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## Toward a Child-Oriented Child Protection System

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The title of this chapter seems odd. Why *wouldn't* a child protection system be child-oriented? It seems intuitively sensible that public agencies devoted to child protection would focus on the needs and welfare of children in striving to prevent maltreatment, intervene helpfully when abuse occurs, and remediate its effects. But researchers, policymakers, and critics have voiced common concerns recently that children are neglected within this system. In 1991, the National Commission on Children concluded that “[i]f the nation had deliberately designed a system that would frustrate the professionals who staff it, anger the public who finance it, and abandon the children who depend on it, it could not have done a better job than the present child welfare system” (p. 293). The U.S. Advisory Board on Child Abuse and Neglect (U.S. Advisory Board) concluded, in 1990, that “the child protection system lacks a focus on the needs of children” (p. 38), and urged the development of a child-oriented, neighborhood-based alternative. Earlier, the Select Committee on Children, Youth, and Families called maltreated children “victims of official neglect” in its 1987 report, and found that they rarely receive the kinds of social and mental health services their abuse warrants. In a similar vein, Wald, Carlsmith, and Leiderman (1988) concluded their intensive study of the experience of maltreated children in foster care and in-home placements with recommendations that would strengthen the availability of developmental, mental health, and social services to children in any placement alternative. These professional criticisms of current procedures are consistent with reports in the popular media of children who are victimized, neglected, or otherwise unaided by a child protection system that is ostensibly designed to safeguard their interests.

These concerns are not new. For at least a generation there has been grave concern that children's interests are absent from the design and practice of "child protection." For example, Mnookin was representative of many critics of the foster care system in 1973 when he inquired "in whose best interest" does the system function, given the extent to which children often languish indefinitely in a series of changing and unstable foster placements. During the same year, Goldstein, Freud, and Solnit (1973) urged greater sensitivity to children's sense of time and needs for relational continuity in child placement decisions. Arguably, neither the caseworkers, program administrators, lawyers, judges, social service and mental health professionals, nor other actors within the child protection system—who are deeply motivated by a concern with child welfare—have set out to ignore children's needs in their child protection efforts. There are other reasons that the child protection system has long lacked a child focus.

Inadequate resources is one obvious cause, and the allocation of existing resources is another. In a well-funded child protection system, of course, caseworkers would be more likely to have case loads that permitted them to enlist adequate social services on behalf of children and families, monitor the effectiveness of interventions, design treatment programs that are individually well-suited to the child's specific needs and capabilities, and provide long-term, supportive assistance to family members. In such a system, incoming abuse reports could be effectively investigated by well-trained caseworkers who could identify pertinent risk factors in the child's current circumstances and perceptively design interventions that would provide immediate assistance to children who require it. In a well-funded child protection system, treatment services from a variety of sources could be provided children (whether at home or in a placement) without undue limits in duration or quality because of funding constraints or agency jurisdictions. In such a system, resources would more likely be available for effective prevention programs that could assist high-risk families before their difficulties resulted in abuse or neglect of offspring. Finally, a well-funded child protection system would be capable of adapting to new demands (owing to changes in the economy, challenges of substance abuse problems, or publicity concerning previously unrecognized forms of child abuse) thoughtfully, planfully, and rationally. In many respects, the current child protection system fails to be child-oriented because resources are insufficient for the effective implementation of existing procedures that are designed to protect children's interests. In a well-funded system, child protection would be more likely to function as it is *supposed* to function on behalf of children.

However, the allocation of existing resources is also to blame. Currently, funding for the child protection system is invested heavily toward

the investigation of abuse allegations and toward funding out-of-home placements for maltreated children, because of a combination of policy priorities and funding incentives (Pelton, 1989). Concerning the former: the crisis orientation and public concern related to child protection tend to prioritize investigating the rapidly escalating number of abuse reports (to ensure that children who are identified to the system are provided quick assistance, and to satisfy statutory mandates that all reports of abuse are investigated) and removing children from dangerous homes (to ensure that maltreatment does not recur). Each has increasingly consumed the resources of the child protection system as reports of child maltreatment have grown in recent years, diverting resources from treatment, prevention, and other worthwhile efforts (U.S. Advisory Board, 1990, 1993). Concerning the latter: while annual federal appropriations for abuse prevention and family support services have barely grown during the past decade, funding for foster care is supported by open-ended entitlements and has consequently increased dramatically over the same period (National Commission on Children, 1991). As a result, it has been easier to find the funds to remove a child from the home than to provide in-home services to the family, even though the latter may be in the child's best interests. In short, a primary reason that current child protection efforts are not child-oriented is the allocation of existing resources toward investigation and out-of-home placements in a manner that diverts resources from other important goals of the child protection system.

A second reason the current child protection system lacks a child focus is that it is primarily concerned with abuse recidivism. Preventing the recurrence of child maltreatment is arguably the most important policy goal for intervention, but it has oriented the child protection system toward the remedial and treatment needs of the perpetrator, not the child. As a consequence, the standard of success for intervention programs is whether a maltreated child is reabused, and other intervention goals related to the child's developmental and mental health needs are relegated to secondary status and, in practical terms, are often ignored. Indeed, children often receive few services from the child protection system, while their parents become the focus of counseling, training, and other human services (Layzer & Goodson, 1992; U.S. Advisory Board, 1990).

Given the limited resources of the child protection system this might be a defensible prioritizing of intervention and treatment goals—in other words, it is probably wise public policy that a concern with abuse recidivism is paramount—but it is essentially a minimalist approach. Moreover, because the likelihood of reabuse is very difficult to determine, this emphasis makes it particularly difficult to determine when intervention has been successful, and tends to emphasize criteria related to the perpetrator's mental health and well-being, rather than that of the victim.

In sum, because it mandates greatest concern with the needs of the perpetrator, the child protection system's emphasis on abuse recidivism helps to account for why the current system may be deemed non-child-oriented.

A third reason for the lack of child orientation to the current child protection system is the nature of the training and background of major actors within the system. The educational requisites for a role in child protection include social work, law or law enforcement, program administration, public health, or counseling, but these relevant fields often provide limited background in child development. This is an important problem because it is difficult for most adults to understand how the child protection system looks from a "child's-eye view." Children's encounters with caseworkers, law enforcement officials, and social service personnel can be disorienting, confusing, and distressing, especially in the context of investigating abuse allegations against a family member. Because children are not usually very articulate advocates on their own behalf, their needs and interests must often be interpreted by others, and it is easy to reinterpret their interests in ways that reflect the perceiver's needs or the interests of more articulate or influential adults who are involved with the case. This is especially true if those concerned with child protection also have other concerns (e.g., ensuring procedural due process for the accused, managing a social welfare agency on a limited budget, or fitting the family's diverse needs into existing delivery systems) that necessarily compete with an acute appraisal of children's needs.

This problem is sharpened by the fact that the term "children" encompasses a sufficiently broad and heterogeneous population to render it useless as a guide to program planning and service delivery. "Children" embraces individuals ranging in age from one day to eighteen years whose needs and interests, capabilities and resources, viewpoints and understanding, and self-referent beliefs vary considerably. This variability means that intervention proposals that would be well-suited to children of one age may be inappropriate or even harmful to younger or older children. Moreover, individual differences in the background experiences and intrinsic characteristics of children add greater heterogeneity to this diverse population. Many maltreated children enter the child protection system with overlapping problems of mental illness, learning disabilities, mental retardation, attention-deficit disorder, emotional dysfunction, or other difficulties. The nature of their maltreatment, the resources in family and community upon which they can rely, and their own coping skills also vary considerably. Consequently, a thoroughgoing developmental orientation is necessary to define the characteristics of a child-oriented child protection system because children vary

significantly in their vulnerabilities and the risks posed by existing procedures (Thompson, 1990). This developmental awareness does not come easily to developmental scientists, however, and even less to actors within the child protection system who have more limited background in child development.

A fourth reason that the child protection system is not child-oriented is that it is an inadequately coordinated, fragmented compilation of diverse agencies that are managed with different agendas. Indeed, to speak of the "child protection system" in America is a misnomer. The "system" consists of hundreds of rather independent child protection systems in diverse jurisdictions that are themselves influenced by allied local agencies concerned with public health, law enforcement, education, and social welfare. That these independent systems lack a child focus is understandable, given that most of their allied agencies are not avowedly child-oriented: the concerns governing law enforcement, public health, and social welfare agencies that shape child protection extend far beyond the particular concerns of children and youth to encompass much more diverse needs and constituencies. Even within one allied agency—such as law enforcement—there is often poor coordination of case planning if families are adjudicated in civil and criminal proceedings that have different goals and purposes. As a consequence, a variety of independent agendas necessarily compete with the needs and interests of maltreated children as the child protection system in each local jurisdiction is shaped by the interaction and conflict between the needs of different groups served by its various agencies.

