The 2005 Fedele F. and Iris M. Fauri Memorial Lecture

Child Welfare in Michigan: What do we know, where do we go?

A public health perspective on child welfare



University of Michigan School of Social Work

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The Fedele F. and Iris M. Fauri Memorial Lecture in Child Welfare is presented annually in recognition of former University of Michigan Dean and Vice President Fedele F. Fauri and his wife. Dean Fauri's leadership and accomplishments in the field of child welfare spanned nearly 50 years. Much of the current social welfare legislation at both the state and federal levels is the product of Dean Fauri's activities, first as Director of the Michigan Department of Social Services, and then through his years in Washington, DC, where he held numerous leadership positions including Senior Specialist in Social Security for the U.S. Senate, Social Security Advisor for both the U.S. House of Representatives and the U.S. Senate, Social Security Advisor to President Kennedy, and Chair of the Advisory Council on Public Welfare for the U.S. Department of Health, Education, and Welfare. His accomplishments in the field of child welfare and social work education brought national and international acclaim to Dean Fauri, the School of Social Work, and the University of Michigan. This lecture series is made possible by gifts from alumni, faculty, and friends, and is intended to serve as a forum for the discussion of ideas and proposals to enhance further the well-being of young people.

Child Welfare in Michigan: What do we know, where do we go? A public health perspective on child welfare

Fauri Memorial Lecture in Child Welfare University of Michigan

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Today in Michigan, there are approximately 19,000 children in the foster care system and another 28,000 total youth in the criminal or juvenile justice system. That represents approximately 2% of all children in Michigan (MDHS Special Data Run of September 16, 2005). While that percentage is about average for large industrial states it is, simply put, too many.

Indeed, nationally, there are now estimated to be 523,000 children in foster care, a decline from the 1998 peak of 570,000 but still a dramatic increase since 1990 (See Table 1).

While many children are resilient, we know that too many children who have been through the child welfare system are damaged for life and continue to struggle throughout adulthood. The Chapin Hall *Midwest Evaluation of the Adult Functioning of Former Foster Youth* study tells us that for the approximately 20,000 children who "age out" of foster care every year, life is difficult and outcomes are troubling. In general, many of these youth are disconnected from the labor force, homeless, in the criminal justice system, have mental illness or substance abuse disorders and/or are parenting a child themselves with few resources to do so (Courtney & Dworsky, 2005). Over half of those included in the study reported one or more economic hardships, particularly evident for those who were no longer in care at age 19 (See Table 2).

In addition to these indicators of a lack of well-being:

- One-third of the respondents reported suffering from some form of mental illness;
- almost half of the females in the study reported that they had been pregnant compared with 20% of 19 year old females in the general population reported that they had ever been pregnant;
- more than one-fourth of these youth had been arrested between ages 17 and 19; and,
- more than 31% were disconnected from either school or work (Courtney & Dworsky, 2005).

In Michigan, our data show that 122,000 youth, ages 18-24, are disconnected from school and work, representing 12% of the youth population (U.S. Census Bureau[a]).

Martha Shirk and Gary Stangler followed a group of "graduates" from the foster care system over a period of time and reported on their outcomes in their book, *On Their Own: What Happens to Kids When They Age Out of the Foster Care System.* (Jim Casey Youth Opportunities Initiative, 2004) In an unscientific but powerful approach, they chronicled the many challenges that these children face as they aged into "independence." While there are some success stories among the 10 youth they followed, many were unable to function independently, vividly demonstrating the same kinds of issues found in the broader Chapin Hill study.

The children themselves tell us horrific stories about their experiences in the child welfare system. In 2003, Michigan became a participant in the Jim Casey Youth Opportunities Initiative. The initiative is a national effort to help youth in foster care transition to adulthood. The initiative provides tangible supports and training for independence through the provision of both tools and leadership development. The essential tool offered through the initiative is called the Opportunity Passport TM. The components of the passport are:

- an individual savings account (IDA) that is matched one dollar for every dollar saved by the youth up to \$1000 per year,
- a personal savings account with an ATM card, and
- a "door openers" effort that can be an event or an ongoing process created by the community to help match youth with jobs, education, housing and the like.

