore, we broadened our study to consider larger issues of child maltreatment.

During this study, we heard from representatives of private and public agencies that are responsible for helping maltreated children. We also heard from families who have involved themselves by becoming adoptive or foster parents. In addition, we reviewed available data and reports on the extent of child maltreatment in Minnesota, and what this state and others are doing to address it and its causes.

Responsibility for policies and programs addressing child maltreatment is shared by federal, state, and county governments. Our study and recommendations concentrate on what can be done in Minnesota by governments, private organizations, and individuals.

It became obvious to our committee that child maltreatment is an issue that government alone cannot solve: the welfare of children is everyone's business. The problem of child maltreatment and its possible solutions illustrate clearly the theme of a recent Citizens League report: interdependent people participating together in a "community" can be a powerful resource for solving problems.¹

A wide variety of opportunities exist for individual members of the community to get involved. For example, individuals can report suspected maltreatment, volunteer in prevention and treatment programs, become guardians ad litem, become foster parents, consider adopting a special needs child, or advocate for the interests of children. Parents and families have the most important and toughest responsibilities--providing children with the healthy attachment, nurturing, self-esteem, and values they need to become productive members of our society.

¹ Citizens League, Community: A Resource for the '90s, 1989.

Chapter 1 of this report provides background and statistical information about child maltreatment, its effects, costs, victims, location of occurrence, and perpetrators. Chapter 2 walks the reader through the public child maltreatment system as a maltreated child might experience it.

We concluded that this system largely exists to serve adults, and that its stated goal of serving the "best interests of the child" is observed frequently in the breach. We tried to identify specific remedies to that problem, and the remaining four chapters of this report discuss the approaches that we've found to be most important:

- preventing child maltreatment;
- improving the goals, effectiveness, and efficiency of the child protection system and the courts;
- increasing the supply and quality of foster care; and
- making more effective use of adoption.

Our committee conducted its work at the same time as a legislative commission studied child maltreatment. We reached many of the same conclusions, and many of our recommendations are very similar. While the Legislature has begun to act on that commission's recommendations, it is clear to us that reform of Minnesota's programs for maltreated children is a process that will take several legislative sessions. In this report, we will note which recommendations were acted on in 1990.

Earlier this year we released a report summary of this study. This edition of the full report includes some editorial changes in the summary section intended to clarify the League's position on ways of expanding service options in the foster care system.

2

CHAPTER 1

CHILD MALTREATMENT: BACKGROUND FACTS

Maltreatment of children can be described on several different levels. It can be viewed as a matter of public law and enforcement, and it can also be viewed as a matter of human values. In this chapter, we review some of the basic issues in child maltreatment in Minnesota.

DEFINING MALTREATMENT AND ITS EFFECTS

Minnesota law defines four types of child maltreatment: physical abuse, sexual abuse, emotional maltreatment, and neglect. Minnesota's criminal code describes the four categories as:

- *Physical abuse:* any physical injury inflicted by a person responsible for the child's care on a child other than by accidental means, or any physical injury that cannot reasonably be explained by the child's history of injuries.¹
- Sexual abuse: the subjection by a person responsible for the child's care, or by a person in a position of authority...to any act which constitutes a violation of statutes defining criminal sexual conduct, prostitution, or using minors in sexual performance.²
- *Emotional maltreatment:* the consistent, deliberate infliction of mental harm on a child by a person responsible for the child's care that has an observable, sustained, and adverse effect on the child. Reasonable training, discipline, or the reasonable exercise of authority is not emotional maltreatment.³
- *Neglect:* failure by a person responsible for a child's care to supply a child with necessary food, clothing, shelter, or medical care when reasonably able to do so or failure to protect a child from conditions or actions which imminently and seriously endanger the child's physical or mental health when reasonably able to do so.⁴

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¹ Minn. Stat. §626.556, subd. 2

² Minn. Stat. §§626.556, subd. 2; 609.342, 609.343, 609.344, 609.345, 609.321, 609.324, 617.326

³ Minn. Stat. §260.015

⁴ *Minn. Stat.* §626.556, subd. 2 and 10e. Prior to 1989, neglect did not include the use of spiritual means or prayer for treatment or care of disease or remedial care of the child. The 1989 Legislature amended the definition to clarify that there is a duty to report failure to provide medical care in spiritual treatment cases if the lack of medical care may cause serious and imminent danger to the child's health.

EFFECTS OF CHILD MALTREATMENT

The effects of child maltreatment are severe and long-lasting. For example, researchers at the Wilder Foundation reviewed the research literature on child maltreatment and concluded:

Child maltreatment is only partially reflected in physically observable injuries, malnutrition, and deaths. Clinical experience and available research suggest that child maltreatment may also result in immediate and long-term impairment of social competence, including many problems in adolescence and adulthood; e.g., delinquency, running away from home, domestic violence, psychiatric disorders, self-destructive behavior, sexual dysfunction, and school failure.⁵

Bonding is a crucial element of successful child development. Psychologist Ken Magdid describes the plight of children who are "unattached." Unattached children did not bond or develop a healthy relationship with an adult early in life. As a result, they do not develop the "trust they need to feel secure in the world, but rather develop an angry response to the world. This angry response is often exhibited in violent, dangerous, and illegal behavior."⁷

Author Lisbeth Schorr warns:

Children whose memories are storehouses of deprivations, neglect, or violence are robbed of the ability to cope with the present or to envision a future bright enough to justify postponing immediate reward. Children whose families were never able to convey to them a sense of being valued with a feeling of coherence are in a poor position to cope with the world of school or work. They are likely to be in deep trouble by the time they are adolescents.⁸

A 1989 survey of Minnesota students found:

Family substance abuse, physical abuse, and sexual abuse all greatly increase the likelihood of poor school performance, antisocial behavior, and alcohol and drug problems among adolescents.⁹

FROM THE BROKEN CORD

Author and anthropologist, Michael Dorris, described the lifelong effects of being born with fetal alcohol syndrome:

My son will forever travel through a moonless night with only the roar of wind for company. Don't talk to him of mountains, of tropical beaches. Don't ask him to swoon at sunrises or marvel at the filter of light through leaves. He's never had time for such things, and he does not believe in them. He may pass by them close enough to touch on either side, but his hands are stretched forward, grasping for balance instead of pleasure.

He doesn't wonder where he came from, where he's going. He doesn't ask who he is, or why. Questions are a luxury, the province of those at a distance from the periodic shock of rain. Gravity presses Adam so hard against reality that he doesn't feel the points at which he touches it. A drowning man is not separated from the lust for air by a bridge of thought--he is one with it--and my son, conceived and grown in an ethanol bath, lives each day in the act of drowning. For him there is no shore."⁶

⁵ Paul Higgins, *The Prevention of Child Abuse and Neglect: A Literature Review*, Amherst H. Wilder Foundation, May 1988.

⁶ Michael Dorris, *The Broken Cord*, 1989.

⁷ Ken Magdid, High Risk: Children Without a Conscience, 1988.

⁸ Lisbeth Schorr, Within Our Reach: Breaking the Cycle of Disadvantage, 1988.

⁹ Minnesota Department of Education, "Minnesota Student Survey Report, 1989." Similarly, a 1989 educator survey conducted for the Midwestern Legislative Conference of the Council of State Governments found that over half of the educators chose parental neglect and alcohol abuse as problems facing children today. And unstable family life and a lack of parental involvement were two of three factors cited as the largest barriers to student learning.

Does the System Maltreat Children?

Researchers have found a dysfunctional early family life to be a major contributor to later involvement in crime. An analysis of the personal, family, and criminal histories of 500 felons in Hennepin County by the University of Minnesota's Center for Urban and Regional Affairs found a unique characteristic of felons to be a "history of unstable family composition, especially a changing mix of people acting as parents."¹⁰

INCIDENCE AND COSTS OF CHILD MALTREATMENT

Cases of child maltreatment come to the attention of county child protection agencies through reports made by professionals required by law to do so (mandated reporters) or by persons who voluntarily report.¹¹ The proportion of reports filed by mandated reporters has grown slightly since 1982, accounting for half of the reports in 1986.

NUMBER OF CHILD MALTREATMENT REPORTS

Reports of child maltreatment increased from 6,200 in 1980 to 16,265 in 1986. After investigation, these reports were classified into three categories:

- substantiated: cases where evidence shows that maltreatment occurred;
- *unable to substantiate:* cases where county investigators could not determine if maltreatment occurred; and
- *unsubstantiated*: cases where maltreatment did not occur.¹²

As shown in Figure 1.1, substantiated reports increased from 4,134 in 1982 to 6,032 in 1986. While information about child maltreatment reports is not yet available for years after 1986, practitioners tell us that the number of reports and substantiated reports has increased dramatically. Much of the increase is attributed to increasing use of drugs and alcohol.¹³

SEVERITY

In cases where child maltreatment is substantiated, child protection workers make a determination about the severity of the injuries. They describe the maltreatment on a continuum from fatal injuries to those children who are neglected and therefore exposed to threat of danger. Figure 1.2 provides the definitions used by the Department of Human Services for classifying the severity of the maltreatment.

¹⁰ University of Minnesota Center for Urban and Regional Affairs, "Crime and New Residents," 1989.

¹¹ Persons required to report are: health professionals, social service professionals, psychological or psychiatric professionals, child care providers, education professionals, law enforcement officials, and members of the clergy (unless the maltreatment was learned through a confession.) *Minn. Stat.* §626.556, subd. 3.

¹² Beginning on August 1, 1988, classification of child maltreatment reports changed. Child protection workers are now required to make two determinations: (1) Did maltreatment occur? and (2) Are child protection services needed? The new requirements will result in four classifications: (1) maltreatment occurred and protective services are needed; (2) maltreatment did not occur, but circumstances indicate the child is in need of protective services; (3) maltreatment occurred, but the child is not in need of protective services. *Minn Stat.* §626.556.

¹³ Several resource speakers appearing before our committee made this observation.



FIGURE 1.2

DEFINITIONS OF CHILD MALTREATMENT SEVERITY

- *Fatal:* The child has died including allegations where the death of a child is subsequently ruled due to natural or accidental causes. A fatality can be the result of neglect, abuse, or both.
- Life Threatening or Serious Injury: Injury that may not have lasting serious consequences, but that would be life threatening at the time of or immediately following injury or injuries, including limb or rib fractures that may result in long-term deformity or disability.
- Moderate or Non-Serious Injury: Injuries which may or may not require medical attention but that would not have the apparent serious affects of cases (above).
- *Possible Injury:* Pain has been inflicted or there are symptoms of an injury, but the injury itself is not yet identified.
- Exposed to Threatening or Dangerous Conditions: Parents or caretakers fail to protect a child from dangerous conditions either through neglect or willfully, whether or not harm is incurred and whether or not such exposure induces stress.

Apparent Health Impairment (Physical, Mental, or Emotional): The child appears to have a physical, mental, or emotional impairment which might reasonably be attributed to the abuse or neglect in the judgement of the child protection worker.

Source: Minnesota Department of Human Services, Social Services Manual

Does the System Maltreat Children?



Figure 1.3 shows the severity of injury (where severity was reported) in substantiated cases in 1987.

CHARACTERISTICS OF MALTREATED CHILDREN

Slightly more than half of the maltreated children in the state are female; the proportion has declined from 53.7 percent in 1982 to 51.8 percent in 1986. Figure 1.4 shows that, in 1986, 43.5 percent were five years old or younger. The proportion of older children (12 and over) increased from 23.5 percent in 1982 to 26.5 percent in 1986.

And, as shown in Figure 1.5, the number and percentage of reportedly maltreated children from minority racial or ethnic heritages increased from 1982 to 1986. In 1982, 16.2 percent of children who were reportedly maltreated were from racial or ethnic minorities. The proportion increased to 23 percent in 1986.¹⁴ In Chapter 4, we discuss our concern with a system that employs few members of minority groups, even as the number of minority children entering the system increases.

14 African-American and American Indian children account for most of the minority children reportedly maltreated. About six percent of children under 18 in Minnesota are from racial and ethnic minorities.



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WHERE DOES MALTREATMENT OCCUR?

The vast majority of children (an average of 80 percent of the cases reported between 1982 and 1986) are maltreated in places familiar to them--their residence or the residence of a relative. As shown in Figure 1.6, maltreatment in the home of a relative is a distant second. Geographically, the occurrence of child maltreatment in Minnesota is proportionate to the population at large--that is, just over half of the reports occur in the seven-county Twin Cities metropolitan area. However, this proportion grew from 52.7 percent in 1982 to 57.5 percent in 1986.



PERPETRATORS OF CHILD MALTREATMENT

Most children are maltreated by persons they know. The younger the child, the more likely the perpetrator is to be female and the older the child, the more likely the perpetrator is to be male. While we have cited research in this chapter and in Chapter 3 concluding that teenage pregnancy is closely related to child maltreatment, that does not necessarily mean that teen parents are frequently reported as perpetrators of maltreatment. Figure 1.7 shows that females between the ages of 20 and 39 account for more than half of the alleged perpetrators. Females under the age of 20 account for less than five percent of cases.



CONSEQUENCES FOR PERPETRATORS OF CHILD MALTREATMENT

Persons who maltreat children commit a crime. A person convicted of malicious punishment of a child or neglect of a child may be sentenced to imprisonment for up to one year, fined up to 3,000, or both.¹⁵ If the malicious punishment results in substantial bodily harm, the perpetrator may be sentenced to imprisonment for not more than three years, fined up to 5,000, or both.¹⁶ Persons convicted of criminal sexual conduct (sexual abuse of a child) may be sentenced to prison for 5 - 20 years, fined 10,000 - 335,000, or both.¹⁷ Persons convicted of sexual abuse may also have their prison sentence and/or fine stayed by the court if it finds that: (1) a stay is in the best interests of the

¹⁵ Minn. Stat. §§609.223, 609.377 and 609.378.

¹⁶ Minn. Stat. §609.377.

