

INFORMATION TO USERS

This manuscript has been reproduced from the microfilm master. UMI films the text directly from the original or copy submitted. Thus, some thesis and dissertation copies are in typewriter face, while others may be from any type of computer printer.

The quality of this reproduction is dependent upon the quality of the copy submitted. Broken or indistinct print, colored or poor quality illustrations and photographs, print bleedthrough, substandard margins, and improper alignment can adversely affect reproduction.

In the unlikely event that the author did not send UMI a complete manuscript and there are missing pages, these will be noted. Also, if unauthorized copyright material had to be removed, a note will indicate the deletion.

Oversize materials (e.g., maps, drawings, charts) are reproduced by sectioning the original, beginning at the upper left-hand corner and continuing from left to right in equal sections with small overlaps. Each original is also photographed in one exposure and is included in reduced form at the back of the book.

Photographs included in the original manuscript have been reproduced xerographically in this copy. Higher quality 6" x 9" black and white photographic prints are available for any photographs or illustrations appearing in this copy for an additional charge. Contact UMI directly to order.

UMI

A Bell & Howell Information Company
300 North Zeeb Road, Ann Arbor MI 48106-1346 USA
313/761-4700 800/521-0600

**BIOLOGICAL PARENTS VIEWS OF KINSHIP FOSTER CARE:
A NEGLECTED PERSPECTIVE EXPERIENCE**

by

Trevor Lennox Grant

A dissertation submitted to the Graduate Faculty
in Social Welfare in partial fulfillment of the
requirements for the degree of Doctor of Social Welfare,
The City University of New York.

1997

UMI Number: 9732920

**Copyright 1997 by
Grant, Trevor Lennox**

All rights reserved.

**UMI Microform 9732920
Copyright 1997, by UMI Company. All rights reserved.**

**This microform edition is protected against unauthorized
copying under Title 17, United States Code.**

UMI
300 North Zeeb Road
Ann Arbor, MI 48103

(c) 1997

TREVOR LENNOX GRANT

All Rights Reserved

This manuscript has been read and accepted for the Graduate Faculty in Social Welfare in satisfaction of the dissertation requirement for the degree of Doctor of Social Welfare.

April 28, 1997
Date

Irwin Epstein
Dr. Irwin Epstein

Chair of Examining Committee

4/28/97
Date

Harold Weissman
Dr. Harold Weissman

Executive Officer

Dr. Irwin Epstein

Dean Bogart Leashore

Dr. Gary Anderson

Supervisory Committee

The City University of New York

ABSTRACT**BIOLOGICAL PARENTS VIEWS OF KINSHIP FOSTER CARE:
A NEGLECTED PERSPECTIVE EXPERIENCE**

by

Trevor Lennox Grant

Advisor: Professor Irwin Epstein

This dissertation is a study of the relatively new and unexplored foster care program in New York City known as kinship foster care - foster children living with approved biological extended relatives such as grandmothers and aunts. The study provides an overview of this new foster care phenomenon, and is designed to provide a descriptive and exploratory analysis of the perspectives of biological parents, whose children are placed in the kinship foster care program, due to allegations of child abuse and neglect.

Five core research questions were identified to be of primary importance in understanding the experiences and concerns of biological parents involved in the kinship foster care program. Interviews were conducted with thirty respondents, and four extensive, taped interviews were conducted to portray in-depth, the critical elements of biological parents' experiences with the child welfare agency and the kinship program.

Biological parents expressed mixed feelings about their experiences with the kinship program, and felt that the kinship program is taking children away from them and putting them with relatives. However, they generally had positive feelings about their children's placement with relatives. Almost all respondents felt that the agency has shown no interest in reuniting them with their children, and little or no efforts are being made by the agency and its workers to reunite parents with their children.

Parents suggested that keeping the nuclear family together should be the top priority of the child welfare agency, and the agency should provide services to keep the family unit intact. They also felt that they need reunification services such as housing, financial assistance, furniture... in order to facilitate the return of their children. Finally, respondents felt that the Administration for Children's Services (ACS) should pay attention to the needs of biological parents, and should have resources available to address their problems. Findings from this original qualitative study and a profile of the biological parents are presented.

PREFACE

An adventurous project like this dissertation - **Biological Parents Views of Kinship Foster Care: A Neglected Perspective Experience** is a very involved, time consuming, intellectual pursuit. It is also a very difficult but gratifying experience.

In order to complete a dissertation and at the same time maintain one's sanity, one must be able to stay focused and allow oneself the minimum amount of time possible to complete the degree. If you are lucky and your dissertation committee is always available (as mine was) to review your manuscript - you are almost there. However, try to get an early approval from the agency in which you plan to conduct your study, because this process can be a very lengthy and time consuming proposition.

Despite the odds, the delays, the skepticisms, the bureaucratic maze, and other anti-intellectual dilemmas - I have persevered and have completed what I consider to be a very important, timely study on kinship foster care. This study is important because there is a paucity of empirical evidence available, documenting the concerns and experiences of biological parents in the kinship foster care program. This, in my opinion, is a disservice not only to biological parents but to the many social scientists, policy makers,

child welfare administrators, social workers and caseworkers interested in conducting holistic studies on kinship foster care issues, in order to learn more about related foster care problems.

This dissertation is a search for knowledge. It is driven by a desire to seek answers to foster care phenomenon, and to provide answers to often asked questions about kinship foster care. It also attempts to highlight the significant issues, concerns, and problems experienced by biological parents in kinship foster care.

Foster care in New York City has been replete with many fundamental problems in the last decade. The tripling of the foster care population from 16,240 in 1984 to 50,518 in 1991 is one example of a system operating with many internal and external constraints, and in many cases, is operational only when emergencies or crises are encountered. Unfortunately for children and families involved with the child welfare agency, this experience is usually a very sad, difficult, emotional and traumatic experience.

This dissertation serves two purposes. It fulfills the requirement for the doctoral degree and most importantly - it provides me with a forum to explore and explain the experiences of biological parents who are involved with the

kinship foster care system in New York City. The experiences and concerns of natural parents will be expressed throughout this dissertation and the study findings will be used to better explain the relatively unknown and unexplored foster care initiative known as kinship or relative foster care.

ACKNOWLEDGEMENTS

My child welfare experience began in 1985 when I was employed as a caseworker for Special Services for Children (now Administration for Children's Services (ACS)). The many friends, colleagues and detractors I encountered from 1985 to 1991 have all in some way given me the inspiration to pursue this dissertation project.

Many people from ACS were instrumental in my academic development. People like John Stevens, Gerald Nienaber, Hazel Murray, Marilyn Brereton, Faith Swire, Cornelius Ashton, Deborah George, Steven Stern, Jocelyn Hall, Josette Guy, and many, many others have provided encouragement and support. My dissertation committee comprising of Dean Bogart Leashore, Dr. Gary Anderson, and advisor, Dr. Irwin Epstein were extremely helpful and were always available to offer assistance and guidance. Dr. Epstein was supportive and always accessible and provided me with 'the necessary' constructive criticisms throughout my doctoral academic career. Dr. Epstein was my

academic inspiration and was partly responsible for my academic successes. Thank you Dr. Epstein.

Fellow students of the DSW class of 1991 were very helpful in listening and offering suggestions to my theoretical suppositions. Cheryl Dozier, Constance Kaiser and Jill Gerson were always very helpful. Professors of the Hunter College School of Social Work and the Sociology Department of the Graduate School were instrumental in fine tuning my ideas and offering useful suggestions.

