

# CHILDREN ARE LISTENING

## Conversations for their future



Proceedings of the  
Statewide Forums on Abused,  
Neglected, and Abandoned  
Children



# About Children's Action Alliance

CAA is a private, non-profit, research, policy, and advocacy organization dedicated to promoting the well-being of all of Arizona's children and families.

Through research, publications, media campaigns, and advocacy, we act as a strong and independent voice for children who cannot speak for themselves.

We work to educate the public and policymakers about children's needs and to promote effective strategies to improve the lives of children and their families. CAA's Board of Directors and supporters believe that the quality of life of our state's children is the single most important determinant of Arizona's future.

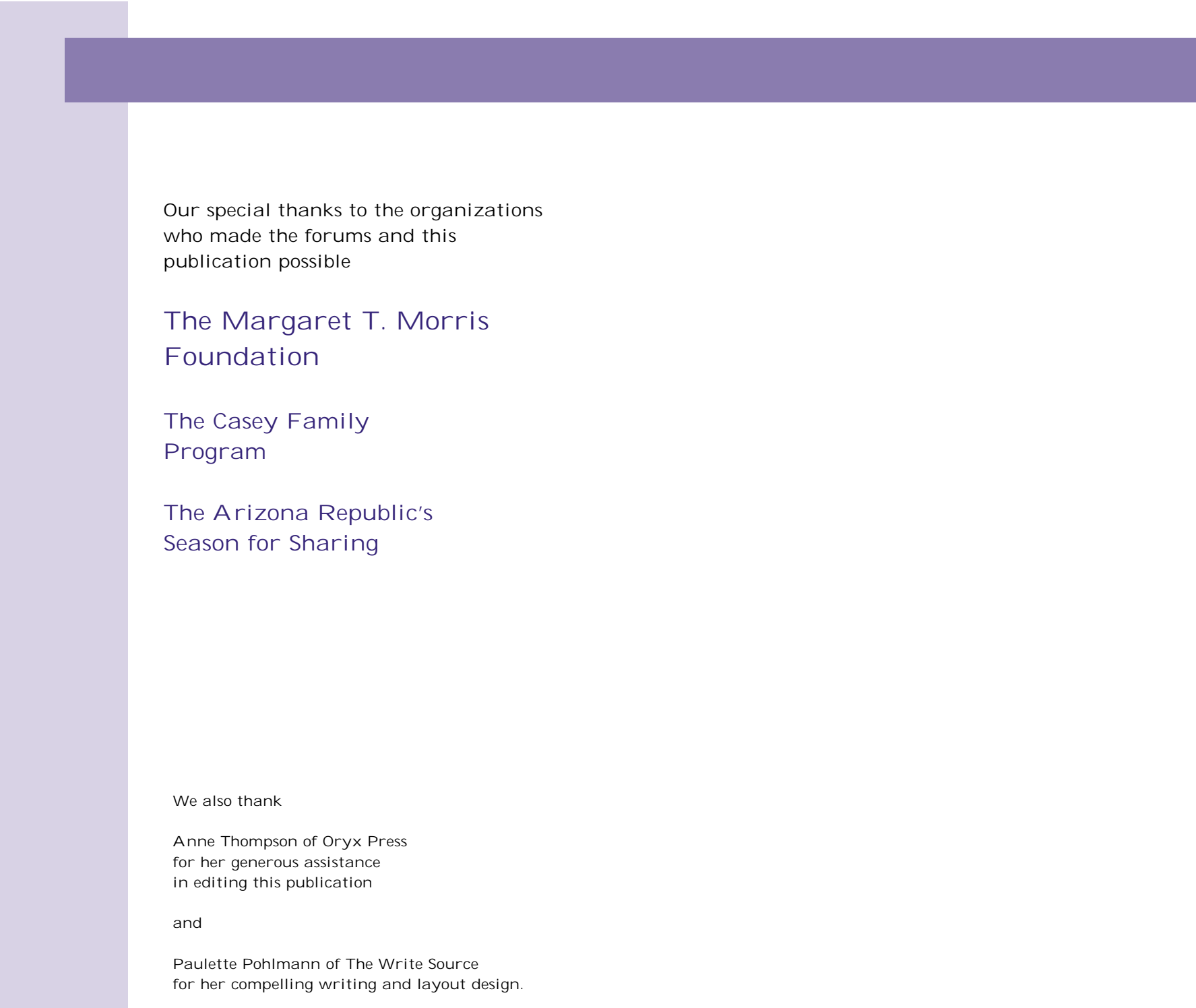
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*“The child welfare system is not based on any set of acceptable values. The values that should be working in a family-centered system are that most children belong with families; and that parents love their children; and that if they maltreat their children, it is an expression of our society’s failure to meet their needs. We should be building a system of care that is based on values. If we did that, we would not have children getting into the mental health system as they are today, [which is] only when they present with serious behavioral problems or have reached the juvenile court system. We would not have families treated by our mental health system as if they were the enemy instead of part of the team. We would not have children treated as criminals even though they have not been charged with crimes. And we would not have games being played with diagnoses over whether or not a child needs services. We would be looking to find what our system can do to support that child to grow up in a family in a way that is productive. I think the most important thing we need to do in any redesign or rework of what we’re doing with children is to start with a set of values.”*

— Attorney



Our special thanks to the organizations  
who made the forums and this  
publication possible

The Margaret T. Morris  
Foundation

The Casey Family  
Program

The Arizona Republic's  
Season for Sharing

We also thank

Anne Thompson of Oryx Press  
for her generous assistance  
in editing this publication

and

Paulette Pohlmann of The Write Source  
for her compelling writing and layout design.

# Arizonans for Kids



**AZ for Kids** is a citizen partnership with Children's Action Alliance dedicated to advocating for systemic reforms to ensure that Arizona's at-risk, abused, neglected, and abandoned children are afforded safe, nurturing, and permanent homes. Our goals include *developing and implementing a model for comprehensive child welfare system reform*. We intend to achieve our objectives by

- understanding what the community perceives as major issues affecting the child welfare system,
- conducting research and analysis to lay the foundation for sound policy development,
- identifying benchmarks for progress and outcome measures for Arizona's child welfare system, and
- working with policymakers to implement systemic reforms.

**AZ for Kids** seeks to *mobilize citizens to be a powerful, articulate and outspoken force to advocate for systemic reform*:

- ✓ by informing citizens around the state of the work of AZ for Kids,
- ✓ through public events, the news media and publications, which will increase citizen awareness of system problems and potential solutions to providing safe, nurturing and permanent homes for Arizona's abused, neglected, and abandoned children,

- ✓ by building consensus among citizens concerned about these vulnerable children as to directions, priorities, and timelines for reform,
- ✓ by recruiting and encouraging well-informed constituents to advance the model for child welfare system reform with policymakers.

**AZ for Kids** adheres to the following guiding principles:

**Leadership** — AZ for Kids provides the leadership to make open, inclusive and informed decisions.

**Community Focus** — AZ for Kids promotes the highest possible degree of citizen involvement.

**Cultural Inclusiveness** — AZ for Kids is culturally inclusive and responds to the interests and needs of Arizona's diverse populations.

**Accountability** — AZ for Kids promotes accountability by the systems that serve Arizona's most vulnerable children.

**Quality** — AZ for Kids promotes effective and efficient services and systems that focus on providing safe, nurturing and permanent homes for at-risk and abused, neglected and abandoned children.

**Managing By Facts** — AZ for Kids seeks to obtain all available fact-based information and research to support system reform recommendations.

# Child welfare forums

It was determined that an important first step in developing a model for reform would be to gather public input. Four forums were held in late 1997 in Tucson, Tempe, Prescott, and Glendale. Attendees were invited to give testimony, either orally or in writing, on their experience with the child welfare system — its positives, its negatives, and their solutions for change. Panels, guided by a facilitator, were assembled at each location in order to witness the testimony and, if necessary, seek clarification. The panelists were selected based on their long and varied histories as both volunteers and professionals with the child welfare system in Arizona.