Moreover, this system (or systems) has historically evolved in response to the crisis needs of emergent social problems with little foresight or planning for the future, much less a coordinated effort to design a system of procedures that would optimally protect children in a rapidly changing society. Institutionalized with the discovery of the "battered-child syndrome" in the early 1960s, the child protection system grew with concerns over the prevalence of neglect and its links to family poverty in the late 1960s (and concerns over homelessness and socioeconomic stress of the 1990s), the "discovery" of sexual abuse in the late 1970s and early 1980s, and the contemporary anguish over drug-exposed babies and the effects of the drug culture on children. In a similar manner, the development of the system has historically also been shaped by public debates over the available range of intervention alternatives for maltreated children and their consequences, including the early and continuing concern about the effects of "temporary" foster care placements, a growing emphasis on "permanency planning" in out-of-home placements, and a concern with "family preservation" in contemporary policymaking. In sum, the historical development of the child protection

system has been reactive rather than proactive, and this has undermined systematic planning to design a system that is more responsive to children's needs.

A fifth reason the child protection system lacks a strong child orientation is that research on maltreated children and the interventions that best aid them is still very limited (Thompson, 1993). Although there has been an explosion of research in recent years on the consequences of maltreatment for children's socioemotional, personality, cognitive, and intellectual functioning, essential information concerning the etiology and origins of different forms of maltreatment is still lacking, as are studies of the efficacy of different intervention alternatives. We know little about how children experience and are affected by their encounters with representatives of the child protection system, how these encounters reduce or enhance the detriments of their experiences of abuse, and how these encounters can be made more "child friendly."

Moreover, intervention efforts are hampered by a dearth of systematic information about the decision-making processes by which cases are guided through the child protection system, the factors predicting intra-familial abuse recidivism, the efficacy of various kinds of in-home service delivery systems for maltreating families, how to measure the outcomes of intervention efforts on parents and offspring, and the effectiveness of alternative prevention strategies. In a sense, if the resources were suddenly made available to dramatically improve treatment and prevention efforts in local jurisdictions, social scientists would still have relatively few comprehensively evaluated programs that could be implemented.

Taken together, these factors help to explain why current child protection efforts significantly—although often inadvertently—lack a child focus. Beyond these, there are some good reasons to ask whether the child protection system *should* be child-oriented. Some students of child protection (e.g., Garbarino & Gilliam, 1980; Pelton, 1992) have argued that efforts to "save children" are futile if they fail to take into account the broader ecology of the child's life that begins with the family, but also encompasses schools, health care systems, access to employment, the quality of neighborhoods and communities, and cultural values. A child protection system that becomes narrowly child-oriented by neglecting the influence of these social institutions will not serve child protection goals, because child maltreatment is embedded in other pressing social problems: urban and rural poverty, the drug culture, neighborhood dysfunction, and changing patterns of family life and child care, to name a few. The problem of child maltreatment is misleadingly decontextualized if it is treated in isolation from these other social issues.

Addressing maltreatment in context requires confronting social problems that are not just "child problems," and consequently, designing

prevention and intervention efforts that address the problem of child maltreatment in context involves policies that are not child-oriented except in the broadest sense: reconstructing neighborhoods, enlisting effective substance abuse strategies, improving social services to impoverished families, and the like. In this respect, therefore, a thoughtfully designed, child-oriented child protection system does not focus exclusively on children, given that the problems that contribute to child maltreatment are not just child problems but problems of society at large.

These considerations suggest that moving toward a child-oriented child protection system is easy in general but difficult in specific. The current system fails to be focused on children in effect but not always in design, and reorienting such a system requires profoundly difficult considerations related to values and priorities among goals. If the goals of child protection entail, for example, rehabilitating and punishing perpetrators, treating victims, preventing future maltreatment, keeping families together, and keeping public expenditures as low as possible (Lamb et al., 1991), then the development of a child-oriented child protection system will require advancing certain of these goals and perhaps not others, in the context of competing needs and constituencies served by the system. Moreover, such a reoriented system must also reconsider broader questions—such as how "maltreatment" should be defined, the extent to which the system should be punitive or rehabilitative toward perpetrators, deciding what social service intervention can (and cannot) do well in assisting children and their families, and how the needs and interests of maltreated children should be conceptualized—for which there are no easy answers, and for which solutions entail value judgments about which there is little social consensus. Recognizing these difficulties is an important safeguard against specious criticisms of existing procedures that derive from a caricature of current goals and missions, and bridles unrealistic proposals for reforms that misrepresent the consensus on values or resources that are required for their implementation. But despite these challenges, the task of moving toward a more child-oriented child protection system remains important to the future of child welfare.

Recognizing this, therefore, this chapter identifies a number of principles that might guide the development of such a reoriented child protection system. Most are general rather than specific, and some are hortatory while others recommend particular procedural reforms. These should be regarded as working proposals intended to provide the outline of what a child-oriented system of the future might look like, and they can and should change as child protection procedures and our knowledge of children and their needs continue to evolve.

## PRINCIPLES OF A CHILD-CENTERED PROTECTION SYSTEM

A child-centered child protection system should have two fundamental orientations toward ensuring child welfare. The first is respect for the needs, views, and interests of children encompassed within the system. As we have noted, one reason why the current system lacks a child focus is that the voices of many others compete with those of children, and children are usually the quietest and the least articulate voices in the variety of those that are competing for attention and resources. A child-oriented child protection system would recognize that children, as victims of maltreatment for which they are not responsible, and as the targets of the state's *parens patriae* obligations, deserve first consideration in the system's procedures and decisions. The second fundamental orientation of the system is to regard child protection within the context of larger social structures and processes that affect all families, whether abusive or not. As noted earlier, child protection is misleadingly decontextualized if it is divorced from broader problems of homelessness and poverty, drug abuse and neighborhood dysfunction, and efforts to prevent and treat child maltreatment must take into account the supports as well as stresses that can influence most families. In a sense, a child-oriented child protection system would be capable of drawing upon the resources provided by a child-oriented society at large to support and assist families, especially in their responsibilities toward children. The principles that follow reflect these dual guiding orientations toward child protection.

### A Social Context that Supports Families

*Principle 1.* Child-oriented child protection occurs in a context of broader social policies aimed at reducing poverty, chemical dependency, neighborhood violence and crime, and other conditions that place children and families at risk, and which can offer the material and social supports needed by families to function effectively as contexts of child development.

It is a sad and distressing irony of existing social welfare programs that parents often cannot easily obtain material or social support for effective parenting from public assistance unless courts have assumed jurisdiction for offspring based on child protection action. This is especially true for families at greatest risk for child maltreatment owing to unemployment and socioeconomic distress, substance abuse, teen parenting, or mental or emotional dysfunction, who are unlikely to benefit substantially from the kinds of income supports provided by the gov-

ernment to middle- and upper-income families (e.g., the tax deduction for children; the child care tax credit; etc.), but are either unknowledgeable of or do not qualify for programs that could provide material assistance or social support for their parenting responsibilities. Thus, it is not unusual for child protection action to occur primarily so parents can become eligible for therapy, job counseling, homemaker services, and financial assistance that would otherwise be unavailable to them. In this sense, it is easier to obtain public assistance in these ways *after* parents have abused offspring than *before*.

This creates several additional problems besides undermining abuse prevention efforts that might occur through the provision of material and social support to high-risk families. In addition, it means that supportive assistance occurs in the context of coercive interventions, by child protection caseworkers, into family life that entail privacy intrusions, family disruption, court action, and labeling parents as abusive or neglectful. Needless to say, the benefits of public assistance contingent on these experiences may be undermined by the costs they entail to the families that receive them, and these contingencies may render parents more, rather than less, willing to receive future help from child protection agencies. Furthermore, the contingency of many forms of public assistance on child protection action means that caseworkers experience incentives to intervene into families that pose no threat to children, but which may be prone to abuse or neglect without material aid or social support. The tendency to intervene coercively before problems have become severe has become known as "widening the nets" (Austin & Krisberg, 1981) and, as it has in criminal justice, may actually undermine the effectiveness of the child protection system by placing a greater strain on limited resources and labeling individuals in undesirable ways when their actions do not really warrant it (Thompson & Jacobs, 1991).

In the system we envision, child protection would be a societal responsibility rather than the exclusive obligation of a single government agency. Much of the social responsibility concerning maltreated children would be preventive in nature, with an emphasis on *secondary prevention*—that is, reducing the risk of child abuse or neglect in non-abusive but high-risk families through the provision of material assistance and social support. Both are necessary, but each alone is insufficient to aid these families in the demands of child-rearing: material assistance is essential to coping with the tangible financial and ecological problems that are often the basis of child maltreatment (and is the kind of assistance these families most desire; see Pelton, 1981), while social support is important to enfranchise these families into broader social networks that can provide long-term assistance and rehabilitation (Thompson, 1994, 1995). The provision of each not only enhances the resources of high-risk families for coping effectively with the demands of child-rearing and

other life tasks, but also directly reduces the likelihood of child neglect owing to poverty and socioeconomic distress, which is currently the leading form of child maltreatment (Pelton, 1994).

