



Bridging Refugee Youth & Children's Services

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**Refugees and the U.S. Child Welfare System:
Background Information for Service Providers**

By

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For
Bridging Refugee Youth & Children's Services (BRYCS)

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Contents

Acknowledgements	2
Introduction.....	3
Section 1: The Child Welfare System: An Overview.....	4
Goals and Services.....	4
Origin of the U.S. Child Welfare System.....	5
Child Abuse and Neglect	7
Making a CPS report.....	10
Mandated Reporters	10
The Role of Child Protective Service (CPS).....	10
Child Welfare Services Beyond CPS	11
The Courts	12
Child Labor.....	13
Section 2: Refugee Serving Agencies and the Child Welfare System.....	14
Helping Clients Who Are Reported to CPS.....	14
Building Bridges between Refugees and the Child Welfare System.....	15
References.....	15
Endnotes	16
Section 3: Resources	17
Resources Available on the BRYCS Website.....	17
Other Web-Based Resources	17
Appendices.....	21
Appendix 1: Tools for Trainers.....	22
A. Test Your Knowledge of the Child Welfare System.....	22
B. Case Studies	22
Appendix 2: Useful Child Welfare Terms	27
Appendix 3: Child Welfare Worksheet—Critical Questions.....	30
Appendix 4: Physical and Behavioral Indicators of Abuse	32
Appendix 5: Identifying Child Abuse	33
Appendix 6: Child Welfare Flow Chart	36

Bridging Refugee Youth and Children's Services (BRYCS), a joint project of Lutheran Immigration and Refugee Service (LIRS) and the United States Conference of Catholic Bishops (USCCB), provides national technical assistance to "bridge the gap" between public child welfare and other mainstream organizations, refugee serving agencies, and refugee communities. BRYCS' overarching goal is to strengthen the capacity of service organizations across the United States to ensure the successful development of refugee and newcomer children, youth, and families through targeted training, consultation, development of cutting-edge resources, and a web-based clearinghouse. Please visit <http://www.brycs.org> for more information.

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Acknowledgements

With this publication we hope to empower resettlement staff and other human service professionals to be **better and stronger advocates** for the refugee and immigrant clients they work with and assist them in negotiating the child welfare system. We hope this will help them **build on knowledge and skills** that they already possess and that they in turn will **impart this information to their clients**.

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Introduction

In our interactions with refugee resettlement staff, numerous workers have highlighted the need for practical tools that utilize a “train the trainer” approach and impact service delivery in the field. Many have also expressed uncertainty about the U.S. child welfare system and its function in relation to refugee families. In response to these concerns, we intend this toolkit to be a practical resource that will:

1. Be a training guide for refugee resettlement staff to improve their understanding of how the child welfare system works, and how to access and assist clients in obtaining services.
2. Provide a common vocabulary of child welfare terms, enabling refugee resettlement staff to make appropriate referrals for child welfare services.
3. Dispel misconceptions about child welfare agencies and encourage stronger linkages between child welfare services and refugee resettlement agencies to utilize preventative techniques and ultimately keep refugee children and youth with their families, minimizing the need for child removal.
4. Assist in the development of a network of services based on a common understanding of how and why the child welfare system works and increase partnerships between the resettlement system and child welfare; increase the responsiveness and cultural sensitivity to refugee children, youth and families, while building on their inherent strengths.
5. Empower refugee resettlement staff to make referrals to child protective services as needed, recognizing the safety needs of refugee children and families.

We hope this resource will shed light on how the child welfare system works and inspire refugee resettlement workers and administrators to reach out and partner with child welfare agencies in their communities, thus providing more comprehensive services to assist new refugees integrating into communities across the United States.

Section 1: The Child Welfare System: An Overview

A 9-year-old refugee boy from East Africa arrived in the U.S. with cataracts, a condition he had lived with for some time. Eye doctors in the U.S. recommended surgery to remove the cataracts and prevent eventual blindness. According to their culture, the mother believed it was the father's place to decide whether or not to go ahead with the surgery, but the boy's father remained in Africa. The mother feared the surgery, assuming that, as in her homeland, surgery would likely end in death for her son. The family arranged a telephone call to the boy's father in Africa; however, he too was convinced that surgery would kill his son rather than cure him.

After being contacted by the child's teacher, the local child welfare agency arranged a meeting at the boy's school with an uncle and a brother, leaving the mother out of the meeting since she was working at the time. The child welfare authorities informed the relatives that the boy would be taken from school and surgery arranged, unless the family agreed to arrange the surgery themselves. A refugee resettlement caseworker intervened, requesting that the family be granted a few more days to work through this difficult decision. A friend of the family arranged for a doctor to speak with the family about the risks and benefits of surgery, allowing the family to share their questions and fears. Ultimately, the family agreed to the surgery on their own, without having it forced upon them. The boy came through the surgery without incident and is now doing well.¹

Refugees who are new to the U.S. face many confusing changes and systems. Among them is the U.S. child welfare system, a service system which is relevant to families but may be overlooked in orienting refugees to their new country.

This toolkit provides a very basic description of the U.S. child welfare system, emphasizing areas that are particularly relevant or potentially unfamiliar to refugees. This toolkit is intended to:

- Provide refugee resettlement staff a basic familiarity with the U.S. child welfare system so that they can, in turn, orient their refugee clients to relevant mainstream services as needed and available.
- Dispel misconceptions about the role of child welfare in the U.S.

This toolkit includes the following:

- A basic description of the child welfare system
- A chart of relevant resources available over the Internet
- Appendices of useful documents.

Goals and Services

The U.S. child welfare system is a mix of services focused on keeping children safe and healthy. These services support families so that they can continue living together. When that is not possible or not safe for the children, services also exist to care for children who cannot live with their families. Refugee families may be able to relate to the goal of **protection from harm**, a

fundamental purpose of the child welfare system that is also the main reason that refugees are resettled in the U.S.

The child welfare system is one piece of a larger social service system in the U.S. designed to help people in need; services for the elderly, the disabled, and the homeless are other elements of the social service system in the U.S. Social services in the U.S. are run by either public (or governmental) agencies, as well as *private* (non-governmental, sometimes with religious affiliations) agencies working together. The public agency has the legal responsibility for serving those in need, but they may contract with private agencies that receive government money to provide services and are subject to government supervision.

The three main goals of the child welfare system include:

- **Safety** – children are not harmed by the people with whom they live
- **Permanence** – children have a stable place to call home
- **Well-being** – children have the things they need for healthy growth and development.

The child welfare system carries out these goals through three main types of services:

- **Child protective service (CPS) agencies** that investigate reports of suspected harm to children
- **Prevention and family preservation services** that are usually provided in the home to help families remain together by improving the health and safety of their children's living environment
- **Foster care and adoption services** for children that cannot live with their families.

These services may be administered differently in each community – combined in one office or separated between several offices. Many other agencies also work with children and families involved with the child welfare system, including juvenile and family courts, private child welfare agencies, mental health, substance abuse, healthcare, education, and domestic violence services.

As indicated by the name “*child* welfare system,” children and their families are the primary focus for services. Some refugee families coming from cultures that are more hierarchical, that emphasize communal needs over individual needs, or that give more honor or attention to elders than to children, may perceive this focus on children as unusual or even uncomfortable. In some cultures, focusing on an individual child's needs may be viewed as spoiling the child or giving more rights to children than to their adult caretakers. Refugee families may require assistance in understanding the wider cultural context for these differences.

Origin of the U.S. Child Welfare System

The U.S. child welfare system builds on the concept of *parens patriae*, meaning that the **government has a responsibility to protect children when parents cannot or do not provide for them.**² For many refugees, government involvement in family matters will be unfamiliar or even threatening. Families who experienced persecution by their former government may feel suspicious of government involvement in family matters. Refugee families should understand that the child welfare system, while not perfect, was developed to protect all children from harm and does not specifically target individual families or groups. However, the over-representation of minority children in child welfare statistics also indicates that professionals working in the child welfare system must recognize that biases, assumptions and cultural misunderstandings can affect assessments of abuse and neglect.

An East African father had come to the U.S. alone, while his wife and daughter had refuge in Western Europe. In order to bring his wife and medically fragile daughter to the U.S., the Western European government required a home study of the father's living situation in the U.S. This requirement infuriated the father, who could not understand why a home study was needed when it was clear that he was the father. He viewed the home study process as an intrusion and an insult to his parental role and authority, rather than as a protection of his daughter's needs. Ultimately the father discussed this with friends, family, politicians and refugee advocates who convinced him to cooperate with the process and the family reunification was able to proceed.³

Internationally, child welfare laws and services are built on the notion of the "best interests of the child," meaning that decisions about a child should take into consideration the child's perspective and be based on what is best for the child, rather than on what is best for the adults or government agencies dealing with the child. The United Nations' *Convention on the Rights of the Child* describes best interests as a "primary consideration" in matters dealing with children; U.S. federal and state child welfare laws also typically include references to a child's best interests.