The forums were attended by hundreds of interested citizens who drew a fairly clear picture of the problems experienced by people who must use or interact with the child welfare system, or work as professionals within the system. They also brought attention to a variety of programs and community-based efforts that have experienced success at

meeting the needs of these vulnerable children.

There are two other important sources of data and feedback that were used in this synthesis of public comment. Children's Action Alliance conducted a survey of court-appointed special advocates (CASA) and Foster Care Review Board (FCRB) members at the June 1997 Statewide CASA/FCRB Skills Training Conference. Their comments were integrated into the text that follows. We also facilitated a young adult focus group in February 1998 for members of the Arizona Young Adult Program Youth Advisory Board who are current young adults in foster care. We felt that hearing from individuals actually in the child welfare system would be especially pertinent as we work toward devel-

oping a model for system reform.

This project is directed by five guiding principles adapted from the W.K. Kellogg Foundation initiative called "Families for Kids Who Wait." These principles were articulated to the forum audiences and set the context for our discussions. They are to

- 1. Provide services to families before the crisis escalates.***
- 2. Respond to serious cases in the right way and on time.***
- 3. Recruit more foster parents and support the ones we have.***
- 4. Give caseworkers the support they need.***
- 5. Give every waiting child a safe, nurturing and permanent home.***

These principles will also serve as the foundation for organizing the public input we have gathered over the past year.

## TO JOIN AZ FOR KIDS OR OBTAIN MORE INFORMATION:

- call Children's Action Alliance, (602) 266-0707 in Phoenix, or
- call Children's Action Alliance, (520) 795-4199 in Tucson, or
- visit our website at [www.azchildren.org](http://www.azchildren.org)

This synthesis attempts to capture the community perception of the successes and failures of the child welfare system — and ideas for reform that merit further development. What it cannot capture in its translation, however, were the faces and intense feelings that reflect the everyday drama of children who suffer, who lose their innocence, their childhoods, and their families.

We owe our gratitude to everyone who had the courage to speak out. We also owe them our resolve to see that their words were not spoken in vain. Together, we *can and will* make a difference for Arizona’s abused, neglected, and abandoned children.

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# Provide services to families before the

Arizona ranks 42nd in the nation in indicators of child well-being — indicators such as health, adequacy of income, educational attainment, and the likelihood of being arrested for crime. This poor ranking coupled with our explosive growth makes our need to strengthen families and nurture children even more urgent.

There is wide agreement that the most effective way to do that is through **prevention and early intervention programs**. At every forum without exception, professionals and volunteers who work with families shared heartwarming successes they have witnessed from troubled parents who were fortunate enough to get guidance and support services before a crisis happened. Examples included the following.

- **Healthy Families** provides volun-

tary family support and parenting skills for up to five years to new parents who have been identified as at risk for abuse or neglect. It is now in over 20 communities in Arizona.

- **Family Support and Family Preservation Program** funds support more than 15 programs state-

wide, such as community-based family resource centers, services to teen parents, and 24-hour crisis intervention programs. These programs are held in high regard because they have “forced” new collaborations that have been rewarding and effective. The federal funds that support these programs were renewed in November 1997.

- **First Steps**, an educational and personal support program that contacts parents of newborns in the hospital at birth and offers continuous support for the first three months. There were

50,000 families served in Arizona in 1996 at an average cost of \$20 per family.

- **Parents Anonymous** is a voluntary statewide program that offers parental peer support, parenting classes, in-home visitation, counseling, and job readiness training on a walk-in basis. It costs about \$300 a year per family. Family Lifeline, one of PA’s programs, is a volunteer-based 24-hour telephone support network in Maricopa County where parents who are stressed with their children can call for support, guidance, and referrals to community resources. They handled 6,000 calls last year.

- **Regional Child Abuse Prevention Councils** are grass-roots, community-based, volunteer-driven groups that determine the best way to prevent child abuse in their local communities, particularly how to keep families from becoming isolated. Currently, there are 17 programs statewide, serving 10 of 15 counties

## WHAT WORKS

*“There is a growing body of evidence that many children may never recover from their neglectful beginnings. Children with emotional disorders or intellectual deficits are expensive and overwhelming for schools, dangerous for society, and bankrupting the taxpayer. Prevention saves self-esteem, neighborhoods, and money.”*

— Associate director, private social services agency

# crisis escalates

with three more counties in the planning stages. The average budget is \$5,000 per year per council.

- **Head Start** provides high quality child care and comprehensive preschool services for three- and four-year-olds from at-risk families. Operating since 1965, the program serves over 17,000 families in Arizona. It is a comprehensive child and family development program that assists families in learning good parenting skills and collaborates with other agencies to reduce child abuse and neglect.

- **Childhelp USA** is a privately funded national organization with a toll-free national child abuse hotline designed to handle crisis intervention and steer callers to resources in their local area. They take approximately 280 calls per day. They are also a major funder of the soon-to-be-opened Child Advocacy Center in Phoenix.

- **East Valley Family Resource Center**, a collaborative project among 14 East

Valley agencies, offers “one-stop shopping” for families who are seeking referrals for services such as counseling, transitional housing, job training, shelter, and parenting classes.

- **Prescott Family Resource Center** provides a variety of prevention programs and family support programs to new parents. They have been a pilot site for Healthy Families for the past five years.

- **TCWC Children’s Program**, offered at the Tucson Center for Women and Children shelter, gives children the tools to protect themselves from family violence and learn non-violent conflict resolution through peer groups and individual sessions. They served nearly 600 children in fiscal year 1996.

- **Yavapai County WIC Program** trains mothers in child development and nutrition resulting in stronger relationships and parental bonding, thus reducing child abuse. They also help moms with

referrals for problems in housing, domestic violence, and job training.

Although there are several model prevention and early intervention programs for families at risk of child abuse and neglect, it is important to note that they are not coordinated as a system of care. They are primarily programs that sprang from human kindness meeting desperate needs and they exist now as a patchwork of programs rather than as a systemic response. Huge gaps in services still exist for most children and families, and a continuum of care through a seamless delivery of services is still a distant goal.



*“Armed with the knowledge of what their child needs, most Healthy Families parents became interested in learning ways to help their children improve. Parents who had been abused or neglected as children were guided to parent differently than they had been. This program works. We need to have the courage to do what is right and expand it!”*

— Director, family support services agency

# Provide services to families before the crisis escalates

**Waiting until crises develop doesn't work.** The way our system operates now, CPS caseworkers close the vast majority of investigated cases — cases with valid findings of abuse or neglect — with no further follow-up. That is a policy which, by default, ensures that nothing will be done until children are in clear and present danger, damaged beyond repair, in the hospital, or dead.

The costs of that policy are monumental. Aside from human suffering, it is becoming clear that many children cannot recover if the abuse or neglect has been too severe or too longstanding. And the real dollars needed to move the child into state care — shelters, court proceedings, foster care, therapy, clothing, caseworkers, health care, — are prohibitively expensive.

## WHAT DOESN'T WORK

**Forum participants also made it clear that substance abuse and domestic violence in families are child welfare issues.** Substance abuse is increasingly a cause for child abuse and neglect.

One CPS caseworker claimed that 85% to 90% of her cases involved a drug abusing parent, but, because of geographical limitations and funding, the treatment

is not available even when parents are willing to enroll. Treatment must be available, and offered or rejected, she pointed out, before the child can go home or before the parental rights can be severed. If there is no treatment available, the child languishes in shelter or foster care while the parent continues to be unable to care for the child. Social workers and law enforcement officers from all over the state reiterated this

problem.