More specifically, a child-oriented child protection system (broadly conceived) would:

- strengthen WIC (the Special Supplemental Food Program for Women, Infants, and Children) program funding to expand supplementary nutritional assistance to lower-income children;
- enhance subsidies to foster prenatal care for mothers who can ill afford it;
- strengthen the availability and quality of affordable child-care services to high-risk families (who report child-care demands as among their most pressing concerns; see Thompson, 1994, 1995);
- enhance funding for parenting and counseling programs for teenage mothers;
- expand funding support for detoxification and substance abuse treatment programs with voluntary self-referrals;
- strengthen the availability of perinatal home-visitation programs to provide social support to high-risk mothers during the child's early years of life;
- enhance access to drop-in respite child-care programs, and;
- use the welfare system to strengthen educational and job training for parents.

In short, this kind of a reoriented child protection system would regard child welfare as a societal responsibility (not just an institutional obligation when children have been maltreated) that is achieved, in part, by providing material and social resources to high-risk families before abuse occurs. It is the society, not just the system, that becomes more child-caring.

### **Outcome Evaluations Based on Child's Developmental Status**

*Principle 2.* The effectiveness of the child protection system is evaluated in terms of the quality of the child's developmental status during and after intervention.

This principle broadens the criteria by which a "successful" child protection system is evaluated by supplementing a concern for abuse recidivism with a focus on the child's developmental needs. Obviously, child protection efforts are unsuccessful if a child is reabused. But these efforts should also be deemed unsuccessful if intervention occurs at a serious cost to the child's mental health or emotional well-being (such as if children are traumatized by testifying in court against a parent, or by removal from the home), or if the child is placed in living conditions that

do not foster age-appropriate functioning, or if the psychological consequences of the initial experience of abuse are unremediated. In a sense, this principle mandates consideration not only of the needs of the perpetrator, but of the victim of abuse as well. These needs merit special concern during the period immediately following the intervention with the family, but require continued attention until it is evident that the child has been restored to healthy, age-appropriate functioning. As earlier suggested, a concern with developmental outcomes mandates attention to the effects of intervention as well as the effects of maltreatment, and requires consideration of the costs as well as benefits to the child of various intervention alternatives.

Although this principle is intuitively sensible on its face, it entails several weighty considerations. First, how do we define the criteria by which children's "developmental status" is evaluated? Is the standard a measure of "adequate" development? How is this assessed in age-appropriate ways? By whom? In general, social service personnel will have to address these questions on a case-by-case basis depending, in part, on the nature of the maltreatment the child experienced, the immediate consequences of maltreatment as revealed in the initial developmental assessment, the age of the child, the range of potential informants who care for the child, and other pertinent considerations.

The focus of developmental assessments should be on remediating the serious consequences of abuse for the child, and in helping to restore the child to age-appropriate functioning. To evaluate whether there is progress in accomplishing these goals, social service caseworkers will have to rely on informants who know the child well. In seeking to determine whether a child's developmental outcomes have returned to age-appropriate norms, for example, a call to the child's school teacher or day care provider may be most relevant when the caseworker is primarily concerned about the child's educational progress, or poor impulse control, or physical cleanliness. Concerns about enduring problems owing to abuse-related injuries, on the other hand, may require a medical consultant. For an infant who experienced physical abuse, on the other hand, questions about continuing physical trauma or the child's intellectual functioning might be better posed to a medical professional in the context of a periodic health screening. For children of all ages, calls to relatives and others who have regular contact with the child are also likely to be useful. Through the convergence of these information sources, as well as direct assessments of the child, gathered over time (to permit a comparison of the child's present functioning with earlier periods), social service caseworkers can evaluate the effectiveness of intervention by assessing whether the child's current functioning (a) is consistent with norms for the child's age, as evaluated by professionals who have had an opportunity to observe the child; and (b) exhibits remedi-

ation of the significant consequences of maltreatment, as they were identified during the initial developmental assessment of the child.

This evaluation is complicated by the fact that, as earlier noted, maltreated children are often multiproblem children, with challenges owing to learning disabilities, emotional disorders, and other problems. They also come from family backgrounds and neighborhood settings that potentially contribute to educational delays, psychosocial problems, and other adjustment difficulties. Many of these problems antedate the experience of abuse, such that remediating the consequences of maltreatment must also entail attention to the child's other developmental difficulties. In this context, social service personnel must become coordinators of potentially long-term services on behalf of children that may range from educational plans to accommodate learning delays or disabilities, to medical services to treat physical or behavioral problems, and mental health treatment to address emotional disorders. Ensuring adequate coverage of these services through public welfare programs would be another component of the caseworker's responsibilities. The child's progress should be regularly monitored, but it is possible (even likely) that court jurisdiction for the child will end before the range of challenges the child faces have been fully resolved. The important outcome assessment, however, is whether the child is on the way toward age-appropriate developmental functioning in terms of the child's capabilities and living circumstances, and whether the severe consequences of abuse or neglect have been remediated.

Finally, if the effectiveness of the child protection system is evaluated in terms of children's developmental outcomes, resources must be created or diverted to provide funds for these treatment and remediation efforts. At present, many children receive no medical, social, or mental health services from the child protection system, and most who do only receive medical treatment for injuries directly related to maltreatment (Layzer & Goodson, 1992; U.S. Advisory Board, 1990, 1993, 1995). Unless the resources of the child protection system are significantly expanded, therefore, funds must be diverted from other programs or fewer children (presumably those experiencing the most severe maltreatment) will be assisted. Some critics of existing child abuse reporting laws have called for narrowed standards for alleging maltreatment as a means of reducing demands on the child protection system and making the criteria for parental abuse or neglect clearer (Besharov, 1985, 1988; Wald, 1975). Such a change in statutory reporting standards for maltreatment would also enable the system to focus more systematically on the developmental needs of the most serious victims of child maltreatment. Alternatively, in the context of restricted abuse reporting laws, services for maltreated children could be funded using entitlement-based language that would ensure at least minimally necessary mental health services and medical

care to assist them in coping with the consequences of maltreatment. Similar kinds of entitlement language, for example, have long been used to fund programs for children or adults with mental or physical disabilities. Entitlement programs, while expensive, continue to be used to address the needs of the most vulnerable groups within society (for example, the Family Support Act of 1988 entitled welfare recipients in job training programs to child-care subsidies associated with their participation in the program), and maltreated children must certainly be considered eligible by this criterion. At the least, however, a reoriented focus on children's developmental outcomes as a criterion of system effectiveness requires funds to treat and mediate the serious consequences of abuse.

*Systematic data collection.* It is important to note that an evaluation of the system's effectiveness based on periodic assessments of the child's developmental status is valuable not only from the child's standpoint, but also in terms of the sensitivity of actors and agencies within the child protection system to the needs of the children in their care. With the predominant focus on abuse recidivism, child protection caseworkers tend to be most concerned with the progress of the perpetrator. With a dual (even preeminent) concern with the child's developmental outcomes, this attention would be shared with a concern about the child's progress. To enhance this approach, and to provide a valid means of evaluating the success of child protection efforts, the system must have a plan for systematic data collection concerning the children taken into its care, their treatment by the system, and the course of their later development.

Although caseworkers typically gather information concerning the child and family throughout the early course of intervention, it is rare that this information is systematically organized so it can be used to evaluate the experiences and outcomes of children on whose behalf the state has intervened. Such information would have several purposes for children and for the child protection system. First, it would better enable caseworkers to determine whether further services for the child and family are necessary, as noted above. For example, if gathering developmentally related assessments of the child was part of the regular six-month review of children in foster care placements that are currently mandated by the 1980 Adoption Assistance and Child Welfare Act, it would perhaps contribute to making these reviews more substantive than perfunctory. Similarly, if children remain at home in the context of supportive services to the family following child protection action, periodic information-gathering concerning the child's developmental status would enable caseworkers to evaluate the need for continuing court jurisdiction based on the child's progress as well as other assessments of the family.

Second, as this information is compiled for the population of children for whom courts assume jurisdiction, it would also enable child protection administrators to assess the quality of the services that are generally available to children and families within their jurisdiction and, if necessary, contribute to designing more effective therapeutic and remedial interventions. In this respect, gathering developmental assessments would enhance the sensitivity of administrators as well as caseworkers within the child protection system to the aggregate experience of children in their care, help them evaluate which interventions work well and which do not, and contribute to better planning concerning children's needs.

Third, in the aggregate this information would also enable administrators as well as caseworkers to better understand the multifaceted "careers" (Blumstein & Cohen, 1987) of children within the child protection system—that is, the sequence of services, placements, reunifications, and resumed placements that often characterize the longitudinal course of a child's experience with the system—and determine whether these careers can be systematically predicted by the form of maltreatment, the child's age, preexisting developmental difficulties, family conditions, and other factors that might influence decisions made for and about the child. Although it is easy to envision that a child's experience with child protection entails an initial investigation, a set of interventions for the child and the family, and final case closure, quite frequently children are repeatedly taken into the system based on changing family circumstances, and each new encounter with child protection can involve its own sequence of placements, treatments, and other interventions, followed again by reunification.

At present, there is little information concerning whether these decisions made on behalf of the children have any systematic relation to children's needs, and whether certain career pathways lead predictably to better developmental outcomes for children than others. In this respect, the systematic collection of developmental data concerning children would contribute to an understanding of the kinds of decision-making processes that affect placement and treatment choices and other facets of children's experiences within the system, contribute to greater predictability concerning the pathways in which certain decisions are likely to lead, and encourage administrators to evaluate whether better decisions can be made on behalf of children.