Financial literacy training is provided in conjunction with the passport. Leadership training and general skills building is provided through a youth advisory board, which is an enormously powerful part of the initiative because it gives skills and confidence to the youth in meeting management and in advocating for their needs. The advisory boards give voice to the youth in a variety of fora. The youth speak to rotary clubs, legislators and in other public settings about their experiences in foster care. The Michigan Department of Human Services is the fiduciary for the Jim Casey grant and has used the youth board to help inform policy about child welfare.

When the youth speak about their experiences in foster care, the stories they tell raise questions about many of today's child welfare practices. The children speak of being moved multiple times; of being placed with families where they have little in common; of being in many different schools and having to create friendships over and over again; of being separated from siblings and other relatives; of never being asked what they want for their futures; of feeling that they have no advocates who speak for them; of running

away from unhappy settings and then ending up in the juvenile justice system; and yes, most unfortunately, of sometimes facing abuse in the foster homes they were placed in to keep them safe.

The message the children give us is powerful. Yet, too often, those who work in the child welfare system, such as case workers, policy makers, and courts, do not listen to the children they are there to serve. Indeed, over and over, the children we serve tell us that they feel powerless over their futures. Rather than *listening* to them, the "system" *tells* them what they need.

So, what do the children we serve tell us they most want? First and foremost, they tell us that they don't want to be pulled away from their families. When they must go into care, however, they also tell us that they want as little disruption in their lives as possible. They want to stay together with their siblings; they want to stay with people who know them – know their likes and routines – relatives or "fictive kin." They want to stay in their schools and neighborhoods. In other words, they want stability in their lives and do not want to be treated as if they are being punished for being the victims of abuse or neglect.

It is from listening to the voices of the children that we serve that we joined several other states supported by the Annie E. Casey Foundation to implement a practice model for child welfare called Family to Family. Family to Family aims to bring birth families together with both community resources and foster families in an effort to strengthen birth families and keep children safely at home whenever possible. Family to Family is based on an underlying concept that it takes more than a nuclear family to raise our children. The idea is to engage many "families" – whether they are relatives, other foster families or the broader family of the community to help struggling birth families to provide care and nurturance to children. In cases where it is not possible to keep a child safely with their birth family, Family to Family also emphasizes other child centered approaches to child welfare, including an emphasis on keeping sibling groups together, keeping children in their schools and neighborhoods and engaging relative care givers as much as possible.

Michigan received a Family to Family grant from the Casey Foundation in 2001 and piloted the initiative in Macomb and Wayne Counties. The initiative has the following components:

- Recruiting, training and supporting foster and kinship families in the neighborhoods where children
 are most likely to be removed from;
- Partnering with community organizations to support at risk families and children;
- Involving parents, children, extended families, foster families and community supports in decision making meetings about placement decisions;
- Using data to strengthen and improve the child welfare system.

As a result of the successful experience with the pilot, the Department of Human Services has made a commitment that this practice model is the model that we will be using across the state. By 2005, this model was in place in 16 counties in Michigan, representing 45% of the state's population. Barring major budgetary challenges, we expect it to be in place in all counties by the end of 2007.

One of the challenges in child welfare is to find meaningful outcomes based data on intervention strategies. Family to Family is no exception to that challenge. Outcomes based evaluation data is not yet available. Preliminary process data, however, shows that Family to Family does have an impact on the child welfare

system. Specifically, experience in Michigan from the communities where Family to Family has been in place shows a:

- significant increase in relative placements,
- much greater number of foster families recruited in communities where there are high rates of children removed, and,
- significant increase in community involvement with families and children at risk.