¹⁷ Minn. Stat. §§609.342, 609.343, 609.344, 609.345.

complainant or the family unit; or (2) a professional assessment indicates that the offender has been accepted by and can respond to a treatment program.¹⁸

SERVICES FOR MALTREATMENT VICTIMS

Many public and private systems deal with and serve children who are maltreated, whether directly, or indirectly. Providers of direct services include health care professionals, county child protection agencies, foster care providers, nonprofit social service providers, law enforcement officials, and the courts. Examples of indirect services include education, child care, food shelves, homeless shelters, and public income assistance.

Hundreds of millions of public and private dollars are spent annually in these systems. Counties estimated expenditures of \$104 million on child and family services in 1988 through community social service programs.¹⁹ Child and family services include assessments of child protection complaints, case management, counseling, adoption, all types of foster care, and correctional facilities placements. (Additional data on county expenditures are included in Appendix A.) The federal government spent an additional \$9 million for these direct services in Minnesota that same year.²⁰

In addition, millions of dollars are spent by public systems providing indirect services, such as city and county law enforcement, legal and court systems, and health care services. Further, private social service agencies spend millions of charitable dollars providing services to children and families.

The cost of child maltreatment also has a long-term impact on the economy. At the national level, the Committee for Economic Development found that each year's class of dropouts will cost the nation more than \$240 billion in lost earnings and foregone taxes over their lifetimes, not including the billions more for crime control, welfare, health care, and other social services these children and their children will need.²¹ Many maltreated children will never graduate from high school.

¹⁸ Ibid.

¹⁹ Minnesota Department of Human Services, "Update on County Planned CSSA Activities for 1988." These programs are funded through federal and state block grants and county general funds.

²⁰ Ibid.

²¹ Committee for Economic Development, "Children in Need," September 1987.

CHAPTER 2

CARING FOR MALTREATED CHILDREN

Maltreated children enter a large and complex government system that can include law enforcement, child protection, foster care, juvenile court, and adoption. This chapter describes the public system, as a child might experience it. The process is summarized as a graphic in Figure 2.1. As you read this chapter, keep in mind that a child might leave the system at any point within it for many different reasons. And it is important to know that the number of children moving through the system decreases with every step.

STEP 1 INVESTIGATING REPORTS OF ALLEGED CHILD MALTREATMENT

STEP 2 ENSURING THE CHILD'S IMMEDIATE SAFETY

Steps one and two can occur simultaneously or in reverse order; that is, a child can be removed from the family before an investigation of alleged child maltreatment occurs. When a child enters the child protection system, a county child protection worker conducts an investigation to determine the validity of a report and whether the child is in need of protective services. If the report is substantiated and the child's health or safety is in danger, the child may be removed from the family and placed in substitute care (e.g., a type of foster care). In less serious cases, where the child's health or safety does not appear to be in imminent danger, the child may remain with the family while services are provided to alleviate the situations that led to the maltreatment. Whether because of an emergency situation or a child protection investigation, only police have the authority to remove children from a home.

Initial removal of a child from the home and family may occur voluntarily or through a temporary place hold ordered by a juvenile court. In most such cases, children are removed from their families and placed in substitute care by court-orders: 65.3 percent of all children in substitute care at the end of 1986 were removed by court order.¹ Note that information on child protection cases may not follow families when they move across county lines. As a result, child protection workers may not be able to receive accurate information about maltreated children whose families move frequently.²

Sometimes children are removed from their home without a maltreatment report, most often when police are investigating the family for another crime; crack raids and domestic violence are examples. In these cases, police have the authority to order temporary removal of children for up to 72 hours. Child protection workers are required to assess the child's situation during that time. If maltreatment is suspected or the safety of the child is in question, a court order or voluntary agreement is necessary to keep the child in substitute care and from his family for any period of time after the 72 hours.

¹ Minnesota Department of Human Services, "Minnesota 1986 Substitute and Adoptive Care Annual State Report," Social Services Division, October 7, 1988.

² In 1990, the Minnesota Legislature directed the Commissioner of Public Safety to study the feasibility of establishing a statewide, computerized system for information on abuse and neglect cases.

FIGURE 2.1

A CHILD'S JOURNEY THROUGH THE CHILD PROTECTION SYSTEM

The following chart illustrates the steps a child entering the child protection system might experience. Under each step professionals and other persons possibly involved in the case are listed.

The number of children who pass through the system becomes smaller with each step.



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Children removed from their families for short periods of time are placed in temporary foster care or temporary shelters. Children removed for longer periods of time are placed in one of several other types of foster care. Four types of foster care settings are listed in Figure 2.2. They include: homes of other family members, state-licensed, county-administered foster homes, state licensed, privately-administered "treatment" family foster homes, and residential treatment centers.

FIGURE 2.2			
TYPES OF FOSTER CARE AND WHEN THEY ARE USED			
1. Home of other family members	In such a case, the child protection worker would have to be satisfied that the child will be properly cared for. The relatives agreeing to take the child in might also have to agree to adhere to any restrictions on visitation placed on the parent(s).		
2. State-licensed, county- administered foster home	Homes with foster parents that are recruited, trained, and serviced by the county. Foster parents are reimbursed for the expenses incurred by the children in their care according to a state-set rate. If the child's needs require additional care due to behavior problems, physical impairment, or developmental disabilities, a "difficulty of care" rate will also be paid to the foster parent.		
	Types of county-administered foster homes:		
Emergency shelter homeInterim home	A home designated primarily for time-limited emergency placements, usually lasting no longer than 30 days for any child; A home providing care for children expected to return to their family within one year or be placed for adoption within two		
• Permanent home	years; A home where care is provided to children under a written agreement until the child reaches the age of majority;		
Restricted homeSpecial services homeGroup family foster home	A home licensed to care only for a specific child; A home with foster parents who are able to provide extraordinary care or services by virtue of training, experience or special skills A home providing care for no more than 10 children (including any biological children of the foster parents).		
3. State-licensed, privately- administered "treatment" family foster home	Homes that are recruited, trained, and serviced by a private, nonprofit or for-profit organization. These foster homes are called "treatment" because they got their start by training foster parents in skills needed to deal with behaviorally needy children. Like county foster homes, privately-licensed homes are reimbursed for the expenses incurred by the children. The reimbursement rates are negotiated and are at times higher than county-administered foster homes. The agency retains part of the negotiated fee for the services it provides to homes. Caseloads for private agency social workers typically are much smaller than county social workers. As a result, the private agency social worker is able to provide more support to the foster parents and services to the child in placement along with the county child protection worker.		
4. Residential treatment center	Residential treatment centers have professional staff and provide intensive therapy and/or medical services for children. These centers contract with the county to provide services to children.		

Examples of agencies recruiting and servicing private foster homes in the Twin Cities area include the Institute on Black Chemical Abuse and the Professional Association of Treatment Homes. The private associations typically offer a lower social worker to foster home ratio than county agencies.

County child protection workers attempt to place children in same race/ethnic foster homes. However, such a placement does not occur for many children. State records indicate that "the possibility that a minority child resided with foster parents...who did *not* share his ethnic minority heritage was highest for Hispanic children and lowest for Black children" (at the end of 1986) as Figure 2.3 illustrates.



The child protection worker decides whether a child is placed in a public or private foster home, based on these factors:

- whether the foster home is of same race/ethnicity as the child;
- proximity of the foster home to the child's own home and school (if applicable);
- availability of public vs. private foster homes; and
- the child's need for any special services.

STEP 3 ENSURING THE LONG-TERM SAFETY OF MALTREATED CHILDREN

County child protection agencies attempt to ensure the long-term safety of maltreated children primarily by working with their parents to alleviate or solve the problems that led to the maltreatment. Usually, this assistance takes the form of providing services to parents such as counseling, parenting education, or treatment for drug or alcohol addiction.

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Does the System Maltreat Children?

Parents of children placed in substitute care develop a written case plan with the county child protection worker. The case plan specifies the duties of parents and services to be provided by the county. The case plan may be voluntary or court-ordered.

If development of a case plan is ordered by the court, the court will review and approve it.³ The court will also monitor the progress of the case plan. State law requires the court to review the plan within one year.⁴ If the case plan is court-ordered, adhering to it is required for parents to maintain parental rights.

For a child placed in substitute care as a result of voluntary agreement with his parents, the court may review the case plan if either the county or parent requests.⁵ Court-approved voluntary case plans must be reviewed within one or two years.

As with any legal proceeding, when the juvenile court becomes involved in a child protection case, all parties, including the child, are entitled to legal representation. But an additional representative is appointed for the maltreated child under federal and state law.⁶ This representative is known as a *guardian ad litem*. The guardian ad litem is not a legal representative of the child, but rather a representative of the best interests of the child.

The guardian ad litem will:

- undertake an independent investigation of the case;
- participate in every court hearing;
- make recommendations about the case disposition;
- appeal the case, if necessary;
- monitor the case for quick resolution and assurance that the case plan is followed; and
- monitor the case to ensure minimal delays.⁷

The court can appoint a guardian ad litem to a case when the case first enters the court system or at a later time in the court process. A guardian ad litem may represent a child through all phases of the case, until the child is returned to his parents, until the child's parent's parental rights are terminated, or until the child is adopted by a new family.⁸ A guardian ad litem may be a volunteer, contract employee, or attorney.

Because of federal law, county agencies are required to take steps to "preserve the family." (In Chapter 4, we discuss our concerns with the goal of family preservation.) The family preservation goal is the result of studies in the 1970s which found children "adrift" in foster care, without any plans for their future. To remedy this situation, the U.S. Congress passed Public Law 96-272 which tied federal funding for children in foster care to state adherence to the family preservation goal.

³ Minn. Stat. §260.191, subd. 1e.

⁴ Minn. Stat. §260.191, subd. 2.

⁵ Minn. Stat. §260.192(a).

⁶ The federal requirement to appoint a guardian ad litem is found in Public Law 93-247, part of the Child Abuse Prevention and Treatment Act. The state requirement for appointing a guardian at litem is found in *Minn. Stat.* §260.155, subd. 4(a). *Minn Stat.*§260.155, subd. 4(b), allows the court to waive the appointment of a guardian ad litem whenever counsel has been appointed to the child or when the court is satisfied that the interests of the minor are protected.

⁷ Remarks to the committee by Suzanne Smith, director, Hennepin County Guardian Ad Litem Program.

⁸ Ibid.

Preservation of the family is also accepted social service practice. Social workers are taught that, in most cases, a child's parents are best able to provide a permanent and safe living situation. Typically, agencies try to preserve a family by working with parents of children who are maltreated to alleviate or solve the problems that led to maltreatment.

The 1988 Minnesota State Legislature took the family preservation goal one step further, passing legislation that requires county governments to undertake "reasonable efforts" to preserve the family.⁹ In 1989, the legislature defined "reasonable efforts" as:

The exercise of due diligence by county agencies to use appropriate and available services. Reasonable efforts must occur at every step in the child protection process and the court must find (certify) that reasonable efforts occurred prior to termination of parental rights.

STEP 4 TERMINATION OF PARENTAL RIGHTS

If family preservation is not possible, and reasonable efforts have not succeeded, the county attorney may go to court and move to have parental rights terminated.

STEP 5 BECOMING A WARD OF THE STATE

Children whose parents lose their parental rights become wards of the state. As a ward of the state, the child is eligible for adoption. However, children who are wards of the state and at least 14-years-old have the right to decide whether they would like to be adopted.¹⁰ If the child decides he does not want to be adopted, he will remain a ward of the state and be assigned to permanent foster care, until he is 18 years of age. Children who "age out" of the system at 18 may receive some state support for higher education and health care.¹¹

STEP 6 ADOPTION

Wards of the state who wish to be adopted enter the adoption system. State, some county governments, and private adoption agencies seek to find adoptive families for these children. Finding adoptive homes for wards of the state is difficult. Most of the children are older (more than one year of age) and have already experienced very difficult lives. Often, their behaviors reflect some of the difficulties they have experienced. Because these children possess characteristics requiring special attention they are often called "special needs" children. Wards of the state who are eligible for adoption are also called "Waiting Children" because they are waiting for a home. Eligible children include all wards of the state under the age of 14 and those over the age of 14 who have expressed an interest in being adopted. Most "waiting children" are between the ages of 5 and 12, white, and not mentally retarded.

MINORITY WAITING CHILDREN

As shown in Figure 2.4, the length of a state ward's wait for an adoptive home varies. About one-half of all state wards are adopted by a family within two years. Minnesota minority children awaiting

⁹ Minn. Stat. §260.221(b)(5)

¹⁰ Minn. Rules, Part 9560.0410.

¹¹ Minn. Rules, Part 9560.0470; Minn. Stat. §136.11 and 136C.04.

adoption might wait longer because the Minnesota Minority Heritage Act requires that every effort be made to find a same race/ethnic home for the child.¹² The Minnesota Minority Heritage Act was passed in 1983 after advocates for minority children successfully argued that failure to find a same race/ethnic home could lead to loss of the child's culture. American Indian children are also protected under the federal Indian Child Welfare Act.



Many professionals think Minnesota's small minority population is the primary reason that it is difficult to find same race/ethnic homes for state wards. And fewer than 10 African-American adoption social workers are employed in Minnesota today, making it even harder to attract prospective African-American parents. To assist adoption agencies in finding appropriate different race homes for children, when a same race/ethnic home is not available, the state Department of Human Services recently published an assessment guide to help social workers determine whether a family is knowledgeable and appreciative of the child's minority heritage.¹³

FINDING HOMES FOR WARDS OF THE STATE

State efforts to find families for wards of the state include publication of "Minnesota's Waiting Children" and financial incentives. "Minnesota's Waiting Children" is a catalog including the photos and a brief description of waiting children. The publication is available at county adoption agencies, private adoption agencies, and libraries. One private agency, Children's Home Society, works with a Twin Cities television station which broadcasts a weekly story about at least one waiting child.

In addition to providing information about the children, the state offers incentives to parents who adopt a ward of the state. These incentives take the form of financial assistance for future expenses the child might incur, such as medical insurance. In addition, waiting children can usually be adopted at very low cost because state and county governments will pay many of the costs of formalizing the adoption. County governments estimated 1988 expenditures of \$891,502 for adoptive placements for waiting children.¹⁴

¹² Minn. Stat. §259.255

¹³ Minnesota Department of Human Services, "Workers' assessment guide for families adopting cross-racially, cross-culturally," 1988.