At present, however, this kind of systematic, longitudinal developmental data is rarely gathered and organized to address these kinds of questions. Consequently, one important corollary of an emphasis on the child's developmental status in evaluating the success of child protection efforts is collecting information by which this evaluation can be made. It is important to note that the child's developmental status is not the

only important criterion by which the effectiveness of child protection efforts should be evaluated, either for a particular family or for the system as a whole. Many other considerations are also pertinent, including whether the financial, ecological, and other circumstances contributing to maltreatment have changed, whether parents have acquired better skills for caring for offspring, and whether parents have successfully remedied other problems that may have contributed to neglect or abuse. Problems with siblings or relations with neighbors may also merit attention. The reason these additional considerations are important, however, is their prognostic value concerning abuse recidivism and the victim's future well-being. In the end, periodic developmental assessments of the child may be one of the most reliable indicators of whether interventions designed to accomplish these dual goals have been successful.

### **Supportive Assistance During Investigation and Intervention**

*Principle 3.* A child-oriented child protection system provides supportive assistance to the child throughout all phases of casework.

Perhaps the most dismaying—and inadvertent—feature of the current child protection system is that children who have been victimized by maltreatment may be further victimized by the system that has been designed to assist them. From the moment of their initial experience of the child protection system—with the entry of a caseworker into their lives, who asks for trust and disclosure but has the capacity to create upheaval in family life—children receive mixed messages concerning the system's capacity and willingness to help. They encounter a panoply of unfamiliar figures who treat them in various ways (ranging from solicitous to coercive); they are ushered through procedures with little knowledge of what is to be accomplished or to where they are leading; they are provided little opportunity to voice their own concerns, fears, or opinions in case planning; and they must do most of this alone or in the company of a distressed or angry parent, a distracted caseworker, or other disinterested personnel.

Depending on the child's age, these experiences can be distressing, frustrating, and sometimes demeaning to children because of their need to understand and contribute to the experiences that affect them. For very young children, the most salient feature of the intervention of child protection agents into the family is the disruption of family life, the distress and anger of family members, and the separation from parents and siblings and placement in unfamiliar settings that sometimes results. Regardless of the importance of halting the child's abuse, these are nevertheless likely to be distressing and confusing experiences to young



children, partly because of their very limited understanding of the reasons for these events (and their tendency to assume that they are somehow responsible), and partly due to their reliance on the relational attachments they share with family members, even abusive ones, that are significantly disrupted when intervention occurs. For somewhat older children in the late preschool and grade-school years, their confusion is enhanced by their awareness of the roles of sociolegal authorities and the legitimacy of their decisions and actions (Shantz, 1983). The conflict they experience is between their respect for the authorities who have intervened into their family and who later seek the child's cooperation in substantiating abuse allegations on one hand, and their fidelity to family members on the other hand. Not surprisingly, the experience of loyalty conflicts like these can make their encounters with the child protection system especially difficult. With increasing age, concerns about "fairness" in the decisions of authorities for family members, and their own roles and voices in these decisions, become increasingly important as children and adolescents seek to influence the processes that affect their well-being and those of family members. At these ages, in other words, it is important that children perceive that they are heard by the system that makes decisions for them, to buttress their own confidence that the system has acted fairly on their behalf.

Consequently, how a child protection system provides "supportive assistance" depends on the age of the child as well as other characteristics of the child and of family life. For very young children, supportive assistance may primarily entail access to a warm, familiar figure who is consistently available throughout the difficult experiences that accompany child maltreatment investigations. For somewhat older children, it may require explanations, at the child's level of understanding, about what has occurred, what is likely to follow, and who is responsible (and not responsible) for the sequence of experiences the child has encountered. At older ages, supportive assistance may especially focus on asserting the child's own interests in the decisions that affect him or her, especially by giving the child a means of expressing preferences concerning these decisions to pertinent authorities. Regardless of the nature of the treatment or assistance the system can otherwise provide, therefore, a child-oriented child protection system is "child friendly" throughout. This entails several features.

*Redefined caseworker role.* One important feature of a reoriented system is that the mixed roles of the child protection caseworker are distinguished from each other, and the caseworker's supportive role is strengthened and clarified for the child (as well as for the family). In most jurisdictions, the role of the caseworker is intrinsically in conflict: on one hand, this is an investigative representative of the state who will make recommendations to authorities concerning civil or criminal action

against the parent(s); on the other hand, this is a social service worker who can provide significant resources to support troubled families and assist their children. These dual roles are, on their face, incompatible because family members are unlikely to regard an investigative authority as a supportive agent. It is especially unlikely that children will regard the caseworker as a benign, helpful person: why should the child trust an adult who is unfamiliar and who evokes hostile reactions from a parent, even if that authority promises to provide assistance? As a consequence, the caseworker's efforts to enlist the child as an informant or ally in intervention and treatment efforts may be undermined by the child's suspicion and distrust.

One solution, based on proposals by Pelton (1989, 1990, 1991, 1992), is to divorce the caseworker's investigative and support functions, and to assign the tasks of substantiating abuse allegations to specially trained law enforcement officials who have the skills and background to conduct effective investigations. In this manner, the caseworker can be, in a sense, an unequivocal family support agent whose function is to mediate between the family and investigators, consult with legal authorities concerning immediate dispositional decisions if abuse is substantiated, inform the family about the procedures surrounding the investigation and prosecution of abuse allegations, describe what is likely to happen next, identify and enlist the social services that family members need, contribute to family preservation efforts, and create the basis for an extended, supportive relationship with the family. In this role, the caseworker can also be a supportive agent for the child by informing the child about the procedures that involve him or her, providing reasonable (and honest) reassurances about what will be happening in the immediate future that are within the child's capacities to understand; by accompanying the child to visits with other agencies involved in the investigation (e.g., to physical or mental health examinations); and by assisting in the preparation of a case plan that involves an individualized treatment plan for the child. In such a child-oriented child protection system, moreover, the caseworker who assumes initial responsibility for the family during the investigation phase is the same caseworker who participates in designing a treatment program for the child and the family, and who monitors its effectiveness and progress toward case closure. Thus, considerable continuity in this family advocate role is preserved.

In Pelton's scheme, the role of child protection caseworker is not only clarified but is also part of a different kind of child protection agency. A reconstituted child protection agency would be devoted exclusively to family support, abuse prevention, and family preservation efforts by offering resources and support that families can accept entirely on a voluntary basis either through self-referral, or through the agency's efforts to contact high-risk or adjudicated families through professional refer-

rals. This proposed agency would, according to Pelton, coordinate and provide material assistance such as emergency caretaking and home-maker services; housing assistance; help in eliminating household health and safety hazards; emergency cash assistance; provision of toys, cribs, and playpens; enlisting visiting health aides; coordinating transportation assistance; fostering parent skills training; facilitating adult self-help groups; and enhancing access to welfare assistance, substance abuse programs, and other services. It is likely that caseworkers within such agencies could also provide direct material and supportive assistance to children, such as locating affordable and good quality child care, discussing the child's special needs with school personnel, and mediating access to other community programs from which children might benefit. The agency would provide these services to self-referred families, high-risk families referred by other professionals, families that have been identified by special abuse investigators, foster families, and even families anticipating the return of their children from foster care—a population sufficiently diverse that families who participate in agency services would not be labeled in denigrating ways.

According to Pelton, the other roles typically assumed by child protection caseworkers would be assumed by other agencies. As noted earlier, for example, the typical caseworker's investigative role would be assumed by specially trained law enforcement units with background in crisis intervention and domestic violence, as discussed further below. In addition, decisions concerning foster care (including locating and licensing suitable placements and decisions about child removal, maintaining current placements, returning the child home, and terminating parental rights in preparation for adoption) would be assumed by the family court system, with assistance by specially trained foster care workers assigned to the court.

Within our proposed scheme, initial abuse allegations of sufficient severity that the child is likely to benefit from civil or criminal action would require that both the child protection caseworker and the special legal investigator contact the family jointly, with the special investigator (not the caseworker) empowered to order the immediate removal of the child, contingent on judicial review within a 24-hour period, in consultation with the caseworker. The caseworker would, meanwhile, remain in periodic contact with the family as a mediator with legal authorities, facilitator of needed services for the family, and support agent. To be sure, there will remain some inherent conflict in a child protection caseworker's child-protection and family-support functions, especially when families continue to act harmfully to offspring despite receiving helpful services. However, avenues toward reducing this conflict and assisting children effectively within their families are more likely to occur when the caseworker assumes a more unequivocally supportive role for the family.

*Special investigative unit.* In Pelton's proposed institutional reforms, and ours, the primary responsibility for investigating child maltreatment allegations would be assumed by a specially trained unit within the police department or, possibly, the district attorney's office. The background, skills, and training of these domestic abuse investigators would differ from those of conventional law enforcement officials in several ways. First, they would be sufficiently trained in family relations and child development as well as in crisis intervention to understand the complex family conditions that may have led to an allegation of domestic violence; how to manage family conflict to promote both immediate and long-term solutions; the considerations pertinent to determining whether allegations are true; and suitable options for an immediate intervention plan. Second, they would be skilled in both child maltreatment and spousal and elder abuse investigations, since these conditions are commonly coexistent in distressed families, and such families require coordinated intervention strategies. Third, they would be trained to act as liaisons with child protection caseworkers and family court specialists in designing immediate and long-term intervention plans that are suitable to the family's conditions and needs. In the context of these multidisciplinary "child protection teams," therefore, members of the special investigative unit can contribute to and monitor progress in the family toward case closure.