I am tremendously grateful to The Public Advocate of the City of New York, Mr. Mark Green for granting me permission to conduct the study. I am also indebted to C-PLAN's staff; Director of Social Services, Julie Levine, Project Director, Jane Golden, Kevin Blank, and all the biological parents who were gracious and kind to volunteer to participate in the study.

I am grateful to the library staff of the Hunter College School of Social Work for the use of library facilities and librarian assistance. Special thanks to Professor Lee Sellers, Ann Thompson and Candice P. Lee. I am also grateful to the Queens Borough Public library and York College for the use of library facilities, books and space to write uninterrupted, and the Human Resources Administration

library (now closed) for the use of library facilities, librarian assistance, and book lending privileges extended to me over the past ten years. Special consideration goes out to Harold Benson, librarian and Mary Gaydos, assistant librarian. Without their valuable assistance and encouragement, this manuscript would have taken a longer time to be completed.

This book is dedicated to the memory of my grandparents, Francis and Cecelia Grant, and my mother, Muriel Celestain. My sons Terry, Tyrone and Trezor Grant were always supportive of my academic endeavors. My life-long special friends Eunice Hinds, Kim McMillan and Althea Dove provided encouragement and support throughout my ordeal. My wife, Cheryl Ann Grant provided support, encouragement, and rewardingly enriching love during the final stages of my dissertation process. Thanks and appreciation to all.

Trevor Lennox Grant

Queens, New York

January 13, 1997

In Loving Memory of

Cecelia Antoinette Grant

and

Hamilton Francis Grant

Grandparents who provided
me with love, wisdom,
knowledge, and the
determination to strive
for success.

A foster child I never was

A foster child I will always be

TABLE OF CONTENTS

	Page
ABSTRACT	iv
PREFACE	vi
ACKNOWLEDGEMENTS	viii
CHAPTER	
I INTRODUCTION	1
Purpose of the Study	12
Major Research Questions	14
Operational Definition of Concepts	16
Motivations for the Study	18
Contributions of the Study	27
II SOCIAL SCIENCE THEORY	33
III REVIEW OF THE LITERATURE	36
Introduction	36
Summary of Thornton's Findings	36
- Kinship Foster Parents Findings	37
- Kinship Social Workers Findings	40
Length of Time in Care	45
Services for Families	47
Reunification	49
Adoption	53
Guardianship	58
Kinship	66
Kinship Foster Care	71
IV RESEARCH DESIGN AND METHODOLOGY	78
Introduction	78
Data Collection	81
Instrument Design	83
Limitations of the Study	86
Advantages of the Study	87
V FINDINGS FROM CWA STUDY	90
Introduction	90
Findings from CWA study	90
Kinship Foster Children Characteristics	91
Biological Parents Characteristics	92
Kinship Foster Parents Characteristics	93

VI	PRESENTATION AND ANALYSIS OF DATA	97
	Introduction	97
	Descriptive Profile of Biological Parents	97
	Research Findings of This Study	98
	A Comparison of Study Findings	101
VII	THEMES EMERGING FROM INTERVIEWS	104
	Introduction	104
	Reasons for Removing Children	108
	Problems Experienced by Parents / Children Removed	111
	Past/Present Experiences with Child Welfare Agency	114
	Lack of Knowledge of the Child Welfare Agency	116
	Feelings about Kinship Foster Care Placement	118
	Lack of Contact with Children	128
	Feelings about Services Received	131
	Services Needed for Children's Return	134
	Expectations about Reunification	137
	Parents' Perceptions of Agency Workers	139
	Parental Long Term Goals	140
	Parental Role when Children are Returned	141
	Strength Gained from Support Systems	143
	Biological Parents Concept/More Functional Agency	145
	Suggestions for Improving Kinship Foster Care	147
VIII	SUMMARY OF FINDINGS OF RESEARCH QUESTIONS	151
	Overview of Themes Emerging from Interviews	157
IX	IMPLICATIONS FOR SOCIAL WORK PRACTICE	159
	Implications for the Child Welfare Agency	161
	Implications for Agency Policy	163
X	RECOGNIZED NEEDS OF BIOLOGICAL PARENTS	166
	Suggestions for Kinship Foster Care Practice	169
	Further Research on Kinship Foster Care	175
	Conclusions	179

APPENDIX

A. Biological Parents Introduction	183
B. Biological Parents Interview Guide	184
C. Biological Parents Verbal Scripts	186
D. Informed Consent	187
E. Human Subjects Review Approval - Hunter College ..	188
F. Approval to Conduct Dissertation Study - NYSDSS ..	189
G. Approval to Conduct Dissertation Study - C-PLAN ..	190
H. Autobiographical Statement	191
I. Case Studies	192
Profiles	193
Linda & Wayne's Story	193
- Interpretation	216
Dallia's Story	218
- Interpretation	238
Lynne's Story	240
- Interpretation	255
Rene's Story	257
- Interpretation	274
BIBLIOGRAPHY	276

LIST OF TABLES

TABLE		Page
1	Number of Children in Foster Care in New York City	8
2	Kinship and AFDC Rates	9
3	Biological Parents Characteristics	100
4	Primary Type of Mistreatment/Reasons for Placement	101
5	Study Comparisons	103
6	Summary of Findings	106
7	Summary of Findings	107
8	Frequency/Location of Visits/Contacts with Worker	129

BIOLOGICAL PARENTS VIEWS OF KINSHIP FOSTER CARE:

A NEGLECTED PERSPECTIVE EXPERIENCE

CHAPTER I

INTRODUCTION

The foster care population in New York City experienced a precipitous rise from 17,166 children in care in 1986 to 50,518 in December 1991, and declined slightly to 40,938 in September 1996 (Table 1). The dramatic increase has been attributed to parental problems such as substance abuse, poverty, neglect, lack of affordable housing, and the behavioral and substance abuse problems of adolescent children (Grant, 1996; Grant, 1993; Wulczyn and George, 1992; Gallagher, 1991, Grant, 1989).

Ironically, the kinship program which was initially introduced in 1986 to serve about 1,000 children, grew dramatically to 4,738 in August 1988, peaking at 21,856 in July 1991; and accounted for 44 percent of the total foster care population in New York City in 1992. The kinship population has declined somewhat to 15,047 in September 1996, and represents 37 percent of the total foster care population (Table 1). Illinois also experienced similar increases like New York City, as Testa (1997:108) states.

Between 1986 and 1994, the number of children in kinship foster care increased almost 500 percent from 3,718 to 22,631 children, and children in kinship care represented 55 percent of the total population in 1994.

In part, kinship foster care grew due to a shortage of traditional (non-relatives) foster parents, to provide care for abused and neglected children. Because of the large number of children entering the foster care system, and the shortage of foster parents – the kinship program was implemented by New York City's Child Welfare Administration (changed to The Administration for Children's Services (ACS) in 1996) to solve a burgeoning foster care crisis.

This action was in response to the Eugene F lawsuit filed by the Legal Aid Society (see p. 4 for more discussion on this). Prior to this litigation, children who were placed (or were living) with blood relatives were not receiving the same financial entitlement as children in traditional (non-relative) foster care.