¹⁴ Minnesota Department of Human Services, "Report: Update on County Planned CSSA Activities for 1988."

CHAPTER 3

PREVENTION OF CHILD MALTREATMENT

All agree that prevention of child maltreatment is preferable to intervention after maltreatment occurs. In this chapter we describe some of the characteristics of families at risk of child maltreatment, and how programs and policies work to prevent child maltreatment.

FAMILIES THAT SUCCEED/FAMILIES AT RISK

CHARACTERISTICS OF HEALTHY FAMILIES

Pediatricians, social workers, and education experts agree that appropriate *attachment* (or bonding) by a child is a necessary ingredient for later success in life. Proper attachment occurs very early in a child's life, usually during the first six months. Proper attachment is not likely when mothers are overstressed or have difficulty caring for or accepting their infants. Lack of attachment is more probable when several children are competing for already inadequate parental or caretaker attention.

Because many people face at least one of the situations listed above, efforts to prevent child maltreatment by identifying and helping families with these characteristics are likely to result in overidentification, and providing assistance to many who may not really need help. Combining factors to come up with a risk index might be useful in identifying children and families at risk of experiencing child maltreatment.

Professor Marty Erickson of the University of Minnesota School of Social Work described to our committee the characteristics of parents who rear productive children. Such parents generally have:

- realistic expectations about parenting;
- a social support system;
- the ability to read and respond to the signals children send; and
- resolved issues about maltreatment experienced by the parent, if maltreatment occurred.¹

Realistic expectations about parenting. Children who grow up without experiencing abuse or neglect usually have parents with realistic expectations about parenting, that is, they understand that parenting is a very difficult but rewarding experience. And parents realize the limits of their control over their children.

¹ Remarks to the committee by Marty Erickson, Ph.D., University of Minnesota, May 9, 1989.

A social support system. Successful parents also have access to a social support system to help them as the child grows. The social support system may consist of family or friends, a paraprofessional, or even volunteers.²

Reading and responding to a child's signals. Parental sensitivity to a child's needs is one of the most important predictors of long-term outcomes. In the first months of life, a child learns by giving out signals to which others respond. The response helps the child develop a sense of trust in others and he also learns that he has the ability to get a response (e.g., that he has some control over what happens to him). Parental insensitivity underlies all forms of child maltreatment.

Resolved issues about maltreatment. Parents who experienced maltreatment as a child and who have resolved their feelings about that maltreatment are much less likely to maltreat their own children.

RISK FACTORS

Conversely, researchers have identified characteristics of families of children likely to suffer maltreatment. For example, researchers at the Wilder Foundation reviewed studies in this area and reported that risk factors for child maltreatment include:

- lack of appropriate attachment or bonding between an infant and its mother;
- a parent's own experience of abuse or neglect as a child;
- severely depressed and apathetic parents; and
- the existence of marital conflict, spouse abuse, or parent(s) who was/were victim(s) of child sexual abuse.³

In Minnesota, researchers believe that many mothers do not avail themselves of existing support networks because they do not have the confidence needed to ask for the help, they do not know how to get help, or they feel the existing system does not address their needs.⁴

Teenage and out-of-wedlock childbearing is an important risk factor for child maltreatment. One national estimate is that 80 percent of foster placements come from the 20 percent of American families headed by a single parent. According to author Lisbeth Schorr:

Research has documented what common sense has taught: Economic stress, lack of social support, and other protective factors, a fragile, impaired, or immature parent, and sometimes a difficult infant can combine, in the absence of outside help, to create an environment so bad that it prejudices the normal development of the child.

Healthy growth is threatened when the baby is in the care of someone who is incapable of responding because of alcoholism, drug addiction, or mental illness, because her own life

An 18-year study of infants on the Hawaiian island of Kauai found that successful parents relied on family members or friends for support when rearing a child. Project STEEP at the University of Minnesota matches a Family Life Facilitator (a mother who is trained to provide support to and help the birthmother build supportive networks) with mothers at high-risk of hurting their children. Congress recently passed legislation to establish six "resource mother" demonstration projects. A resource mother is a volunteer living in the same neighborhood as high-risk families who has successfully reared her own children, and who acts as a counselor for pregnant girls. Already used in four locations, resource mothers have been found to reduce the repeat rate of teenage pregnancies by half.

³ Paul S. Higgins, *The Prevention of Child Abuse and Neglect: A Literature Review*, Amherst H. Wilder Foundation, May 1988.

⁴ Remarks by Marty Erickson, Ph.D.

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experience has left her defeated or otherwise impaired. The chances of harm increase when the impaired parent is responsible for a baby who is--for any number of reasons--particularly difficult to care for.⁵

Some experts believe that young parents under the age of 19 are more likely to be abusive than older parents, though that may be because of the stresses of poverty and their lack of education and parenting skills, not because of their age. Teenage mothers are also less likely to receive adequate prenatal care during pregnancy, resulting in a higher incidence of low-birthweight babies. Finally, teenage parents tend to be poor and to lack self-esteem.

Other researchers have concluded that parents who are addicted to drugs (whether illegal or legal-alcohol or cocaine), regardless of their age, are as likely to maltreat children as teenage parents. A 1981 review of the research literature concluded that parental depression and other mental impairment, alcoholism, and immaturity can interfere with normal child development and lead to child abuse and neglect.⁶

Researchers have found that providing families with much needed social support, especially during the crucial years of a child's early development, is an effective way to stop the development of child abuse and neglect. See the sidebar for some characteristics of effective support programs.

HOW CAN CHILD MALTREATMENT BE PREVENTED?

Social work professionals and others believe more emphasis should be placed on prevention of child maltreatment, even though it is a very difficult task. Esther Wattenberg of the University of Minnesota School of Social Work has written about two possibilities:

- primary prevention: blocking high-risk men and women from having children, including reducing the number of unintended and teenage pregnancies; and
- encouraging the placement of children for adoption.⁸

However, pursuing these options is very difficult. First, public opinion is divided about most approaches to preventing unintended and teenage pregnancy: should contraceptives be more readily available? Should more schoolbased clinics be opened? Should the right to abortion be restricted?

- 5 Lisbeth Schorr, Within our Reach, 1988.
- 6 N.A. Polansky, et al, Damaged Parents: an Anatomy of Child Neglect, 1981.
- 7 Lisbeth Schorr; The Family Resource Coalition Report, Vol. 8:1, 1989.
- ⁸ Esther Wattenberg, "Prevention should be the first step," *Star Tribune*, July 1989.

FAMILY SUPPORT: WHAT WORKS

Successful family support programs are widely diverse in approach, based on particular community needs, but share a belief in prevention and empowerment of families by promoting their strengths. Lisbeth Schorr has identified certain guiding principles that are common to these programs:

- they invest substantial resources in outreach;
- they offer a range of learning opportunities in an accepting, culturally sensitive atmosphere;
- they are geared to promoting strengths and capabilities, personal growth, and empowerment in an individualized fashion;
- they remain available to families over an extended period of time;
- they take a comprehensive view of families and offer a broad spectrum of services, crossing traditional professional and bureaucratic boundaries;
- they see the child in the context of the family and the family in the context of the community;
- they are flexible in meeting individual family needs;
- their services are coherent and easy to use.⁷

Second, few women are willing to endure a pregnancy only to give the child away, particularly when mothers who do are viewed unfavorably by society for having given away their "flesh and blood." Testimony to the committee by representatives of adoption agencies and several women who placed their children for adoption revealed consistent societal and family pressure to rear children and *not* consider adoption.

In her book, *Within Our Reach*, author Lisbeth Schorr describes how experiments in St. Paul and Baltimore show school-based clinics are effective in reducing teenage pregnancy.⁹ In St. Paul, the first school-based clinic was established in 1974. Today, four of the district's six high schools have clinics. While some view these clinics as limited to dispensing birth control advice and devices, in fact, they provide a broad range of health services to high school children, including prenatal care for pregnant teens, birth control information, physicals for athletes, immunizations, and a weight control program. The clinics offer counseling on a range of issues and offer students the opportunity to form a trusting relationship with a responsible adult.

The clinics are given much of the credit for reducing childbearing in the four high schools by more than one-half. Use of the clinics continues to increase, with almost 35 percent of the female students using the clinics' family planning services. And fewer than two percent of students that did get pregnant had second pregnancies before graduation.

In Baltimore, a school-based clinic is credited with reducing the rates of pregnancy and childbirth in one school, while the rates went up in two other schools without a clinic. "In less than three years, the proportion of sexually active high school students who had borne babies decreased 25 percent." The professionals operating the clinics attribute their success in large part to creating a caring atmosphere for the students -- "always seeing whoever came in, responding promptly to the expressed needs of student-clients, and adapting professional schedules and habits to teenage needs." While the results of school-based clinics are impressive, they are overshadowed by the continuing rise of teenage pregnancy rates nationwide.

We also reviewed examples of effective programs operating in other cities. The sidebar on the right lists some examples of programs that have been evaluated and found effective in meeting the special needs of young parents.

HOW INTERVENTION CAN HELP

The Prenatal/Early Infancy Project (Rochester, NY). Regular visits to first-time pregnant women and new mothers were intended to provide social support and improve use of prenatal care and other community services. Results: improvements in use of community services, diet and smoking habits, birth weight, and length of gestation. Participants had fewer verified cases of abuse or neglect in first two years after birth.

Parents Too Soon (Chicago, IL). Program for low-income, pregnant teens achieved goals of participants staying in school longer, better use of prenatal care, higher employment rates after 12 months, and lower rates of subsequent pregnancies.

HOW DO PUBLIC PROGRAMS APPROACH PREVENTION?

The public child protection system described in Chapter 2 is oriented to addressing problems of maltreatment after the abuse or neglect has already occurred. County social service agencies, which are the primary service providers or managers in this area, are oriented toward dealing with problems once they have reached the acute stage, not with prevention or early intervention.

A few public child maltreatment prevention programs currently exist. See the sidebar on the next page for some examples. Welfare policy can be seen as closely tied to issues of neglect and maltreatment. In Minnesota, recent changes in welfare policy, designed primarily to reduce long-term dependency on Aid

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⁹ Lisbeth Schorr, page 50.

to Families with Dependent Children (AFDC), might be considered child maltreatment prevention efforts. These changes affect minor parents who often have several of the characteristics associated with child maltreatment.

The changes are:

- Requiring that hospitals report the birth of a child to a minor parent to the county social service agency and a determination by a county social worker about whether the family needs any social services. A report and "plan" for the family is written by the social worker.
- Referring all *minor* parents applying for AFDC to the county social services agency where the family's needs are assessed. Recommendations are developed to help with the family's needs. Failure to cooperate with any recommendations can result in payment of AFDC grants to third parties.
- Requiring all *minor* parents receiving AFDC to complete a high school education. Failure to attend school without a "good cause" excuse would result in loss of some portion of the AFDC grant.¹¹

PARENTING EDUCATION

Parenting has always been a very difficult task. The task is even more difficult if parents are themselves children, uneducated, living in poverty, or have no one with whom to share parenting responsibilities. Parenting education and the availability of a support network are crucial to ensuring that a child's needs will be met.

Participation in parenting classes could assist new

STATE PREVENTION PROGRAMS

Minnesota's Children's Trust Fund was established in 1981 to distribute grants to public and private nonprofit agencies in Minnesota which operate child maltreatment prevention programs.¹⁰ In addition, the Trust Fund, administered by the Department of Public Safety produces statewide educational and public information seminars on child maltreatment: provides technical assistance and coordination to local councils and agencies working on child abuse prevention programs; and recommends changes in state programs or policies to reduce child abuse in the state. The Trust Fund's fiscal year 1988 budget was \$100,000, and anticipated grants in 1988 were expected to amount to \$350,000. Since 1987, grants have been awarded to public and private agencies for a wide variety of services. (For a complete list of grants awarded, see Appendix B.)

Several state agencies are involved in a cooperative project to reduce child maltreatment in Minnesota. The Child Abuse and Neglect **Team** is made up of representatives from the state Departments of Corrections, Education, Health, Human Services, and Public Safety, the Offices of Attorney General and State Public Defender, and the State Planning Agency. The team shares information, develops strategies for reducing child maltreatment, and provides training for professionals who work with child sexual abuse cases. From 1985 to 1987 the team received \$988,000 from the federal government plus some state/local and private matching monies to conduct its work. Those monies were spent providing training to professionals about child sexual abuse. While the team continues to meet, it no longer has financial support.

¹⁰ Minn. Stat. §299A.20.

¹¹ "Good cause" includes parent illness, child illness, available school program requires more than two hours commuting time, no child care or funds to pay for child care available, no appropriate educational program, child medical appointments, court appearances, or physician certification of need for parent to remain at home with child. *Minn. Stat.* §257.33, subd. 2, and *Minn. Stat.* §256.746, subd. 3c.

parents in their responsibilities. Parents who are knowledgeable about a child's developmental needs and who have basic information about care and feeding are better prepared to care for -- and not maltreat -- their children.

Support for parents is also very important, particularly if they are at-risk of maltreating their children. Persons providing support can make a critical difference to the parent and thus prevent child maltreatment. Support networks could consist of other adult family members or friends. Today, parents without access to such a support network are not assisted in finding one. Furthermore, parents at risk of maltreating their children are not required to participate in or consider parenting education, nor are they provided with access to a support system, if they do not have one.

THE ADOPTION OPTION

Parenting a child--even when the parents are children themselves, unprepared for the task--has become a common decision. Ninety-five percent of children born to teenage parents remain with their parents, even though study after study shows a bleak future for both the mother and child.