Finally, they would be skilled interviewers of children during the immediate investigation of abuse allegations so that the most accurate, and reliable, account possible of the child's version of events is provided. One of the ways that children are victimized by existing procedures within the child protection system is during the interviewing process, such as when children are reinterviewed repeatedly concerning the circumstances underlying maltreatment allegations. Because the interviews are conducted by individuals with various interests and goals, reinterviewing is not only emotionally demanding for children but may also undermine the reliability of the account through the kinds of questioning children receive. Furthermore, it is often difficult to determine whether interviews lead to fundamentally accurate representations of the child's knowledge or experience, because the quality of the interviewing is impossible to determine after the fact, unless a video record or transcript of the interview is retained. For these reasons, a child-oriented child protection system relies on skilled interviews conducted initially through the auspices of specially trained law enforcement authorities, that are videotaped to provide a permanent record of the child's initial interview account. This becomes the primary source of investigative information related to the child's account.

*Special advocate for children.* Although the child protection caseworker can better function as a support agent for maltreated children under this proposed scheme of responsibilities, we have earlier noted that the case-

worker's child-protection and family-support functions are sufficiently complex (reflecting the state's interests as well as consideration of the family as a whole) to warrant the assignment of another individual as a special advocate for children. The proposed role of "special advocate"—modeled loosely along the lines of the Court Appointed Special Advocate (CASA) program that currently exists in a number of states—would be exclusively child-oriented. This individual would hopefully be drawn from among persons in the child's social environment who have a pre-existing relationship with the child that can contribute to his or her advocacy functions; a teacher or child-care worker, neighbor, community worker, or other neighborhood figure would be suitable. A member of the child's extended family might also be appropriate. Recognizing that this may not be possible in many circumstances, however, child protection agencies would also have access to a list of trained volunteers who could assume this role when necessary.

In either case, the special advocate is appointed when legal authorities decide that civil or criminal adjudication of abuse allegations is necessary. Once appointed, the special advocate would accompany children to all phases of the pretrial investigation, assist the child in negotiating the various procedures and personnel who are involved in this process, and help in representing the child's interests to legal authorities and the court (in cooperation with a guardian ad litem, if one has been appointed). It will be especially important for the special advocate to elicit the child's opinions in ways that neither impose an undue burden of responsibility for case outcomes (by emphasizing that legal authorities, not the child, are responsible for these decisions) nor confound the communication of the child's preferences with the views of others who are speaking on behalf of the child. Thus, considerable skill is required for this role that would be enhanced both by training and by personal knowledge of the child. In this respect, a special advocate appointed from non-neighborhood sources would likely have been trained under the CASA program if one exists in the local jurisdiction, but the added advantage of the special advocate's role in this proposed scheme is the expectation that this person would be drawn from among the child's existing adult allies within the community, if possible.

*Other procedures.* Other features of the child's experience with the child protection system could also become more "child friendly" under a reformed, child-oriented plan. Although considerable judicial attention has been devoted to procedural reforms to accompany child testimony in court concerning allegations of maltreatment (e.g., *Coy v. Iowa*, 1988; *Maryland v. Craig*, 1990), these reforms are only one small part of a child's encounters with the legal system that can influence whether these encounters are traumatizing or tolerable. Some jurisdictions have experimented, for example, with "child courtrooms" that are warmer

environments, with furniture and other accommodations better suited to child testimony than conventional courtroom settings allow (Boland, 1991; Libai, 1969). The events leading to court testimony—including preparation of the child during pretrial interviews, and information provided about the roles of the various legal actors who will be in court—can also be tailored to the child's developmental level and needs for understanding and assistance by either the child protection caseworker or the special advocate. Indeed, children can be provided a prior opportunity to become familiarized with the courtroom by sitting in the witness chair, speaking into the microphone, and becoming acquainted in other ways with the setting in which they will later be offering testimony. Meeting the judge prior to the proceedings might also be helpful. During the testimony itself, access to a security object for younger children, and frequent breaks in the examination for all children would foster better accounts and greater ease in testifying. In these and other ways, therefore, the victimization of children that sometimes accompanies the investigation and interventions accompanying abuse allegations can be replaced by procedures that recognize children's needs for age-appropriate supportive assistance to make these procedures tolerable, albeit still difficult for them.

### Respect for the Child's Perspective

*Principle 4.* A child-oriented child protection system respects children by taking seriously their perspectives on relationships, sense of time, understandings of causality, and other features of their life experience. It also recognizes the centrality of the child's relationships with family members, even abusive ones.

One of the important challenges in child protection decision making is appreciating how interventions are viewed from the child's perspective. By contrast with a typical caseworker's preeminent concern with halting abuse and ensuring that it does not recur, the more salient features of a child's experience with the system may be that family life has been irreparably disrupted. Other decision making junctures in a child's "career" in child protection may reflect similar differences in viewpoint. Infants and young children develop emotional attachments to their caregivers that are central to their emotional well-being, even to temporary foster families who have not been entrusted by the caseworker with the child's long-term care. Somewhat older children may have unvoiced expectations concerning the likelihood of family reunification, or its immediacy, that are not shared or understood by decision makers acting on the child's behalf. Adolescents may have strong views about their own autonomy and place in the family that are essentially unknown (or

unacknowledged) by child protection agents. Children's understanding of their own responsibility for child protective intervention, or of the permanence of their current out-of-home placement, or of what will happen to family members as a result of legal intervention, may be significantly different from that of the adults who are seeking to take their best interests into account.

The problem here is not just a failure of communication. Rather, it is the fact that the unarticulated understanding and assumptions of children are likely to differ from those of adults, and that children's understanding of events not only varies with age but also significantly affects the impact that these events will have upon them. Much of the distress that young children experience in protective care likely derives from their misunderstanding of the causes and consequences of their removal from the home. Much of the frustration experienced by older children and adolescents in their encounters with caseworkers derives from their perceptions that their views are not being heard by decision makers. Furthermore, with the voices of many different participants in child protective decision making competing for attention, it is easy for decision makers either to ignore the perspectives of children, or to reinterpret those perspectives as similar to those of adults. As a consequence, those who make choices in children's interests may fail to discuss those decisions with children themselves; may fail to clarify the consequences in a manner that children can understand; or may fail to even consider that children are construing these experiences much differently from how adults do.

A child-oriented child protection system does not assume that children perceive the system similarly to how adults do, and actors within such a reoriented system strive to understand and respect the child's view (even if not always acting solely on this basis). In some cases, understanding children's perceptions requires talking with children who can articulate their own views and thoughts, especially in the context of a trusting relationship with a supportive adult within the system (or an adult enlisted from outside the system, such as a day care worker or a teacher). In other cases, particularly with younger children, understanding their perceptions requires background in child development that enables caseworkers and other legal actors to recognize how infants' and young children's understanding of relationships and permanency differ from their own, and to respect these differences in their case planning. For example, it may entail recognizing that what the adult world regards as a "temporary" out-of-home placement may be experienced as an enduring relocation by the child, entailing attachments to new caregivers. In either case, respect for children's perceptions may sometimes alter decisions made on their behalf (such as maintaining an existing foster care placement rather than shifting children to a new one), but also re-

quires providing information to children and obtaining their views about these decisions.

The most important tension in policymaking concerning child maltreatment is balancing child protection goals with the child's continuing need for a family that includes an abusive parent. This is especially true earlier in life, when children maintain attachments to abusive parents and deeply miss their families when they are removed from home, and have fewer extrafamilial supports to rely upon than do older children and adolescents. But even older children in foster placements deeply miss the abusive parents they have left behind (Wald et al., 1988). This dilemma is also faced in a poignant way by adolescents who are forced to cope with permanency plans that require periodic reunification with the family, only to be followed by the failure of the home placement and a return to an out-of-home setting. Currently, child protection decision making is guided by family preservation goals that respect the attachments that children develop to family members, but these goals are sometimes applied insensitively to a child's immediate and long-term needs, and thus a greater articulation of the implications of the system's respect for a child's family is necessary.

*Preventive family preservation.* Although the concept of "intensive family preservation" is typically applied to circumstances following the adjudication of child maltreatment allegations, a child-oriented child protection system puts a priority on the availability of preventive social services that enable families to remain intact while remediating problems of inadequate care or supervision, discipline, or other needs, before problems of child maltreatment arise. It also means that a reoriented system seeks alternatives to removing the child from the home, especially when the causes of parenting dysfunction are otherwise remediable. Allegations of neglect that are based on the parent's inability to provide adequate clothing, shelter, warmth, or supervision are a case in point. In such circumstances, the emergency enlistment of social service agencies to provide these resources on a temporary basis, together with longer-term efforts to enlist parents in substance abuse, job training, counseling, and other programs designed to foster their ability to provide for offspring, constitutes a better intervention alternative to immediate removal of the child from the home. In New Jersey, for example, an emergency fund was created to provide temporary material and financial assistance to families identified by one county's child protection system to assist with emergency housing costs, utilities, food, or medical expenses. An evaluation study revealed that the availability of emergency funds often prevented placement of a child outside the home (Horowitz & Wintermute, 1978), and this later formed the basis for a statewide system of similar design (Pelton, 1994). Although costly, programs like these are less expensive in the long run than enmeshing the child in the foster care

system, and are more likely to support the child's healthy growth and emotional well-being.