In 1979, the United States Supreme Court declared that under the Social Security Act, which underwrites approximately 50% of state foster care costs, foster children placed with relatives whose homes meet state licensing or approval standards are entitled to the same level of federally supported foster care benefits as children in regular foster homes. Youakim v. Miller, 440 U.S. 125 (1979) (McNally, 1992: 1).

"There are basically two types of family foster care arrangements which comprise the foster care system in New York City" (Thornton, 1987: 1). The older and more familiar type of foster care service is the traditional or non-related foster care arrangement in which children who are removed from their parent's home due to allegations of child abuse and neglect are placed with non-related foster parents. The second type of

foster care arrangement is the kinship foster care arrangement. In this type of care, children are removed from their parents home and placed with extended family members such as grandmothers, aunts, uncles, sisters and brothers.

Many, particularly in the African American community, regard kinship foster care placement as a necessary placement option in order to keep the family bond unbroken, while stabilizing the children until the parents are ready to assume their parental obligations.

The kinship system has played a significant role in the survival of African Americans. In Africa, it was the glue that held families and communities together. In America during slavery, it helped broken and separated families feel a part of the larger African American family. Today, it provides an identity for families that have migrated to the north, moved for economic reasons or lost their connection to the past. The use of the kinship system must play an important role in any policy decisions made in delivering services to African Americans (Ferguson and Manning, 1992: 2).

Danzy and Jackson (1997) share the same perspective:

Although the use of relatives for the care of their young kin is a new practice for the child welfare system, it is not new for African American families (p. 33). ...For the African American community, the terms family preservation and kinship care are interchangeable. Both are ways of sustaining and maintaining the family system (p. 37)

Kinship foster care also referred to as kinship care, extended family placement, relative placement, and relative care (CWLA, 1991) is a recent phenomenon which began in some states in 1976, and is now practiced by over thirty states. However, while kinship care is seen as a 'most valuable and

preferable resource for children needing substitute homes,' kinship care raises many practice and policy issues (COFCCA, 1991).

In 1987, the Legal Aid Society filed a petition against New York State compelling the state to provide families who have relative foster children with the same board rate payments as non-related foster parents. Families caring for kinship children receive payments ranging from \$4,272 to \$14,184 a year depending on the child's age and special or exceptional needs. The allowance for families receiving Aid to Families with Dependent Children (AFDC) ranges from \$1,344 yearly for a family size of one to \$5,256 yearly for a family size of six, plus shelter allowance ranging from \$2,580 to \$5,052 yearly (Table 2).

Thornton (1987: 25) states:

The practice of paying foster care board rates to relatives who provide care for their minor dependent relatives was extended nationwide as a result of the Youakim v. Miller case. This case originated in the State of Illinois in 1976. It was brought by foster parents who were providing care for the wife's minor siblings. The family contested the practice in that State, which provided for higher payments to unrelated foster parents than to related ones Youakim v. Miller, 425 U.S. 231 (1975). This case went all the way to the U. S. Supreme Court.

Prior to this Supreme Court decision, relatives received AFDC payments for the related children in their care.

Historically, in most societies, relatives have taken care of their related children, and it is a known practice that many children are reared and nurtured by someone other than their biological parents (RMC FCC, 1993; CWLA, 1991; Smith, 1988; Gordon, 1987). Information from the Census Bureau, RMC FCC and CWLA state:

Recent Census Bureau information indicates that in 1990, eleven percent (11%) of New York State children under the age of eighteen years lived in a household other than that of their parent(s), an increase of seven percent (7%) over 1980. Approximately eighty percent (80%) of these children lived with a relative - usually a grandparent. Less than one percent (1%) of all children lived in an institution, in a group setting, or headed their own household (Report of the Mayor's Commission for the Foster Care of Children (RMC FCC, 1993: 38).

According to the New York City Planning Commission, in 1990, over a quarter of a million of this City's children under eighteen years of age, including almost fifty thousand in kinship and non-relative care and eleven thousand in institutions, group or congregate settings, did not live with their parents. More than half (51%) of those children living with grandparents and other relatives were Black, and almost one-third were Latino. In contrast, White children represented only one-tenth (10.6%) of all children not living with their own parent(s) (RMC FCC, 1993: 38).

In the past decade there has been a 16 percent increase in the number of children and youths living with relatives. ...Four million American youngsters across ethnic and socioeconomic strata live with their relatives. One-third of those children, or 1.3 million, are growing up with relatives while their parents are not living there at all. Grandparents comprise two-thirds of those relatives (CWLA, 1991: 89).

However, it must be pointed out that in most cases this arrangement was done voluntarily and not for financial reasons.

Today, when a child is removed from his/her natural parents due to allegations of abuse and neglect, an immediate investigation must be conducted to locate relatives of the child's parents. The emphasis of the child welfare agency is to place children with relatives (kinship foster care) rather than with strangers.

Prior to the introduction of the kinship program in New York City, children were placed with strangers, as they were the only placement source available. However, after the kinship program was implemented, the agency policy was changed, and emphasis was placed on locating relatives of the natural parent, and making arrangements to place the child with relatives. This was done mainly to decrease trauma and separation anxieties of the child, to keep the family bond together, and most importantly, to place the child with someone he/she already knows and is familiar with.

The guidelines for kinship foster care in New York City state:

Chapter 744 of the Laws of 1989 amended the Family Court Act (Section 1017) to require that ... When the court determines that a child must be removed from his or her home, ... the court shall direct the local commissioner of social services to conduct an immediate investigation to locate relatives of the child and inform them of the pendency of the proceeding and of the procedures for becoming foster parents or for seeking custody or care of the child... (NYCHRA, CWA, 1992: 2).

Relatives are financially compensated for caring for their blood relatives (children) (see Table 2 for payment rates).

Remuneration of blood related relatives has created controversies and raised issues about the major differences in payment rates between AFDC and kinship foster care (Gallagher, 1991; Wulczyn and George, 1992; Grinker and Smith, 1993). (See Gallagher (1991), p. 55, for an interesting discussion on this). Some critics contend that the differences between \$2,928 to \$12,840 yearly for families receiving AFDC and kinship payments respectively, have caused the kinship foster care program to become a "supplementary welfare program" (Gallagher, 1991).

According to Grinker and Smith (1993: 74).

Because relatives in the kinship foster care system receive substantially higher benefits than if they were on welfare, poor families have an incentive to enter the system even if foster care is not really needed.

Moreover, Thornton (1987), contends that 80 percent of kinship foster parents became involved with the foster care agency *through referrals from income maintenance centers* (italics added), and 60 percent of kinship foster parents would not have been interested in being a foster parent if their related children did not need such care. Therefore, the majority of kinship parents are only interested in caring for their own related children, but are not interested in caring for non-related foster children. Thus, many foster parents are receiving both PA and kinship money.