We were also told that many children who witness domestic violence exhibit the same disorders as those who are *actually* physically abused themselves. Although children who are members of a family caught in domestic violence are not technically part of the child welfare system, these children need services every bit as much as other children already in the system in order to prevent the abused/abuser cycle becoming a permanent part of their psyche.

Several directors of shelters that assist battered women testified that any reform of the child welfare system must take into account these vulnerable mothers and their children and provide early intervention funds that will divert children from the foster care system if possible.

*“There simply are not substance abuse services that exist in this state, Maricopa County, Pima County, in anywhere near the number to meet the needs of these families. In case after case, if intervention had occurred when the child’s family first presented with the substance abuse problem, there may not have been the tragedy that occurred for their children later on.”* — Attorney

*“Domestic violence is not a law enforcement problem. It’s not a CPS problem. It’s not a criminal justice problem. It’s a problem for all of us, all of us working together.”*

— County sheriff’s department officer



*“We are now beginning to see the effects of 20 years of inadequate services for citizens who are abusing drugs. The effects result in children born exposed to drugs and alcohol, children with significant emotional and behavioral needs and parents whose parental rights are being terminated due to their inability to parent because of drug abuse and mental health issues.”*

— Juvenile Court Commissioner

## THE PEOPLE RECOMMEND

- ✓ Base public policy upon the principles of prevention and early intervention.
- ✓ Shift more funding to prevention and early intervention programs to prevent more costly interventions later.
- ✓ Develop a continuum of support and care for all children and families starting at birth.
- ✓ Fully fund prevention programs such as Healthy Families, Family Resource Centers, and First Steps so that they are integral parts of the statewide child welfare system.
- ✓ Expand the availability of substance abuse treatment programs for families at risk of child abuse and neglect.
- ✓ Increase domestic violence prevention and shelter programs to support families in need.
- ✓ Provide services to all families with valid findings of abuse or neglect prior to the need for foster care.
- ✓ Establish Regional Prevention Councils in each county with a full-time coordinator.
- ✓ Improve the links between public child support investigators and collectors and other workers in the child welfare system , especially for single moms who are struggling to meet their kids’ needs.
- ✓ Provide more funding for school counselors.
- ✓ Teach real life skills in the schools such as budgeting, meal planning, child development — things all people need to build strong and healthy families.

# Respond to serious cases in the right

Collaborations to handle complex cases of child abuse and neglect, such as through multidisciplinary teams and Child Advocacy Centers, appear to be positive steps for handling some very difficult cases. Arizona's juvenile courts have also made giant strides toward expediting child welfare cases and increasing the options for resolution. The following are examples of programs described in forum testimony that are experiencing success.

- **Child Advocacy Centers** — now established in Tucson and Mesa, with one planned for Phoenix and others being considered in Prescott and Flagstaff, these facilities house multidisciplinary teams of professionals to investigate, document, and review cases of abuse and neglect. Referrals come from both the public and private sectors. CPS,

law enforcement, physicians, city and county attorneys, school officials, mental health providers, and other appropriate parties come together to conduct a single videotaped forensic interview of a child who has been abused. Medical evaluations for physical and sexual abuse are conducted there also. The child is spared having to describe his or her abuse experience repeatedly and services to the family are speeded up considerably.

- **The Model Court Project** — piloted in Pima County Juvenile Court, this is an effort to improve the timeliness and substantiveness of judicial proceedings in cases involving abused, neglected, and dependent children. The primary focus of this pilot effort has been to “front-load” the court process. Front-loading refers to setting in place procedures to

ensure that all parties to court proceedings begin actively participating at the earliest point possible and doing all they can to minimize the length of time children remain in temporary placement and that their families remain involved with the court. The results have been more than promising.

The first meaningful hearing for parents is reduced from 90 days to 5 days. During the five-day period after the child is removed, the attorneys meet with the parents they represent and the child's attorney meets with the child. There is a pre-hearing conference where everyone who has an interest in the child is invited including parents, relatives, friends, the CPS intake and ongoing caseworkers, attorneys, the assistant attorney general, teachers, and any other adults who actively participate in the life of the child. The parents are told up front that if they do not cooperate, their parental

## WHAT WORKS

*“This [the Model Court Project] is a child-centered approach, which I firmly believe in . . . a lot of delays have come from people who tried to be too fair to the adults at the expense of the children.”*

— Juvenile Court Judge

# way and on time

rights might be terminated.

During the evaluation phase of the pilot, there was a remarkable response rate. Nearly 98% of the parents appeared at the hearing. The court determination of whether there had been abuse or neglect was reduced to 29 days from an earlier average of 112 days. Children were being returned to their families or moving into relative care much more quickly. Services for the child and parents were being delivered at a faster rate. A bill will be considered during the 1998 legislative session which will make the Model Court Project the formal legal procedure for dependent children and their families statewide. A Pima County Juvenile Court Judge testified to the tremendous benefits of the project but warned that *“it doesn't do any good to push the judicial system into quicker response unless services and treatment funds are in place to help the family*

*“I've been working with child abuse cases for many, many years and I'm just amazed in the year and a half we have been doing cases in this Child Advocacy Center what a difference it makes in moving forward more rapidly.”*

— Pediatrician

*correct their problems.”*

• **Wraparound** — coordinated by the Yavapai County Juvenile Court, a multidisciplinary team from CPS, juvenile probation, and behavioral health come together to create a plan for the child and his/her family whose problems have crossed over jurisdictional lines. Rather than expecting a single agency to take the lead, representatives of all agencies who are interacting with the family discuss what resources they need to become whole again.

• **The Community Links Project** — a collaborative project between the Glendale Police Department and Child Protective Services, it is the result of the police recognizing that criminal prosecution is not always the first and best response to non-life-threatening child abuse and neglect cases. A liaison from both Glendale Police and CPS respond to all reports of child abuse and neglect within Glendale city

limits. The family is guided to community resources (e.g., parenting classes, emergency food and clothing) and counseling (e.g., anger control, substance abuse treatment) in an attempt to re-establish health, safety, and stability.

*“It doesn't do any good to push the judicial system into quicker response unless services and treatment funds are in place to help the family correct their problems.”*

— Juvenile Court Judge



## Respond to serious cases in the right way and on time

**Not all reports of child abuse are investigated.** From July 1996 through June 1997, 6,000 reports of child abuse and neglect — representing over 13,000 children — were not investigated by CPS. This number was quadruple the number of uninvestigated reports from the previous year.

*Family Builders*, a new community response program funded by the state beginning in January 1998, will handle the potential abuse and neglect reports from Maricopa and Pima Counties. This is good. It is hoped that this newly passed legislation and appropriation will allow for 100% response to reports of abuse and neglect. However, *Family Builders'* success is dependent on a parent's voluntary cooperation and if the number of reports increase dramati-

cally again this year or in years to come, we might find ourselves again with a large number of uninvestigated reports.

**Three-fourths of the uninvestigated reports resulting in valid findings of child maltreatment were closed after investigation without any follow-up by CPS.** These families might be

referred to services in the community or within another division of DES but no one knows whether the services were received by the family or if they were successful in reducing risk to the child. We know that these families are troubled and without some sort of guidance, the problems will likely escalate. Forum participants, many of whom work with CPS families, were very concerned about this lack of follow-up.

### WHAT DOESN'T WORK

**The juvenile justice system becomes the repository of problems delayed or ignored in the child welfare system.** Nearly one-third of the children in the juvenile justice system have histories with CPS. Judges who testified at the forums reported that many of the kids who are arrested come from families where the parents are drug users, substance abusers, and have in effect abandoned their children. The system has created a track where these kids get processed through juvenile justice rather than as dependents who have been neglected and abandoned.