Some adolescents experiencing an unintended pregnancy want information about adoption. In Wisconsin, a state adoption information center attempts to encourage and meet that interest. (See sidebar). A 1986 survey found that one-third of pregnant adolescents expressed a moderate or high interest in considering adoption, and 75 percent

expressed some degree of interest in adoption.¹²

A 1987 Minnesota study found many counselors did not discuss adoption with pregnant teens, but rather assumed the clients were not interested.¹⁴ The same study found that adolescents have too little knowledge about adoption to initiate any discussion about the topic.

Several years ago, a group of Minnesotans met to discuss concerns about the lack of adoption information given to adolescents. The group is now known as the Adoption Option Committee, Inc. The committee provides positive information about adoption to persons seeking it, puts together educational programs about adoption for use in schools, and provides support to birthparents who decide to place their children for

- ¹³ The number of calls from these types of individuals during 1986-87 was 153, 1987-88, 278, and during the first nine months of 1988-89, 185. Statistics provided by the Wisconsin AIC to the committee, April 1989.
- ¹⁴ Michael Resnick, Ph.D., and Jane Bose "Adoption and Parenting Decisions Among Adolescent Females," July 1987. The study was conducted for the Children's Home Society of Minnesota.

THE WISCONSIN ADOPTION INFORMATION CENTER

The Wisconsin Legislature established the Adoption Information Center (AIC) to provide free, confidential information about adoption. The center was established in an attempt to stem the tide of children being born to and reared by teenage mothers. It has two major responsibilities: (1) to promote adoption to pregnant adolescents, and (2) to train professionals working with pregnant adolescents to understand adoption procedures.

One of its first projects was the production of a 15-minute videotape about adoption, from the perspective of parents who had placed their children. The video was produced primarily for use in Wisconsin public schools. The AIC is also charged with undertaking a continual public information campaign to increase awareness and improve the public's image of adoption.

Another major service offered by AIC is a 24hour toll-free phone line persons can call to receive information about adoption. Since opening in July, 1986, the center has experienced a steady increase in the number of inquiries it receives from pregnant individuals or others calling on behalf of pregnant individuals.¹³ The total number of children placed for adoption in the state has not yet increased.

Edmund Mech, "Pregnant Adolescents: Communicating the Adoption Option," *Child Welfare* 65:6, Nov.-Dec. 1986.

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adoption.¹⁵ The organization is very small and operates largely with the help of volunteers. Total annual budget of the group is less than \$40,000.

PRIVATE ORGANIZATIONS WORKING TO PREVENT MALTREATMENT

We found a few private organizations working to prevent child maltreatment. Two small statewide organizations are the Minnesota Committee for the Prevention of Child Abuse and Parents Anonymous of Minnesota. Each organization has three full-time employees. Together their 1986 expenses totaled \$282,000.¹⁶ The Minnesota Committee for the Prevention of Child Abuse works to prevent child maltreatment by producing "educational and resource materials focusing on public awareness, conducting training sessions for children, parents, and professionals, and networking with other agencies to provide community-based prevention services."¹⁷ Parents Anonymous is a self-help organization providing group counseling and support.¹⁸ Other Twin Cities organizations involved in prevention efforts include the Children's Home Society Crisis Nurseries and Responses to End Abuse of Children, Inc.

Other private organizations have formed partnerships with governments to provide early childhood education services. Examples include the Success by Six and Way to Grow programs involving the City of Minneapolis, United Way, and other private and public agencies. These services could be preventing child maltreatment because the programs work to address problems such as parental insensitivity or indifference toward a child.

FUNDING FOR PREVENTION PROGRAMS

Social services funding has not kept up with the demand for services needed by maltreated children and families. And with so many interests competing for public funding, political support for funding to implement child maltreatment prevention programs is not likely to surface soon.

Persons working in the social services/child protection fields are concerned about maintaining funding for social services programs that assist families after child maltreatment occurs. Government funding for programs was recently threatened in two Twin Cities metro area counties.¹⁹

Given intense competition for public funding, government and private agency employees wonder whether adequate public support for funding to provide child maltreatment prevention services will ever be available. As an example, they cite failed legislation in 1989 that would have provided \$150,000 to Minnesota's Parents Anonymous Organizations to assist in meeting its rapidly growing demand for services.

WHAT IS THE ROLE OF INDIVIDUALS?

Some social work professionals are concerned that individuals may have abandoned their role in assisting children, calling instead on government. Years ago, individuals or the community cared for

¹⁵ Remarks to the committee by representatives of Adoption Option Committee, January, 1989.

¹⁶ Staff and financial information taken from the *Minnesota Nonprofit Directory*, produced by the Minnesota Nonprofit Council, 1988.

¹⁷ Information taken from one of the organization's pamphlets.

¹⁸ Minnesota Nonprofit Directory, 1988.

¹⁹ The Ramsey County Board considered reductions in the social service budget in March 1989 and December 1989. The Hennepin County Board considered reductions in social services budgets in November 1989.

WHAT IS THE ROLE OF INDIVIDUALS?

Some social work professionals are concerned that individuals may have abandoned their role in assisting children, calling instead on government. Years ago, individuals or the community cared for children in need. Calling on government was rare. A social worker at St. Joseph's Home for children put it this way:

There was a time when, if Miss Jones had hard times, say she had trouble with liquor, the water was shut off, she had no food, well, Miss Jones had pride, the community had pride. Mrs. Smith would come over and take care of the kids and try to help. Now if your neighbor has a problem, you don't want to get involved, so you call the police.²⁰

CONCLUSIONS AND RECOMMENDATIONS

We concluded that efforts to prevent child maltreatment should be increased substantially. We cannot overemphasize the importance of ensuring that children are not maltreated. Failure to work vigorously toward the prevention of child maltreatment will:

- mean the continued frustration of public systems that deal with maltreated children, such as schools; and
- require large expenditures of money in the systems, programs, and institutions that will care for children who are unable to lead productive lives, as children and as adults.

We recommend that public and private organizations and agencies in Minnesota expand efforts to prevent child maltreatment by:

- reducing the incidence of teenage and unintended pregnancies;
- **making adoption a more attractive alternative by providing information** about it;
- **providing child development and parenting education to all** schoolchildren; and
- providing a variety of support alternatives for mothers and children at risk of experiencing child maltreatment.

Teen pregnancy: Expanded efforts to reduce teenage and unintended pregnancies should replicate and build on successful models.

Adoption: For adoption to be a more attractive alternative to persons at risk of abusing their children, information about it must be available. To expand access to information, the Legislature should create an adoption information center to provide unbiased and accurate information about adoption, its effects on children and their parents, and existing agencies and their processes. Adoption should be discussed in schools, by county social workers contacting teen mothers, and by private agency social workers counseling prospective parents. In Chapter 6, we discuss other ways of enhancing the adoption option.

Education: All children should learn about child development and parenting during their public school years. While such a requirement may be seen as just another burden on public schools, we can think of nothing more important than ensuring that children learn about parenting and child development. We

²⁰ Remarks by Avis Daniels in Bonnie Blodgett, "The Forgotten Children," *Twin Cities*, December 1988.
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specifically declined to limit this recommendation to families that have somehow been identified as being "at-risk" for child maltreatment. We do not want to attach any stigma to those families, and we also think that if all children learned something about the responsibilities of parenting and the needs of children, that might act as a deterrent to teen pregnancy.²¹

Support Networks: Furthermore, all parents should have access to a support network. The Legislature, private foundations, and community organizations should support community-based efforts and the creation of new programs, where needed, to assist parents in finding such a support network.

In many cases, implementing these programs to prevent maltreatment will cost public and private funds, though we cannot say how much. For example, we don't know the exact cost of helping children learn about child development and parenting in the public schools. However, many programs serving children have demonstrated their cost-effectiveness in Minnesota or other places. Money invested in children through those programs is likely to be recovered from future savings. In other cases, we suggest that there may be opportunities to reallocate funds already spent in different parts of the systems.

We concluded:

• A community or individual first response, rather than government first response, might have an old-fashioned flavor, but it has a good deal of potential for preventing child maltreatment.

Instead of calling on government to report suspected child maltreatment, individuals need to first ask whether they can help. If a child is cold, needs a place to sleep, or just someone to talk to, the child should be assisted. And if possible, assistance should also be extended to the child's parent(s) in an attempt to help them understand their child's needs or get them through a rough time. A wide variety of volunteer opportunities exist for assisting children and the families.

We recommend:

□ Individuals should become more involved in the lives of troubled children and their families by providing direct assistance or volunteering through private organizations.

The print and broadcast media have a role to play in increasing public awareness about the extent and effect of child maltreatment. They can increase coverage of the methods of prevention and services available and donating more space or time to public service announcements on the topic. Recent coverage of child maltreatment by the media has already greatly increased awareness of child maltreatment, but has focused on a small number of very dramatic cases. More coverage is needed to build public understanding and awareness of the wide range of problems experienced by children and families and to build the public support necessary to achieve changes.

²¹ Our 1988 report in this area, *Building Tomorrow by Helping Today's Kids*, stressed the need for improving access to parenting education programs offered through public schools and private agencies.

CHAPTER 4

THE CHILD PROTECTION SYSTEM AND THE COURTS

Minnesota's trial courts and county child protection agencies are key components of the child protection system. In this chapter, we review how well the courts and county agencies are advocating the interests of the children entrusted to them.

CONTRADICTORY SYSTEM GOALS

The child protection system attempts to achieve two sometimes contradictory goals: *family preservation* and serving the *best interests of the child*. Under federal law, Minnesota's child protection system, which is set up to protect children from harm, is required to work to keep the child with his/her family; in other words, family preservation. Failure to work toward family preservation could lead to a loss of federal funds used to pay for foster care. Minnesota law also requires county child protection agencies to undertake "reasonable efforts" to preserve the family.¹ But the law does not define when, or at what cost, reasonable efforts have occurred.

Some social workers now question whether family preservation has become an end in itself, rather than a means to ensure the safety of children.² Because many children who enter the child protection system today are the products of parents who have chronic alcohol or drug addictions requiring years of treatment, some experts question whether family preservation is the appropriate goal in all cases.³

At the same time that child protection agencies are attempting to preserve a family, they are also attempting to serve "the best interests of the child." On occasions when it does not appear to be in the best interests of the child to preserve his family, a social worker is faced with an extremely difficult decision -- whether to remove the child or allow him to remain with his family.

"Family" is not a clearly defined term, so when social workers are trying to determine when "preservation of the family" is in the best interests of the child, they have little to guide them. What is a family? What kind of family should child protection workers be trying to preserve? These are difficult questions, but ones that need to be answered before child protection workers can be expected to serve the best interests of the child. To answer these questions, policymakers should consider the characteristics of successful families, as described in Chapter 3.

¹ Minn. Stat. §260.221, subd. b(5)

² Michael S. Wald, "Family Preservation: Are We Moving Too Fast?" Public Welfare, Summer 1988.

³ Remarks to the committee by several social workers indicated a growing trend in this direction. Several journalists have also documented increasing numbers of children born addicted to crack because their mothers are users of the drug. However, specific data about the conditions of parents in the child protection system are not gathered.

EFFECTIVENESS OF CHILD PROTECTION AGENCIES

Minnesota's county child protection agencies have critical responsibilities for helping children who are maltreated. Yet, we found it difficult to assess how good a job they were doing.

WHAT IS KNOWN ABOUT EFFECTIVENESS?

It is difficult to assess the effectiveness and efficiency of county child protection services for several reasons. First, information about those services is inadequate. Information about a maltreated child's age, gender, race/ethnicity, and similar characteristics of alleged perpetrators is gathered. But this information is not summarized and made available to the public until several years later. As of January 1990, the most current statewide information available about child maltreatment in Minnesota was for the year 1986. And state officials do not know when child maltreatment information will be available for the years 1987-1989.⁴

Some important information about characteristics of children and families in the child protection system is not gathered, including: the child's socioeconomic status; marital status and other characteristics of the child's parent(s); whether the child has siblings; whether the child has been reported to the county child protection agency on more than one occasion and, if so, whether the maltreatment was substantiated; whether the child has been removed from his home previously; whether abuse of siblings of the child has been reported; and whether the child's family experienced domestic abuse.

Second, statutes restrict public access to information. For example, Minnesota's data practices laws restrict public access to information about child maltreatment.⁵ Government officials are concerned that without data privacy laws, the private lives of children would be exposed, perhaps permanently harming the child. They also wonder whether parents should have the right to waive provisions of data privacy laws since it is the children who are most directly affected by the consequences of such a decision.⁶

However, this "secrecy" makes it very difficult to assess the performance of child protection agencies. Media representatives are concerned that data privacy laws only protect the mistakes of government employees and harm efforts to garner public support for changes. They argue that it is a rare situation when a child's maltreatment is not known to many of the people involved in his life. And they question whether data privacy laws really serve the best interests of the child.⁷

Data privacy also restricts the ability of persons who report child maltreatment to learn about the status of the report. Was it investigated? Were services provided? If so, what services? With the exception of the child's parents, no one, not even other concerned family members who report or know about the maltreatment, has access to information about the case.

Third, little is done to evaluate the effectiveness of services. Very little is known about the effectiveness of social services provided to families of children in the child protection system, because few of the services are regularly evaluated to determine whether parents change the circumstances that led to the maltreatment. Neither government nor private agencies conduct this type of assessment, at least in part

⁴ Staff conversation with Minnesota Department of Human Services, January 24, 1990.

⁵ Minn. Stat. §13.52, subd. 5.

⁶ Remarks by State Rep. Kathleen Vellenga and Commissioner Ann Wynia, Department of Human Services, at Child Protection Conference sponsored by the Minnesota Social Services Association, September 15, 1989.

⁷ Remarks by Steve Eckert, WCCO I-Team, and Paul McEnroe, *Star Tribune* reporter, at Child Protection conference sponsored by the Minnesota Social Services Association, September 15, 1989.

because of a lack of funding.⁸ Another reason might be the difficulty of doing long-term follow-up with clients.

But both government and private agencies keep information about the number of clients served and the number successfully completing programs. And county governments review contracts with private agencies regularly to determine whether the contractual arrangement should continue. In general, these evaluations do not focus on the effectiveness of the services.