TABLE 1				
*** Number of Children in Foster Care in New York City ***				
Year	Total in Foster Care	Traditional Foster Care Non-Relative	Kinship Foster Care Relative	% in Kinship Foster Care
1960	18,424	18,424	NA	NA
1964	22,380	22,380	NA	NA
1968	23,734	23,734	NA	NA
1972	27,900	27,900	NA	NA
1976	23,062 (10/76)	23,062	NA	NA
1980	20,571	20,571	NA	NA
1981	22,704	22,704	NA	NA
1982	18,391	18,391	NA	NA
1983	17,154	17,154	NA	NA
1984	16,240	16,240	NA	NA
1985	16,618	16,618	NA	NA
1986	17,166	17,166	NA	NA
1987	19,768	19,768	NA	NA
1988	31,951	27,213	4,738 (8/88)	15
1989	45,491	32,491	13,000 (12/89)	29
1990	49,980	31,977	18,003 (7/90)	36
1991	50,518	28,662	21,856 (7/91)	43
1992	48,567 (10/92)	27,264	21,303 (10/92)	44
1993	47,509 (12/93)	27,281	20,228 (12/93)	43
1994	45,554	26,346	19,208	42
1995	41,969	24,916	17,053	41
1996 *	40,938 (09/96)	25,891	15,047 (09/96)	37

Note: None of the sources cited had accurate or consistent data for the years listed. Data from the state was not consistent with data from the city - as there were major inconsistencies in both the number of children in traditional foster care and kinship foster care. No data source consistently reported the same number of children in foster care from 1960 to 1988.

Data for 1960 to 1980 are from the City of New York, Human Resources Administration, Monthly Statistical Report. Data for the total population in foster care from 1981 to 1991 are from the New York State Department of Social Services. Statistical Supplement to the 1991 Annual Report of the New York State Department of Social Services, p. 78.

For consistency and reliability, data were compiled from monthly HRA Facts reports. Data from 1992 to 1996 are compiled from the City of New York, Human Resources Administration. HRA Facts. Kinship statistics were first included and published in the City of New York, Human Resources Administration, HRA Facts from May 1991 to July 1996. * Source: ACS Office of Management Analysis

TABLE 2

**** KINSHIP AND AFDC RATES ****

<u>KINSHIP</u>		<u>AFDC *</u>	
Child's Age	Monthly Rate Kinship Care **	Family Size	Monthly Rate AFDC ***
METRO			
Normal Children			
Birth - 5 years	\$ 356	1	\$ 112
6 - 11	420	2	179
12 +	485	3	238
		4	307
Special Needs Children		5	379
		6	438
Birth - 5 years	648	For each	
6 - 11	714	additional	
12 +	780	person	60
Exceptional Children		Shelter Allowance (Monthly)	
(Any age)	1182		
UPSTATE		With Heat	Without Heat
		1 \$ 215	\$ 207
		2	250
Normal Children		3	286
		4	312
Birth - 5 years	325	5	337
6 - 11	391	6	349
12 +	452	7	403
		8 or more	421
Special Needs Children			384
(Same as above)			
Exceptional Children			
(Same as above)			

* AFDC: Aid to Families with Dependent Children

** Source: Child Welfare Administration memorandum.
Fiscal year 1996 Foster Care Rates.

*** Source: Human Resources Administration.
HRA Guide to Budgeting

It is important to note that the public assistance (AFDC) rolls in New York City declined from 694,525 in 1987 to 642,038 in 1989, rose again from 670,864 in 1990 to 825,908 in 1995, declining slightly to 823,238 in January 1996 (HRA Facts, 1987-96). Consequently the foster care population was on an upward spiral from 1985 through 1991, and has been declining since. Many of the parents whose children were placed in foster care during the period (1985-1991) were receiving AFDC benefits, before their children were taken away. Consequently, their AFDC budgets were reduced or eliminated and the PA rolls were reduced. Therefore, children were moved from the PA rolls to the foster care (kinship) roll, and is one of the major reasons for the increase of the kinship foster care population.

In July 1979, New York State Governor Hugh Carey signed into law the Child Welfare Reform Act of 1979 (CWRA).

The Child Welfare Reform Act was designed to shift the focus of child welfare away from placing children into foster care. Policy and funding would emphasize assistance to children and families in their own homes, and thereby prevent the need for placement. For those children who were placed into foster care, the Act was designed to sharply reduce or eliminate the impermanence in their lives (Tobis, 1989: 91).

The Act was also meant to:

Discourage unnecessary, inappropriate, or unnecessarily long stays in foster care, to promote permanency planning (Tobis, 1989: 91); and to strengthen the alternatives to out-of-home placement and streamline the use of foster care when placement was required (CWA, 1992-3: 1).

The intent of this new legislation was to improve and reform foster care. It is important to note that when the Act was passed, the foster care population in New York City was on a downward spiral (See Table 1). Child welfare agencies in the State were discouraging removals and eventually foster care placement, and the number of children in care declined from 1981 to 1984, based on these measures.

In June 1980, Congress passed the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272).

This law is based on many of the same principles regarding foster care and preventing placement as the New York State Child Welfare Reform Act of 1979 (Tobis, 1989: 94).

The CWRA of 1979 was seen as a precursor to P.L. 96-272 (Petro, 1989).

This new legislation was designed to encourage states to move from reliance on foster care to helping children remain with their families or if that is not possible, to be placed in adoptive homes (Calhoun, 1980: 2).

Among the highlights of this significant legislation was: financial incentives were provided to states to redirect child welfare programs to one of family preservation, and keeping the family unit together instead of removing and placing the child in foster care. States would have to develop programs to reunite children with their families, and states

would get federal assistance to provide pre-placement preventive services to help keep the family unit together. For Calhoun (1980: 3), the new legislation meant:

A shorter time in foster care, fewer changes in living arrangements, earlier return to their own homes, or placement with adoptive families, or in long-term living arrangements.

In accordance with both legislations (CWRA and P.L. 96-272), kinship foster care is a realistic option for families whose children are removed from home. However, once the child is placed within the natural family network (such as with grandmothers, aunts...), every effort should be made to provide the biological parent with the necessary wrap around services she/he needs. Once these vital services are provided to the parent, it would then be easier to reunite the family.

However, the issue of permanency in kinship foster care poses a new challenge to foster care agencies, as:

The achievement of permanency for a child in a kinship home is often problematic, and especially so when adoption is the case plan (Thornton, 1991: 596).

Purpose of the Study

This study will attempt to find out the concerns, issues and experiences of biological parents who are involved in the kinship foster care program. Presently, not much is known about biological parents whose children are placed in

kinship care, and this is an attempt to identify and make known their experiences. Although much has been written about other foster care issues, kinship foster care in general, and the natural parent in particular, have not been fully explored, and many questions still remain unanswered about this new foster care initiative.

There is also a definite need for more understanding of the biological parents' role with respect to the kinship foster care program. It is the intent of this study to provide a clearer picture of the crucial biological parents role in the kinship foster care program. Since there is limited empirical data available in the literature about the experiences of the biological parent in kinship foster care, this study is designed to attempt to fill the vacuum and thus add new knowledge to the foster care literature. Most studies on foster care have not addressed the biological parents' role, and it is expected that the concerns, issues, problems and experiences of the biological parent will be clarified and fully explored in this study.

Davis (1995) made an attempt to identify the problems natural parents had with child protective service workers. Davis examined how CPS workers initiate contact with involuntary clients and their success or lack of, of the formation of a working relationship. Davis found that 80 percent of the

parents in her study demonstrated high resistance in the investigation process, were in various states of denial, were hostile, and threatened workers. According to Davis, parents felt that the investigations were an invasion of their privacy, and they were under the control of CPS workers. However, many did not know they had a problem.

The study will address a series of philosophical, organizational and practical issues relating to the biological parent's role in the kinship foster care program in New York City. In this analysis of the concerns, issues and experiences of biological parents in the kinship foster care program, the intent is to add new knowledge, and provide answers and solutions to frequently asked questions about biological parents who are involved in the kinship foster care program.