Some laws in the U.S. are established by the federal government and are the same for every state (such as immigration laws), while other laws are established by each individual state. Child welfare laws are set out minimally by the federal government, meaning the federal government has established the least that must be done by each state in laying out its own child welfare laws. Generally, State governments then establish their own State child welfare laws and policies to implement those laws throughout the State. However, there are approximately 10 States that establish broad State laws and policies while each local jurisdiction (or county) develops and implements their own more detailed policy. Thus, child welfare laws and policies vary from state to state and sometimes within States from county to county. For example, the requirement of how and when to make contact with a child after receiving a child abuse report in Texas will be different from those requirements in California. In Texas, child welfare laws and policies are established and carried out at the State level; in California policies are established and carried out by each separate county.

Due to state-by-state variation, this toolkit can only include general descriptions of the U.S. child welfare system. A "Child Welfare Worksheet" is included as Appendix 3 to help refugee resettlement workers gather information about local child welfare laws and standards.

Several key federal laws provide the foundation for local child welfare statutes.⁴ Two of the most important include:

- **Child Abuse Prevention and Treatment Act (CAPTA)**, originally enacted in 1974 and amended most recently in 2003, establishes the minimum definition of child abuse and neglect as "any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act or failure to act which presents an imminent risk of serious harm" to a child. CAPTA provides financial assistance to states for identifying, reporting and investigating child abuse and neglect and funds research and reporting on child maltreatment.

- **Adoption and Safe Families Act (ASFA)**, enacted in 1997, emphasized that the safety of the child, no matter where the child resides, is paramount. In addition, ASFA established time frames for achieving permanency so that children would not remain in foster care too long or find a permanent living arrangement with kin. ASFA provides guidance on when a petition for termination of parental rights can be filed, but in the U.S. only the court (judge) can make the decision to terminate a parent's rights so that a child can be adopted. ASFA also emphasized the placement of children with relatives before placing children with unrelated foster families.

Child Abuse and Neglect

The definitions of child abuse and neglect can vary from state to state and from culture to culture. The following story of a refugee family in the U.S. illustrates what can happen when physical discipline practices from one culture are applied in the U.S.

In one year, 10-year-old Sedekie learned how to make snow angels, catch a football and play video games. He started third grade with kindergarten-level skills and improved two grade levels in one year. Sedekie, his mother, [three] siblings, and [two] teenage cousins moved to the U.S. last year after spending two years in a refugee camp in Guinea. For Sedekie, the last year has been a mix of confusion, wonder, surprise and heartache. He wants to see his dad, who went missing three years ago when guerrillas massacred people in their village. "I miss my dad because I like him. He was nice," he said.

Hardest of all: He had to leave his mother ... for two weeks as Child Protective Services investigated allegations of corporal punishment at home. He and several other children stayed with members of [their church], and recently returned to their three-bedroom apartment. As with many refugees, the family is struggling to acclimate to cultural differences in their new country, said Isaac Munji, a counselor working with the family through Bethany Christian Services. In the U.S., children question parents' authority and immigrant parents are challenged to raise their children under new rules, Munji said. "It takes a long time for parents to understand that disciplining children here is different," Munji said. "A lot of (physical) discipline happens in African countries and seems natural. Here, it is a big issue." The separation took a toll on Sedekie. At school, he rarely smiled and didn't want to talk about it or let others know he wasn't going home at night. He was asked to write about a special person in his life. He chose his mother. "She loves me," he wrote. "Sometimes she gives me big hugs. She makes rice for me."⁵

As this story of Sedekie shows, what is considered common discipline practice in one culture may be interpreted as maltreatment by U.S. child protection standards. In a very general sense, abuse is an action against a child, while neglect is a lack of action for the child.⁶ There are four types of abuse and neglect typically described in U.S. child welfare law. These include:

- **Physical abuse:** Causing injury to a child through actions such as beating, kicking, biting, burning, or shaking; this is usually intentional injury, though sometimes excessive punishment or not protecting a child from injury by others (such as a violent spouse or partner) can be considered abuse.

- Some refugee families come from cultures which favor physical discipline, such as beating with a belt, stick or hand, holding one position for long periods, kneeling on hard objects such as rice, or placing painful substances such as pepper oil in eyes or other openings. Though customary in their countries of origin, such practices would be as viewed as abusive in many U.S. states. Refugee families should be oriented to these differences in discipline practices and informed about alternative non-physical forms of discipline more common in the U.S.

Physical discipline—or corporal punishment—is discouraged in the U.S., however, abuse is often identified as punishments or actions that leave marks or bruises rather than all forms of physical discipline. Nonetheless, the distinction between discipline and abuse can be a matter of the intensity or frequency of the punishment. In some cases abuse can be a slap or spanking delivered too hard or to a vulnerable part of the child’s body, for example the child’s face or back. In the words of one CPS official, “Most parents accused of abuse did not intend to be abusive.”⁷ Refugees who have experienced violence in their homelands may connect with the idea of protecting their children from all forms of violence, including violence in the home. Refugee families may need support and encouragement in using new and unfamiliar discipline methods.

Despite the cultural differences in disciplinary practices faced by refugee families, it is important that refugee parents still feel the authority to discipline and guide their children in the U.S., rather than abandoning all discipline due to vague fears of the U.S. child welfare system. Parenting education meetings can be an effective means of empowering refugee parents to adapt their discipline practices to their new environment. For more on these issues, see “Raising Children in a New Country: A Toolkit for Working with Newcomer Parents” at <http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=1597>.

- Sexual abuse: Any kind of sexual activity or sexual contact with a child by an adult or older child (teenager) is considered sexual abuse, including prostitution, pornography, or not protecting a child from sexual abuse by others in the home.
 - Some refugee girls may have willingly or unwillingly exchanged sexual relationships with older men—or “sugar daddies”—for money, as a means of survival during displacement or refugee camp life. Parents or caregivers who allow such practices to continue in the U.S. may be considered guilty of sexual abuse or neglect for failing to protect their child. Parents who allow, or force, the marriage of young daughters to older men may also be charged with sexual abuse or neglect as failure to protect, though such charges may be investigated by either child welfare or law enforcement officials, depending on State laws. Refugee teens and adults should also be informed of their state’s statutory rape laws.⁸
- Emotional abuse: Persistent actions by a caregiver that harm a child’s emotional health, such as screaming, name calling, rejecting and withholding affection.
 - Some refugees may come from cultures where harsh verbal reprimands or insults are acceptable forms of discipline; however, persistent use of such actions may be considered emotional abuse in the U.S.
- Neglect: This is the broadest category, resulting in the most reports to CPS, and covers failure to provide for a child’s basic physical and educational needs, including:

- **Physical neglect** – failing to provide sufficient food, housing, clothing or supervision
 - **Educational neglect** – failing to send a child to school or to seek special education needed for a child
 - **Medical neglect** – failing to meet a child’s medical and mental health needs;
 - **Emotional neglect** – disregarding a child’s emotional and psychological needs.
- Substance abuse and mental health problems, such as depression, can often result in various forms of neglect. However, being poor or homeless may only mean that a parent needs other services to provide for the family while not necessarily meaning they are neglectful.
- Lack of appropriate supervision is considered a form of neglect. Refugees who are used to more informal or casual childcare arrangements, or who come from communities where adults provide discipline and guidance to any child in the community, not merely their own, may expect there to be similar communal supervision in the U.S. These parents may be unaware of the traffic or crime risks to unsupervised children, not to mention U.S. norms for more organized child caring arrangements. Some refugee parents may also rely on older siblings to babysit younger siblings. Caseworkers should investigate local child welfare guidelines regarding appropriate babysitting ages and responsibilities and talk with newcomer families about local childcare options.
- Inappropriate dress for the season can be another form of neglect of which refugees should be aware. Refugee families resettled in cold climates will need assistance and resources to dress children appropriately for cold weather.
- Children who are school age but are kept home can be considered victims of educational neglect. Refugee families will need to be informed of the ages that children in their community are required to be in school, usually age 5 to age 16 or 17, but these requirements vary from State-to-State.

Some states also add **abandonment** as a separate form of neglect.