The Director of Juvenile Court Services in Yavapai County testified that he had several kids sitting in detention at that moment who had been abandoned, neglected, and abused. He pointed out that it is extremely difficult to decide what the underlying issue is, dependency or delinquency. The question they re-

*“Follow-up services for families and children in crisis is absolutely critical. Contact with parents and children at risk must continue for a minimum of three months to insure child safety and resolution of family problems. The goal should be to keep children and families from becoming involved in costly state child protective systems”*

— Executive director, social services agency

*“We get cases in which we have a family that has a history of 18 different involvements with Child Protective Services, yet nothing has been done to correct the situation.”*

— Police department detective

peatedly face is “should probation take the lead or CPS?”

Once a child is in the juvenile justice system, it is nearly impossible to retrack them back into the child welfare system where they really need services. It requires a CPS investigation, a dependency petition, and a court process to determine whether the child is actually still dependent. It's not a matter of willingness but rather a lack of policy.



## THE PEOPLE RECOMMEND

- ✓ Focus on in-home services at the front end so that foster care placement can be prevented if at all possible.
- ✓ Connect CPS investigation with follow-up. Even situations that do not involve removals, dependency petitions and foster care placements frequently require on-going case management, counseling, or parent aide services. All valid cases should be open a minimum of three months with continuous follow-up occurring.
- ✓ Create a statewide consortium of law enforcement specialists and pediatric specialists who can cross-train each other in their own expertise and open up lines of cooperation between police and medical responders to child abuse.
- ✓ Expand Child Advocacy Centers statewide.
- ✓ Expand the Model Court Project statewide.
- ✓ Consider amending the legal definition of dependency to allow a juvenile court judge to order investigation of the family system when there is repeated delinquent behavior. The court should be able to determine if the child has suffered abuse so he or she can then be tracked into the child welfare system rather than juvenile justice.
- ✓ Promote and use juvenile court mediation services that are available at no cost to families.
- ✓ Bring CASAs into dependency cases immediately after the initial court hearing.
- ✓ When severe substance abuse is an issue, the court should demand inpatient treatment at the onset. If the parent refuses, parental rights should be terminated.

# Recruit more foster parents and support

At this time, there are approximately 6,000 children in foster care in Arizona. That's an increase of 29% since October 1995. There are only 1,900 licensed foster homes, however. That's an increase of only 3% during the same period. Recruitment efforts are not keeping pace with the need.

Signing on as a foster parent today is far different from the past. The abused children and their families who are coming into the system are more troubled. It takes courage, commitment, and extreme patience to take the necessary steps to be licensed for foster care. The licensing process is difficult and reimbursement rates are insufficient. Caseworkers are too busy to make or keep their appointments. Training is minimal. In short, the system is unfriendly — to some, even hostile.

Although the list is short, there are

some unique local initiatives that have set the pace for recruiting and better supporting our foster and adoptive parents.

## WHAT WORKS

- **The Tucson Foster/Adoptive Home Recruitment Council** — this 12-year-old-collaboration of ten agencies recruits foster/adoptive

families. It is privately funded and believes that finding families for children should be treated like a business. They use advertising as a strategy. They recently created a statewide recruiters committee with a toll-free foster care/adoption line, statewide logo, and a marketing and advertising plan.

- **The Yavapai County Foster Parents Support System Pilot Project** — Because children in foster care are more emotionally disturbed than in the past, families are generally ill-equipped to deal with the vast set of problems that come

along with the foster child. Through a local grant, a foster parent support group was formed. Parents meet once a month. Quality child care is available. Refreshments and fun are built in. They have established a Web page with extensive links to community resources for families and children and a confidential foster parent discussion forum on the Internet. Their address is <http://www.mwaz.com/shelter>.

- **Yavapai County Juvenile Court Community Advisory Board**— this volunteer group in Prescott has realized that foster parents need much greater support. Through publicity and personal requests, they are enlisting local service clubs to sponsor at least one activity a month for foster kids, which offers them wholesome recreational opportunities, a chance to bond with their peers, and respite for their foster parents. They have also had considerable success recruiting new foster parents.

*“We feel that there are cases where the foster parents have not been made fully aware of what to expect from children who have been abused and perhaps that accounts for the turnover in foster care. That could be prevented if they were given more training or a warning of what to expect from these abused children.”*

— Foster care review board member

# the ones we have

Arizona's child welfare system is out of touch with its foster parents. Foster parents, caseworkers, court-appointed special advocates, judges, program directors, attorneys, police officers made a steady stream to forum micro-phones to make the case for more training and formal support for foster parents. One after another, they told stories of undelivered promises for respite care (a licensed caregiver to give foster parents an occasional break), inadequate or inappropriate mental health services, breakdowns in communication, literally having to go to war with the system for something their foster child desperately needed.

Many foster parents are faced with caring for children who need multiple sources of professional care but are left to fend for themselves through the system.

## WHAT DOESN'T WORK

Although foster parents are supposed to have caseworker contact at least once a month, many report that is not the case.

According to testimony, reimbursement rates are inadequate, support systems are virtually nonexistent, services for the child are difficult to obtain, adoption and severance are long and difficult processes, and

foster parents are rarely prepared for the challenges that these children bring with them.

Many foster parents, out of necessity, have begun to find each other and network. They often just need someone to talk to who understands their frustrations. The system has failed to prepare them and worse, nearly abandons them once the child is in place. The system as it operates today has lost touch with the fact that foster parents are the foundation of a system

that works.

**Foster care reimbursement rates are too low.** Taking into account the costs of food, clothing, shelter, transportation and personal care, the foster care reimbursement rate covers only 53% of the costs of raising a child. This financial deficiency makes recruitment of foster parents difficult in an era where many families require two incomes to make ends meet. The rate also does not acknowledge that the children entering the system are more seriously disturbed, often requiring more time and effort on the part of foster parents.

**Relatives who take in displaced children are treated with even less regard than foster parents.** At least 25% of the children placed by CPS are in relative care, but most relatives are guardians rather than licensed foster parents. This puts them at great disadvantage, financially and otherwise, in dealing with the child's emotional and physical needs. Arizona makes almost no financial provision for relatives

*“A woman took in her five grandchildren who would otherwise be in the foster care system, and the only subsidy she got from foster care was \$300 a year for a clothing allowance. We all know that \$300 is not going to raise a kid in a year.”*

— Foster parent

## Recruit more foster parents and support the ones we have

who have stepped into the primary caretaker role. For children who cannot be freed for adoption, there is no solution to provide permanency for children in the care of relatives.

**There is minimal training for foster parents.** According to a shelter coordinator, *“Foster parents tend to be normal, middle-class people who have raised or are raising their own children. They are not prepared for the challenges of working with troubled children in an unfriendly system. In Arizona, pre-service training for foster parents is 12 hours. Foster parents generally agree that it takes two years or more to learn the ‘ins and outs’ of working with CPS, schools, and therapy services. By the time they have learned their rights within the system,”* she reported, *“they’ve already reached the burn-out point and are ready to quit.”*

**There is little sensitivity to cultural diversity for either children or adults impacted by the child welfare system.**

Because children of color are over-represented in the system, there is a great deal of multicultural blending. Foster children themselves reported cultural insensitivities throughout their experience in the system, from racial slurs being allowed in group homes to religious biases in foster homes. Several participants also commented on the language barriers that occur between caseworkers and Spanish-speaking families.

Foster parents are rarely informed about or instructed in culture-specific care. An adoption specialist with Black Family and Children’s Services gave the example of two African American children, an infant and two-year-old, who were placed with white foster parents. The caseworker noticed the mother need-

ed culture-specific help but didn’t feel qualified to give it. She asked the private agency specialist to come into the home and teach the mother how to care for the children’s hair, where to buy children’s books with emphasis on their cultural heritage, and similar activities. *“I think diversity training should start at the DES case manager level,”* she said *“because then it would be constantly reinforced throughout the child’s stay in the system.”*

System reform must recognize that foster parents are the best friends the state and abused children have. They should be treated with attention, resources, and respect. Then perhaps we will have foster parents waiting for available children, instead of the other way around.