Major Research Questions

This study focuses on the kinship foster care program in New York City. The different elements that comprise what is now known as kinship foster care will be explored. Qualitative measures are used to describe the experiences of biological parents who are involved in the kinship foster care program. Direct experiences of children in foster care will not be part of this study. The natural parent was given the opportunity to provide detailed information on her/his experiences, concerns,

issues, perceptions, roles, and problems with the kinship foster care program in New York City.

The central research questions addressed in this study were:

Biological Parents

1. What are the parents' perceptions of the reasons for the removal of their children?
2. What are the parents' feelings about their children's placement with relatives?
3. What have been parents' experiences with the child welfare agency and the kinship foster care program?
4. What services do parents feel that they need in order to facilitate the return of their children?
5. What are parents' perceptions of ACS's efforts to reunite them with their children?

Operational Definitions of Concepts

The following concepts will be used throughout the study and are defined below for the purpose of greater clarity:

1. **Adoption:** Adoption is the **legal** process by which these rights and responsibilities are given to a person to whom that child was not born. At the end of the adoption, the child's 'biological parents' or 'birth parents' no longer have any rights or responsibilities to the child. The 'adoptive parents' now possess all the legal rights and responsibilities to the child, just as if that child had been born to them. After the adoption is finalized, the adoptive parents legally are the child's '**real parents**' (Sifferman, 1993: 1).
2. **Caseworker:** Line staff person, who may or may not have a degree in social work; who provides, coordinates, and monitors child welfare and other services to children, youths, and families (Child Welfare League of America, Inc., 1991: 127).
3. **Custody:** Court-ordered transfer to relative of physical care and control of child. Family Court Act Article 6. Child is not in foster care and receives no foster care subsidies, services or supervision. Child may be eligible for AFDC benefits. Unless judicially terminated, custody expires when child attains majority (McNally, 1992: 6).
4. **Family Foster Care:** An essential child welfare service option for children, youths, and parents who must live apart while maintaining legal and usually, affectional ties. When children, youths, and parents must be separated because of the tragedy of physical abuse, sexual abuse, neglect, maltreatment or special circumstances, family foster care provides a planned, goal-directed service in which the care of children and youths takes place in the home of an agency-approved family. The value of family foster care is that it can respond to the unique, individual needs of infants, children, youths, and their families through the strength of family living, and through family and community supports. The goal of family foster care is to provide opportunities for healing, growth and development leading to healthier infants, children, youths, and families with safe and nurturing relationships intended to be permanent (Child Welfare League of America, Inc., 1991: 129).

5. Foster Child: Any person in the care, custody, or guardianship of an authorized agency, who is placed for temporary or long-term care (Carrieri, 1991: xxi).
6. Foster Parent: Any person with whom a child, in the care, custody, or guardianship of an authorized agency, is placed for temporary or long-term care (Section 371 of the Social Services Law) (Carrieri, 1991: xxi).
7. Guardianship: Court-ordered transfer to relative of full parental authority over child, including physical care and control. Family Court Act Article 6. Child is not in foster care and receives no foster care subsidies, services or supervision. Child may be eligible for AFDC benefits. Unless judicially terminated, guardianship expires when child attains majority (McNally, 1992: 6).
8. Kinship Care: An essential out-of-home care option in which relatives or extended family members provide family foster care services. Also known as relative placement, relative care, and extended family placement. Kinship care is the first placement option that should be considered and assessed when children and youths must be separated from their parents as a result of abuse, neglect, or special medical needs (Child Welfare League of America, Inc., 1991: 130).
9. Length of Time in Care: The period of time a child spends in the foster care (traditional or kinship) system.
10. Out-Of-Home Care: An essential child welfare service for children, youths, and families separated because of abuse, neglect, or special medical needs, which includes such options as kinship care, emergency shelter care, treatment foster care, group care, and residential treatment (Child Welfare League of America, Inc., 1991: 130).
11. Permanency Planning: The systematic process of carrying out, within a brief time-limited period, a set of goal-directed activities designed to help children live in families that offer continuity of relationships with nurturing parents or caretakers and the opportunity to establish lifetime relationships. Maluccio and Fein (cited in Garcia, 1989).
12. Place or Commit: The act of a family court judge whereby a child is placed into foster care (Section 371 of the Social Services Law) (Carrieri, 1991: xxii).

13. Reunification: The process of reuniting (returning) children in foster care with (to) their biological parents, relatives, or guardians in the shortest period of time possible.
14. Services for Families: The process of providing families with a continuum of wrap-around services in order to keep families together, and to create a stable, harmonious living arrangement for the family. Services such as medical, financial, supportive, educational, preventive, or rehabilitative once provided in a timely manner can eliminate out-of-home placement.
15. Social Worker: A professionally educated and trained individual with a B.S.W. or M.S.W. degree who provides and/or coordinates a range of social and other services to children, youths, families, and individual adults (Child Welfare League of America, Inc., 1991: 131).
16. Respondent: The respondent in an abuse and neglect proceeding is any parent who is alleged to have abused or neglected that child. Fam. Ct. Act #1012(a). A parent who is not living with the child can be a respondent... (Ratterman & Freedman, 1992: 1-7).

Motivations for the Study

With almost 41,000 children placed in foster care in New York City (second only to California) and 37 percent of them placed in kinship foster care; many issues and concerns have been raised over the years by legislators, policy makers, advocates, child welfare professionals, social scientists, and practitioners. Many of these concerns have unfortunately remained unanswered and hopefully, this research study will be instrumental in providing some answers and solutions to the kinship foster care controversy.

Recent studies have shown that not enough is (has) been done for the biological parents of children in foster care (traditional and kinship) (Seligson, 1991; George, 1990). Many feel that the placement of a child with a relative should facilitate a quicker resolution to the problem experienced by the birth parent, and should lead to a timely reunification of child and birth parent. However, according to Halpern (1992), the policies of the Child Welfare Administration in New York City has (is) not being properly utilized and agency policies have, "wasted the most meaningful reunification tool - frequent high quality visitation," and the provision of preventive and supportive services to the natural parent.

Other research studies show that children are staying longer in kinship care than in traditional care (Everett, 1995; Wulczyn and George, 1992; Seligson, 1991); kinship children are younger (Dubowitz et al., 1993; Seligson, 1991); and kinship parents are not interested in adopting their kinship children (Thornton, 1987; Dubowitz et al., 1993). However, Magruder (1994) found that adoptive placements more than doubled in California from FY 1981/2 to FY 1991/2, and 27 percent of adopted children placed in FY 1991/2 were placed with relatives (see page 54 for more on this study).

The finding that kinship children are younger suggests that parents are experiencing more parental problems in the early stages of their children's lives, and therefore, are more likely to be reported to the child abuse hotline. For example, 54 percent of the children in kinship care in New York City in 1992 were less than 7 years of age, and 43 percent of the children in foster care (both) in 1993 were less than 6 years of age (ACS, 1995).

Nationally, over thirty states have incorporated this new child welfare program - kinship foster care. States like Illinois (46%); Baltimore, Maryland (20%) (Dubowitz et al., 1993), and California (37%) (CASA, 1991) had high numbers of children in kinship foster care in 1990 (Grant, 1993). However, reliance of kinship care continues to increase in several states. For instance, more than half (55 percent) the number of children in foster care in 1994 in Illinois were in kinship arrangements (Testa, 1997), and 67 percent of the children in placement in Philadelphia in 1992 were in kinship homes (Heger and Scannapieco, 1995). New York City's kinship population has shown a downward spiral from 44 percent in 1992 to 37 percent in September 1996.