- Abandonment refers to children who have been left without a caretaker, whether the parent or guardian has intentionally or unintentionally left a child on their own.
- A refugee family who moves to another community but leaves a young child behind could be charged with abandonment, while a family who leaves a teenager behind could be charged with neglect due to a lack of supervision. Refugee adolescents may be the most at risk for being left on their own, particularly those who have been resettled with distant family—such as relatives by marriage or relatives they do not know well—or parents they have not seen for many years. Refugee teens who have experienced a lot of independence prior to resettlement may find it hard to obey a new adult caregiver in the U.S. imposing curfews and discipline, thus causing friction between the youth and adult relatives.

Local child protective service (CPS) offices receive reports of child abuse and neglect and then investigate the reports to decide if abuse and neglect has occurred.

Making a CPS report

Every State has its own system for receiving and responding to reports of child abuse and neglect. In general, reports can be submitted by phone, mail or fax to statewide hotlines, local child protective services, or law enforcement agencies. The Childhelp National Child Abuse Hotline, at 1.800.4.A.CHILD (1.800.422.4453), is available around the clock to receive child protection inquiries in 140 languages and to direct callers to local emergency and support resources. To find child abuse reporting numbers for your State, visit:

http://www.childwelfare.gov/pubs/reslist/rl_dsp.cfm?rs_id=5&rate_chno=11-11172.

Check if your agency has any protocol for making CPS reports. If not, talk with your supervisor about what steps you should take if you suspect a client is mistreating a child. Some communities may require that a written report or form be completed before a CPS investigation will begin. Look into these things before a problem arises so you feel prepared to respond appropriately when needed.

Determining if the behavior you have seen constitutes abuse or neglect may be the most difficult decision. Knowing your community's legal definitions of abuse and neglect is an important first step. A *Child Welfare Worksheet*, included as [Appendix 3](#), can help you gather this kind of relevant information from your local public child welfare agency. In addition, refer to [Appendix 4](#) for a list of *Physical and Behavioral Indicators of Abuse* to understand how abuse and neglect can show up in a child's appearance and actions. However, keep in mind that your role is only to report suspicions of child maltreatment, while the CPS agency has the responsibility to investigate and determine if maltreatment occurred.

Mandated Reporters

While anyone can report suspicions of child maltreatment, each State has laws identifying individuals or professional groups who are required to report suspected child abuse and neglect. At present, 18 States require all individuals to report child maltreatment while 34 States note certain categories of professionals—such as attorneys or clergy—who are exempt from mandatory reporting for confidentiality reasons. Mandated reporters who fail to report despite knowing or having reason to believe that a child is being mistreated could be subject to fines or criminal charges, depending on State laws. Someone who knowingly submits a false report of child maltreatment may also be subject to penalties, depending on individual State laws. Find out your State's laws regarding mandated reporters, since some refugee resettlement workers will be considered in this category.

Whether mandated reporters or not, refugee resettlement caseworkers play a key role in the lives of refugee clients and may be one of the few, or only, social service providers involved with a newcomer family. Although resettlement casework often focuses on the adults, children are equally important and provide a different window into overall household functioning. Children should periodically be given the opportunity to talk with caseworkers apart from other adult relatives. If abuse or neglect is suspected, resettlement caseworkers should involve CPS; they should not conduct investigations themselves.

The Role of Child Protective Service (CPS)

Child protection agencies provide a range of services to children and their families. CPS workers investigate community reports of abuse and neglect and determine whether the reports are true or not. Their primary responsibilities include:

- **Screening** child abuse and neglect reports to determine whether the reports warrant further investigation
- **Responding** to credible reports by investigating whether the abuse and neglect allegations are “founded/substantiated” or “unfounded/unsubstantiated,” and assessing the child’s current safety or risk of future harm; this assessment determines whether the child can safely remain in the home or will be temporarily removed due to safety concerns and placed with relatives, friends, a foster family or shelter.
- **Case planning**, once an assessment is completed, usually involving the family and case manager working together to set goals for change so the child(ren) can remain in the home or can be returned home.
- **Intervention and service delivery** by ensuring that the services outlined in the case plan are delivered in a timely manner.
- **Evaluating case progress** on a regular basis so CPS can determine if the child can safely remain in the home or be returned home and whether the family still needs services.⁹

Even before coming to the U.S., some refugee families will have heard stories of CPS workers removing children from their families. Some stories may be accurate and some may be exaggerations of events, or may only reflect part of what actually occurred. Ask refugee families what they already know or have heard of CPS and child welfare in the U.S. in order to understand their perceptions and assumptions.

In some cultures, children may be sent by parents to live with other relatives, friends or acquaintances for short or long periods during difficult times or for access to schooling and other opportunities. Unlike these voluntary and informal arrangements with which some refugees may be familiar, the removal of children by CPS is a formal official process in which refugee families will have input but not control, and which sometimes results in the permanent removal of children from their families. Refugees should understand that CPS involvement is not a type of free voluntary childcare service.

Child Welfare Services Beyond CPS

Due to concerns about hygiene and roach infestation in the home, an East African family was referred to CPS following the birth of their fifth child. With the help of an interpreter from a refugee resettlement agency, CPS worked with the family on household cleaning products, home hygiene, and access to other local resources. This relationship with CPS and other child welfare workers ultimately led the refugee mother to end an abusive relationship and move with her children into subsidized housing. “CPS was extremely helpful to fund the assistance that the family required to understand how they could successfully function within the U.S. system.”¹⁰

As noted previously, in addition to CPS, child welfare agencies also typically provide services to keep families together (family preservation) as well as foster care and adoption services for children who cannot safely remain with their families. As this case illustrates, CPS can work with families to create a safe environment so children can remain in their own homes, and they can refer families to other local social services as needed.

Prevention services are provided to prevent child maltreatment from occurring in families identified as “at risk” of abuse and neglect. These services are proactive—before a problem arises—such as parenting education classes. Often these services are provided after CPS has been contacted and CPS has determined that no abuse and neglect has occurred, but has determined that the family is in crisis and is in need of services to prevent abuse and neglect from happening. Services to prevent the removal of a child from the home are often called **family preservation services**, indicating a focus on keeping families together. Such services usually build on a family’s strengths and arrange for an intensive complement of social services to support a family during a critical period. Services such as substance abuse counseling, medical care, prenatal care, or government financial assistance through programs such as Temporary Aid to Needy Families (TANF), Women Infants and Children (WIC), subsidized housing or Food Stamps are often provided.

Some States provide **wraparound services**, a particular approach to family preservation services emphasizing a teamwork approach to serving families by seeking family input about their perceived needs, focusing on family strengths and abilities, and encouraging coordinated efforts with other community service providers to keep children and families living together in their own homes.

While prevention and preservation services aim to keep children in their own homes, foster care and adoption services are available for children who cannot safely return to their own homes. Foster care is one of several substitute care arrangements—meaning any out-of-home placement where care and nurture is provided by someone other than the child’s parent or usual caregiver—available to children who cannot remain at home. The most common types of substitute care include the following:

- **Kinship care:** Substitute care is provided by a relative. For child welfare cases these placements have the formal recognition of the court. But the vast majority of kinship care placements are informal arrangements made within families or communities and not considered part of the child welfare system. Therefore, relatives do not usually receive financial help from the child welfare agency unless they are licensed foster parents. However, these relatives may apply for TANF and Medicaid at their local social services office. Non-parental relatives caring for children should establish legal guardianship to ensure the relative’s ability to make important medical and educational decisions for the children.¹¹
- **Family foster care:** Substitute care provided by another family who has been screened, licensed and trained to care for children who are separated from their parents for a variety of reasons.
- **Group home:** A type of substitute care, more often for older youth, that provides a homelike setting in which a number, usually over seven, of unrelated youth live under the care and supervision of house parents, staff or caseworkers.
- **Residential treatment:** Intensive institutional care, usually short-term, in a state-licensed 24-hour care facility for children needing special emotional, behavioral, physical or mental health services.
- **Emergency shelter care:** A temporary placement, usually in an institutional setting rather than a home-like setting, designed for short-term use while a more permanent long-term placement is arranged.

The Courts

Each state designates a particular court system to handle children and family issues. Most often these are called juvenile court, family court, or dependency court, but in some states trial courts handle child welfare cases in addition to other types of adult cases. Some Native American tribes

have their own court systems which may handle child welfare proceedings involving Native American children. Juvenile and family court judges have a range of responsibilities which may include deciding whether a child should be removed from their family and placed temporarily in substitute care, determining whether abuse or neglect occurred, deciding whether a parent's rights should be terminated, and determining whether a child should be adopted.¹²

Children who are separated from parents and living in the U.S. with extended family may also go through court proceedings to have their relatives establish legal guardianship for them, thereby allowing the relative to make important decisions about medical care, schooling and other issues. Guardianship proceedings vary from state to state; they often take place in probate courts, but they may also occur in circuit court, state Supreme Court, superior court, county court or family court.