We thus use the concept of "preventive family preservation" to refer to the efforts of a child-oriented child protection system to enable families to remain together before their problems have reached the crisis when child removal from the home is necessary. Preventive family preservation can either entail services to high-risk families before maltreatment has occurred, or assistance to adjudicated families to permit them to retain children at home. There are many program models of each approach. Concerning the former, for example, the state of Hawaii has established a statewide home-visitation program with abuse prevention goals, called Healthy Start, that provides high-risk mothers with a regular home visitor from the child's birth until age five (Breakey & Pratt, 1991; Chapter 11, this volume; Hawaii Department of Health, 1992). Based on the success of similar demonstration projects (U.S. Government Accounting Office, 1990), paraprofessional home visitors under Hawaii's Healthy Start program provide parent counseling, education about child development needs, assistance in obtaining material resources for the family (including medical aid, respite care, employment, and transportation), and referrals to other social service agencies. The purpose of this program of preventive family preservation is to provide high-risk families with social support, parenting guidance, and access to community resources that can buffer the stresses that can sometimes lead to child abuse or neglect, and strengthen their resources for coping and successful parenting. Early evaluation studies suggest considerable success in achieving these program goals (see U.S. Government Accounting Office, 1990).

In other instances, preventive family preservation may occur after allegations of maltreatment have been substantiated through access to material resources and social support services. Indeed, under Pelton's plan for restructuring the child protection system described above, the primary function of the child protection caseworker would be to enlist such services for the family with this goal. However, it is important to note that in a child-oriented child protection system, services may be provided to children that have additional, indirect benefits for the family. In these cases, by identifying children as the primary intended recipients of social services, children and families can both benefit.

One example is child care. Studies of high-risk families indicate that child-care demands are among the greatest stresses of family life from which relief is sought among extended kin, neighbors, friends, and others (Belle, 1982; Starr, 1982). For children in these families, child care removes them from a stressful home environment (where they may be the targets of a parent's anger and frustration) and, if the care is of good quality, puts them in an environment that is more affirming and devel-

opment enhancing, and potentially can help remediate some of the other difficulties that children from high-risk families often experience (e.g., with peer relations, impulse control, etc.). Infants and toddlers in good quality day care, for example, develop attachments to caregivers that may provide more secure emotional ties than those they experience with parents (Howes et al., 1988). Somewhat older children from these homes may not experience the feelings of inferiority, failure, and anxiety that they often experience at school (Cicchetti, 1990) because well-designed after-school programs do not foster the performance evaluations and social comparison processes that characterize school classrooms. Thus, the availability of good quality day care and after-school care services for the offspring of specially targeted, high-risk families, and for children of families that have been found to be abusive, can have tangible benefits for children and parents alike. It would relieve one of the major financial and ecological stresses that parents commonly experience, while providing children with a supportive extrafamilial social environment.

Moreover, if the day care and after-school care services were carefully designed, they could potentially provide added benefits to high-risk and adjudicated families. Professional preparation of caregivers would enable them to encourage healthy physical, cognitive, and socioemotional growth in children, while enabling them to offer support, counseling, and parent education to their parents. For example, parents sometimes turn to child caregivers for advice on parenting problems, and often profit from the modeling of parenting practices that they can observe, even when they do not seek or appear to accept direct instruction (Flood, 1984; Flood, Greenspan, & Mundorf, 1985). Caregivers in day care and after-school care services can also offer interpersonal and emotional support when parents experience personal problems or marital or job-related difficulties (Thompson, 1994, 1995). Well-trained caregivers are in an optimal role to monitor parent-child relations to detect the onset or recurrence of abusive or neglectful behavior. The child-care or after-school setting can also function as a site for coordinating other services to high-risk or adjudicated families, as professional caregivers offer referrals and enlist other social agencies on behalf of the families whose children are in their care. Day care services have also been used, in demonstration projects, as settings for parent training and mutual support groups (Long, 1983; Powell, 1987, 1988). For children, care centers directed by well-trained professional staff can also function as quasi-therapeutic environments where problems of depression, deficient social skills, and poor impulse control that tend to characterize the victims of child maltreatment can be identified and treated (Durkin, 1986).

In sum, the concept of preventive family preservation that would characterize a child-oriented child protection system emphasizes the provision of material resources and social support to enable high-risk families

to function more effectively before abuse has occurred, and to allow families where maltreatment has occurred to keep their children at home. In contrast with the kinds of "intensive family preservation" (Wells & Biegel, 1991) that occurs *after* family problems have reached crisis, preventive family preservation makes the same material and social commitment to troubled families *before* problems have reached crisis, to prevent the necessity of removing children to an out-of-home setting.

There must be limits, of course, to the efforts of child protection caseworkers to keep families intact in the face of repeated and persistent abuse, personal dysfunction of parents, or overwhelming financial or ecological problems for the family. Indeed, there is currently considerable debate about the limits of family preservation in terms of the needs of children and the extraordinary obstacles in the lives of some parents to effective remediation of their problems. There is considerable wisdom to this debate, partly because children are often the unintended victims of the heroic, persistent, and long-term efforts of the child protection system to reunify a family that has become shattered for many reasons. A child-oriented child protection system would orient this discussion, however, to the needs of children for a home setting and family relationships that are affirming, supportive, and predictable. At the very least, the periodic reuniting of parents and offspring without the serious prospect of their long-standing success as a family should be reconsidered in light of the emotional demands it imposes on children of all ages. At times, especially for older children, continuing relationships with family members may be important, even when the physical reunification of the family is not possible, and strategies to permit this should be considered. In broader terms, however, the limits of family preservation should be defined, in part, by the detriments to children of living for long periods in uncertainty, instability, and relational flux.

*Parental enfranchisement in case planning and decision making.* It is ironic that many treatment programs for abusive parents as well as for maltreated children isolate each partner from the other. It is difficult to know how adults can better learn parenting skills in isolation from the offspring with whom they have experienced parenting dysfunction, or how children can begin to cope with the emotional and psychological consequences of abuse when isolated from the parent with whom they are likely, eventually, to be reunited. Moreover, when short-term intervention decisions isolate family members from each other in treatment or placement planning, their eventual reunion is likely to be especially difficult because there has been little effort to help them develop a new relationship that, by definition, requires time together. This is particularly true given that their reunification—and the period immediately following it—is not typically accompanied by systematic, supportive assistance from overburdened social service caseworkers.

Even when they have been abusive or neglectful, parents have a unique understanding of their child's specific needs and special characteristics, and are the most emotionally salient and influential figures in the child's life. In a child-oriented child protection system, therefore, parents are enfranchised in case planning and treatment decision making concerning the child. If the child remains within the home, treatment and other social services are provided not only to individual family members, but jointly, whenever possible, to foster the emergence of new family systems that will promote the child's welfare. For example, parenting classes for adults should include periods when parents and children are together in various structured and unstructured activities, with the advice and guidance of the counselor, who can help adults apply new parenting practices in actual contexts of interacting with offspring. If children are offered therapeutic assistance to cope with the psychological consequences of abuse, a component of the therapeutic regime should include family therapy that will alter the family system as a whole.

If the child is removed from the home, on the other hand, parents should be enfranchised in the process of assisting in the child's transition to and from the foster family. This includes the parent joining the child during the initial visit to the foster family, selecting preferred toys, security objects, and other articles that will ease the child's transition, visiting regularly with the child at the foster home with assistance by the child protection caseworker (who may be especially helpful with transportation), helping in the child's care within the foster home (e.g., identifying allergies, food preferences, assisting in laundering and meal preparation, etc.), ongoing participation in the child's school or child-care arrangements, and eventually participating in the child's transition back to the biological home. The goal of these efforts is, in short, to preserve within the child and parents their shared identity as a family throughout the intervention and treatment process, and to provide a psychological foundation for their successful eventual reunification. However, even when the eventual reunification of the family is not anticipated by child protection caseworkers, many of these procedures will nonetheless be helpful to children by easing their transition to a foster family and enabling foster parents to learn about the child's special needs and characteristics.

Clearly, these kinds of cooperative arrangements with parents as facilitators of their child's in-home treatment or out-of-home placement are unlikely to occur smoothly within the kinds of confrontational encounters with child protection agents that often characterize intervention efforts. To the extent that parents naturally regard caseworkers as adversaries rather than advocates on their behalf, efforts to enfranchise them in case planning and decision making are often likely to be futile.