However, since the implementation of kinship care, children placed with relatives are increasingly accounting for most of the foster care population in some states, and is consequently using up a large amount of the foster care budget. For example, in New York City, kinship foster care was estimated to cost about \$400 million of an overall foster care budget of \$990 million in FY 1994, almost one-half of the overall foster care budget.

Many practitioners contend that the temporary placement of children with extended relatives in kinship foster care is a better placement objective than placement with strangers in traditional foster care. However, the biological parent must be provided with the needed (necessary) comprehensive services in order for the family to be reunited expeditiously. Of course, keeping the family unit intact and providing needed wrap-around services to the whole family unit in the home should be the primary priority of child welfare agencies. This action will not only eliminate unnecessary out-of-home placement, but will also eliminate unnecessary traumatic and separation anxiety experiences for both parents and children.

Practitioners and professionals alike are concerned about the generation gap between kinship parents especially grandmothers and kinship children. The average age of kinship parents in Thornton's (1987) study was 55 years, with ages

ranging from 40 to 77 years in the sample study; and from 25 to 80 years in the total population study. Children of today have many personal, psychological and other problems, and it may be unfair to ask kinship parents to take on the responsibility of parenting and nurturing their grandchildren, nephews or nieces.

Many experts feel that child welfare agencies are taking advantage of the established strengths of families, and by using known extended kin to take care of troubled, abused, or neglected children indefinitely, the agency is demanding too much from the kinship parents. Further concern is raised by advocates and critics, that some of the kinship parents failed their natural children, and will ultimately fail their grandchildren as well (Dubowitz et al., 1993; Dubowitz & Sawyer, 1994). The central issue is, what can be done for families who are experiencing difficulties rearing their children?

The emphasis on seeking alternative out-of-home placement for abused and neglected children has created many difficulties in keeping with the tradition of family life. Families are broken up when a child is removed from his/her biological parent and placed elsewhere. If siblings are placed separately, there is more anguish and pain for the children, and this must be considered by child welfare workers when

removing children. Consequently, if children are placed with relatives, the separation may be less traumatic. Nonetheless, even under the best of circumstances, placement is traumatic for both natural parent and child, because the bonding is being broken because of the separation.

Provisions were made in the New York State Child Welfare Reform Act of 1979 and the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272) to stabilize and strengthen families, and to provide preventive services to help children remain with their families. Both Acts emphasized improved services for families in order to eliminate unnecessary out-of-home foster care placement.

It is clear from the dramatic increase in the foster care population in New York City that the purposes of neither of these two legislative actions have been achieved.

However, there is a contradiction here, since states are provided with much more money by the federal government to place children in foster care, than to provide social services which will strengthen and preserve families and avoid the need for foster care (Grant, 1994). Federal matching funds for foster care services (ie. investigation, removal and placement of children in foster care) dramatically increased from \$309 million in 1981 to \$2,311 million in 1992, but funding for preventive services only increased from \$164 million in 1981

to \$274 million in 1992 (CDF, 1992).

Epstein (1997: 47) states that:

The 1994 Federal budget (P.L. 103-66) provided \$60 million and rose quickly to \$240 million, for matching grants to the states, in support of family preservation services.

This funding has been increased, for in 1994/5, the federal government funded the family preservation and family support bill providing one billion dollars to the states for prevention and family support services.

The slight decrease in the foster care population in New York City in the last four years is attributed in part to the new initiative - Family Preservation Program (FPP) which provides intensive home-based intervention services to families for eight to ten weeks. This program focuses on stabilizing and strengthening families who are experiencing familial problems; and provides intensive, as needed services round the clock to the entire family unit in order to avoid foster care placement. However, the number of families and children served by FPP in New York City are relatively small in comparison to the number of children in foster care. For example, 247 families were served by FPP in 1992, 954 in 1993, 1,135 in 1994, and 1,041 in 1995. (The number of children served were not disclosed). Nine hundred and sixty (960) families were projected to be served in FY 1996 (ACS, 1995).

For example, if it is assumed that the average foster care family size is four children per family (as this study findings show), then in 1995, only 4,164 children (or 10 percent) were served by FPP, out of a total population of 41,969 children. Therefore, FPP cannot be an effective program for averting foster care placement since only a small number of families and their children are served. It should also be pointed out that FPP intervention is a one shot deal, and after the 8-10 weeks expires, subsequent reports of child abuse or neglect are referred to the protective diagnostic (PD) units, which has responsibility for the case (even when FPP is working with the family).

Another factor contributing to the slight decrease of children in foster care is the present agency policy to decrease caseloads. In fact, CPS workers in the five boroughs of New York City, sometimes work on the weekend to close cases. The closing of cases consequently decreases the reported number of children in foster care. Children, then, are supposedly reunited with their natural parents when the allegations which precipitated their removal from home are found to be unsubstantiated, but this is not always the case in CWA, as many children remain in foster care long after their cases have been closed. (See Dallia's story in Appendix I for a perfect example of this).

Another example is warranted here. Admissions of children in foster care outnumbered discharges of children from foster care from 1987 to 1991, consequently the foster care population escalated. However, discharges were greater than admissions from 1992 to 1995, thus, the total foster care population decreased by 8,549 children from 1992 to 1995 (ACS, 1995). The implications here are that, whenever admissions are greater than discharges, the foster care population will increase, and when discharges are greater than admissions, it will decrease. Therefore, depending on the immediate goals of the commissioner of ACS (or is it the Mayor?), the foster care population will increase or decrease (Grant, 1996). If he/she is pro-discharges it will decrease, if he/she is pro-new admissions, the foster care population will increase. Unfortunately, that is how foster care is operationalized in New York City.

It should be pointed out that in January 1996, Mayor Rudolph Giuliani signed an Executive Order creating a "new" child welfare agency. This new agency - The Administration for Children's Services (ACS) was made independent of the Human Resources Administration (HRA), and became effective in February 1996. Former prosecutor Nicholas Scoppetta is the Commissioner of ACS, and reports directly to the Mayor. ACS replaced The Child Welfare Administration (CWA), which replaced Special Services for Children (SSC), which replaced

The Bureau of Child Welfare (BCW). Therefore, CWA, SSC, and BCW are used interchangeably throughout this study to refer to what is currently called ACS.

Contributions of the Study

This study attempts to make a contribution to the limited information available in the literature on the experiences of biological parents involved in kinship foster care. It also attempts to provide some answers pertaining to this new foster care initiative (kinship care). In addition, the concerns and issues of biological parents will be expressed, documented and exposed. Therefore, this is a forum for biological parents to express themselves, and to provide valuable information about their experiences in the kinship foster care program.

There is growing national concern by child welfare advocates, policy makers, and legislators for a reexamination of the policies and practices relating to kinship foster care. This study takes these concerns into consideration. Research instruments were constructed to answer some of the concerns that other studies on kinship care did not answer. Those studies (such as Thornton's) did not provide any information on biological parents, and thus, there is very little empirical data available about the biological parents of children in

kinship foster care. This study attempts to fill that void by focusing on the role of the biological parent in the kinship foster care program.