Some refugees may be intimidated by court, assuming that court is only a place for criminals or the highly educated, or they may be reminded of corrupt or discriminatory government practices from their home countries. Courts play a significant role in U.S. public life. In some sense, the court systems in the U.S. function like "elders"—providing guidance, mediation, decision-making and interpretation of U.S. laws. Courts are intended to protect the rights of all people in the U.S., even children. Refugees should be encouraged to seek knowledgeable help if they become involved in court proceedings, whether child welfare related or otherwise.¹³

Child Labor

Both the federal government and state governments establish laws regarding the type and amount of work children are allowed to perform. The U.S. Department of Labor implements national laws and programs regarding employment, including the Fair Labor Standards Act (FLSA) which restricts the work hours of young people under age 16 and designates certain occupations as too dangerous for young workers.

In general, 14 is the minimum age for most non-farm work. However, youth of any age can:

- Deliver newspapers
- Perform in radio, television, movie, or theatrical productions
- Work in businesses owned by their parents (except in mining, manufacturing or certain dangerous jobs)
- Perform babysitting or minor chores in a private home, and
- Gather and make evergreen wreaths.¹⁴

A summary of *When and Where is Your Teen Allowed to Work* can be found at:

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=4584>.

A complete description of youth jobs exempted from the FLSA, including youth working in agriculture, is available at: <http://www.dol.gov/elaws/esa/flsa/cl/exemptions.asp>. Many states have also established their own child labor laws; state information and Web links are available at <http://www.dol.gov/dol/topic/youthlabor/Statelaborlaws.htm>.

Section 2: Refugee Serving Agencies and the Child Welfare System

An East African family resettled in Texas left six younger children in the care of their high-school-age daughter, as was the custom prior to coming to the U.S. A three-year-old child slipped out of the family's apartment unnoticed and was found wandering around the neighborhood alone. A neighbor contacted the local child protective services, which removed all seven children from the home and placed them in foster care. The refugee agency helping the family engaged in vigorous advocacy with CPS, explaining the refugee family's cultural background and experiences. Due to advocacy by the refugee serving agency, the children were ultimately returned home and the parents were not charged with neglect.¹⁵

Helping Clients Who Are Reported to CPS

Some refugee resettlement caseworkers have been contacted by clients after they have been reported to CPS for child maltreatment. Refugee resettlement caseworkers can play an important role as a cultural go-between for newly arrived refugees. The refugee family will likely feel confused, scared and angry, while the CPS worker may feel equally confused about the refugee family. Refugee resettlement workers can carry out several critical functions such as assisting the CPS worker in securing an interpreter for the family, providing information or training to the CPS worker on the newcomer's culture, and/or explaining CPS procedures to the refugee family. These actions can facilitate a more accurate understanding of the children's safety and the family's situation. For example, a CPS worker who understands that corporal punishment is traditionally accepted in a refugee's culture of origin may recommend parenting education so the parent can learn other discipline strategies, rather than a child's removal from the home.

Misunderstandings due to language or cultural differences can and do occur in CPS cases; at the same time, refugee families are capable of child maltreatment, especially when traditional practices are compared against current U.S. interpretations of abuse and neglect. Refugee resettlement caseworkers can play an important role in explaining each side to the other.

Resettlement caseworkers should remember that they are working with the whole family unit, not merely the parents. At times, the caseworker may meet separately with the children in the family, apart from the adults in the household, in order to check in about their adjustment to the U.S., school, neighborhood, etc.

Refugee families typically consider children their most valued treasure, representing all of their hopes and dreams for the future. To survive the chaos and tumult of war, persecution and displacement, only to lose their children to child welfare workers in their country of refuge would be a cruel irony, but this is unfortunately a real fear for many refugee families. Resettlement workers can play an important role in helping refugee families gain access to services in the U.S. that can help them stay together and thrive in their new country.

Building Bridges between Refugees and the Child Welfare System

The best way to understand your local child welfare system is to connect with it. Developing relationships between refugee serving agencies and the child welfare system can help refugee agencies to better understand local resources and supports available to help clients, while also helping child welfare agencies to better understand refugee groups in their community. Building these bridges can help to create more positive encounters between refugee families and their local child welfare systems.

Listed below are some concrete recommendations for developing connections with your local child welfare system:

- **Orient** new refugees to U.S. parenting practices/expectations, especially regarding child discipline and supervision; invite local child welfare staff to participate
- **Meet** periodically with representatives from your local child welfare system and representatives from local refugee groups or ethnic associations; this may be most effective and efficient with a coalition of refugee serving agencies
- **Share** cultural and background information about new refugee groups with child welfare agencies in your community or state
- **Organize** a “cross-service training” between refugee serving agencies and child welfare agencies; details can be found at:
<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0701>.
- **Encourage** direct contact between refugee clients and child welfare employees to break down barriers and create goodwill before problems arise
- Overall, look for opportunities to **collaborate and coordinate** between child welfare and refugee resettlement systems; including other service systems—such as mental health, education and health care—may also benefit refugee clients.

References

A Child's Journey Through the Child Welfare System

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=1682>

A Family's Guide to the Child Welfare System

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0983>

Child Abuse and Neglect: General Packet Information

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=2891>

Keeping Families Together and Safe: A Primer on the Child Protection—Housing Connection

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=2889>

Mandatory Reporters of Child Abuse and Neglect

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0207>

Endnotes

¹ Information provided by Katie Richardson, Case Manager, World Relief, Nashville, TN

² For more on *parens patriae* and CAPTA, see: U.S. Department of Health and Human Services; Administration for Children and Families; Administration on Children, Youth and Families; Children's Bureau; Office on Child Abuse and Neglect. (2003, June 25). *The Child Abuse Prevention and Treatment Act, Including Adoption Opportunities & The Abandoned Orphans Assistance Act, As Amended by The Keeping Children and Families Safe Act of 2003* (p. 4).

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=1504>

³ Information provided by Susan Oslund, Social Work Supervisor, International Social Service—USA, Baltimore, MD.

⁴ For a more complete summary of federal child welfare legislation, visit:

http://www.childwelfare.gov/systemwide/laws_policies/federal/

⁵ Some identifying information has been removed from this text for the sake of privacy. Copied from: Nardy Baeza Bickel, *Student from West Africa finishes third grade*, 7 August 2006, The Associated Press.

⁶ See: The Ohio Department of Job and Family Services, Office for Children and Families (2005). *Child Abuse and Neglect: A Reference for Medical Professionals (Second Edition)*.

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=2918>

⁷ Interview with Njeri Njoroge, MSW, Intake & Investigation Program Specialist, DFPS-CPS State Office, Austin, TX (August 15, 2006).

⁸ Statutory rape refers to sexual activity considered illegal because of a person's age. Each state has its own laws regarding the age that a person can legally consent to sexual activity. For information on laws governing sexual contact visit: <http://www.sexlaws.org/>

⁹ For a more complete description of these responsibilities, go to: "Keeping Families Together and Safe: A Primer on the Child Protection—Housing Connection" p. 5-8,

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=2889>

¹⁰ Information provided by Mary Flores, Director Refugee Services, St. Vincent Catholic Charities, Lansing, MI.

¹¹ For more on guardianship see: BRYCS (2003). *Guardianship Fact Sheet for Staff Assisting Refugee Families*. <http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0527>, and BRYCS (2006). *Guardianship Information by State*.

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=1559>

¹² This section summarized from: Sue Badeau. *Child Welfare and The Courts*.

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=4613>

¹³ BRYCS (2003). *Guardianship Fact Sheet for Staff Assisting Refugee Families*.

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0527>

¹⁴ From <http://www.dol.gov/elaws/faq/esa/flsa/026.htm>. For more on child labor issues, visit:

<http://www.dol.gov/dol/topic/youthlabor/index.htm> or <http://www.youthrules.dol.gov/>

¹⁵ BRYCS (2005). *Case Study of Child Welfare Interventions in Refugee Families in Texas*.