Therefore, one of the reasons for a redefinition of the child protection caseworker's role, as outlined above, would be to eliminate certain components of the adversarial relationship that often characterizes intervention efforts. However, even within current procedures, additional efforts to enlist parents helpfully in casework decision making on behalf of children might prove fruitful. Davidson (1989), for example, has urged the use of mediation in child protection cases to reduce conflict between caseworkers and parents about the dispositional plan, although mediation might also be useful in addressing disagreements about the nature of maltreatment allegations themselves. Several jurisdictions currently have provisions for mediating disputes between parents and caseworkers in child protection cases, although they vary concerning the role and function of the mediator and other issues.

Davidson (1989) has also argued that mediation may be helpful in resolving conflicts between parents and relatives (when the latter are also involved in the dispositional plan), between parents, foster parents, and the child welfare agency, and between other parties involved in the dispute. As is true in other areas of family law where alternative forms of dispute resolution have been tried, mediation does not offer a panacea for the conflictual relations that, to some extent, must necessarily characterize encounters between parents who have been accused of child maltreatment and the caseworkers who seek to protect the child; and differences in the relative power of these adversaries can undermine the perceived fairness of mediated resolutions to their disagreements. Moreover, mediation should be considered cautiously when the child has been repeatedly and seriously harmed, or is at immediate risk of serious harm from parents. But in other cases, mediation can be helpful in enfranchising parents to a greater degree in the decisions surrounding their children by providing the basis for a more cooperative relationship with caseworkers, as well as sensitizing caseworkers and other child protection authorities to parents' legitimate concerns. For these reasons, mediation provides a potentially valuable avenue for improving relations between parents and child protection agents.

Finally, it is important to note that even when family reunification proves impossible, termination of parental rights and adoption of the child by others is only one of several alternative dispositions that could be considered. Some alternative options preserve the possibility of limited future interaction between child and biological parent, while barring the latter from ever achieving custody of the child, and placing the child in a permanent, safe home environment. These include arranged long-term foster care plans, custody and guardianship awarded by the court to a new family, and adoption with visitation privileges for the biological parents (Garrison, 1983; Hardin, 1983). While some of these arrange-

ments would require special provisions or statutory revision to prohibit the possible resumption of custody by the biological parents, under such circumstances they provide a means by which the child is in the care of non-abusive adults, while not completely losing contact with biological parents. To the extent that adjudicated parents contest termination of parental rights because, as Davidson (1989) argues, they fear losing any chance of future contact with the child, alternative permanency options may allay these fears, facilitate more efficient placement of the child in safer but permanent living conditions, and advance the child's interests in not losing contact with parents as well.

*Extended family and neighborhood participation.* One additional way to accomplish the goal of preserving a shared identity as a family throughout the intervention and treatment process is for a child-oriented child protection system to enlist extended family members for intervention purposes. Many local child protection agencies already turn to the extended family for temporary foster care placements for maltreated children, on the assumption that their familiarity with and attachment to the child will provide greater social support to children and parents. Extended family members can also ease and facilitate the child's return home when the family is ready to be reunited. Less commonly enlisted are neighbors and other community members who can provide similar benefits to maltreated children in temporary out-of-home placements.

For example, tribal members and others who share the child's cultural or ethnic heritage can be especially important for children from minority cultures. For older children and adolescents, these neighborhood resources may be more valuable than extended family members because these are sources of social support upon which children of these ages commonly rely. Extended family and community members are each more likely than unfamiliar foster families to facilitate the child's access to the parent and support their relationship during the placement, as well as preserving, in many cases, an ethnic and cultural identity for the child. Although these arrangements can sometimes be detrimental to children (e.g., if abusive encounters persist during visits with parents), on balance there are considerable potential benefits to children under these arrangements.

When children remain home while the family receives needed services, extended family and neighborhood members can be enlisted by the child protection system in other helpful ways: as providers of respite care, as crisis support agents to parents, and as counselors to maltreated children. By participating in some aspects of parenting classes, these family members can also reinforce and monitor the assumption of new skills by abusive parents. Of course, these roles are commonly assumed by extended family members and neighbors in informal ways, and thus a

child-oriented child protection system seeks to strengthen and build upon existing natural social supports for the family, before seeking to create new supports from sources that are unfamiliar to family members.

### Individualized Treatment Plan

*Principle 5.* Intervention and treatment of children within a child-oriented child protection system are designed according to an individualized plan that takes into account the type of maltreatment, the child's age and developmental capacities, the family ecology, and the particular resources and vulnerabilities of the child as well as the family.

The children who enter the child protection system are often multi-problem children, with overlapping difficulties with mental illness, learning disabilities, mental retardation, emotional dysfunction, and other problems in addition to the effects of abuse. Moreover, the consequences of their maltreatment are also individualized, depending on the child's intrinsic vulnerabilities and resiliencies, as well as the kind of maltreatment, its duration, the identity of the perpetrator, and family conditions. The age of the child is, of course, a significant influence on how the experience of maltreatment affects developmental outcomes and how they can be effectively remediated (see Cicchetti, 1990). Added to these individualized outcomes is variability in the nature of the social supports upon which the child can rely on the family (including the extended family) and the neighborhood. Recognition of these factors compels the development of an individualized approach to intervention and treatment within a child-oriented child protection system. For example, as Daro (1988) has shown, different treatment models work best for children who have experienced physical abuse, neglect, sexual abuse, and emotional maltreatment. Different treatment approaches also work best for infant, preschool, school-age, and adolescent victims of maltreatment.

In a child-oriented child protection system, an individualized treatment plan for maltreated children would be designed by the child protection caseworker in consultation with the family, the child's special advocate, the child (depending on the child's age and interest), and other constituents. This treatment plan would include, as needed, educational, medical, mental health, and other services that are integrated and coordinated across relevant agencies by the caseworker. The duration of services would last until the serious effects of maltreatment have been remediated and the child has been restored to age-appropriate developmental functioning (*Principle 2*). Interagency coordination would be enhanced by the funding mechanisms for such services, which are centralized in a state-level clearinghouse of social services for maltreated

children and their families that monitors and regulates funding and eligibility requirements to enhance the flexibility of service delivery to these and other troubled children. The foster care system would also be strengthened to provide more effective and helpful services to children within foster families, as well as supportive services to these families themselves.

*Flexible range of integrated services.* A significant obstacle to the effective assistance of maltreated children within the current child protection system is not only limited intervention and treatment resources, but inadequate access to these resources. Because of funding constraints, eligibility requirements, and limited flexibility in program design, the task of marshalling services for maltreated children and their families is often a matter of channeling their diverse and complex needs into the small range of existing services and agency jurisdictions. At times, major decisions in case planning hinge on the strategies necessary to obtain eligibility for needed services, such as when courts assume jurisdiction over neglected children to ensure their eligibility for social services. And with distressing frequency, devising a treatment plan is a matter of choosing the least detrimental alternative from among a variety of very limited and potentially unhelpful options. It is no surprise, consequently, that major critiques of the child protection system have underscored the poor availability of treatment services and the fact that maltreated children receive little remedial assistance from the state (Select Committee on Children, Youth, and Families, 1987; U.S. Advisory Board, 1990, 1993, 1995; Wald et al., 1988). According to the National Commission on Children (1991):

The bureaucratic maze of discrete, unrelated programs, each with its own administrative procedures and eligibility criteria, discourages many families from seeking help and delays the provision of assistance to others. The unfortunate consequence is often to heighten parents' feeling of isolation and helplessness and to exacerbate problems that may lead to abuse or neglect. Once children have been removed from their homes, fragmented and narrowly defined programs make it difficult for foster parents and caseworkers to secure the array of health, educational, and social services many of these children desperately need. (pp. 202–203)

One approach to breaking this bureaucratic logjam on children's behalf is the centralized coordination of service programs under the direction of a state agency working directly with federal and other agencies. An illustration of how this can be accomplished is the decategorization of child welfare services in Iowa. According to Lerman (1994), child welfare administrators who sought increased funds for family preservation services in Iowa discovered that many funding streams were oriented to-



ward foster care (rather than placement-prevention services), and those that were prevention-oriented had highly specific eligibility criteria. To free the necessary resources for family preservation efforts, they identified 30 programs that supported various services related to day care, in-home services, adoption, and institutional care, and decategorized the 30 funding streams at the state level, merging them into a single pool of funds to be allocated to local counties, with few state regulations attached to expenditures.

A local plan developed by a team of county authorities was necessary to release decategorized funds for local needs. Following an experimental pilot project in two Iowa counties during 1988–1990, other counties were added to the statewide plan. While it is too early for a comprehensive evaluation of the success of the decategorization project, Lerman (1994), suggests that as a consequence, local counties discovered the importance of cost-effectiveness in the allocation of child welfare monies while improving, in a planful manner, the delivery of services to needy children. At the same time, statewide expenditures for out-of-home placements stabilized while the responsibility for placement decisions was shifted to local authorities.