FULFILLING GOALS OF PERMANENCY

County child protection agencies are not fulfilling state goals to provide a child with a safe, permanent family. In 1985, the Minnesota Legislature passed permanency planning legislation.⁹ The law directed county child protection agencies to make a plan that would ensure that all children facing out-of-home placement would eventually have a permanent and safe home in which to live. An appropriation to the Minnesota Department of Human Services provided grants to assist counties in providing placement prevention and family reunification services.

The Department of Human Services evaluated permanency planning between January 1986 and November 1988.¹⁰ The evaluation found that many children were placed in long-term substitute care (permanent foster care) without a permanency plan. Such a placement was inappropriate because "parental rights had not been terminated, nor were there any plans to go to court to seek termination." Many of these children were in the system because of child maltreatment.¹¹

RESPECT FOR CULTURAL AND ETHNIC DIFFERENCES

Child protection workers and law enforcement officials investigating child maltreatment are often not of the same race/ethnic heritage as the families they investigate. Investigators are mostly white and middle class, while the investigated are often of minority status and poor. Figure 4.1 shows that one-fourth of reportedly maltreated children in Minnesota are of minority ethnic and racial groups.

Differences in cultural experiences of the investigators and persons being investigated led representatives of minority communities to voice concern about the impact on investigations. A reporter recently told an audience of child protection workers that the system they worked in was racist and sexist, lowering and raising standards according to the race and residence of the children and families in the system.¹²

County officials are also concerned about the impact of different cultural experiences and have increased efforts to hire minority social workers. The supply, however, appears to be much smaller than the demand.

⁸ Pat Adair, executive director of Genesis II for Women, told the committee that the agency is very interested in conducting a longitudinal study of its clients to determine whether the services they provide make a difference in their lives. However, funding for such a study was not available. March 7, 1989.

⁹ Minn. Stat. §256F.01-.07.

¹⁰ Minnesota Department of Human Services, "Permanency Planning in Minnesota," March 1989. The study included a review of a random sample of 500 cases, half of which were opened after permanency planning was in place and half of which had children who had already experienced extended placement.

¹¹ Other reasons children were in the system include: mental retardation, refugee status, parental inability/unwillingness to cope with the child's behavior or physical condition, deceased parents, or parents with mental illness or an alcohol/drug addiction.

¹² Remarks by Paul McEnroe at Child Protection Conference, September 15, 1989.



ORGANIZATION AND COORDINATION QUESTIONS

Many social workers may be involved in a child protection case. Different social workers can be assigned to the child, to the foster parents, to the parents, to other members of the family, and to witnesses. With so many people working on a case, it is difficult to hold any one person accountable for the results. Furthermore, having multiple social workers can confuse everyone involved in the case, including the child.

Because of concerns about accountability and potential confusion, some experts are calling for the clear assignment of one social worker to act as a case manager and be directly responsible and accountable for the work of other social workers involved in each case.¹³ Child protection agencies in Minnesota's two most populated counties, Hennepin and Ramsey, now operate under such a system.

Child protection agencies and workers are available to respond to calls only during limited hours. While child protection agencies are only open eight hours a day, child protection reports can be made at any time during the day. Reports filed late in an afternoon usually wait a day before they are investigated, unless they are serious enough to warrant investigation by law enforcement officials.

When several different governmental units work on a child protection case there is often a lack of cooperation. Frequently, different governmental agencies are involved in a child protection case. The most common combination includes child protection workers, law enforcement officials, and the county attorney's office. Recent legislative hearings found that cooperation among different agencies involved

¹³ Remarks by Esther Wattenberg to the Committee on May 16, 1989.

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in child protection cases is difficult at best.¹⁴ The lack of cooperation is due to several factors, including the different goals of the different units and a lack of trust between members of the different professions.

SERVICE ALTERNATIVES

A new type of family-based service, delivered in the client's home, is proving effective at preventing out-of-home placement of children. The Minnesota Department of Human Services recently reported that the number of counties providing family-based services increased to 83 between 1985 and 1987.¹⁵ But family-based services may not be available to county child protection agencies.

Two models of family-based services provided:

- a professional model, providing intensive services centering around family therapy to prevent placement and improve family functioning; and
- a paraprofessional model, providing services focusing on home management, budgeting, and parenting skills.

Both models provide services in the home at least once a week for a limited period lasting about six months. The Department of Human Services concluded that family-based services were "quite effective in preventing out-of-home placement for children," and "the cost of the services is about one-third the cost of out-of-home placement."¹⁶

The Hennepin County Department of Community Services (Financial and Information Resources Division) recently evaluated the effectiveness of home-based services delivered through the county's family services division.¹⁷ The study found that home-based services were effective in reducing the out-of-home placement of children, and that over 30 percent of the families were able to achieve significant progress in accomplishing the goals agreed to in the case plan within the six month time period. The study concluded that home-based services offer a viable alternative to out-of-home placement for families with high-risk children. A study of the effectiveness of similar home-based services in Michigan found the services to be very effective.¹⁸

DELAYS IN THE LEGAL SYSTEM

Child protection cases involving the juvenile court are resolved slowly for several reasons. When a case enters the court system, new players become involved, including a guardian ad litem, county attorney, and a legal representative for the parents, usually a public defender. Guardians ad litem are not always available and until one is, the child and the case wait. Many cases await guardians ad litem in Hennepin County.¹⁹

¹⁴ Hearings by the House Children's Justice Subcommittee, Summer 1989.

¹⁵ Minnesota Department of Human Services, "Permanency Planning in Minnesota," March 1989.

¹⁶ *Ibid.*, Introduction and page 18.

¹⁷ Philip AuClaire and Ira M. Schwartz, "Are Home-Based Services Effective?" Children Today, May/June 1989.

¹⁸ "Families First," a program of the Michigan State Department of Social Services, begun in 1986.

¹⁹ Conversation with Suzanne Douglas, Director, Hennepin County Guardian Ad Litem program. However, Hennepin County is hiring a permanent guardian ad litem recruiter after a demonstration project in the summer of 1989 found that a recruiter was successful in increasing the number of guardians ad litem.

Child protection cases are not a priority of the court system. Felony cases are first in line, receiving priority attention. Juvenile court is referred to disparagingly as "kiddy court." As a result, lawyers working on child protection cases are not afforded the respect and status of other lawyers. Some county attorney and public defender offices do not have lawyers who specialize in child protection cases. Instead they work on a variety of cases. Lack of specialization might lead to delay while the lawyers educate themselves about the issues.

Like lawyers, judges generally do not specialize in juvenile cases. Indeed, some Minnesota judicial districts rotate judges between courts, thus limiting a judge's opportunity to specialize or even gain expertise in child protection cases.

Concerns have also been voiced about the granting of continuances (postponement) in child protection cases. It has been suggested that legal procedures for juvenile court be changed to allow the granting of continuances only if they can be proven to be in the best interests of the child.²⁰

Termination of parental rights does not occur very often because it is a difficult legal procedure that can occur only after:

- (1) the court finds that the county social service agency has made reasonable efforts to reunite the child with his family; and
- (2) the county attorney convinces the court that the child's parents will be unable to parent satisfactorily in the future. This standard of proof is very difficult to meet. In addition, the court must be satisfied that termination of parental rights is in the best interests of the child.²¹

PROSECUTION OF ABUSE CASES

A 1986 study found child physical abuse cases were rarely prosecuted and that child sexual abuse cases, while prosecuted more frequently, constituted only a small percentage of the total number of confirmed sexual abuse cases.²² A more recent report by the State Planning Agency found a significant difference between the rate of prosecutions for sexual abuse cases and physical abuse cases.²³ When searching for reasons for the disparity in prosecutions of child physical abuse cases and child sexual abuse cases, the reports found:

- the perception among treatment professionals that preserving the family and helping the abused child may be incompatible with prosecution of the offender;²⁴
- professionals feel society is consistent in its view that sexual abuse of children is wrong in all instances, but what is "reasonable" force, and therefore permissible physical punishment, is not clear;
- some professionals regard sexual abuse as more damaging to the victim than physical abuse;
- treatment programs are available for sexual abuse offenders, but treatment programs for physical abusers are rare; and

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²⁰ Several attorneys testifying to the Minnesota House of Representatives Children's Justice Subcommittee during the summer of 1989 made this recommendation.

²¹ In re J.J.B., a minor child, Minnesota Supreme Court. 1986.

²² "Child Abuse Within the Family -- A Report of the Attorney General's Task Force," 1986.

²³ Stephen Coleman, Ph.D., "Victims of Violent Crime," State Planning Agency, 1988.

²⁴ "Child Abuse Within the Family -- A Report of the Attorney General's Task Force," 1986.

most physical abuse perpetrators are women, whereas most sexual abuse perpetrators are men. Professionals might be reluctant to prosecute a mother because of the potentially detrimental effects on the family.²⁵

CONCLUSIONS AND RECOMMENDATIONS

We concluded:

The child protection system is not clear about its goals and responsibilities toward children and families in the system.

Child protection workers cannot be expected to do a good job when goals are unclear or in conflict. Prior to determining whether preservation of the family is in the best interests of a child, child protection workers need a useful way to evaluate whether a given family is a healthy, nurturing setting for that child. As we noted in Chapter 3, a healthy family includes at least one parent with the following characteristics:

- realistic expectations about parenting;
- access to a social support network;
- the ability to understand and respond to a child's signals; and
- resolution of any experience of maltreatment as a child.

When family preservation is determined to be in the best interests of the child, county child protection agencies and courts will need guidance in determining when and at what cost reasonable efforts occurred. Such guidelines should be flexible, allowing opportunities to meet the wide variety of needs of children and families. But some limits should be established so that judges and county agencies understand that the child cannot linger in the system.

And because a child's developmental needs change with age, the guidelines should pay particular attention to the amount of time a child can afford to wait. The younger a child is the more important it is for the case to be processed swiftly because of the child's developmental needs. Parents of older children, who know their parents and have bonded with them, should be afforded more time to work on alleviating the problems that led to the maltreatment.

We recommend:

The Legislature should direct county child protection agencies to work toward the goal of fulfilling the best interests of the child in all cases. The goal of family preservation should be secondary to the goal of meeting the best interests of the child.

Furthermore, the Legislature or the Department of Human Services should develop guidelines to help county workers evaluate whether a family is a healthy place to return a child to and the amount of effort -time and/or money -- that counties should expend in "reasonable efforts" to reunite families.

In cases where a conflict exists between the best interests of the child and the rights or interests of the parents, the child's interests must be paramount. Society cannot afford the costs associated with

²⁵ Stephen Coleman, op. cit.

children who remain in families unable to parent. Every child should have the right to live in a safe, permanent, and nurturing home. While adopting the primary goal of serving the best interests of the child may result in the loss of some federal funds, family reunification will still be the appropriate way to fulfill the best interests of the child in some cases.

We concluded:

Child protections cases often take too long in the courts.

Very young children cannot afford to wait because developmental periods are short. Most agree that children bond with adults during the first six months of their lives. If healthy bonding does not occur during this period it will be much more difficult, if not impossible for the child in the future.

We recommend:

To increase the responsiveness of the court system in child maltreatment cases:

The Legislature should: change the legal requirements for termination of parental rights by eliminating the requirement of proof of future inability to parent; encourage outstate counties to form district-wide juvenile courts to be staffed consistently by one judge; and disallow the granting of continuances in child protection cases if the continuance is not in the best interests of the child;

County governments should: encourage specialization in child protection cases by county attorneys and public defenders; and increase efforts to recruit guardians ad litem in order to fill the shortage; and

The State Bar Association and other agencies should increase legal training in the fields of child protection for practicing attorneys and judges.

We believe that increased specialization at all levels will help reduce the amount of time that cases linger in court.

We concluded:

• Not prosecuting child maltreatment perpetrators who are the parents may be appropriate in some cases.

Foregoing prosecution may be appropriate when other methods, including termination of parental rights, and enrollment in and successful completion of treatment programs are available to reduce future child maltreatment inflicted by parents. However, when maltreatment is inflicted by someone other than a parent, prosecution should be vigorously sought.

We recommend:

□ The Legislature should direct county attorneys to vigorously prosecute child maltreatment perpetrators who are not the legal parents of the child.

If family reunification is, in fact, in the best interest of the child it makes sense not to prosecute parents who maltreat their children. Once parental rights have been terminated, however, reunification of the family is no longer possible. In such cases, the parent should be prosecuted.

We concluded:

• Additional information is needed about the services provided by child protection agencies.

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Information is essential to useful evaluation of a system. Much important data about children and families in the child protection system is currently unknown. And information that is gathered is not usually available for several years. Until more questions are answered and information is available on a timely basis, it will be difficult to make many policy changes.

For example, it would be helpful to know the length of cases, the availability of services for families, follow-up by case workers, and the effect of data privacy laws on county agency performance. For agencies providing services to families, it is important to know the cost of services, whether they are effective in the short and long term, and the views of clients about the services.

More types of, and timely access to, child maltreatment information are needed to evaluate and improve the child protection system. The state should evaluate the effectiveness of services provided to families in the child protection system to ensure that the best interests of the child are met.

We questioned whether the state's Data Practices Act serves the best interests of the child. Instead, the law may serve to frustrate persons who are concerned about the child because they are unable to determine whether any progress is being made. So long as the person who reported the maltreatment is willing to abide by the Data Practices Act, that is, agrees not to discuss the case with others, child protection workers should discuss the case with them.

We recommend:

- □ The Legislature should authorize the Minnesota Department of Human Services to begin collecting new information about child maltreatment cases. And the Department of Human Services should be required to compile and publish useful summary information about child maltreatment within a reasonable time after it is collected.
- □ The Legislature should authorize and direct county child protection workers to discuss child protection cases with persons who report the suspected maltreatment if the reporter is willing to abide by the Data Practices Act.
- □ To assess the effectiveness of child protection agencies and the services provided to families in the system, the Legislature should order an external review of county child protection agencies and other organizations delivering services to families and children. The initial review should be followed by ongoing evaluation.
- The Legislature should require that home-based services be available to all county child protection agencies and should assist counties in financing those services.