Attempts will be made to identify the problems experienced by biological parents who are involved with the kinship foster care program, and to develop solutions based on the experiences of those parents directly involved with the kinship program. The findings of the study will provide detailed information about biological parents, and will lead to a more significant understanding of the birth parents of children in kinship foster care.

This study is designed to add new meaning and knowledge to the kinship foster care phenomenon. It is also designed to contribute new and valuable information about a new area of child welfare that is being practiced by over thirty states. As is the case with any original study, the richness of the data will be instrumental for answering many vexing questions, and for providing solutions to often asked questions about kinship foster care.

Besides Thornton's work (see p. 36 for a discussion of his study), there is an increasing number of studies available in the literature on kinship foster care, such as Davis, Landsverk, Newton and Ganger, 1996; Scannapieco and Jackson,

1996; Gleeson, 1995; Everett, 1995; and Berrick and Barth, 1994). However not much empirical data is available on the biological parent in kinship care.

This study is an attempt to shed new light on a growing, unknown controversial subject. Kinship foster care is controversial because many of the concerns raised have remained unanswered. For example, some major concerns addressed are the cost of kinship care, the length of time children are spending in kinship care, the age of kinship foster parents, and the efforts made by child welfare agencies to reunite natural parents with their children. Consequently, there is not sufficient empirical data available for purposes of analyzing information, monitoring and testing program effectiveness.

Children living with relatives voluntarily or involuntarily are nothing new. The practices of Special Services for Children (SSC) in 1985-87 would highlight this. Families with related children in their care would notify their caseworkers who would send a package containing pertinent information about the family to the Division of Placement (Allocations unit). The Allocation's worker would contact a private, voluntary agency to request that they conduct a home study of the family. The package would be sent to the private agency, and the worker would wait for a response.

In many cases, the home study was never completed by the private agency, and after waiting for as many as six months for a response from the agency, the caseworker and allocation's worker would give up in disgust. Alternative measures such as applying for AFDC (for the child), would then have to be made, in order for the family to get financial assistance to help in the caring of their related children.

This failed agency practice is practically responsible for the sudden escalation of the kinship population from 1988 to 1991. There were many families caring for related children, who were not receiving compensation for their services, and the foster care system did not respond adequately to their needs. Only when they (families) were referred to CWA by income maintenance centers did the families receive the attention, services, and remuneration from the child welfare agency.

There have been many inherent problems with foster care (traditional and kinship) in New York City. As Tobis (1989: 247) states:

A major factor defining foster care is the competing social functions of the system. Although its official, stated function is to assist children and families in crisis, the system appears to have other social functions that seem to be more important determinants of the way the system operates.

As for former Executive Deputy Commissioner of CWA, Robert Little (1990-1993),

... Foster care is a business, it's a very large business... Each agency is a business, they get money for providing services and care and all that. *But the children in their programs are what generates the money* ... (italics added). When I say that I'd like to reduce the length of stay of every child in care one year, some people say, 'Well, that sounds good.' But from a business standpoint, those who run these programs see this as less money. And so they have their ways of resisting trying to do these things... (Bullard, Hicks, & Wadley, 1993: 31).

The above quotes show clearly that to study foster care in New York City, one has to understand the social underpinnings and the inherent problems existent in the child welfare agency. One cannot study kinship foster care without understanding traditional foster care, since they are interrelated, and at the same time, foster care is foster care whether it is kinship or non-kinship. Consequently, one cannot isolate biological parents and pretend that nothing else exists. That is absurd. This also holds true for biological parents. One must look at the whole to reflect on one part of the picture (system).

Clearly, there is a need to evaluate how biological parents are faring in the kinship foster care program. Of major importance are their concerns, issues and experiences in kinship care. Since there has been few studies about their experiences in kinship care, the primary purpose of this study is to provide an exploratory analysis of their experiences in

the kinship program. Therefore, a study of this kind will not only provide answers to kinship foster care problems, but will generate new knowledge for improving policy, practice, and management of an unexplored child welfare program.

This chapter has provided a brief overview of the kinship program in New York City, the rationale for conducting the study, the major research questions, the definitions of key concepts, the interest for conducting the study, and the contributions the study will make to the limited information available in the literature on kinship foster care. The study will also provide a forum for biological parents to talk about their experiences in the kinship program.

CHAPTER II

SOCIAL SCIENCE THEORY

Despite some attempts to explain the problems of biological parents who are involved in the foster care system (Davis, 1995), researchers have found it extremely difficult to gain access to biological parents. Consequently, not much empirical data is available about their concerns, experiences and involvement with the foster care system. This qualitative exploration of biological parents attempts to help guide social science theory in understanding the experiences of natural parents in the kinship program in New York City.

One can try to understand the reasons parents inflict bodily or other harm on their children, and not be fully satisfied (Kramer, 1994). However, their behavior could be based on stress factors, their inability to cope, or they are just overwhelmed. Whatever the reason(s), parents react to what Scott (1995: 101) called "a process of 'definition' or 'interpretation.'" Scott (1995: 101) states.

The active involvement and intervention of people in their own circumstances requires the informed use of practical knowledge, a fact that separates them from other animals. In order to pursue their plans, individuals must construct a meaningful definition of their situation and act on the basis of this definition.

Therefore, parents are responsible for their actions, and much can be learned from their interaction with self, others and their physical environment.

The role of the biological parent is ascribed and particularistic. It is also the main ingredient for keeping the family network together. Once the child(ren) is(are) taken away from the home, instability, chaos, depression, loneliness, illness and other factors become the dominant forces in what probably was once a stable, loving family. A respondent in this study expressed her state of depression after her children's removal.

I was depressed and stressed out. I could not eat or sleep because I missed my children. Their removal created personal problems for me. It was pure hell not having my children around. I thought of committing suicide.

The role of the biological parent undergoes a dramatic change when s/he is involved with a child welfare agency. "The organization, for the most part, dictates the contents of the positions which comprise the role set" (Thornton, 1987: 40). Many parents feel that it is very disturbing to be scrutinized so closely by child protective service workers, and feel powerless and hopeless (Davis, 1995). Weissman (1988: 209) makes this point about clients and social agencies interactions.

Many of the clients (parents) of social agencies are unsophisticated about formal organizations and quite suspicious of them. Many are convinced, for example, that if they criticize, they may be punished by having service denied. ...Many clients have a sense of helplessness and dependency.

An important aspect of this qualitative study is the attempt to describe the concerns, issues and experiences of biological parents involved in the kinship program, and to integrate these experiences with social work practice, in order to understand the nature of the problems experienced by them - and the relevant changes that need to be made.

The need for a constant monitoring of established meanings and the periodic creation of new meanings ensures that the process of interpretation contains the everpresent possibility of change (Scott, 1995: 104)

This change is for the benefit of parents. Change that will help parents resolve their problems, and make them functional and stable, so that they can carry out their parental responsibilities.

CHAPTER III

REVIEW OF THE LITERATURE

Introduction

In this chapter, a review of the literature is presented. Emphasis is placed on the relevant permanency planning options associated with kinship foster care. Options such as the length of time children are spending in kinship care, services needed for families, adoption, reunification, and guardianship are discussed. The development of the concept of kinship and kinship relationships are presented to show similarities in kinship networks throughout the world. Since Thornton's study on kinship care in New York City is the only extensive body of knowledge available on the subject, some discussions of his findings are presented.