*“Somewhere along the line, foster parents got put at the bottom of DES’s totem pole. Foster parents don’t know what’s going on and are mostly in a state of shock. There should be beginning, intermediate, and advanced training for foster parents and lots more support.”*

— Foster parent of 35 years

## THE PEOPLE RECOMMEND



- ✓ Expand the Foster/Adoptive Home Recruitment Council of Tucson statewide and support their energetic marketing strategies.
- ✓ Expand the Foster Parents Support Project statewide and provide permanent funding.
- ✓ Provide resources to foster parents so they can succeed.
- ✓ Raise the foster care reimbursement rate to a sufficient level.
- ✓ Offer more and better training for foster parents.
- ✓ Allow certified adoptive parents to provide respite care for foster parents as one possible solution to filling the serious shortage of respite care providers. Currently, individuals offering respite care to foster parents must be foster care licensed.
- ✓ Make foster care benefits equally available to guardian relatives.
- ✓ Merge into one process the foster care licensing and adoptive certification processes, which are now separate, causing great delays and much duplication of effort.
- ✓ Make changes to caseworker loads so that foster and adoptive families are being contacted as mandated by current policy.
- ✓ Inform all new foster parents about the CASA program.
- ✓ Provide a packet of culture-specific guidelines to new foster parents who are receiving a child of a different ethnicity than their own.
- ✓ Promote and inform foster parents about the statewide association that advocates for their rights and the rights of their children.
- ✓ Have CPS recruit and train additional foster homes within each CPS district so that no child in foster care lives outside his or her own county.
- ✓ Recruit and train more therapeutically-licensed foster homes because children are entering the system with more complex problems.
- ✓ Improve coordination and caseworker equity between the Division of Developmental Disabilities and CPS so that children with special needs are treated equally.

# Give caseworkers the support

The child welfare system is only as responsive, nurturing, and reliable as the policy that drives it and the caseworkers who are guided by it. But for a variety of reasons, CPS caseworkers find themselves in a system driven by many factors that conflict with meeting the needs of the people it exists to serve.

Being a CPS caseworker is no easy task. The work can be heartwrenching, dangerous, and relentlessly stressful. Caseworkers, often the target of blame when the system fails, acknowledge it can be thankless as well. Add to that overwhelming case loads, noncompetitive salaries, and less control over outcomes and you begin to have difficulty recruiting and maintaining a professional and skilled work force.

Despite the problems, we must not overlook the fact that CPS caseworkers

received over 38,000 reports of abuse and neglect between June 1996 and June 1997 and they offered continuous care to some 6,000 children removed from their troubled families.

Day in and day out, they provide personal contact and assistance to both birth and foster families and children caught in the

grip of poverty, abuse, violence, and other painful circumstances. There are many dedicated professionals who, through their persistence and commitment, prove that the rewards of helping children and families still outweigh the problems.

Forum testimony, with few exceptions, praised caseworkers but demanded changes in the system that would lighten their load and help them to do their jobs more effectively. Some forum participants described positive steps that are being taken to assist CPS in

both recruitment and training.

CPS has formed a unique partnership with Arizona State University that is resulting in more and better qualified workers. Because reports of child maltreatment have increased more than 77% in Arizona since 1987, and children in out-of-home care has grown 45% since 1994, CPS has not been able to keep up with the demand for child welfare services. In the 1980s, responding to a lack of qualified candidates for CPS positions, DES eliminated degree requirements for child welfare positions. This has resulted in a decrease in workers with social work degrees, who now number only 24% of caseworkers.

In an attempt to solve this devolution of educational standards, DES formed a partnership with the Arizona State University School of Social Work, where students registered full-time in the school's MSW program (with a specialization in child welfare) are eligible

## WHAT WORKS

*“It’s a horrible thing to have to pull children from their home, even if the parents are bad parents. But it had to be easier when I at least knew the home the child was going to and I could coordinate a decent level of care for the child. The system is so dysfunctional now that caseworkers have little control over what happens to that child.”*

— Executive director, social services agency

# they need

for a variety of stipend programs. In exchange for monthly stipend payments and tuition support, students agree to work for CPS for a minimum of 18 months upon graduation. Enrollment in the program, begun in 1991, supported with state and federal funds, has more than tripled since. The stipend programs help to raise the CPS standards once again, while simultaneously lessening recruitment pressures.

**CPS has also been working hard to make up for the decrease in degreed workers with intensely focused internal training programs.** The Case Manager Core Training, now 22 days of intense study, has recently been updated. It is family-centered, trains to best practices, is endorsed by the Child Welfare League of America, and is being delivered in 33 other states. It now includes case planning for children who are in substance-abusing families and has a module on cultural diversity competence, both issues that

were raised by forum participants. There are various advanced trainings available and a new sexual abuse awareness course. A curriculum that includes on-the-job mentoring and coaching for new case managers is being considered for development.

Most people who interact with the child welfare system and caseworkers spoke highly of their commitment but agreed that until the system itself is corrected so that these workers are shown due respect and fully supported, the child welfare system will continue to falter and conditions for children and families will likely stagnate or worsen.



*“Staff retention is a very serious problem at CPS. An internal ACYF study showed that the workers who stay do so because of their heartfelt and bone-deep commitment to children and their families. They need administrative support and respect for an extremely difficult job — respect from the public, the courts, and the legislature.”*

— Retired CPS Manager

# Give caseworkers the support they need

Since 1991, the rate of reports of child abuse and neglect has risen 29%. In 1997, a staggering number of cases of child abuse were reported — over 38,000. It is predictable that as poverty stagnates or worsens, violence, substance abuse, and child abuse increase. But despite an exploding surge in population and a growing economy, state funding for the child welfare system has remained fairly level even as caseloads grow.

**Caseworkers are overworked.** The Department of Economic Security has developed a “case weighting” system that measures the capacity of workers to handle their assigned cases. Although adjustments may need to be made to this tool, current findings indicate case-

workers carry more work than they can reasonably handle, and some units measure 40% over capacity.

**Caseworker turnover is unaccept-**

**ably high.** The turnover rate for CPS specialists is 21% — up again from last year. This is a severe underestimate of the turnover families actually experience

because this rate does not take into account CPS specialists who have transferred or have been promoted within DES or have left their job for another within state service. In general, there is great difficulty in maintaining a professional and skilled Child Protective Services work force, not only in Arizona, but nationwide.

**CPS caseworker salaries are not considered competitive.** A 1996 DES

study shows CPS salaries lower than salaries paid to juvenile probation officers, school social workers, or hospital social workers in Arizona. Unlike other public employees in Arizona, caseworkers do not receive raises based on experience and length of service. This results in staff with 10-12 years of experience making slightly more than novice workers.

Some forum attendees also pointed out the inconsistency of staffing practices across DES units. Caseworkers who care for children with disabling disorders (DDD) often have equally difficult and complex cases. Yet, unlike their CPS counterparts, their educational requirements and initial salaries are lower and they receive no paid continuing educational opportunities.

## WHAT DOESN'T WORK

*“It’s about getting more manpower and not six months to a year from now but yesterday. When I worked for CPS they said ‘we’ll get you a new computer or a new desk.’ It wasn’t about my desk. It wasn’t about my computer. It’s about manpower. They don’t have enough manpower and I can speak for almost every unit out there. They are totally overwhelmed.”*

— Former CPS caseworker

Forum participants, many of whom work with CPS caseworkers every day, echoed repeatedly that caseworkers are overworked, undertrained, and underpaid. CPS itself acknowledged that their failure to investigate 100% of child abuse reports was due to lack of staff resources.