We concluded:

• Government and private agency employees need to be more aware and respectful of racial/ethnic differences between them and families entering the child protection system.

Additional training of child protection workers about racial/ethnic differences and employment of a larger number of minority professionals and paraprofessionals would increase the likelihood that cultural differences will be respected and dealt with appropriately during the course of any child maltreatment investigation.

We recommend:

□ To increase awareness of and respect for racial/ethnic differences, county child protection agencies should increase training for current child protection workers. Furthermore, they should directly hire or contract with existing private social service agencies serving minority communities in order to increase the number of minority employees.

We saw that the incidence of child maltreatment does not confine itself to certain hours of the day or certain days of the week. Neither should the availability of child protection services.

We recommend:

• County child protection agencies should be staffed 24 hours a day.

In its 1990 session, the Minnesota Legislature enacted several measures that further these recommendations. For example, it inserted the standard "best interests of the child" in several sections of the child protection law. However, our reading of the law as now amended suggests that the best interests of the child are still presumed to be with the child's family. In 1990, the Legislature also limited the granting of continuances in child protection cases and directed a study of how data practices laws are applied to abuse cases. The Supreme Court was asked to study the issue of training for juvenile court judges, and the Attomey General and Department of Human Services were directed to study data practices issues in the child protection system.

CHAPTER 5

INCREASING THE SUPPLY AND QUALITY OF FOSTER CARE

Many maltreated children are placed in foster care settings. Until efforts to prevent child maltreatment are in place and working effectively, improvements in the supply and quality of foster care will be needed. In this chapter, we examine ways to achieve this goal.

SUPPLY OF FOSTER CARE

A foster parent's job has changed dramatically in recent years. Children who enter foster care today have many more serious problems than in the past.¹ A foster parent recently said, "Years ago, we had so-called illegitimate babies, kids whose parents didn't want them, some runaways. There were handicapped kids, but nothing like the kinds of handicaps they have today."² County officials attribute the dramatic changes to increased drug and alcohol abuse and a climate of violence and neglect in families experiencing addictions.

Foster parents express concern about their ability to deal with the dramatic changes in today's foster children.³ And they call for more training to keep up to date.

PUBLICLY-SPONSORED FOSTER HOMES

We found that the supply of foster homes is unable to keep up with the demand. Recent reports indicate a growing need for foster homes and a stagnant or dwindling supply of foster homes in Hennepin and Ramsey counties. A newspaper reported:

More than 1,200 requests for foster care will be made this year in Hennepin county, which has 606 licensed foster homes. That compares with 860 requests in 1986, when demand began climbing. In Ramsey County, nearly 600 requests are expected this year, compared with 341 in 1986. The county has 311 foster families, two less than in 1986.⁴

County officials would like to have a much larger supply of foster homes in order to better match children with a foster family. Before deciding what family to assign a child, county officials consider schools, proximity to natural parents (in order to arrange for visitation), race/ethnicity, and other factors. Because there are so many considerations, it is important for county officials to have many foster homes from which to choose.

¹ Testimony to the committee by several foster parents indicated that the children they care for experience such severe abuse and neglect that they need intensive therapy, including drugs.

² "Need for foster care outpacing the supply," *Star Tribune*, November 6, 1989.

³ Testimony by several foster parents to the committee.

⁴ "Need for foster care outpacing the supply," *Star Tribune*, November 6, 1989.

In order to increase the supply of foster homes, Hennepin County officials began using public service announcements in 1981. This method has proven effective, but expensive, due to high production costs. And while the public service announcements bring in new families, the number is not yet high enough to meet the growing demand.

Laws against discrimination have resulted in a changing mix of foster parents. It used to be that most foster families were made up of two-parent families where the mother did not work outside the home. Today, counties cannot discriminate against persons wishing to become foster parents. As a result, persons of all ages, sexual preferences, religious affiliations, and racial/ethnic heritages are foster parents. Demographically, foster parents now reflect the diversity in the community at large.

PRIVATE AGENCY HOMES

As we noted in Chapter 2, an increasing number of foster home families are recruited, trained, and serviced by private agencies. Efforts to increase the supply of foster homes have resulted in conflicts between the county and private agencies. County officials believe that private agency efforts to recruit foster families are increasingly focused on homes already licensed by the county. Such a focus does not result in an increase in the supply of foster homes but rather a shift from publicly-administered to privately-administered homes. Private agencies argue that county licensed foster homes seek their assistance because the foster homes lack confidence in the county's ability to respond to their concerns.

REIMBURSEMENT AND SUPPORT ISSUES

Availability of foster homes is closely related to two issues: adequacy of reimbursement and the level of support provided by the supervising agency.

REIMBURSEMENT LEVELS

Some foster families provide services on an expense reimbursement basis, while others receive additional compensation for their services. County-administered foster families are reimbursed for some of the expenses of caring for a child. As the children entering foster care have become more difficult to care for, a large percentage of county-administered foster families are receiving difficulty of care rates to compensate for the cost of meeting the child's additional needs.⁵

Reimbursement and contracting policies vary from county to county. In some counties, foster families administered by private agencies are expected to provide "treatment" to children and are sometimes reimbursed at higher rates than a county-administered foster home. As with county-administered foster homes receiving difficulty of care rates, the higher rates paid to private foster parents can be considered compensation for the expertise and services they provide. The rate also covers the centralized support and training provided by the private agency. Neither county nor privately-administered foster families are reimbursed for damage foster children do to their homes.

Given the dramatic changes in the needs of children entering foster care, there is concern about the adequacy of current levels of reimbursement. Reimbursements and rates of pay to foster parents vary by type of foster home. Daily reimbursement for county-administered foster homes is between \$325 a month for children under 12 (about \$10.50 a day) to \$421 a month for children between 15 and 18 (about \$14 a day). "Difficulty of care" reimbursement may increase the daily rate. Emergency shelters receive \$31 a day per child and foster privately-administered foster homes receive \$43 per day, about

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⁵ For example, as of December 1989 about 60 percent of Hennepin County's foster parents were receiving "difficulty of care" rates for the children in their care.

\$15 of which is kept by the licensing agency for administrative purposes. Reimbursement rates have increased about four to five percent each year since 1986.

Other conflicts between county and private agencies administering foster homes arise because higher reimbursement rates are paid to private foster homes even when children placed are not in need of "treatment." Some county officials are concerned that more and more children are assigned to private foster homes, not because of treatment needs, but rather because of an inadequate supply of public foster homes. Existing contracts between counties and private agencies do not usually provide flexibility in the rate of payment for a child who enters a "treatment" home but is not in need of treatment. Consequently, county officials believe taxpayers may be paying for more service than they are receiving.

Contracts with private agencies are reviewed annually, but some county officials and private agency representatives are having difficulty agreeing on whether and how to increase reimbursement flexibility to reflect more fairly the type of child being placed.

AGENCY SUPPORT

The support provided to foster parents is largely dependent on whether they are serviced by the county or a private agency. County social workers servicing foster parents have very large caseloads so they are not always able to provide the support their foster parents need. Private agency social workers servicing foster parents have much smaller caseloads and as a result they are able to provide a much higher level of service and support to foster families and children in foster care.

Foster parents are concerned about their role in child protection, the level of support provided to them, and the respect and recognition afforded to them by social work professionals and society. While foster parents are concerned about reimbursement levels, they also express other concerns that they regard as more important. Our committee heard these concerns:

- a lack of support provided by county social workers;
- a lack of recognition and respect afforded to them by both professionals and society; and
- a failure of social workers to consider the foster family's experiences with a child when planning for the needs of children.⁶

ALTERNATIVES TO FOSTER HOMES

Because of an inadequate supply of foster homes and the dramatic changes in children entering foster care, some experts are calling for the creation of new institutional settings to care for children. As with the goal of preservation of the family, some social work and legal experts believe the goal of removing children from institutional care has gone too far and may now be one of the reasons children are left with their abusive families.⁷

⁶ Some frustrated foster parents write reports about the children they care for and submit them to child protection workers for use in the case. Remarks to the committee by Donna Geisen, Ramsey County foster parent, March 14, 1989.

⁷ Testimony to the committee by Esther Wattenberg, Tuesday, May 16, 1989; commentary by Lois G. Forer, Judge, Court of Common Pleas, Philadelphia, Pa. in "For children's sake, bring back the orphanage," *Star Tribune*, November 21, 1989.

One social work expert points out that the child welfare system is facing unprecedented problems, attempting to deal with infants and very young children afflicted with AIDS and cocaine and crack addiction. It is very likely that foster care, as currently structured, does not meet the needs of some children coming into the system. As the children entering the system become more difficult to care for, because of drug addictions or other serious medical problems, most foster families will not be adequately prepared to meet their needs. At the same time, these children might not require the type of care currently offered at residential treatment centers. So a search for new alternative placements such as institutional care is underway.⁸

The creation of new long-term settings for children may provide a partial solution for the needs of children who have experienced unsuccessful placements in family foster care, who enter foster care because of a failed adoption, who choose not to be adopted, or who need specialized care beyond what a foster family can provide. A new service option would be a supervised group home setting that would be home-like, professionally staffed, and sensitive to the special needs of children from diverse cultural and racial groups.

Some use the term "orphanage" to describe such a setting. We understand that the term orphanage immediately conveys a negative image to many people, whether of the bleak setting of a Charles Dickens novel or more recent memories of large orphanages in Minnesota a few decades ago. What we are suggesting would be much different from those facilities. In our view, a new service option would be a professionally staffed group home setting that would fall somewhere between the small family setting provided in foster homes and the medical/therapeutic approach of large residential treatment centers. Models could be designed to meet the special needs of two groups of children:

- older children who cannot function well in a family setting, as evidenced by a series of unsuccessful foster family placements, but who do not want to be adopted and do not need the treatment approach offered by residential treatment centers,
- cocaine/crack babies or others with significant special needs that cannot be easily provided in a family foster care setting.

The Hennepin County Department of Community Service and Catholic Charities are both seriously considering development of new foster care group homes.

It is argued that the possibility of bringing back long-term group settings should be seriously considered because increased and expensive efforts to recruit and retain new foster parents are not producing the number of families needed to care for the increased number of children in the system. And, no matter how much foster parent recruitment efforts increase, they are not likely to ever meet the demand.⁹

CONCLUSIONS AND RECOMMENDATIONS

We concluded:

• More foster parents and homes are necessary to fulfill the best interests of the child.

The absence of a large pool of available foster parents makes it very difficult, if not impossible, for county child protection workers to meet the best interests of the child while working toward preservation of the family. No one is well served if a child is placed in a foster home where he feels uncomfortable, where geographic distances make visitation by parents difficult, schooling is disrupted, and where the foster parents feel they are unable to meet the child's needs.

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⁸ Some refer to this new institutional placement as "the new orphanage." Written comments to the committee by Esther Wattenberg, June 8, 1989.

⁹ Lois Forer, "For children's sake, bring back the orphanage," Star Tribune, November 21, 1989.

- Additional training for foster parents is necessary to keep up with new ideas for caring for increasingly difficult children.
- Increased support and recognition, professional respect, and reimbursement are necessary to recruit additional foster parents.

We recommend:

To improve retention of good foster families, counties and private agencies should improve the job in several ways. They should also increase their foster parent recruitment efforts.

State and county governments and private agencies should increase recognition of the work of foster parents. Recognition events should occur once a year for all foster parents. Corporate sponsors could be sought and awards given to foster parents excelling in their field.

Counties and private agencies should increase training available to foster parents. More is known about how to parent every day. More is also known about the nature and causes of child maltreatment and how to deal with it. Foster parents need to keep up with the latest research in order to provide effective services to children.

Finally, counties should reduce the caseloads of social workers servicing foster parents, to ensure that support is available from the county.

Both counties and private agencies need to increase their efforts to attract foster parents. They should increase their use of public service announcements, contacts and agreements with existing community agencies and churches, and other publicity. The broadcast media should provide opportunities to get the recruitment message across.

We concluded:

• Reimbursement rates paid to foster parents should be based on the types of children cared for and the services needed. Whether the home is serviced by the county or a private agency should not be a primary consideration.

When private agencies began administering foster homes, it was partly with the intent of providing "treatment" to children in foster care because of behavioral problems. Today, many of the children entering foster care require treatment, and the services provided by private foster parents and county foster parents are more similar than dissimilar. In addition, because of the shortage of foster homes, counties often place children who are not in need of "treatment" in privately administered homes.

In some counties, different rates are sometimes paid to county and private homes. This is unfair. Foster parents need to be paid rates reflecting the children's special needs. But private agencies should continue to receive fees for the training and support they provide to foster parents and children.

We recommend:

□ The Legislature should undertake a study of reimbursement rates paid to foster parents in an effort to increase them to more reasonable levels and ensure that foster parents are compensated equally on the basis of the child's needs, regardless of whether the administering agency is public or private.

Reimbursement rates for foster parents are low and will need to increase if efforts to attract new foster parents are to be successful. The amount of increase, however, should be determined only after thoughtful consideration of all the reasons for and against upgrading the nature of foster parenting to a professional activity.

Foster parents should be reimbursed for any damage to their home caused by a foster child. In addition, the Legislature should fund respite care for foster parents. And counties should encourage regular participation by foster parents in respite care.

We concluded:

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The creation of new long-term settings for children should be seriously considered.

Arguments advanced for the creation of new, long-term settings for children entering the child protection system are persuasive and should be seriously considered. As the children entering the system become more difficult to care for, it is likely that some foster families will not be adequately prepared to meet their needs. At the same time, these children might not require the type of care currently offered at residential treatment centers. So, a new service option could provide an alternative for these children and others who have experienced unsuccessful placements in family foster care, who enter foster care because of a failed adoption, who choose not to be adopted, or who have care needs beyond what a foster family can provide. Such settings could also play an important part in reducing the demand on foster families.

We recommend:

The Legislature should explore the feasibility of alternatives to foster care, including the creation of specialized, supervised group home settings.