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=1556>

Section 3: Resources

Resources Available on the BRYCS Website

The following BRYCS resources are available at <http://www.brycs.org>:

Building Bridges: A Guide to Planning and Implementing Cross-Service Training
<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0701>

Determining Child Abuse & Neglect Across Cultures, Spotlight April 2005
<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=2814>

Enhancing Child Care for Refugee Self-Sufficiency
<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=1787>

Liberian Refugees: Cultural Considerations for Social Service Providers
<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=1287>

Multi-Cultural Guidelines for Assessing Family Strengths and Risk Factors in Child Protective Services
<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0037>

Program Description: Center for Multicultural Human Services, Multicultural Family Strengthening to Improve Learning and Development
<http://www.brycs.org/promisingpractices/promising-practices-program.cfm?docnum=0020>

Somali Bantu Refugees: Cultural Considerations for Social Service Providers
<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0837>

Other Web-Based Resources

1	Organization	Annie E. Casey Foundation
	Web site	http://www.aecf.org
	Resources	<i>Undercounted. Underserved. Immigrant and Refugee Families in the Child Welfare System</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=1810
2	Organization	Child Welfare Information Gateway
	Web site	http://www.childwelfare.gov
	Resources	<ul style="list-style-type: none"> Child Abuse and Neglect User Manuals http://www.childwelfare.gov/pubs/usermanual.cfm#new <i>Child Abuse and Neglect: General Packet Information</i>, http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=2891

		<p>includes:</p> <ul style="list-style-type: none"> ○ What Is Child Abuse and Neglect? ○ Recognizing Child Abuse and Neglect: Signs and Symptoms ○ How Does the Child Welfare System Work? ○ Long-Term Consequences of Child Abuse and Neglect ○ <i>Child Maltreatment 2004: Summary of Key Findings</i> ○ Toll-Free Crisis Hotline Numbers <ul style="list-style-type: none"> ● Spanish version: <i>El Abuso y Negligencia de Menores: Paquete de Información General</i> http://www.childwelfare.gov/pubs/sp_can_info_packet.cfm ● <i>Cultural Competence</i> resource page http://www.childwelfare.gov/systemwide/cultural/index.cfm ● <i>Defining Child Abuse and Neglect</i> resource page http://www.childwelfare.gov/can/defining/ ● <i>Definitions in Federal Law</i> resource page http://www.childwelfare.gov/can/defining/federal.cfm ● <i>Mandatory Reporters of Child Abuse and Neglect</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0207 ● <i>State Child Welfare Agency Web Sites</i> http://www.childwelfare.gov/pubs/reslist/rl_dsp_website.cfm?s_ID=16&rate_chno=AZ-0004E ● <i>State Statutes Search</i> http://www.childwelfare.gov/systemwide/laws_policies/state/
3	Organization	Child Welfare League of America
	Web site	http://www.cwla.org
	Resources	<ul style="list-style-type: none"> ● <i>Keeping Families Together and Safe: A Primer on the Child Protection—Housing Connection</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=2889 ● <i>A Family’s Guide to the Child Welfare System</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0983 ● <i>Cultural Competence</i> resource page http://www.cwla.org/programs/culturalcompetence/culturalabout.htm
4	Organization	Coalition for Asian American Children and Families
	Web site	http://www.cacf.org
	Resources	<ul style="list-style-type: none"> ● <i>Understanding the Issues of Abuse and Neglect and Asian American Families</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0080 ● <i>Crossing the Divide: Asian American Families and the Child Welfare System</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0073

5	Organization	Minnesota Department of Human Services
	Web site	http://www.dhs.state.mn.us
	Resources	<ul style="list-style-type: none"> • <i>Reporting Child Abuse and Neglect</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=4614 • <i>Families' Guide to Child Protection</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=2217 • <i>Cultural Competence</i> resource page http://www.dhs.state.mn.us/main/groups/agencywide/documents/pub/dhs_id_016420.hcsp
6	Organization	The Pew Commission on Children in Foster Care
	Web site	http://www.pewfostercare.org
	Resources	<ul style="list-style-type: none"> • <i>A Child's Journey Through the Child Welfare System</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=1682 • <i>A Brief Legislative History of the Child Welfare System</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=4310 • <i>The Federal Legal Framework for Child Welfare</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=4309 • <i>Child Welfare and the Courts</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=4613 • <i>The Child Welfare Financing Structure</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=4307
7	Organization	The University of Georgia College of Family and Consumer Sciences Cooperative Extension
	Web site	http://www.fcs.uga.edu
	Resources	<ul style="list-style-type: none"> • <i>Grandparents Raising Grandchildren: What You Need to Know about Abuse and Neglect</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=4615 • <i>Grandparents Raising Grandchildren: Disciplining Your Grandchild</i> http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=4616

Appendices

Appendix 1: Tools for Trainers

Appendix 2: Useful Child Welfare Terms

Appendix 3: Child Welfare Worksheet—Critical Questions

Appendix 4: Physical and Behavioral Indicators of Abuse

Appendix 5: Identifying Child Abuse

Appendix 6: Child Welfare Flow Chart

Appendix 1: Tools for Trainers

This toolkit can help in training refugee resettlement staff about the U.S. child welfare system. Included below is a list of questions to test one's knowledge of the child welfare system, along with four case studies and accompanying questions to guide discussion.

A. Test Your Knowledge of the Child Welfare System

[Answers listed after the case studies]

1. True or False: Child welfare laws are the same in every state.
2. What are the three main goals for children involved with the child welfare system?
3. Name three types of child welfare services typical in the U.S.
4. Name two important U.S. child welfare laws.
5. Name and describe 4 types of child maltreatment defined in child welfare laws.
6. Which of the following are types of substitute care for children who cannot safely remain with their families?
 - a. foster care
 - b. kinship care
 - c. group home care
 - d. residential treatment
 - e. emergency shelter care
 - f. all of the above
7. What is a mandated reporter?
8. What should you do if you think a client is abusing their child?

B. Case Studies

The following case studies are copied from the BRYCS document *Foster Care at a Cultural Crossroads: Refugee Children in the Public Foster Care System (Roundtable Report)*, <http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0760>. Each case study relates the story of a refugee family involved with the U.S. foster care system. Case specific questions follow each case study, in addition to the two general questions listed below. Trainers and supervisors can use these case studies to generate discussions about refugee families and the U.S. child welfare system.

- In these case studies, what strategies could be used to foster collaboration between public child welfare services, resettlement agencies and ethnic organizations?
- If it was your family described in these cases, what information or services would be most helpful to you, and provided by whom?
- If you were a resettlement caseworker involved with each family described, how would you work with CPS to assist in each case? What advice, coordination or cultural information might be helpful?

Case Study 1

Two Asian sisters were reported to Child Protective Service (CPS) as victims of sexual abuse by their father. The girls were part of a large family that came to the United States as refugees more than 20 years ago.

Kinship care was not viewed as a viable option, since extended family was seen as complicit in the abuse. Due to the number of children, the siblings were split between four different foster homes. The three youngest children were placed with an Asian foster family of different ethnicity. Although there were some similar customs, this placement was ultimately problematic since there was a great deal of mistrust between the children's family and the foster parents.

The two abused girls were then placed together in a culturally matched foster home. This placement allowed for shared culture, language, and customs; however, these same characteristics allowed the birth parents to influence and intimidate the foster parents and to have continued contact with the girls. The girls were blamed by family members for splitting up the family, which led to feelings of guilt.

One of the girls was more introverted and did not talk about her problems and concerns. Ultimately, she was placed in a psychiatric facility due to mental health problems. Her birth parents convinced her to refuse her psychiatric medication.

To minimize the parental pressure on the girls and the foster family, the two sisters were eventually moved to an American therapeutic foster home. The birth parents were then less likely to call the girls by phone, and the daughter with mental health concerns was able to receive more intensive foster care and mental health services.

Questions Specific to This Case

- What were the benefits and drawbacks to using a culturally matched placement in this case? How can you know which type of placement will be best for a child?
- What should be considered in making placements for abuse victims within a small ethnic community?
- What assumptions can occur in placing "Asian" children in "Asian" foster homes or "African" children in "African" foster homes? Are such assumptions problematic, and if so, how can they be minimized or challenged?

Case Study 2

Shireen, a 10-year-old Muslim girl, was resettled with her parents and older male siblings. Originally from the Middle East, she arrived in the United States in 1996 as a refugee. She had 10 older siblings and 1 younger sibling.

When Shireen was 16, her school called her home to say that Shireen was being suspended from school. Shireen had been accessing inappropriate Internet sites at school in order to communicate romantically with boys. Shireen's mother and brothers came to the school to talk with the school administrators and to pick her up. Because Shireen's mother did not speak much English, the school explained to her brothers why she was being suspended.

When Shireen returned to school on Monday, she had bruises on her arm. She told the school principal that her brother had beaten her up because it was contrary to their culture for her to be dating or communicating with boys on her own. The school reported this to CPS, so that when the family came to pick Shireen up from school in the afternoon, they were told that she was already under the protection of CPS. When the family returned home from the school, CPS investigators were already at the house to interview the family about what had happened.

Shireen was placed with a Christian, American foster family, and the court ordered that the biological family could not have any direct contact with Shireen. After six weeks in foster care, Shireen attempted suicide. In a suicide note, she stated that she did not like living in the foster home because there were too many rules. She apparently expected that she would have more freedom in an American home than in her family's home.