*“I have to tell you since the late 1970s when Child Protective Services declassified their social work positions, I’ve seen a gradual deterioration and decline in the quality of care that they are providing to families in the child welfare system.”*

— Executive director,  
social services agency

*“I feel sorry for CPS caseworkers. On my way over here today, I stopped at one of the CPS offices to meet with two caseworkers who were there last week but they’re gone this week. Yesterday, I talked to a supervisor and she said ‘I feel absolutely hopeless.’”*

— Contract consultant

## THE PEOPLE RECOMMEND

- ✓ Hire enough caseworkers to investigate all reports, and give every child, parent, and adult in the child welfare system the attention and support they need.
- ✓ Fund the system so that caseworkers can do their jobs effectively.
- ✓ Raise the qualification standards of CPS caseworkers and pay them accordingly.
- ✓ Continually train CPS case managers in cultural sensitivity so that they can more effectively prepare children and foster and adoptive families as to how to best handle cross-cultural placements.
- ✓ Allow private agencies to provide ongoing case management instead of CPS.
- ✓ Expand CPS training to include on-the-job mentoring and coaching for new case managers.
- ✓ Examine consistency of staffing practices including salaries and continuing education opportunities between CPS and Developmental Disability caseworkers.

# Give every waiting child a safe,

State law was revised last year to expedite the court process for dependent children and, when necessary, terminate parental rights. This year's legislative session is expected to produce more positive changes with the statewide adoption of the Model Court Project described earlier. It is hoped that these judicial reforms will

speed the permanent placement of children—either returning them home or moving them into adoptive homes.

A most serious problem, however, is that **there aren't enough adoptive homes to accept the children who are waiting.** It doesn't do much good to speed the judicial process if there is nowhere for these children to go. In 1997, there were approximately 1200 children in care with case plans for adoption, while there were only 125 homes certified and available for placement.

Barely recognizing the seriousness of this deficiency, the legislature in 1996

appropriated \$100,000 in state funds to DES to enhance adoption recruitment efforts. At the same time though, they cut \$2.1 million from the adoption services budget that helps families to adopt children with special needs.

As we seek solutions to permanency for dependent children, there is a model program being conducted in southern Arizona that deserves our full attention.

**Pima County Families For Kids** is a project funded by the W. K. Kellogg Foundation aimed at moving foster children into permanent families when they will not return to their biological parents. The project targets those children who are legally free for adoption or have been in foster care more than two years with adoption as their case plan goal. The project is a collaborative partnership between Arizona's Children Association, DES/ACYF, Pima County Juvenile Court, Catholic Social Services, and community and family advocates. The target backlog

population consists of 501 children. Adoption recruitment efforts focus on older children and children of color. As of September 30, 1997, 290 children in the target population had been adopted. This contributed to the significant increase in the number of adoptions in Pima County.

There were several elements important in their success:

1. *The project is data driven.* At the beginning of the project, data were gathered and used to understand who the children are, what kept them in the foster care system, and what was needed to move them out. The data also have been used to describe the children who need a permanent home, to help identify families who can best meet the needs of those children in the target population, and to identify the family support services they are likely to need that will promote permanency.

2. *They established milestones to track each child's progress*—The milestones were created based on national

## WHAT WORKS

*“In the first ten months of this year, I have already approved 334 cases for severance in Districts 1 and 3 involving 533 children. If there are only 125 licensed adoptive homes, where are we going to put these children? The lack of adoptive homes is the number one problem that I see for children in our foster care system who cannot return home.”*

— Contract consultant

# nurturing, and permanent home

opinion and on Pima County key informants. They defined the steps on the path to permanency.

3. *They honored the child's experience.* Life books were created for children in the target population for recording memories that will be part of their identity for their entire lives.

4. *A cross-functional, team-coordinated assessment process expedited permanency.* Cross-functional teams that were diverse and collaborative were created to provide children in the target population with consistency in permanency planning, to overcome fragmentation, to identify strengths and barriers related to finding permanent homes, and to conduct rigorous continuing advocacy for children. They work in cooperation with the child's caseworker.

5. *Permanency family support services were made available to both adoptive and foster families.* The flexible use of funds and grantmaking was used to provide services that either removed a barrier or supported stability and permanency for children in the target population.

**Another serious problem is what occurs for a child who has multiple agency involvement.** The traditional service model often results in a child having multiple case managers at multiple locations with no formal interagency collaboration. **A promising solution is the Inter-agency Case Management Project (ICMP).** Established in 1995, the ICMP is a five-year pilot established by several state agencies to reduce duplication of case management services for children and families currently served by multiple agencies.

In the ICMP model, there is a *single* case manager in a single location for each family. Case managers are cross-trained in policies and procedures and have authority to provide services for DES, ComCare, the Maricopa County Juvenile Court Center, and the Arizona Department of Juvenile Corrections. Case managers coordinate multiple services across agencies for which a child or family is eligible to meet the needs of all family members. As evaluation results are compiled from the ICMP pilot, it is hoped that this service model will lead the way for comprehensive system reform.

**The Arizona Young Adult Program (AYAP),** established by DES for teenage foster children, is, according to the young people themselves, a real success. They admire their caseworkers and appreciate the counseling and individual attention that they receive on their journey to adulthood.

Before they officially entered AYAP however, they said the CPS system failed to explain their rights to them, why they were in the system, shuffled them from home to home, kept changing caseworkers, and provided poor quality counseling. They were denied access to their case files, and felt in some cases that they were "automatically" medicated. One youth summed it up by saying, *"There's a big difference between being in AYAP and what happens prior. Before I only knew that I was a 'foster child.' AYAP educates us about the system."*

The Advisory Board of AYAP, composed of teens in foster care, recruits foster homes for teens, provides feedback to DES on the quality of foster care, and makes recommendations regarding services for teens in foster care.

*"Families for Kids is a success story. We feel so strongly about this process that we are actively seeking dollars to support the continuation of the program. It is our goal to expand it throughout the state of Arizona."*

— CEO, private social service agency

# Give every child a safe, nurturing, and permanent home

**Children are entering the system more troubled.** Because the primary system of child protection is weak, the problems in the family might well have gone on for some length of time before the child is finally removed from the home. This means that children who enter the system now are more severely disturbed. A representative from the Arizona Center for Disability Law cited evidence that about 60% of children who are in the child welfare system have mental health care needs. In order to give every child a safe, nurturing, and permanent home, adequate and appropriate services must be available.

**Behavioral health services for dependent children are uncoordinated, underfunded, and often too little, too**

## WHAT DOESN'T WORK

**late.** A foster/adopt mother described a situation with her five-year-old child who had been severely abused as an infant. This child's allowable treatment as designed by the county's regional behavioral health authority, consisted of 15 minutes a month with an approved psychiatrist or nurse practitioner.

After the child's medication lapsed due to inadequate mental health services, he attempted to strangle a neighborhood child. This occurred after the mother had been fighting for appropriate care for four years.