The emphasis in Family to Family is on keeping children safely with their families whenever that is possible and working to reunite them with their biological families as quickly as possible. While we do not have an outcomes evaluation of Family to Family, we do know that its goals and priorities are consistent with what the children tell us they want. It is because of that framework and the philosophical underpinning that we have made the comprehensive commitment to make Family to Family our statewide approach to child welfare.

The Family to Family model is a challenging one to implement. Child welfare as it has been relatively recently practiced in Michigan has been built on a model that emphasized recruitment of a large number of foster families regardless of geographic location and a belief that the first priority is to move children out of potentially dangerous situations. As a result, there has not been the kind of emphasis on front-end services, foster family recruitment matched to children's needs and community resources that are necessary for a model like Family to Family to work. Understandably, practitioners both directly employed by the Department and working as contractors have based their practices and businesses on the historical philosophical framework advanced by the Department. Considerable change from these practitioners is necessary for Family to Family to be successful.

The Family to Family model requires shared power, inclusion and respect for voices of those who may be perceived as not competent to make decisions (the children themselves or families considered to be "impaired"), a more intensive approach to family supports early in the process that requires more up-front funding; and, a more robust and integrated acceptance of diversity of family structures. Changing our thinking and models about child welfare requires ongoing work and is not for the faint of heart. There is much internal and external resistance from those who perceive their own systems of thinking or their own financial models to be threatened by this change.

Some have assumed that the Family to Family model places more emphasis on maintaining family structures than on the safety of the children. Some conclude that putting a priority on keeping children in their own neighborhoods continues to expose them to unsafe conditions. Still others believe that it is not possible to accomplish the goals of more recruitment of foster families in the targeted areas. All of these perceptions are false and are critical to address in any approach to child welfare change.

In addition to describing a desire for a change in the placement process, when children talk about the child welfare system, they also talk about a more fundamental issue related to reform. Specifically, what the children we serve say, at core, is that as damaged as their families may be, they are in the end, their families. Removing a child from their biological home is enormously traumatic. While we tend to focus on the damage to a child that may occur if we keep them in a home where there is neglect and/or abuse, the damage from removal can also be enormous. Rather than taking them away from their families, the children

tell us that what they most want is for us to "fix" their families. In the Chapin Hall study, over two-thirds of those they studied who had been "removed from their families" and aged out of the foster care system said that they still felt close or very close to their biological mothers. (Courtney & Dworsky, 2005). In addition, we know that when children run from the system, they most often run back to their biological family.

Any meaningful discussion about child welfare, then, must look more broadly at the causes for the removal of children and consider what can be done about those underlying issues. The common view among the public is that children in the foster care system are most frequently removed from their families because of abuse, but we know that this view is not true. In Michigan, of the 26,000 child protective services cases that closed between September 1, 2004 and August 31, 2005, 81% of children were removed from their homes as a result of neglect only (Michigan Department of Information Technology/Michigan Department of Human Services Data Warehouse – September 20, 2005). While neglect can be very serious and indeed life threatening, and while abuse and neglect occur among members of all economic classes, we also know that the single most important contributing factor to neglect is poverty.

Michigan and many other states are struggling with an increase in poverty as manufacturing has been downsizing and outsourcing has increased. As of 2004, 38.9% of Michigan children were living at or near poverty. Michigan's child poverty rate in 2004 was 19.3%, well above the national rate of 17.8% and much higher than the child poverty rate of 14.3% in 2003 (U.S. Census Bureau[b]). In addition to creating instability in family life, families in poverty may lose their children to the foster care system if they cannot provide adequate housing, clothing or supervision (while they work). In fact, a staggering 91% of children in the Michigan child protective services system in 2005 were in families where one or more members had previous contact with the Department of Human Services to seek help with cash assistance, food assistance or the like before there was any allegation of abuse or neglect (Michigan Department of Information Technology/Michigan Department of Human Services Data Warehouse Team Analysis). If we could have intervened effectively in family life at that point, there is no question that we could have prevented a significant number of cases of abuse and neglect. I believe that most families want to nurture and care for their children. Too many families who end up in the child welfare system are there simply because they do not have the financial resources or necessary support structures to take care of their children.