Following her suicide attempt, Shireen was transferred to a group home. She preferred the group home to the foster home because she had more independence. However, she became violent with the group home staff on two occasions. The fights resulted in two short-term stays at a juvenile detention facility.

After seven months in care, supervised meetings were arranged between Shireen and her family. When in the presence of her family, Shireen said repeatedly that she wanted to return home. However, her requests were more conflicted when speaking alone with child welfare staff. A plan to return Shireen home with her family for a 60-day visit was terminated when Shireen said at the last minute that she did not want to return home.

Questions Specific to This Case

- What would be important factors to consider in arranging the best possible placement for a child like Shireen?
- What kind of preventive or preparatory work could be done in this community to prepare for cases like Shireen's in the future?
- How can public child welfare agencies and refugee serving agencies work together to address intergenerational conflict between refugee parents and teens?
- What would you have done similarly or differently to best serve this family?

Case Study 3

An East African family came to the United States as refugees in 1995. Since that time, the family has lived in three different states in the Midwest. The family was intact at the time of arrival in the United States, but the father has since been sent to prison for threatening the family with a gun during a parental dispute.

Since becoming a single parent, the mother has been arrested twice for driving while intoxicated. In addition, the mother failed to seek medical attention for one of the children and was charged with neglect. The children were placed in foster care for four months before being returned home to the care of their mother.

Recently, the family was again reported to CPS by a neighbor who was concerned that the children were being neglected. When the CPS worker arrived at the home to investigate the charge, the mother became enraged and threatened to take her own life and the life of her children. At that point, the children were removed from the home and placed in foster care.

There are six children in the family, ranging in age from 4 to 16. All of the children remain in the care of CPS. The five youngest children are split between two foster homes, and the eldest child has run away from both foster care and group home arrangements. The second oldest child, age 14, is beginning to run away as well. The four youngest children appear to be adjusting relatively well to foster care.

Other local refugees from the same ethnic background have been divided in their reaction to this case. Some community members have been critical of CPS and the U.S. child welfare system, while others have begun to view the intervention as a protection for the children.

Questions Specific to This Case

- How might the local East African community be a resource in serving this family?
- What cultural misunderstandings with this family and the wider East African community are likely to arise in the removal and placement of the children? How could these misunderstandings be minimized?
- How can the child welfare agency help ensure that the children are supported in maintaining their original culture and language?
- What role could a refugee caseworker play with the family, the East African community, and with CPS?

Case Study 4

A mother and father from Asia were granted asylum* in the United States. They live with their teenage son, who was born in their country of origin, and a seven-year-old son, who was born in the United States. As is customary in this ethnic community, the younger son was sent to his grandparents in the country of origin from infancy until he was ready to begin school in the United States. This practice is common due to the busy work schedules of most parents in the United States; the practice lets children learn their mother tongue and be cared for by their grandparents.

The mother works during the day, and the father works at night. Thus, when the seven-year-old boy returns from school, the father is at home, but often sleeping. One evening, the father awoke and found the boy missing. After searching for him, the family realized that the boy had been routinely leaving the house without permission while the father was asleep.

The father punished the child by hitting him with a thin bamboo stick, a common discipline technique in his home country, and sent the child to bed without supper. The mother says that she also hit the child, but not hard.

The next day at school, a teacher noticed bruises on the child. The school then contacted CPS to file an abuse charge. The CPS investigator who visited the home was accompanied by a Mandarin interpreter, although the parents' first language is another Asian dialect. The family was assigned a caseworker of Asian descent, although the caseworker is not of the same ethnicity as the family and does not speak the same language as the family. Court proceedings were interpreted into Mandarin; however, the family remained confused because that is not their primary dialect. The child was very confused as well because he primarily speaks the parents' local dialect. The family did not understand what was happening and what the court was deciding about their son, due to the language gap.

Ultimately, the father was charged with neglect and the mother was charged with abuse. A court order was issued barring the mother from visiting the son. The child was placed in a kinship care placement with an aunt, where he remains. The court has recommended parenting classes and mental health counseling for the mother, but culturally appropriate services have not yet been located.

Questions Specific to This Case

- How did the child welfare agency attempt to provide culturally sensitive services? How were they appropriate or inappropriate?
- Put yourself in the teacher's shoes. What would you consider in determining whether to contact CPS or child welfare services about this family? What supportive services might be helpful?
- What would you have done similarly or differently to best serve this family?

- What broad cultural or societal pressures are affecting the child-rearing abilities of this family? How can community-based organizations and public child welfare agencies work together to address these issues?

**Asylum is for people who request refugee status after they have entered the United States, whereas refugee status is given to people before they enter this country. Once asylum status is granted, asylees are eligible for most of the same public benefits as those who have refugee status.*

Answers to “Test Your Knowledge of the U.S. Child Welfare System”

1. F
2. Safety, permanence, well-being
3. Child protective services (CPS), foster care, adoption, family preservation, wraparound services
4. Child Abuse Prevention and Treatment Act (CAPTA); Adoption and Safe Families Act (ASFA)
5. Physical abuse; emotional abuse; sexual abuse; neglect—physical, educational, medical or emotional; abandonment
6. F
7. Someone mandated by law to report suspected child abuse and neglect.
8. Discuss this answer with a supervisor.

Appendix 2: Useful Child Welfare Terms

Best interest of the child: The central focus in decision making about a child should be the child's needs rather than an adult's, court's or government's needs. Considerations should account for the child's immediate and long-term needs and, where possible and appropriate, should involve children in the decision making about what will happen to them. This concept is sometimes described as mentally putting oneself into the child's "shoes" to decide what the child would want for his or her future.

Child abuse registry: Most states have a centralized place for tracking the names of people who are found to have abused or neglected a child (such registries are based on investigation findings, not merely allegations). These registries may be checked when people apply for jobs involving children, such as school and child care employment. Each state has a different registry system. Legislation passed in July 2006 will create a national child abuse and neglect registry (still being created at the writing of this toolkit). Links to state sex offender registries, including information about those who have sexually abused children, can be found at: <http://www.prevent-abuse-now.com/register.htm>

Child maltreatment: This is another way of saying child abuse and neglect.

Child protective services (CPS): The state-by-state system of services for assessing and addressing child safety and risk of harm issues. CPS agencies typically receive, investigate and report on allegations of child abuse and neglect.

Concurrent planning: Making simultaneous plans for family reunification and a permanent out-of-home placement, so that children do not suffer placement delays if family reunification does not ultimately occur.

Court order: A legally binding document describing a judge's decisions, instructions or directions.

Cultural competence: The ability of individuals and systems to respond respectfully and effectively to people of all cultures, classes, races, ethnic backgrounds, sexual orientations, and faiths or religions—recognizing, affirming, and valuing the worth of individuals, families, tribes, and communities, and protecting and preserving the dignity of each.

Custody: The adult or agency that has the legal responsibility to care for, make placement and other major decisions about a child.

Domestic violence: Violent or abusive behavior—whether physical, sexual or psychological—between people that live together. Domestic violence may result in the removal of children from home for their own protection.

Emergency placement/removal: If a CPS worker finds that a child is not safe in his/her home, the child may be taken out of the home temporarily as a protective measure and placed with a relative, foster home or shelter on an emergency basis. Such decisions will typically be reviewed by a judge to see if the child can return home.

Emergency shelter care: A temporary placement, usually in an institutional setting rather than a home-like setting, designed for short-term use while a more permanent long-term placement is arranged.

Family foster care: Substitute care provided by another family who has been screened, licensed and trained to care for children who are separated from their parents for a variety of reasons.

Family group decision making: An approach to planning for a child's placement and safety needs that emphasizes the decision making role of the child's immediate and extended family members, who meet and develop a concrete plan for the child's safety and permanency needs, for review and approval by professionals and government representatives involved in a case. This model of child welfare decision making may work well with refugee groups due to the increased family involvement and incorporation of cultural variations and perspectives.

Family preservation: Intensive short-term services to a family in crisis, typically delivered in the home to prevent the removal of children from the home or to facilitate family reunion.

Group home: A type of substitute care, more often for older youth, that provides a homelike setting in which unrelated youth live under the care and supervision of house parents or staff.

Guardian *ad litem* (GAL): An advocate for a child, usually appointed by the court, who is designated to look out for the child's best interests. A child's lawyer, by contrast, is bound to do what the child requests, which may differ from what is considered best for the child. For example, a boy may ask his lawyer to reunite him with his parent, but the GAL may recommend an alternate placement due to the parent's substance abuse or history of domestic violence.