One foster parent with a lifetime of foster care experience testified that because cases have become increasingly complex over time, she feels it is now an obligation of the foster care system to distinguish between children who have

emotional problems that will heal with time and proper care and the children that come into the system severely mentally ill. Before that can be done, she says, "we must establish a continuity of care." She related the following story:

*"I had a child in my home one time who was schizophrenic and no one told me about it until I had him for two weeks, even though he had been in the system for nine years. The former foster parent and the caseworker seemingly overlooked it. These children, when you put them in a home and don't warn the foster parents what the issues are, have to be moved more, and then you have more and more attachment disorders. Without continuity of care, a child with a mild emotional problem pushed from home to home, parent to foster parent and back again, eventually becomes mentally ill."*

*"I think in our zeal to make quick decisions we need to make sure we're not creating a group of legal orphans. I can't tell you how many kids there are whose parental rights have been terminated and yet they're still sitting in a foster home without a permanent home. What have we given them that's any better?"*

— Attorney

**Children experience multiple transitions that are often inhumane.** Several participants decried how cold the system is when it comes to helping both the child and the foster/adopt parents cope with transitions. One foster/adopt parent testified:

*"I am concerned about how children are moved. They're not informed about what's happening to them. Being taken from home is traumatic enough but — I've received [foster] kids in my home dragging their clothes in a black garbage bag — these children should have the benefit of at least being told 'this is why,' 'this is what happens next,' and 'here is someone who is going to help you through this transition.' "*

The residential coordinator of a children's shelter observes children in transition on a daily basis. She reported:

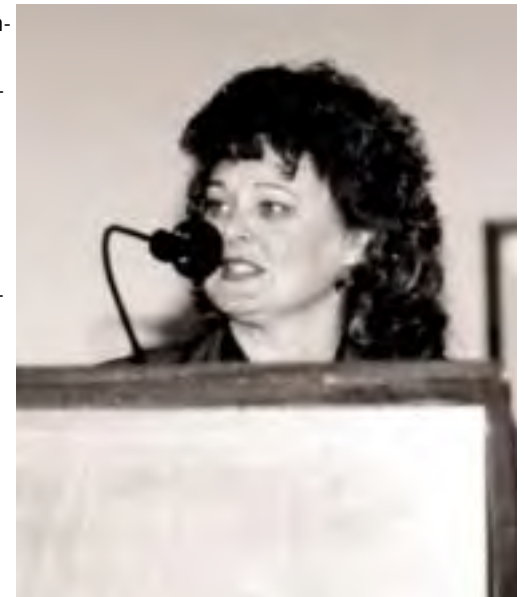
*"Despite all our best efforts, children removed from homes experience multiple*

*transitions. Transitions are traumatic, and multiple transitions can be extremely damaging to the child. Loss of the primary caregiver is a major factor in attachment disorder, and attachment-disordered children are so hard to deal with that they are the ones who are moved most often. Even for normal children, attachment problems arise with multiple placements. The emotional abuse resulting from poor transitions, so very common in our system, can and must be stopped."*

**There are simply not enough adoptive parents.** More children are entering the system and more are staying there considerably longer than is acceptable. A staggering 44% of the state's 6,000 foster children have been in care for at least two years and some a great deal longer than that.

**Children of color are particularly trapped in the system.** Several attendees addressed the issue of children of color

who are disproportionately represented in the child welfare system and are much more likely to get caught in it for years, often their entire childhoods. Nearly 50% of the children in out-of-home care are children of color. They wait longer for placement and are less likely to be adopted. DES' most recent report to the federal government indicates that there are 1,200 children with a case plan of adoption. Of these, 720 are children of color, yet only 18 ethnically and culturally diverse homes are available for placement on the adoption registry. While the law prohibits delaying a child's adoptive placement due to race or ethnicity, targeted recruitment is permitted.



***"The biggest problem in the child welfare system is the huge mismatch between services that are needed and the services that are available."***

*— Foster care review board member*

# Give every child a safe, nurturing, and permanent home

**There is also a serious breakdown in our state's capacity to match adoptive children with adoptive parents.**

One forum participant testified that she and her husband were certified and licensed as adoptive parents in Arizona *for an entire year* without one word or one phone call from the state.

They finally gave up and went through a private agency seeking a child available for adoption. They recently adopted a second child from the state of Colorado that utilizes an aggressive recruitment strategy on the Internet. This story was particularly sad since this family is African American and the need for ethnic adoptive families is so urgent in Arizona.

## WHAT DOESN'T WORK

**The lack of permanency sends older children into adulthood without any family.**

If older children languish in the system for several years, which is likely due to their age, they find themselves turning 18 without a permanent family or a stable base of support when social and legal custom expects them to now be self-sufficient. The Independent Living Program has been designed by the state for these young people to help get them out on their own, but several foster parents have pointed out that these kids need ongoing family stability and more emotional support than the average young adult.

*“Between 1992 and 1996, 187 children died because of abuse or neglect. Some of these deaths occurred while the child was in foster care. Some of the deaths occurred when the children were known to Child Protective Services. Whenever a child dies, it touches all of us. Whenever a child dies who is known to our system asking for intervention, we have all failed.”*

— Superior Court Commissioner



## THE PEOPLE RECOMMEND

- ✓ Expand Families for Kids statewide and make it the model for permanency planning and adoption.
- ✓ Adopt a proactive approach to recruiting adoptive parents.
- ✓ Establish a standard operating procedure that will identify siblings who come into foster care or are being considered for adoption and then do everything humanly possible to keep them together.
- ✓ Begin the severance process (termination of parental rights) earlier in case planning and move it faster.
- ✓ Make adoption certification easier.
- ✓ Focus more on foster parents who are willing to adopt and nurture them along.
- ✓ Establish a continuity of care for children particularly regarding their mental health needs.
- ✓ Fund children's behavioral health services so that they can fully meet the needs of the children and families they serve.
- ✓ Mandate that there be a counseling process for foster children to understand their lives and what's happening to them, particularly before and after transitions.
- ✓ Begin permanency or concurrent case planning with the first placement in cases where there is a long history of family abuse.
- ✓ Consider making open adoption available in Arizona (if the child is willing, scheduled visitation is allowed with the birth parents).
- ✓ Give older dependent children, prior to adoption, the right to know where their birth parents are and, in certain cases, the right to communicate with them.
- ✓ Provide mentors for children in foster care.
- ✓ Allow foster teens to mentor other teens and children in care.

# Forum participants make the case

**There is a serious lack of inter-agency coordination.** CASAs and FCRB members reported that the system is confusing, with too many different ways to get help or be rejected for services. It is frustrating for all involved and the child too often “falls between the cracks.”

Agency workers also pointed to confidentiality rules as a major barrier to cooperation. The director of a crisis shelter and former CPS caseworker pointed out that *“We cannot serve our children unless we are sharing information about their histories, about what’s happening with them now, and what they’re going to need in the future, and we’re not doing that.”* A survey respondent said that *“territorial attitudes among agencies inhibit prompt response to children’s needs and it must stop now.”*

The 1997 CASA of the Year reported that CASAs can get reports such as mental health records that caseworkers can-

not and vice versa. In one case, she was denied access to an FBI report. The caseworker, who did have access, volunteered to request it. The report showed that the individual about to be awarded custody of a dependent child was previously involved in a double homicide and robbery.

**System services are fragmented and duplicative.** When the response to child abuse is weak, we see aggravated stress in all areas of the child welfare system. The foster care process begins to fail, children get backlogged in the legal system and begin to experience greater emotional instability, the courts get clogged, shelters get overloaded, funding falls short in the face of demand — the entire system of authority, decision making, and allocation of resources breaks down. Children become ping-pong balls between parents, the courts, shelters, foster parents, schools, doctors, case managers, and judges.

Repeatedly we heard that the system is fragmented to the point of dysfunction and if we could somehow capture the waste of duplicated and overlapping services, there may be enough resources for every program, every family, every child.