Decategorization of funding streams for children's services provides one avenue for more effective service delivery that is less encumbered by restrictive eligibility guidelines, inconsistent administrative procedures, and inadequate agency coordination. However, enhanced access to these services must be accompanied by increased integration and coordination of services by those who provide them. One approach to doing so is through the use of multidisciplinary "child protection teams" that include a child protection caseworker and representatives from public health, law enforcement (i.e., the special investigative unit described above), the juvenile or family court, the child's special advocate together with the child and, possibly, his or her family. These teams would be responsible for approving an initial individualized treatment plan and for periodically monitoring the effectiveness of services and modifying the treatment plan as needed, based on recommendations from the child protection caseworker. While the caseworker would be primarily responsible for these tasks, consultation with a child protection team—which may consist of a standing committee of representatives from pertinent agencies with additional members on a case-specific basis—would help to ensure greater interagency integration of service delivery on behalf of children and coordination with other agencies with an interest in the case.

*Variety of in-home services.* One of the challenges in remediating maltreatment and preventing its recurrence is that in-home services to families are limited in scope and duration by funding and administrative restrictions. Thus, even when the goal of family preservation is accom-

plished, there is often little that child protection agencies can offer troubled families to strengthen them and ensure that abuse does not recur. A child-oriented child protection system would be capable of providing a variety of in-home, neighborhood-based services to maltreated children and their families. These include respite care and crisis nurseries that are available on emergency demand (possibly supported through community volunteer agencies); neighborhood drop-in, after-school programs for older children; "Big Brother" and "Big Sister" programs for children and adolescents; special education services for children with educational needs; homemaker and parent aide services for parents; assistance from child protection caseworkers in obtaining food, housing, medical care, and other necessities under eligibility guidelines for welfare programs; counseling and mental health services for children and parents as needed; and access to job training, substance abuse, and parent education programs for parents.

Equally important, these services and programs would not be artificially time-limited by agency restrictions, but would be available as ongoing support services, accessible by request, as long as high-risk families perceived their need for them. Thus, ongoing supportive services as well as intensive crisis intervention services would be available. This is consistent with the emphasis on broadly conceived, secondary prevention services articulated in *Principle 1* as part of societal commitment to reducing child maltreatment, and the concept of family-oriented, preventive family preservation described in *Principle 4*, for high-risk families and families adjudicated for allegations of child maltreatment. Because family problems are not always remediated after three months or six months of services, there is no good reason that services designed to assist them should be summarily terminated after this time.

Although this discussion identifies a fairly extensive inventory of services and an open-ended commitment of public resources, many of these programs are currently available to families under the auspices of child protection agencies; several are based on volunteer efforts, and a number provide services to all families in need, whether they have been identified by child protection agencies or not. In a sense, therefore, these services are a broadly based array of social supports that vary in their target populations. Because of this, participation is less likely to be stigmatizing to recipients and service delivery systems need not necessarily be tailored specifically to maltreating families. In this respect, families that are abusive and families that are prone to abuse can benefit from the same kinds of material and social supports that all families in need might receive from a child-caring society.

*Strengthened system for out-of-home placements.* Problems in foster care have been of long-standing concern to critics of the child protection system, but many of the conditions warranting concern have become worse

rather than better during the past decade. Foster care is avowedly a temporary placement for maltreated children, but the intractability of many of the family or parental problems associated with child abuse, the limited effective supervision of children placed in foster care, and a dearth of permanency-leading alternatives undermines this goal. Consequently, children remain in foster care while failing to receive additional services, perhaps on the assumption that foster care itself will remedy the child's problems (Wald et al., 1988). But foster care placements are unlikely to be intrinsically remedial settings for children, given the limited availability of suitable foster care placements and the increasing demand for such placements by an overwhelmed child protection system. In addition, there are few services or other supportive programs for foster families, and social service policies often discourage foster families from forming attachments to the children in their care. Moreover, low maintenance payments, lack of training and support to care for multiproblem children, and other difficulties of the foster care system discourage well-functioning families from becoming foster families.

While policies that encourage the provision of in-home services to maltreated children and families are a desirable goal, the fact that out-of-home placements will always be necessary for some children mandates greater attention to the needs of children and foster families. A child-oriented child protection system would provide meaningful financial incentives and support services to encourage healthy families to care for maltreated children. This would include special training for foster families, support groups under the guidance of professionals, consultations with experts concerning special-needs children, special therapeutic and counseling services for maltreated children in foster care, and greater coordination between child protection authorities and foster families concerning case planning and disposition, as well as enhanced maintenance payments. Foster families would be enlisted as consultants by child protection teams in the design and revision of the individualized treatment plan for the child in their care. Moreover, the notion that authorities should explicitly discourage the development of emotional ties between foster parents and the children they care for is unrealistic and unwise public policy, both for children and for foster parents. Indeed, most children are likely to benefit from stable, emotionally supportive out-of-home placements, even when family reunification eventually occurs, and foster families are less likely to abruptly terminate placements when the policies of social welfare agencies do not discourage close ties to foster children. Consequently, attachments between foster parents and the children in their care would be encouraged, rather than discouraged, under a child-oriented system. A child-oriented child protection system would also create specialized foster care placements for children with special needs, including therapeutic foster care and small group homes for ad-

olescents (who can most benefit from such arrangements). These foster families would receive special training, higher maintenance payments, and access to other services to assist them in their special responsibilities.

Finally, it is important to recognize that children removed from their homes often reside not in foster families, but in institutional settings that may consist of residential treatment centers, group homes, or other arrangements. Concerns about reports of institutional abuse of children in some of these settings suggests the need not only for enhanced services, but also for stronger regulation of such placements within a child-oriented child protection system. In an incisive analysis, Lerman (1994) has proposed extending statutory definitions of child abuse and neglect to the regulation of institutional settings for children, upgrading licensing standards and responsibilities (e.g., to include standards for nutritional and health care as well as the quality of the physical setting), and improving the monitoring and enforcement of revised licensing and statutory standards. Furthermore, he has urged that statutory provisions include a presumption against institutional placements for children who are adjudicated as abused or neglected by requiring caseworkers to document that less restrictive placement alternatives are unavailable or were unsuccessful, and that the child experiences imminent danger of harm unless an institutional placement is provided. In these ways, the goal of providing an out-of-home placement in the "least restrictive environment" that is suitable to the child's needs could be included in service delivery for maltreated children.

Taken together, these provisions clarify that a child-oriented child protection system recognizes that the consequences of maltreatment are not necessarily remediated by removing a child from an abusive home and placing the child elsewhere. Clearly, additional intervention and treatment strategies—coordinated by a child protection caseworker with the assistance of a child protection team, facilitated by the flexible coordination of service programs through a statewide agency, and enlisting the advice and cooperation of the child and, possibly, the family (and the foster family, where pertinent)—are an important part of enabling the child protection system to accomplish one of its primary goals of restoring the child to age-appropriate, developmental functioning.

### Generation of New Knowledge

*Principle 6.* A child-oriented child protection system supports the development of new knowledge concerning child maltreatment and its prevention and treatment.

Comparably tragic to the escalating incidence of child maltreatment is the dearth of new knowledge concerning its prevention and treatment.

Despite an explosion of new studies of child abuse and neglect during the past decade, only a small amount of this new knowledge is directly relevant to the policy problems that are of greatest concern to practitioners "in the trenches" (Thompson, 1993). One reason for this problem is that research in this area has been undirected and unfocused, with no well-coordinated research initiatives designed to systematically test and compare alternative intervention or treatment strategies; few rigorous evaluations of demonstration projects concerning maltreatment treatment or prevention; and few longitudinal investigations of the causes and correlates of abuse or neglect. Another reason is that it is very difficult to design and conduct good, policy-relevant research concerning child maltreatment, and consequently the growth of research knowledge in recent years has not directly benefitted policymakers or child protection workers with their difficult decisions and determinations. Finally, a third reason for the dearth of policy-relevant research is that such research requires the long-term, sustained investment of research funds to facilitate the kinds of longitudinal follow-up and evaluation studies that are so lacking in this field. Neither alternative funding sources nor the reward structures of universities foster the investment of research time and effort in such studies without substantial funding assistance.

Within a child-oriented child protection system, these obstacles to the effective generation of new research knowledge are addressed by earmarking major research funds to the study of child maltreatment and guiding this study into consensually defined priority areas. Priority areas would be identified based on the recommendations of a multidisciplinary panel of experts that included researchers but also practitioners working at various levels of the child protection system, with their recommendations revised biannually to promote currency and effective monitoring of research progress. At present, new research is desperately needed in several areas. First, research is needed to systematically evaluate the outcomes of various abuse-prevention strategies, which can be conducted through the coordination of an integrated, multisite research program (comparable to current NICHD support of a research consortium on the effects of early infant day care) and combined with basic studies of the factors predicting intrafamilial abuse recidivism. Second, further evaluation efforts are required to judge the efficacy of alternative in-home intervention programs of the kinds outlined earlier in this discussion (especially parent-education programs that are widely used in diverse jurisdictions), as well as to design and evaluate the efficacy of alternative kinds of foster care placements. Finally, considerable research effort is required to gather information concerning the child protection system itself and the decision-making processes by which families are influenced by the system (see Thompson & Wilcox, 1995).

This research is important because it provides one important founda-

tion to improving the current child protection system and toward making it more child-oriented. In this manner, researchers can contribute to the assumption of society's general responsibility toward children in need.

## NOTE

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**PART III**

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**Some Current Applications**

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