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CHAPTER 6

MAKING MORE EFFECTIVE USE OF ADOPTION

Earlier in this report, we discussed how adoption could be helpful in preventing child maltreatment. But adoption is also an option for children who are maltreated and who cannot, for different reasons, be returned to their families. This chapter presents our recommendations for how adoption can be used more effectively as a tool for finding families for children.

ROLES OF PRIVATE AND PUBLIC AGENCIES

Families that can afford to pay large fees and are willing to wait for a healthy infant are well served by existing private adoption agencies. Minnesota's large private adoption agencies were started many years ago to serve the needs of children needing adoption. Most of these children were white. Several years ago, as the supply of white children began to dwindle, agencies began placing more and more children who were foreign-born.

The cost of adopting a healthy infant from a private agency ranges from $$5,000-$7,000.^1$ The wait is usually several years. For families able to afford these fees and willing to wait, existing adoption agencies and policies work well.

But existing private adoption agencies might not be serving the needs of Minnesota's "special needs" children seeking families. Today, fewer and fewer children put up for adoption are healthy infants. Instead, more children needing to be adopted have "special needs" and should be placed with families sensitive to those needs.² Private adoption agencies work hard to place all the special needs children that come to them. However, some special needs children wait a long time before being placed with a family, because private agency clients are not usually seeking to adopt a "special needs" child.

Hennepin County has created its own adoption unit, to deal specifically with children who are wards of the state. County officials tell us that private agencies' adoption workers frequently contact the county in search of families who are seeking to adopt special needs children.³

Unlike adoptions of healthy infants, the state assists in the attempt to find homes for special needs children. A state registry and catalog for "Waiting Children" are maintained. The state also provides financial assistance to families who adopt special needs children. Adoption subsidies help pay for the child's medical expenses or maintenance needs.

¹ Testimony to the committee by representatives of Children's Home Society, Catholic Charities, and Lutheran Social Services.

Federal law defines "special needs" as a child who has at least one of the following characteristics: (1) he is older (presumably more than 12 months); (2) he is part of a racial or ethnic minority group; (3) he possesses or has the potential to possess physical or mental problems; (4) he is part of a sibling group and should be placed for adoption with his siblings.

³ Testimony to the committee by Lynn Malfeld and Jean Webb, Hennepin County Adoption Unit, May 23, 1989 and June 20, 1989.

In addition to financial assistance, parents adopting special needs children will need the support and assistance of other adoptive families in order to deal with the many distinctive parenting issues that come with the child. To this end, Hennepin County and some private adoption agencies provide post-adoption services, such as support group meetings.

SERVING SPECIAL NEEDS CHILDREN

Minnesota's special needs children of racial/ethnic minority status may experience additional difficulty in finding a home because of state law requirements. Minnesota law requires that a family of same race/ethnicity be sought first for children of minority race/ethnicity.⁴ The law does not, however, place a time limit on the search.

As we discussed in Chapter 2, a high proportion (23 percent) of children awaiting adoption are from racial and ethnic minorities. The search for same race/ethnic homes is difficult for two reasons:

- A lack of minority adoption workers to recruit prospective adoptive families. Only a few minority adoption workers are working in Minnesota today--one is employed by the state Department of Human Services, six by Hennepin County, and one by a private agency. Most of these adoption workers have been employed in the agency or county unit for less than six months. And Minnesotans of minority race/ethnicity are concerned that adoption workers be sensitive to and understanding of racial differences.⁵
- The high cost of adoption through a private agency. A minority family seeking to adopt a healthy minority infant may be unable to afford the cost of \$5,000 and up.⁶

Because of the difficulty finding same race/ethnic homes for children, some question whether the search time for same race/ethnic homes for Minnesota's minority children should be limited. Limiting the time is likely to result in more transracial adoptions, where parents and child are of different races.

Unlike minority children born in Minnesota, adoption agencies are not required to find same race/ethnic families for foreign-born children or minority children who come to Minnesota from other parts of the nation because the Minnesota Minority Heritage Act does not apply to children who are not born in Minnesota. Nevertheless, private adoption agencies are sensitive to the needs of minority and foreign children adopted by different race/ethnic families and provide educational classes to orient families about cultural differences and awareness.

Results of studies on transracial adoptions are mixed. Some of these adoptions are very successful, others are not. And opinions on the topics vary widely. So it is difficult to know whether a minority race/ethnic child will be harmed if placed in a family of different race/ethnic origin.

⁴ The only exceptions to the law occur when the child's genetic parent explicitly requests that the law not be followed.

⁵ Lester Collins, executive director of the Council on Black Minnesotans, summarized the results of a 1987 survey of black Minnesotans which found that they were particularly concerned about racial sensitivity and awareness by adoption workers.

⁶ Ibid.

ADOPTION ALTERNATIVES

The adoption process is often cited as the reason so few children are placed for adoption. In the past, adoption processes were very secretive, with the birthparents not allowed to meet or know who the adoptive parents were. Today, the extent of secretiveness or openness in the adoption process can largely be determined by the birthparents, who can choose their level of involvement both in selecting the adoptive parents and developing a relationship with them.

Despite this new openness, most birthparents still apparently believe that placement of a child necessarily means loss of any contact in the future. And many people who have gone through adoption, either as birthparents, adoptive parents, or adopted children, comment that the secretive aspect of the process may result in problems later.⁷

Others, however, point out that social factors are more influential in decisions not to place children for adoption. For example, expectant parents may face strong peer and family pressure to keep children despite their inability to parent or provide for the child.

OPEN ADOPTION

Recognizing that the secretive aspects of adoptions in the past may lead to problems in the future, adoption agencies are working to improve their processes. And in the past 10 years, there has been a major shift toward more openness in adoption.

Open adoption was defined in 1976 as "an adoption in which the birth parent meets the adoptive parents; relinquishes all legal, moral, and nurturing rights to the child; but retains the right to continuing contact and knowledge of the child's whereabouts and welfare."⁸ Others point out that the key feature distinguishing open adoption is the extent to which identifying information is exchanged between the birth parents and adoptive parents. This sharing of information is in contrast with the strict confidentiality that has characterized adoption in this country for decades.

One author describes open adoption as a process that:

recognizes that all the parties involved are inextricably interconnected and that it is impossible to disconnect them from each other emotionally, medically, or psychologically. Open adoption assumes that birthparents and adoptive parents are likely to respect each other once they have met and shared their stories. And once a genuine sense of compatibility is established, (the parties) are well able to plan for the adoption...⁹

The debate over the openness in adoption is vigorous and ongoing. Advocates of open adoption argue that openness in adoption eases some of the problems faced by birth parents and adoptive children, such as facing the loss of role as a nurturing parent. Opponents argue open adoption resembles foster care, and that the adoptive parent is prevented from becoming a complete psychological parent. The result, they say, is that the children pay the price of uncertain relationships with multiple sets of parents and difficulties in successful passing through developmental stages.¹⁰

Adoptees, birthparents, and adoptive parents testifying to the committee pointed out the wide range of problems that can occur because of the secrecy surrounding adoption, including insecurity and feelings of not being wanted by the child, difficulty in getting important medical information by adoptive parents, and difficulty in dealing with the grief experienced by birthmothers.

⁸ Annette Baran, et al, "Open Adoptions," Social Work, volume 21, 1975.

⁹ James L. Gritter, M.S.W., Adoption Without Fear, Corona Publishing Company, 1989.

¹⁰ Kenneth W. Watson, "The Case for Open Adoption," and A. Dean Byrd, "The Case for Confidential Adoption," *Public Welfare*, Fall 1988.

In more practical terms, an open adoption would allow birthparents to develop a relationship with the adoptive parents and probably maintain some presence in the child's life. Two agencies offering open adoptions are described in the sidebar on this page.

Some persons feel open adoptions are particularly important for children who are placed for adoption after they know and have bonded with their birthparents. Some of these children may be the victims of maltreatment and because they had a relationship with their birthparents, cutting off all ties and communications is unnatural and may seem cruel as well as difficult.¹²

In Minnesota

Agencies in Minnesota have been making their adoption processes more open in recent years. There is now general agreement that secret adoption -- where no information is provided to birth parents and adoptive parents about the other -- is not good, and that has generally not been agency practice in recent years. While open adoptions are available through Minnesota adoption agencies, they occur infrequently in their most pure form: where the birthparent develops and maintains an ongoing relationship with the adoptive parents and the child.

Instead, the three large Minnesota agencies offering adoption services -- Children's Home Society, Lutheran Social Services, and Catholic Charities -- provide a wide range of openness in the adoption process. Birthparents may choose the extent to which the adoption is open. including any point along a continuum from giving the adoption worker a list of characteristics preferred in the adoptive parents, to actually reading the applications of potential families and narrowing the list down, to meeting and interviewing prospective adoptive parents. However, disclosure of names or other identifying information is usually not part of the process. Adoptive parents must agree to any openness requested by the birthparents.

Openness in adoptions appears to be working well, and private adoption agencies in Minnesota report satisfaction with the process. While the

AGENCIES USING OPEN ADOPTION

The pure form of open adoption is not used widely, but where used, they have been found to be very successful. A Michigan agency, Community, Family and Children's Services Traverse City, which specializes in the pure form of open adoptions recently published a book recounting the experiences of 17 adoptive families with open adoption.¹¹

All of the experiences reported are positive and the adopted children's knowledge and communication with their birthmother is expected to lessen any future identity crisis the child may experience. And the adoptive parents' knowledge of the birthparent could assist them in dealing with any medical or cultural conflicts that arise in the future.

Another adoption agency, Open Adoption and Family Services of Oregon, is experiencing positive results promoting the use of open adoptions by young birthparents who are experiencing a second unintended pregnancy. According to agency officials, birthparents are much more willing to place a child for adoption when future contact with the child and its family is possible.

"pure" form of open adoptions also seems to work well, social workers warn that it is not well-suited for everyone.

The Traverse City, Michigan adoption agency conducting open adoptions is careful to mention the importance of all of the steps involved in open adoption. Crucial to the process is an intensive educational process, acquainting prospective parties to an open adoption about the rationale behind open

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¹¹ Described in Gritter, Adoption Without Fear.

¹² The experiences of a birthparent who placed her children for adoption at the ages of 6 and 8 shows the children needed to maintain some contact with her to better deal with their new situation.

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adoptions, the differences between open and closed adoptions, and the risks involved in an open adoption.

INDEPENDENT ADOPTION

Independent adoption allows an individual to place a child without the assistance of an adoption agency. Instead, an attorney assists the parties through the process, which requires the same court approval as an agency adoption. It is important to note that independent adoption is most widely used in Minnesota to arrange adoptions within families.

Independent adoptions have been controversial in Minnesota and elsewhere. Attorneys arranging private adoptions argue that independent adoptions are easier, cheaper, and sometimes the best way to find a home for children.¹³ And at least one private attorney recommends that adoption agencies undertake home studies for families seeking to adopt a child independent of the agency.¹⁴

Private agencies and the Department of Human Services are concerned about the use of independent adoptions because they fear "baby-selling." These officials also point out that an independent adoption provides no assurance that children are placed with families that can meet their needs and provides no post-adoption services for adoptive families. Agency officials argue that they are best suited to provide the counseling and follow-up services to all parties that are crucial to making an adoption successful.¹⁵ The Child Welfare League, in its "Standards for Adoption Services" (1988), opposes adoptions outside of agencies.

OPENNESS AFTER ADOPTION

After adoptions occur, information about birthparents and families is difficult to acquire and not regularly updated. A small percentage of adoptees, birthparents, and adoptive families seek information about another party to the adoption years after the adoption occurs. Usually, they learn that Minnesota adoption agencies are not required to update information kept in files.¹⁶ So when information is sought and received, it is often outdated.

Agencies point out that attempting to update information is a very time consuming and expensive process. Nevertheless, adoption agencies are receiving more and more requests for information every year.¹⁷ And it takes a long time to fulfill those requests.¹⁸ As a result, an underground network of independent investigators has developed to assist adoptees, adoptive parents, and birthparents in their search for information.

¹³ Remarks to the committee by Wright Walling, attorney, February 21, 1989.

¹⁴ Ibid.

¹⁵ Some researchers have concluded that the rate of disruptions (child returned to agency) in older child adoptions was related to the inadequate preparation of the adoptive parents before the adoption and to poor post-placement services. They also point out other factors, including characteristics of the child. Richard Barth, "Disruptions in Older Child Adoptions," *Public Welfare*, Winter 1988.

¹⁶ The only exception is that birthparents must be notified when an adopted child dies. *Minn. Stat.* §259.254.

¹⁷ Remarks to the committee by representatives of Catholic Charities, Lutheran Social Services, and Children's Home Society, January 31, 1989.

¹⁸ According to private agencies, the requests may not be filled until several months after they are initially made.

CONCLUSIONS AND RECOMMENDATIONS

We concluded:

- Information about adoption should be easily accessible and affordable.
- Additional agencies or programs and variety or flexibility in adoption processes are needed to increase efforts to find homes for special needs children.

The adoption landscape has changed dramatically in the past few years. But, existing adoption agencies and adoption policies limit the ability to find homes for special needs children within a reasonable amount of time.

A variety of adoption processes and knowledge about those processes is necessary to increase the likelihood that birthparents will consider options and place children they are unable to parent for adoption. Minnesota adoption agencies have been increasing the flexibility of adoption processes available to birthparents for many years. But this flexibility is not generally known.

The controversy over independent/private adoptions may be working against children by disallowing birthparents from considering this adoption alternative, or by requiring children to remain in foster care while the court system struggles to find a solution.

We recommend:

- Adoption agencies should make adoption processes as flexible and supportive as possible in order to facilitate the birthparents' decision to place a child.
- □ Independent adoption should be one of several types of adoptions available to birthparents.
- The Legislature should authorize a state agency to begin the collection and maintenance of adoption records for future use by adoptees, adoptive parents, and birthparents.

But, additional safeguards should be put in place for families seeking to adopt a child outside of an agency. The Legislature should require home studies for families seeking to adopt a child through a private attorney. Private agencies should be required to undertake the home studies as well as allow all families who adopt a child access to the post-adoption services their agency provides.

We concluded:

• The goals of the Minnesota Minority Heritage Act should continue, but not unrestricted in time.