The following is an excerpted case history read by a court-appointed special advocate (CASA) about a child in his care:

*“The child is a bright and healthy 11-year-old with above average intelligence. However, after 8 years of repeated moves and 11 placement changes, the child has begun exhibiting psychological distress and depression for which we now prescribe medication. Unfortunately with the constant change of doctors and caregivers, medication is inconsistent and files are incomplete. Due to erratic and constantly changing placements, it has been reported that on more than one occasion, medication was either forgotten*

***“With repeated reassignments, problems go away for everybody but the child. Abuse and neglect by the system continues and the brief critical period of childhood is lost. The fact of the matter is the system just does not work. Not only are our children trapped but so are the good people attempting to work in and run that system.”***

— Court-appointed special advocate

# for system reform

*or mixed up and the child has suffered from adverse side effects, including withdrawal symptoms. Medications over the past three years have included various doses of Ritalin, Dexedrine, Elavil, Buta-tran, Zoloft, and Imipramine. As for staffing and oversight, we have judges conducting six-month report and review hearings, Foster Care Review Boards conducting six-month reviews, CPS conducting periodic staffings that include professionals and case staff. The child has a court-appointed attorney, a guardian ad litem, a CASA, a surrogate parent, a CPS case manager, a CPS case supervisor, a family aide, a psychiatrist, a psychologist, and up until recently a ComCare case manager and a ComCare case supervisor. As for consistency, in the past three years alone, the child has had five different judges, four different CPS case managers, three different ComCare case managers, and six different psychiatrists, each with new and differing opinions regarding medication. With no one in charge, overlapping duties, and inconsistency, no one is accountable for failure."*

## THE PEOPLE RECOMMEND

- ✓ Establish one case manager, with decision-making authority, to oversee all services to a child and family from the moment they enter the child welfare system to the point when they meet a set of criteria that measures health and stability.
- ✓ Provide continuity of services to children and families with the mission of high-quality service provision, with no duplication or gaps in service. It is obvious that the fragmented approach through DES, DHS, AHCCCS, DOE, ADJC, and others is not working.
- ✓ Combine funding for children in the child welfare system. Eliminate the lack of integrated services that is the result of categorical funding and have the funding "follow the child."
- ✓ Encourage and establish coordination and collaboration between systems, agencies, and staffs, both public and private.
- ✓ Provide CASAs, CPS caseworkers, and providers with access to all records, including criminal and mental health data.
- ✓ Have DES remove unnecessary confidentiality barriers with providers and the community.
- ✓ Establish clear and understandable public policy concerning dependent children. Armed with a strong public statement and reliable funding, all parties from caseworkers to agency heads can identify and carry out what is expected of them.
- ✓ Use conclusions and recommendations of past studies and reports in the development of Arizona public policy.
- ✓ Measure our success not by the number of children moving through the system but rather by whether they continue to live with their families, whether they have achieved stability, if they are performing well in school, if they are ready to enter the work world — successful outcomes for children, families, and the community.
- ✓ Fight poverty. Move parents off welfare by helping them, not punishing them.

# Forum Panelists

Special thanks to our facilitators and panelists who brought a wealth of knowledge and wisdom to this public forum process, and to our funders who recognize the gravity of our purpose and who are willing to invest in the capacity of our community to do the right thing for our children.

You can all be assured that your feedback will play an important part in our evolving effort to create a model for child welfare system reform that is efficient, sensible, cost-effective, and dedicated to placing children and their best interests first.

## TUCSON

*October 28, 1997*

*Arizona Schools for the Deaf and Blind*

### **Facilitator**

Boyd Dover  
*The Providence Corporation*

### **Panelists**

Karen Abman  
*Arizona's Children Association*

Darlene Dankowski  
*Open Inn*

Jaime Gutierrez  
*University of Arizona*

Sue Krahe-Eggleston  
*Our Town Family Center*

### **Participants**

Barbara Anderson  
Dr. Anna Binkiewicz  
Maria Bravo  
Fred Chaffee  
Lyn Cheever  
Juanita Chrysanthou  
Mary Dryden  
Sharon Fultz  
Jeannette Gallagher  
Kristine Hanson  
Ann Haralambie  
Charlotte Keller  
Jeanne Landdeck-Sisco  
Det. Marilyn Malone  
Lana Mitchell

Dawn Swink  
Tommie Thomas  
Bianca Varelas  
Honorable Nanette Warner

## TEMPE

*November 6, 1997*

*Kyrene Elementary School District*

### **Facilitator**

Jacque Steiner  
*Chair, CAA Child Welfare Committee*

### **Panelists**

David Arrow  
*Attorney-At-Law*

Chris Fickas  
*Child Crisis Center East Valley*

Natalie Miles-Thompson  
*Parents Anonymous*

Dr. Sylvia Strickland  
*Pediatrician, Maricopa Medical Center*

### **Participants**

Carol Ainley  
Evelyn Carson  
Rudy Carver  
Natalie Cawood  
Nancy Cowperthwait  
Joan Drydyk  
Barbara Griffin  
Yvonne Mannion  
Marsha Porter  
Honorable Maurice Portley  
Claire Rhodes  
Anne Ronan  
Dr. Marc Rubin  
Margaret Soberg  
Michelle VanKilsdonk  
Commissioner Penny Willrich  
Melinda Young-Imes

# and Participants

## PRESCOTT

November 13, 1997  
Prescott City Council Chambers

### Facilitator

Barbara J. Polk  
*West Yavapai Children's  
Council*

### Panelists

Carl Brown  
*West Yavapai Children's  
Council*

Bev Ogden  
*Governor's Division for  
Children*

Becky Ruffner  
*Prevent Child Abuse*

Jacque Steiner  
*Chair, CAA Child Welfare  
Committee*

### Participants

Patsi Beaven  
Honorable Robert M.  
Brutinel  
Robin Frielich  
Gordon Glau  
Paula Makowsky  
Lt. Kathy McLaughlin  
Morissa Miller  
Kathy Davidson Moore  
Dottie Morris  
Honorable Janis A.  
Sterling  
Laurel Taylor Fitzhugh  
Lois Thompson

## ARIZONA YOUNG ADULT PROGRAM

N.G.                      F.W.  
D.K.                      M.C.  
E.W.                      R.O.

## GLENDALE

December 2, 1997  
Glendale City Council Chambers

### Facilitator

Jacque Steiner  
*Chair, CAA Child  
Welfare Committee*

### Panelists

Kay Ekstrom  
*Christian Family  
Care Agency*  
Tom Lolos  
*Parents Anonymous  
& AZ for Kids Chair*  
Marsha Porter  
*Crisis Nursery, Inc.*  
Alberta Stone  
*Maricopa County  
Public Defenders  
Office*

### Participants

Margarita Aguilar  
Fernando Barrera  
Ben Benhoff  
Alissa Blackwell  
Carole Brazsky  
Charlie Brown  
Berta Carbajal  
Bonnie Cohn  
David Frieberg  
Jim Hart  
Celia Hodges  
Maria Hoffman  
Susan Jernigan  
Mike Matcha  
Dr. Chris Monaco  
Connie Phillips  
Det. John Piccarreta  
Laura Rapkin  
Donald Reis

Rachael Rodriguez  
Daryle Smith  
Evelyn Smith  
Janet Weiss  
Vera Woodard

## WRITTEN TESTIMONY

Stephen Allen  
Jim & Mary Barnard  
Daryl L. Bell-Greenstreet  
Joan Crosby  
Mary Dryden  
Adam Glaser  
Brenda Goldsmith  
Eva Hamant  
Kristine Hanson  
Vicky Hinkle  
Kathryne Hughes  
Stephanie Jakes  
Liz Jones  
Anne Kane  
David Marcy  
Dr. James Mick  
Marilyn Neibergall  
Angela Randon  
Dr. Christina Risley-Curtiss  
Jane Schorzman  
Charity Torrez  
James L. Treece  
Joan Williams  
Carla Woyak

# CHILDREN'S ACTION ALLIANCE

## CHILD WELFARE COMMITTEE

Jacque Steiner, *Chair*  
Barbara J. Polk, *Vice-Chair*  
Karen Abman  
Anna Arnold  
David Arrow  
Beverly Crawford  
Darlene Dankowski  
Boyd Dover  
Kay Ekstrom  
Chris Fickas  
Jackie Flowers  
Janet Garcia  
Jim Hart  
Carol Hurtt  
Kim Kelly  
Sue Krahe-Eggleston  
Thomas Lolos  
Cathryn Lore  
Linda Mazon-Gutierrez  
Rachel Oesterle  
Bev Ogden

Carol Poore  
Marsha Porter  
Mary Lou Quintana  
Anne Ronan  
Becky Ruffner  
Margaret Soberg  
Sylvia Strickland, M.D.  
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