While programs that empower youth (like the Jim Casey Youth Opportunity initiative) and that change our approach to placement (like Family to Family) are great initiatives, they will not get to the root cause of the issues related to child abuse and neglect. Furthermore, while these initiatives are critically important to pursue because they have a real impact on those already in the system, we must simultaneously and aggressively pursue the causes of abuse and neglect. We must pursue prevention, not just more effective approaches to intervention. Therefore, to achieve the most meaningful impact on reducing the rates of child abuse and neglect in our society, I believe we must do what we can to address the core, underlying issue of poverty. Addressing poverty is critical to our ability to increase opportunities so that all our children have equal opportunity to succeed in life.

At one time, Michigan's Department of Human Services had resources to focus on prevention issues when clients came to the system for cash assistance help. However, as state budgets became constrained, the emphasis shifted to an almost entire focus on crisis intervention. There is little question families and children have suffered as a result of the reduced ability of DHS to focus on prevention.

Prevention, with regard to child abuse and neglect, must be looked at as an investment from both a human and an economic perspective. Unfortunately, prevention requires an up-front investment in order to achieve a payback in terms of reduced costs for human services, saved lives and increased productivity of our citizenry. However, this is an investment that I believe the public would wholeheartedly support if it was well understood and credibly executed.

The issue of poverty, its causes and the opportunities for fundamental change is a complex and intricate one. Welfare reform was supposed to "end welfare as we know it" and create an entirely different structure and set of incentives than had been in place to that point in time. Indeed, those in the welfare system today are different from those who we served prior to welfare reform. The reality is that the welfare clients we are dealing with today are the hardest to serve, with many suffering from the devastation of generational poverty and diminished opportunities. In Michigan, those who have been on cash assistance for more than 4 years are most likely to be:

- disabled or caring for someone who is disabled
- functionally illiterate
- and/or a single mother who is working full time but still living in poverty.

Though more research needs to be done on the impact of the mid-1990s welfare reform, we do know that while many people did end up in the work force, many of those ended up in low paying jobs with no career path and an inability to become self-supporting. More needs to be done to strengthen the welfare system with a goal of not only reducing the welfare roles but of also reducing poverty. In Michigan today, we are looking again at the system to provide for structural policy changes that will focus on:

- Providing more educational and training support so our clients can qualify for jobs that can enable them to achieve self-sufficiency,
- More effective provision of direct services to deal with barriers to independence such as substance abuse and mental health issues, and
- Strengthening post-employment support to help keep people on the job once they are there.

These are core components to helping our clients to achieve permanent labor force attachment and these concepts combined with other dimensions related to financial incentives such as taking full advantage of the Earned Income Tax Credit, child support collections and an increase in the earned income disregard can help lift our clients out of poverty and strengthen families.

In addition to this systemic approach to second generation welfare reform, we also have good data that show some critical opportunities for reducing poverty that have a direct connection to child welfare. While there are many areas where we can and must invest if our goal is to reduce poverty, there are three that I want to highlight here because the evidence of their impact on poverty and potential for positive effect on child abuse and neglect if we address them is very strong.

First, we know that poverty is about both race and class. The documentation of the connection between race and poverty is very deep. Data related to the rates of poverty among families of color and systemic and institutional racism abound. Limited opportunities and race based discrimination is insidious and we must do whatever we can to collectively address issues of equal opportunity in education and life options.

We must also understand class related issues when we talk about poverty. Ruby Payne in her book, *A Framework for Understanding Poverty* (1996), speaks to what she calls a "culture of poverty." She argues that "an individual brings with him/her the hidden rules of the class in which he/she was raised" (p. 11). Helping those who have lived in poverty for generations understand the "hidden rules" of the middle class can provide a part of the foundation necessary to succeed in a work or educational environment grounded in the hidden rules of the middle class.