Guardianship: The process of giving legal responsibility for the care of a child to an adult who is not the child's parent. Guardianship allows the caretaker to make important decisions for a child that a parent would usually make, such as medical treatment and education, but it does not end the rights of the birth parent. Guardianship is usually established by a court and ensures that a responsible adult is looking after a child.

Home study: An intensive examination of the home and family with which a child will live, whether for adoption, foster care, kinship care or guardianship. Home study requirements will vary from state to state but typically examine overall living conditions, physical safety within the home (ex: guard rails on stairways, fire safety), ages and backgrounds of all household residents, sleeping arrangements, discipline methods, etc.

Investigation: The information gathering process used by CPS workers following a report of child maltreatment, in order to determine if child abuse or neglect has occurred. This may involve interviews with the child (if possible), the parents or caregivers, relatives and others who know the child such as neighbors, teachers, doctors or childcare workers.

Juvenile justice: The system of courts and services designed to work with youth who get into trouble with the law.

Kinship care: Substitute care provided by a relative. In the child welfare system these placements have the formal recognition of the court, but more often they are informal arrangements made within families or communities. Relatives do not usually receive financial help from the child welfare agency unless they are licensed foster parents.

Mandated reporters: People or professions required by state law to report concerns or incidences of child abuse and neglect. Each state establishes its own laws, with some states designating all residents as mandated reporters and other states designating specific professions that come into contact with children, typically social workers, medical and mental health professionals, teachers, and childcare providers.

Parens patriae: The legal notion that government has the responsibility to protect children when parents fail to do so.

Permanency planning: The process of determining a stable, long-term placement for a child in substitute care, generally overseen by a court. The Adoption and Safe Families Act of 1997 created a greater emphasis on permanency at a more expedited pace. Concurrent planning for family reunification and for alternative long-term care is now more common, if family reunification is not feasible within timelines.

Reasonable efforts: The steps that child welfare agencies must take to prevent children from being removed from their homes, to help removed children return home, and to help children find other permanent homes if they cannot return to their own families. The Adoption and Safe Families Act (ASFA) clarified that reasonable efforts emphasize children's health and safety but it allows states to specify what actions count as reasonable efforts.

Residential treatment: Intensive institutional care, usually short-term, in a state-licensed 24-hour care facility for children needing special emotional, behavioral, physical or mental health services.

Substitute care: Any out-of-home placement for a child where care and nurture is provided by someone other than the child's parent or usual caregiver, such as foster care, kinship care, group home care, or emergency shelter care.

Termination of parental rights (TPR): The court decision made by a judge to end the parental rights of birth parents so that a child can be freed for adoption.

Definitions for this section were compiled from:

- 1) BRYCS (2003). *Guardianship Fact Sheet for Staff Assisting Refugee Families*. <http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0527>
- 2) BRYCS (2004). *Serving Foreign-Born Foster Children: A Resource for Meeting the Needs of Refugee Youth and Children, Appendix 9: Glossary*. <http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0759>
- 3) CWLA. Web page on cultural competence. <http://www.cwla.org/programs/culturalcompetence>
- 4) CWLA, et al. (2003). *A Family's Guide to the Child Welfare System: Terms You May Want to Know*. <http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=0983>
- 5) Therapistfinder.net Mental Health Journal (2001). *Domestic Violence: An Overview*.

Appendix 3: Child Welfare Worksheet—Critical Questions

Listed below are basic questions to ask your local government child welfare service agency. If you are not sure where to call, consult this website for a state-by-state listing of agencies that respond to child abuse and neglect reports:

http://www.childwelfare.gov/pubs/reslist/rl_dsp.cfm?rs_id=5&rate_chno=11-11172

Suggested introductions to your call:

- Hello, my name is _____ from [agency] _____.
 - We work with refugees from [countries/ethnic groups] _____ and my responsibilities are _____.
 - We relate to children and families in the following ways [describe] _____.
 - Because we work with children and families, I would like to gather some information from you about the child welfare system and services in our community.
1. Who are considered mandated reporters in this community? What is expected of mandated reporters?
 2. What is the process for making an abuse and neglect report?
 - a. Whom would I call?
 - b. What is the phone number?
 - c. What information should I be ready to provide?
 - d. Is a report by phone enough, or do I need to submit something in writing also?
 - e. What will happen after I call?
 - f. Will my name be given to the family/person reported?
 - g. How quickly will an assessment/investigation be made?
 - h. Will I receive any follow-up contact or information?
 3. What services are available in this community to keep families together, as an alternative to removing children from the home?
 4. How are abuse and neglect defined in this community? Please be specific.
 5. Do you account for cultural differences in assessing abuse and neglect? If so, how?
[This could be a good time to offer your agency's help in understanding different cultures.]
 - My office works with refugees from _____. If you would like, I could direct you to some resources about these cultures. **OR**
 - Do you have any questions about refugee groups or families in this community with which my office could help?
 6. Can you give me a copy of the abuse and neglect assessment tool used in my community?
 7. Are there any guidelines for leaving children home alone (ex: at what age can they be left at home alone)?
 8. Are there any guidelines for what is considered appropriate hygiene and appropriate standards of dress for the weather?
 9. What are the guidelines regarding school enrollment (for example, up to what age is school enrollment required by law? How quickly after moving into this community must families enroll their children in school? What happens if a child is not enrolled in school?)

10. What should families think about if they are having older siblings babysit for younger siblings?
11. What are some of the minimum safety requirements/recommendations for a home with children of these ages?
- 0 - 2
 - 3 - 5
 - 6 - 10
 - 11 - 18
12. What do child welfare workers do when an interpreter is needed?
[If appropriate, you may want to offer your agency's help when interpreters are needed, or let the worker know what languages are spoken by your agency's staff.]
13. *[This may be a good opportunity to exchange information about local service providers who can help refugees.]*
- Can you give me phone numbers for _____ **OR**
 - I have found the following service providers helpful in working with refugee/newcomer clients _____
- Service provider examples:*
- Community mental health centers
 - Free or low cost health/dental clinics
 - Free or low cost legal assistance
 - Local food banks
 - Police immigrant liaison
 - Other _____
14. Here is my name and phone number *[or that of someone else in your refugee resettlement agency]*. Please keep it on hand in the event you encounter a refugee family in your work.

Appendix 4: Physical and Behavioral Indicators of Abuse

Type of Abuse	Physical Indicators	Behavioral Indicators
Physical Abuse	<ul style="list-style-type: none"> • Unexplained bruises (in various stages of healing) • Unexplained burns, especially cigarette burns or immersion burns • Unexplained fractures, lacerations or abrasions • Swollen areas • Evidence of delayed or inappropriate treatment for injuries 	<ul style="list-style-type: none"> • Self destructive • Withdrawn and/or aggressive - behavioral extremes • Arrives at school early or stays late as if afraid to be at home • Chronic runaway (adolescents) • Complains of soreness or moves uncomfortably • Wears clothing inappropriate to weather, to cover body • Bizarre explanation of injuries • Wary of adult contact
Physical Neglect	<ul style="list-style-type: none"> • Abandonment • Unattended medical needs • Consistent lack of supervision • Consistent hunger, inappropriate dress, poor hygiene • Lice, distended stomach, emaciated • Inadequate nutrition 	<ul style="list-style-type: none"> • Regularly displays fatigue or listlessness, falls asleep in class • Steals food, begs from classmates • Reports that no caretaker is at home • Frequently absent or tardy • Self destructive • School dropout (adolescents) • Extreme loneliness and need for affection
Sexual Abuse	<p><i>Sexual abuse may be non-touching: obscene language, pornography, exposure - or touching: fondling, molesting, oral sex, intercourse</i></p> <ul style="list-style-type: none"> • Torn, stained or bloody underclothing • Pain, swelling or itching in genital area • Difficulty walking or sitting • Bruises or bleeding in genital area • Venereal disease • Frequent urinary or yeast infections 	<ul style="list-style-type: none"> • Excessive seductiveness • Role reversal, overly concerned for siblings • Massive weight change • Suicide attempts (especially adolescents) • Inappropriate sex play or premature understanding of sex • Threatened by physical contact, closeness
Emotional Abuse	<p><i>Emotional abuse may be name-calling, insults, put-downs, etc., or it may be terrorization, isolation, humiliation, rejection, corruption, ignoring</i></p> <ul style="list-style-type: none"> • Speech disorders • Delayed physical development • Substance abuse • Ulcers, asthma, severe allergies 	<ul style="list-style-type: none"> • Habit disorder (sucking, rocking, biting) • Antisocial, destructive • Neurotic traits (sleep disorders, inhibition of play) • Passive and aggressive - behavioral extremes • Delinquent behavior (especially adolescents) • Developmentally delayed

Remember:

DISCIPLINE helps a child learn a lesson that will carry over and positively affect future behavior. ABUSE affects the future in a negative way, leading to anger, hatred and more deviant behavior.