Minority children often remain in the foster care system for long periods of time because existing agencies have difficulty finding homes for them. Many potential adoptive parents who are of minority race/ethnicity are uncomfortable working with existing agencies and others cannot afford the fees charged. And cultural barriers are difficult to overcome if the agency is not staffed by similar race/ethnic professionals as those who seek adoption.

Child development experts have found healthy attachment/bonding to be the most important characteristic between parents and children. Timing plays a very important part in developing healthy attachment because a child's developmental stages are short. Unless every effort is made to provide permanent homes for children as quickly as possible, the child is likely to live with different caretakers, reducing the opportunity to form healthy attachments.

Does the System Maltreat Children?

Time is precious for young children. The goal of placing a child with a same race/ethnic family is important, but needs to be balanced against the goal of finding a permanent family for the child quickly. If a conflict exists between finding a child a home quickly and finding a same race/ethnic home, the child might suffer irreparable damage. So while experts study and debate the effect of transracial adoptions, the developmental needs of children can be in jeopardy. The child's needs for a family must be paramount.

For children waiting to be adopted, the first goal should be to find a family quickly -- particularly if they are very young (less than two years of age.) The older the child, the less important time becomes, since they have already progressed through some of the most important developmental stages.

We recommend:

□ The Legislature should provide start-up capital and on-going support for the creation of minority staffed adoption agencies/programs to serve minority children. At the same time, however, it should limit the search time for a same race/ethnic home for a minority child.

Creation of an adoption agency or an adoption program in an existing agency should increase the opportunity to find families for minority children more quickly. It should also increase the opportunity to find families of similar race/ethnicity.

APPENDICES

A. DIRECT EXPENDITURES FOR CHILD AND FAMILY SERVICES IN MINNESOTA: 1988 ESTIMATES

SELECTED ACTIVITIES	CLIENTS	EXPENDITURES
Assessment of Child Protection Complaints	20,824	\$ 8,516,185
Case Management	53,702	17,077,125
Counseling	54,729	12,128,521
Family Based Services:		
Counseling (Professional)	9,279	7,544,138
Life Management (Paraprofessional)	2,550	1,522,730
Homemaking (includes emergency caretaker)	855	586,894
Social & Recreational	329	90,152
Transportation	8,430	325,091
Adoption	1,206	891,502
Day Care (non-training/non-employment)	1,507	1,081,609
Respite Care	12,278	1,468,789
Emergency Shelter	7,359	9,062,653
Child Foster Care	6,872	24,707,682
Group Homes, Rule 5 Homes, and other treatment programs	s 1,962	*15,574,788
Correctional Facilities	985	4,770,961
Respite Care exceeding 72 hours, or 30 days in 12 mos	1,853	689,993
Staff Costs for Licensing and Administration	-,	6,562,524
Other Services	57.196	**3.021.617
	<u>v.i.i+2V</u>	
TOTAL	241,916	\$115,622,954

* Includes child/family cases identified as emotionally disturbed children.

** Includes amounts reported for other services, plus difference between expenditures totaled by service and expenditures totaled by funding source.

Note: Data not included for Carver, Crow Wing, and Grant counties.

EXPENDITURES BY FUNDING SOURCE

FUNDING SOURCE	EXPENDITURES
Federal Title IV-E	\$ 8,991,908
State Permanency Planning	4,651,060
Community Social Services*	97,263,730
Other Sources	4,716,256
TOTAL	\$115,622,954

Includes federal Title XX, state Community Social Services Act, and county general funds.
Data not included for Carver, Crow Wing, and Grant Counties.

Source: Minnesota Department of Human Services, "Update on County Planned CSSA Activities for 1988."

B. GRANTS AWARDED BY THE CHILDREN'S TRUST FUND OF MINNESOTA

July 1987

Statewide Programs

- \$10.000 St. Paul-Ramsey Medical Center, Hearing-Impaired Parents Program
- Illusion Theater, Minneapolis 10,000
- Parents Anonymous of Minnesota, Inc. 15.378

County Programs

- \$10,000 Beltrami, Cass, and Hubbard Counties, Sexual Assault Program, "Sexual Assault Prevention"
 - 5.124 Carver and Scott Counties, Carver-Scott Cooperative Center, "New Beginnings-Child Abuse Prevention"
- Carver, Dakota, and Scott Counties, "Coordination of Child Abuse Prevention" 22,486 Kandiyohi County, West Central Community Services Center, Inc., "Targets-8,000 Adolescent Primary Prevention"
- 2,576 Yellow Medicin eCounty, Upper Sioux Community, "Community Awareness for the prevention of Child Abuse"
- 2,132 Clay County, Rape and Abuse Crisis Center of Fargo/Moorhead, "The Woodrow Project: A Sexual Abuse Curriculum for the Developmentally Disabled"
- 2.038
- Clay County, Rape and Abuse Crisis Center, "T is for Touching" Clay County, St. Luke's Hospital of Fargo, "A Tool to Prevent Child Abuse" 3.000
- Olmsted County, County Health Department, "Intensive Parenting/Homemaking Services 9,504 to Families at Risk of Child Abuse and Neglect"
- Olmsted County, Child Care Resource and Referral, Inc., "Parents of Adolescents Support 6,180 Group"
- Hennepin County, Phyllis Wheatley Community Center, "Support Play Group" 15.000
- Hennepin County, Sexual Violence Center, "Child Sexual Abuse Prevention: A 5,000 Grassroots Approach"
- Houston County, Women's Resources, "Parent/Child Support Program" 7,887
- Lincoln County, Divine Providence Hospital Home Health Care, "Infant Abuse and 2,820 Neglect and Prevention Awareness"
- Ramsey County, Model Cities Health Center, Inc., "Children's Advocacy Project" 10,000
- Ramsey County, Mounds View Schools, "Child Abuse Prevention Program (CHAP)" 7,920
- Rice County, Northfield Public Schools, "A Child Went Forth Child Care" 23,750

Administrative Grant Awards

\$800 Olmsted County, child Abuse Prevention Council

October 1988 through September 1989

Statewide Programs

- \$10.000 Illusion Theater, Minneapolis
- 7,868 Minnesota Migrant Council
- 39,325 Parents Anonymous of Minnesota, Inc.
- 27,500 CLIMB, Theater, Saint Paul

Does the System Maltreat Children?

County Programs

- Carver and Scott Counties, "Coordination of Child Abuse Prevention" \$73,954
- 12,356 Houston County, "Parent/Child Support Program"
- Cass County, Cass Lake/Bena School District, "Children are Special" 22.284
- 3,665 Pennington County, Ripley Alliance, "Focus on the Family"
- Goodhue County, Community Health Service, "Family Service Aide" 16,862
- Goodhue and Rice Counties, Citizens Action Council, "Nurturing Program" 9,360
- 15,000
- Ramsey County, "Hmong MELD" Ramsey County, Saint Paul Public Schools, Community Education Department, "Parent-5,000 to-Parent Project"
- 7,500 Ramsey County, Saint Paul Public Schools, "West Side Family Life Program"
- 20,000 Hennepin County, Big Brothers/Big Sisters of Greater Minneapolis, "Child Abuse Prevention Program (CAPP)"
- Dakota County, Child Abuse Prevention Council, "A Comprehensive Prevention 15,000 Strategy"
- Polk County, Sheriff's Office, "Polk County Child Abuse Prevention Program" 32,276
- Redwood, Yellow Medicine, and Lincoln Counties, Southwest Women's Shelter, 13,200 "Children's Program"
- Chippewa County, Montevideo Hospital, "Primary Abuse Prevention-Intervention" 14,038
- Olmsted County, Child Care Resource and Referral, Inc., "Parents of Adolescents 3,000 Support Group"
- 3,380 Lincoln County, Divine Providence Hospital, "Baby Steps to Growth"
- Clay County, St. Luke's Hospital/Merit Care, "Parent Education: A Tool to Prevent 2,914 Child Abuse"

Administrative Grant Awards

- 1,720 Scott County, Child Abuse Prevention Council
- 1,000 Hennepin County, Child Abuse Prevention Council
 - 234 Rice County, Child Abuse Prevention Council
- 220 Yellow Medicine County, Child Abuse Prevention Council
- 150 Olmsted County, Child Abuse Prevention Council

Source: Children's Trust Fund of Minnesota, 1989 Report to the Legislature and to the Governor

WORK OF THE COMMITTEE

CHARGE TO THE COMMITTEE

The committee worked in response to the following charge from the Citizens League Board of Directors:

FOSTER CARE AND ADOPTION POLICIES

Abused and neglected children often are stripped of the opportunity to lead normal, productive lives; tragically, some are stripped of life itself. Children placed in foster care for long periods of time often learn distrust that remains with them throughout their lives.

While Minnesota law gives every child the right to live in a safe, permanent environment, Minnesota is experiencing increases in: (a) illegitimate births; (b) child maltreatment reports (from 16,199 in 1983 to 21,977 in 1985); and (c) long-term foster care placement (53 percent of children placed spend more than one year in foster care).

Some persons argue more government action on behalf of children is needed. Others argue that the only appropriate government action is that which seeks to maintain family units, not tear them apart.

Today, courts find it difficult to sever parental rights, and most social service agencies do not discuss the adoption alternative. While adults determine what steps to take, children wait.

The issues in this study relate to children who are already born. Issues of abortion and birth control are outside the committee's charge and will not be considered.

The committee should recommend state intervention strategies aimed at increasing the likelihood that every child will have an opportunity to live in a safe, permanent home environment without abuse, neglect, or placement in foster care for long periods of time.

The committee's examination should include:

- data and trends in child abuse and neglect, and policies for reporting, identifying, monitoring, and penalizing abuse and neglect cases;
- the role of changing family structure in child abuse and neglect;
- Minnesota adoption policies;
- Minnesota foster care policies;
- the role of private adoption agencies; and
- the effect of welfare policies (AFDC and Medicaid) on placement of children for adoption and the relationship between single-parenthood, AFDC, and foster care placement.

COMMITTEE MEMBERSHIP

Under the leadership of Judith Alnes, chair, 23 Citizens League members participated actively in the deliberations of the committee. They are:

Dan Peterson Beverly Propes January Roberts Kimberly Roden Stephen Rood David Rosenbloom Joanne Sloan Bill Smith Jacqui Smith Imogene Treichel Jean Webb

COMMITTEE MEETINGS/RESOURCE SPEAKERS

The committee met for the first time on November 29, 1988 and concluded its work on January 9, 1990. A total of 36 meetings were held. As a part of the study process, the committee heard from these speakers:

Patricia Adair, executive director, Genesis II for Women Cheryl Alquist, adoptee Judith Anderson, executive director, Citizens Coalition on Permanence for Children Lane Ayers, assistant public defender, Hennepin County Michelle Bailey, Catholic Charities Jean Campbell, Catholic Charities Carol Dethmers, Minnesota Department of Human Services Mary Dornbush, administrative coordinator, Adoption Option Committee, Inc. Marian Eisner, Minnesota Department of Human Services Pat Eldridge, Lutheran Social Services Sharon Enjady, Minnesota Indian Women's Resource Center Marty Erickson, University of Minnesota School of Social Work Donna Falk, Hennepin County Juvenile Court Referee Bonnie Fleming, adoptive parent Donald Fraser, mayor, City of Minneapolis Donna Geisen, Shelter Foster Parent Marty Gerkey, Ramsey County Human Services Department Hyun Sook Han, Children's Home Society Patrice Hughes-Alfred, Hennepin County Community Services Ann Jaede, State Planning Agency Lynn Malfeld, Hennepin County Adoption Unit Marjorie Mereen, Children's Home Society Mary Kay Metz, Catholic Charities Peggy Meyer, Resources for Adoptive Parents Barbara Moore, Hennepin County Foster Care D. James Neilsen, attorney William Neiman, attorney, Hennepin County Mike Peterson, Professional Association of Treatment Homes Pamela Roedl, former foster child Heidi Schneider, adoptee

Ummil Khee Shabazz, foster parent Larry Sloma, president, Hennepin County Foster Parent Association Suzanne Smith, director, Hennepin County Guardian Ad Litem Program Sandra Sperrazza, coordinator, Minneapolis Chapter of Concerned United Birthparents Mary Lou Stewart, board member, Adoption Option, Inc. John Taborn, J. Taborn and Associates Dave Thompson, Ramsey County Child Protection Program Wright Walling, attorney Esther Wattenberg, University of Minnesota School of Social Work Ruth Weidell, Minnesota Department of Human Services Janet Wiig, director, Children's Services, Minnesota Department of Human Services

ASSISTANCE TO THE COMMITTEE

This report was prepared by Marina Lyon. Dawn Westerman and Joann Latulippe provided staff support to the committee.

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You can get a copy of *The School Book* by calling the Citizens League at 612/338-0791 or by using the enclosed order form. League members can buy the book for \$10.00; the nonmember price is \$12.95

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The report analyzes the improved finances of Minnesota's 10 active HMOs and points out areas of continuing concern. For example, four HMOs still lost money in 1989, and several can not, on their own, meet new state minimums for net worth and working capital. Most will have to continue double-digit premium increases to raise their net worth to state standards. Furthermore, although HMOs have reduced inpatient hospital use in the past, their use has increased steadily in recent years, particularly for older enrollees.

Minnesota HMO Review 1989 is a valuable reference for people who need to keep up with Minnesota's dynamic health care marketplace. League members can buy the report for \$5.00; nonmember price is \$10.00. To order your copy, please use the enclosed form or call the League at 612/338-0791.

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The Citizens League has been an active and effective public affairs research and education organization in the Twin Cities metropolitan area since 1952.

Volunteer research committees of League members study policy issues in depth and develop informational reports that propose specific workable solutions to public issues. Recommendations in these reports often become law.

Over the years, League reports have been a reliable source of information for governmental officials, community leaders, and citizens concerned with public policy issues of our area.

The League depends upon the support of individual members and contributions from businesses, foundations, and other organizations throughout the metropolitan area. For membership information, please call 612/338-0791.

Ellen Brown

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