In our culture, the ability to earn a wage that will enable a family to be self-supporting occurs in a work environment that is predominantly middle class. It can be a very difficult transition for someone who has grown up in generational poverty to enter an environment where the hidden rules of another culture predominate. Likewise, without understanding some of the underlying framework or as Payne calls them, "hidden rules" of those in poverty, it is difficult for those from the middle class to communicate with those they are trying to help. For example, Payne talks about the view of some in poverty that having children counts as a "possession" and when one has few possessions, having more children adds valuable possessions. That perspective is very important to understanding why women in poverty would choose to have children even though they have limited financial resources to care for them. Without that understanding, it would be very difficult for those raised in different backgrounds to help those women and children become self-supporting. Incorporating a framework like Payne's in child welfare and assistance staff training can be a key tool to helping to bridge communication between classes, increasing the likelihood that intervention strategies will be effective.

Second, we know that sustained intervention makes a real difference to individuals in poverty. Sustained intervention is well demonstrated by a joint project the MDHS has had with Cascade Engineering in Grand Rapids, Michigan since 1997. In the Cascade Engineering model, Fred Keller, the visionary leader of Cascade set out to approach poverty and work through a fundamental change strategy. Keller himself learned from the Ruby Payne model why so many efforts to help the poor had failed. Her work had such impact on him that he required all of his employees to learn and understand the teachings of Payne. He and his team also partnered with the Department of Human Services to work together to hire welfare recipients and keep them on the job. Keeping them on the job has become a major focus of the joint effort between the Department and Cascade. We know that many welfare recipients struggle with issues of substance abuse, domestic violence, mental health and physical health problems as well as pragmatic issues such as child care and transportation. In partnership with the DHS and community based resources, Cascade provides a support structure for welfare recipients to help keep them on the job. Too many other initiatives that aim to place welfare recipients in the labor force focus only on the skills needed to get a job, not on overcoming the daily obstacles it takes to stay on the job. The MDHS/Cascade project has taught us that post-employment supports are at least as important as the initial focus on getting a job. This work has been one of the underpinnings of our recommendations for structural change in the welfare system in Michigan today.

Third, and most optimistically for the future, we know that investing in young children and their families can break the generational cycle of poverty. There are many studies about the importance of these early years in the future success of our children. Two particularly powerful studies show us the impact of early intervention on children in poverty. They are the David Olds Nurse Family Partnership program model and the High/Scope Perry Preschool Study.

The work of David Olds is an excellent demonstration of the power of early intervention in the lives of young women. The Olds' Nurse Family Partnership model is one that provides prenatal and infancy home visits by nurses to women who are pregnant with their first child and who are either very young (age 19 or younger), unmarried, and/or in poverty. Home visits by nurses are provided at various intervals starting in pregnancy and through the child's second birthday. The nurses provide pregnant women and new mothers with considerable education and help in health related behaviors, parenting and personal life-course development through this period of time. (Olds, 1997).

Olds and his colleagues have extensively researched the impact of this tightly structured, comprehensive program. His work has consistently shown significant positive effects of this intervention. In a 15 year follow-up study, Olds, et al found that women who received the full intervention provided by the nurses had statistically lower rates of public assistance, substance abuse, criminal arrests, child abuse and neglect and fewer subsequent children than those women who were in the control group (Olds, 1997). This work tells us both that early intervention is important and that it works. Indeed, investing in a nurse home visitation program of the type designed by Olds has a significant positive return on investment with regard to public programs as well as directly reducing the incidence of child abuse and neglect.