DISCIPLINE enhances the child's sense of self worth, helping the child learn self-control and thus becoming comfortable within the family and in society. ABUSE robs the child of self worth and causes him/her to feel outcast and resentful.

DISCIPLINE is not shame or guilt. ABUSE is shame or guilt which satisfies the needs of the parents at the moment and destroys the self image of the child in a hostile manner.

DISCIPLINE is taught by example. But so is abuse!

Adapted from "Child Discipline: Guidelines for Parents" by Gary May. Copied from the National Children's Advocacy Center http://www.nationalcac.org/families/for_workers/abuse_indicators.html

Appendix 5: Identifying Child Abuse

- Each case of child abuse and neglect is individual.
- The child is always the victim.
- Although Ohio * law permits corporal punishment in the home, school and institution, **excessive physical discipline is abuse**. It is difficult to define “excessive,” but there are guidelines you can use. Physical discipline probably is excessive if:
 - It results in physical injury, including bruises
 - The injuries are in particularly sensitive locations (eyes, genitals)
 - It is inconsistent, arbitrary punishment designed not to educate, but to instill fear
 - The caretaker loses control during discipline
 - It is inappropriate to the age of the child
 - It is the result of unreasonable expectations or demands on the child by the caretaker
- A perpetrator of child abuse or neglect can be any person who has care, custody, or control of the child at the relevant time. This could include parent, stepparent, teacher, babysitter or day care staff person, relative, institution staff person, bus driver, playground attendant, caretaker, parent’s boy/girlfriend, or anyone with whom the child has contact. There also are instances when the parent or regular caretaker can be held responsible for abuse or neglect perpetrated by another; for example, when a parent allows the spouse to physically abuse their child, or when a child is left in inappropriate care and subsequently suffers abuse or neglect.
- There are not simple answers. Abuse or neglect rarely occurs in clear, simple and specific terms. Abuse or neglect usually results from complex combinations of a range of human and situational factors.

What We Know About Identifying the Abuser

Many of us have felt at times that life is more than we can handle. What stops us from giving up or lashing out are skills and mechanisms we have learned to control or divert our anger, accept and assume adult responsibility, recognize realistic boundaries of acceptable behavior and expectation, and seek and accept help and support. When adults are faced with a situation which requires the use of coping skills that have not been developed, child abuse or neglect often results.

Although this explanation is oversimplified, it does help us understand how abuse and neglect can occur. It also explains the term “cycle of child abuse and neglect.” Children learn from their parents. A child who has been raised in a home where violence is an accepted response to frustration will, as an adult, tend to react violently. The skills necessary for controlling anger or frustration are never learned. What is learned is violence.

In the same way, a parent who lacks self-esteem or maturity cannot instill these characteristics within his child. Without significant outside influences, the child is likely to become an adult who perceives himself and life in the same manner as his parent does. This is the cycle of child abuse and neglect: adults tend to repeat the actions and attitudes which they learn as children.

Adults who abuse or neglect children usually will share several of the following general characteristics:

Isolation	Adults who abuse or neglect children often do not have the support they need. They are isolated physically and emotionally from family, friends, neighbors, and organized groups. They may discourage social contact, and rarely will participate in school or community activities.
Poor self-concept	Many of these adults perceive themselves as bad, worthless, or unlovable. Children of parents with a poor self-concept often are regarded by their parents as deserving of abuse or neglect, because they see their children as reflections of themselves. They view abuse and neglect as behavior that is expected of them.

Immaturity	This characteristic may be reflected in many ways: impulsive behavior; using the child to meet the adult's own emotional or physical needs; a constant craving for change and excitement.
Lack of parenting knowledge	Many times, abuse or neglect results because the adult does not understand the child's developmental needs. Abusive parents often are strict disciplinarians who are frustrated from unmet expectations. These parents tend to place unrealistic demands upon their children, and view their child's inability to perform as willful, deliberate disobedience.
Substance abuse	It has not been clearly established whether substance abuse is a causative or a resulting factor. However, studies consistently have shown a correlation between the misuse of drugs or alcohol and the occurrence of abuse and neglect.
Lack of interpersonal skills	The abusive or neglectful adult often has not learned to interact with people, socialize, or work with others.
Unmet emotional needs	Often, the abusive or neglectful parent has unmet basic emotional needs—warmth, support, love. Unable then to provide the child with these feelings, they will instead seek fulfillment from the child.

In the family where physical abuse occurs, the abusive adult may...

- Have unrealistically high standards and expectations for himself/his children
- Be rigid or compulsive
- Be hostile and aggressive
- Be impulsive with poor emotional control
- Be authoritative and demanding
- Fear or resent authority
- Lack control or fear losing control
- Be cruel or sadistic
- Be irrational
- Be incapable of child rearing
- Trust no one
- Believe in the necessity of harsh physical discipline
- Accept violence as a viable means of problem resolution
- Have an undue fear of spoiling the child
- Consistently react to the child with impatience or annoyance
- Be overcritical of the child and seldom discuss the child in positive terms
- Lack understanding of the child's physical and emotional needs
- Lack understanding of the child's developmental capabilities
- Perceive himself as alone, without friends or support
- View seeking or accepting help as a weakness
- Be under pressure
- Have an emotionally dependent spouse
- Be engaged in a dominant-passive marital relationship
- Have marital problems
- Have been physically abused himself

In the family where sexual abuse occurs, the abusive adult may...

- Be overly protective of the child
- Refuse to allow the child to participate in social activities
- Be jealous of the child's friends or activities
- Accuse the child of promiscuity
- Distrust the child
- Have marital problems
- Need to be in control or fear losing control
- Be domineering, rigid, or authoritative
- Favor a "special" child in the family
- Have been sexually abused himself

In the family where emotional maltreatment occurs, the maltreating adult may...

- Act irrationally or appear to be out of touch with reality
- Threaten the child's health or safety

- Be deeply depressed
- Exhibit extreme mood swings
- Constantly belittle the child or describe the child in terms such as “bad,” “different,” or “stupid”
- Be cruel or sadistic
- Be ambivalent towards the child
- Expect behavior that is inappropriate for the child’s age or developmental capabilities
- Constantly shame the child
- Threaten the child with the withdrawal of love, food shelter, or clothing
- Reject the child or discriminate among children in the family
- Be involved in criminal activities
- Use bizarre or extreme methods of punishment
- Avoid contact with the child, seldom touching, holding or caressing him
- Avoid looking or smiling at the child
- Be overly strict or rigid
- Torture the child
- Physically abuse the neglect the child
- Have been abused or neglected himself

In the family where neglect occurs, the neglecting adult may...

- Be apathetic
- Have a constant craving for excitement and change
- Express dissatisfaction with his life
- Express desire to be free of the demands of the child
- Lack interest in the child’s activities
- Have a low acceptance of the child’s dependency needs
- Be generally unskilled as a parent
- Have little planning or organizational skills
- Frequently appear unkempt
- Perceive the child as a burden or bother
- Be occupied more with his problems than he is with the child’s
- Be overcritical of the child and seldom discuss him in positive terms
- Have unrealistic expectations of the child, expecting or demanding behavior beyond the child’s ability
- Seldom touch or look at the child
- Ignore the child’s crying or react with impatience
- Keep the child confined, perhaps in a crib or playpen, for long periods of time
- Be hard to locate
- Lack understanding of the child’s physical or emotional needs
- Be sad or moody
- Fit the clinical description “passive and dependent”
- Lack understanding of the child’s developmental capabilities
- Fail to keep appointments and return telephone calls
- Have been neglected himself

Adolescent Offenders: Adolescent offenders account for an estimated one-third of the sexual offenses against young children. The majority of these offenses occur either in their own home involving a younger sibling or in the role as baby sitter for other young children. These offenders reflect many of the same characteristics as an adult offender and are often “loners” with minimal peer relationships.

** This document was written for Ohio professionals, but this chart applies more generally.*

Reprinted from: The Ohio Department of Job and Family Services, Office for Children and Families (2005). Child Abuse and Neglect: A Reference for Medical Professionals (Second Edition), pp. 21-25.

<http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=2918>

Appendix 6: Child Welfare Flow Chart

This diagram shows the typical progression a child makes through a state child welfare system. The format is based on federal and common state law and practice; nevertheless it is only a model. Laws vary across states, as does the capacity and practices of child welfare agencies and courts to manage their caseloads. Copied with permission from the report, *A Child's Journey through the Child Welfare System*: <http://www.brycs.org/clearinghouse/clearinghouse-resource.cfm?docnum=1682>.