The High/Scope Perry Preschool model echoes the message from the Olds Nurse Home Visitation program. In the Perry Preschool program, a high quality preschool program is provided to 3 and 4 year old children living in poverty. The High/Scope model provides 2 years of 2 hour classes 5 days a week combined with weekly home visitation. Teachers have bachelor's degrees and certification in education and are paid at public school salary levels. Each teacher works with a cohort of 5-6 children and structures large and small group activities that support children's self-initiated learning. Upgrading of teacher skills is encouraged and ongoing feedback is provided (Schweinhart).

The ongoing research about the Perry program shows that high quality early childhood care and education has a statistically significant impact on a number of quality of life indicators of the participants. Indeed, in the most recent study, the children who were first studied at age 11 have reached age 40. In this study, the research shows a return on investment of 17 to 1. That is, in constant 2000 dollars discounted at 3%, the economic return to society was \$17 for every dollar invested in the program (Schweinhart). An economic return was identified with regard to lower rates of crime, higher high school graduation rates, higher rates of male involvement with their children, lower rates of welfare, higher employment rates and higher earnings for program participants compared to a control group (Schweinhart).

We can make an appreciable difference in reducing poverty by focusing on three opportunity areas:

- Addressing racism and dealing with barriers to class mobility,
- Sustained intervention programs in the work place to deal with human service needs of those in poverty, and
- Quality early childhood programs

Within each of these areas there are approaches with documented research and proven results, and they are feasible.

Our greatest hope for breaking the generational cycle of poverty is investing in young children and their families. With all of the new research on the brain, we now know that the prenatal period through age 5 is the most critical time period for development of our children. In addition, with the data we have on programs and approaches that work, we know that investing public dollars in the earliest months and years of our children's lives will create an enormous societal return. The focus of these kinds of investments is to assure equal opportunity so that all of our children have a chance to succeed in life and contribute to society.

It is based on this knowledge that Michigan is embarking on an exciting new public/private partnership to assure comprehensive early care and development for all children 0-5 in Michigan. In this regard, in February of 2005 Governor Granholm announced the formation of the Early Childhood Investment Corporation (ECIC). The ECIC is a public corporation with a goal to assure that all young children and their families have the services and support structure that is necessary to enable children to be ready to succeed when they enter kindergarten. Services include parenting skills, preschool education, health care and the like. With the ECIC, it is our goal to educate the public broadly about the importance of these early years and strengthen community, public and private investment in prevention services for the youngest among us.

If we can combine this new child welfare practice to help children in the system today with a comprehensive and systemic effort to help families become self-supportive and keep our children out of poverty, we can have the kind of impact on a child's life and the life of our community that will strengthen our society long into the future.

Table 1: Number of Foster Childen Ages 17 and Under, 1990-2003



*2003 is the most recent year for which data are available

Source: "Child trends data bank, Department of Health and Human Services reports, 1990-2003," *The CQ Researcher*, 15(15), p. 52.

Table 2: Economic Hardships Experienced by Study Participants

	Number of	Total	Still in	No Longer
	Respondents	Sample	Care	In Care
		%	%	%
(1) Not enough money to buy clothing	591	38.1	36.1	39.9
(2) Not enough money to pay rent	584	12.0	4.7	18.6
(3) Not enough money to pay utility bill	589	12.2	6.5	17.4
(4) Gas or electricity shut off	591	3.0	1.8	4.2
(5) Phone service disconnected	592	21.1	20.0	22.1
(6) Evicted	589	4.4	1.1	7.4
(7) Sometimes or often not enough food to eat	592	7.7	3.6	11.5
Mean number of hardships (-7)	583	.981	.733	1.21
(8) Ever homeless post-discharge*	323			13.8

^{*}Only asked of respondents who said they were no longer in care.

Source: Chapin Hall Discussion Paper, p. 28, *Midwest evaluation of the adult functioning of former foster youth:* Outcomes at age 19, by Courtney, M. & Dworsky, A., 2005.

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U.S. Census Bureau[b]. Estimated population of MI by age and sex: 2000-2004.



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