Summary of Thornton's Findings

In his study of the kinship foster home in New York City, Thornton (1987) looked at the perceptions of kinship foster parents and social workers. Using a combined quantitative and qualitative research approach, Thornton used an exploratory and descriptive design to describe the kinship foster care program from the standpoint of these two sets of participants in the system. Thornton's methodology consisted of interviewing a sample of twenty (20) kinship foster

parents, reviewing the case records of ninety-five (95) kinship foster families, and the completion of a questionnaire instrument by eighty-six (86) kinship foster care social workers. Thornton did not include biological parents in his study. Thornton was employed by the agency under study at the time of the study, and used knowledge gathered as an employee and participant observer as well, to develop instruments to describe the problem being studied.

The major findings and relevant discussion of this study are presented.

Kinship Foster Parents Findings

Thornton found that kinship foster parents tend not to want to adopt their related foster children because they felt that blood ties already exist between them. This is an important finding as it suggests that kinship foster parents are not interested in adopting their blood related relatives, since they are already biologically related. They also do not want to sever the biological ties of their daughters/sons and their children. Even though, kinship foster parents are being compensated by the City for caring for their relatives, they do not view them as foster children but as relatives, and hence, do not feel obligated to adopt them.

Thornton found that most kinship foster parents have family motivations and are not in the program for the money, and most kinship foster parents have family motivations and feel that other family members expect them to provide care for the related foster children placed in their care. However, kinship foster parents were found to be difficult to supervise and resented agency authority.

According to Thornton, 45 percent of the kinship foster parents were providing care for 2 related foster children. However, 80 percent cared for related foster children before agency involvement. This finding suggests that these children were being raised and nurtured by their grandmothers, aunts, and other relatives through a voluntary kinship arrangement. Once kinship foster care was implemented, parents applied for or were referred to ACS by AFDC workers for financial assistance to care for their related children. In other words, there is the likelihood that if kinship care was not in existence, these children would be cared for voluntarily by their relatives.

Thornton found that kinship foster parents had many motives for assuming the role of foster parent. For example, 60 percent of the parents cited - children should be cared for within their extended family - as the reason reported for caring for related foster children. Forty-five percent cited -

a sense of familial obligation, and 10 percent cited - it's the right thing to do as their reasons. Eighty-five percent of the parents felt strongly obligated to helping members of their families. Eighty percent became involved with the foster care agency through referrals from income maintenance (public assistance) centers. However, 60 percent of kinship parents would not have been interested in being a foster parent if their related children did not need such care. Sixty percent of the kinship parents would not have been interested in being a foster parent to unrelated foster children.

Kinship foster parents according to Thornton, had various views about foster parenting. Forty-five percent of them felt that board rate helps to provide a better standard of living for related foster children. Thirty-five percent cited being able to hold the family together as the best part of being a kinship foster parent, and 15 percent cited foster care services are better than services obtained via public assistance.

Forty percent of the kinship foster parents in Thornton's study had three biological children, and 45 percent were providing care for two related foster children. These parents had been a kinship foster parent for a mean of nine (9) years. Forty-five percent of the kinship parents were grandparents, 35 percent were aunts. Eighty percent of the

parents cared for related foster children before agency involvement.

As mentioned earlier, 70 percent of the parents felt that adoption was unnecessary as they were already a family, and 30 percent felt adoption would cause conflict in relationship with the biological parent. Sixty-seven percent of kinship foster parents did not feel that training was necessary, and 50 percent experienced difficulties in attending training sessions. Thirty-three percent felt that too much training was provided by the agency. Thornton's findings suggest that there are many problems with the role of kinship foster parents. Kinship foster parents were not interested in adopting their related children, resent agency authority and agency supervision, and were not interested in providing care for non-related foster children.

Kinship Social Workers Findings

Thornton (1987) found differences in workers' views of kinship foster parents as problematic based on worker's job titles. Administrators and supervisors were more likely to conceive of kinship foster parents as problematic than caseworkers for each position. Ninety percent of the workers agreed that kinship foster parents were more difficult to supervise than unrelated foster parents, 87 percent agreed

that most kinship foster parents felt that because they were related to the foster child through blood ties, they should have the sole right to raise the related foster child the way they choose without interference from the agency, and 84 percent agreed that in general, kinship foster parents seem to be more possessive of their related foster children than foster parents of children who were not related to them through blood ties.

This could mean that kinship foster parents are more difficult to supervise because of the biological blood ties to their related foster children. They view the children as part of the(ir) family, and are very resistant to conforming to agency standards and expectations. They do not view their roles as foster parents in the traditional sense, but as family members helping out (providing support to) other family members. This finding suggests that kinship foster parents do not want to be treated like foster parents, but as family members of the child.

In exploring workers' perceptions of problems in dealing (working) with kinship foster parents, 45 percent of the workers reported problems in dealing with kinship foster parents resistance to agency supervision; 28 percent reported problems in getting kinship foster parents to comply with agency policies; 21 percent reported problems in dealing with

kinship foster parents resentment toward the agency's authority; and only 10 percent reported problems in working with the biological parents of related foster children placed in kinship foster homes. This finding suggests that 90 percent of social workers in Thornton's study did not report having problems working with biological parents. This could mean that either no contact was made with biological parents by most workers, hence, once the child was removed, not much contact and interaction was made with the natural parent, or workers had excellent communication with the natural parents.

However, 54 percent of the workers disagreed that kinship foster parents should be granted more autonomy in raising their related foster children than unrelated foster parents in raising their unrelated foster children. Workers perceptions about kinship foster parents were extremely high for the following statements. Thornton found that 94 percent of the workers felt that kinship foster parents comprise a unique and special group of foster parents in the agency, and 94 percent felt that there are some notable differences in the way kinship foster parents and unrelated foster parents take on the foster parent role.

Ninety-two percent of the workers agreed that when a child needs to be placed away from his/her biological parent, it is better for such a child to be placed in the home of a relative than in the home of an unrelated family. However, 58 percent disagreed that in addition to providing care for related foster children, kinship foster parents should have unrelated foster children placed in their homes as well. For example, 64 percent of the workers who were currently supervising kinship foster parents on their caseload agreed that kinship foster parents should have unrelated foster children placed in their homes, but only 32 percent of the workers not supervising kinship foster parents on their caseload agreed with this statement.

Social workers views on kinship foster parents provided the following responses. Thirty-five percent of them cited a desire to hold their family together (foster care services help make this possible) as the major reason most kinship parents become foster parents. Twenty-four percent cited to avail themselves of financial benefits offered through foster care, and five percent cited because they love the related foster child as their reason.

Eighty-six percent of the workers agreed that as a result of family ties, kinship foster parents feel obligated to provide care for their minor dependent relatives. However, sixty-five percent of the workers disagreed that most kinship foster parents are in (foster parenting) for the money. Most workers (91%) agreed that most kinship foster parents show little interest in adopting their related foster children. More than half (55%) of the workers felt that a kinship foster parent is like a substitute parent. But there were differences between Black and White workers. Fifty-one percent of Black workers viewed kinship parents as substitute parents, compared to 81 percent of White workers. This finding suggests that Black workers view kinship parents as substitute parents in a permanent living arrangement, while White workers view kinship parents as substitute parents in a temporary living arrangement.

Kinship foster care whether in a temporary or permanent arrangement can be viewed as a specialized type of placement but overall, foster care is foster care and kinship care is foster care. Therefore, the placement of children with relatives should be viewed as a temporary arrangement and not a permanent one.

Kinship social workers felt that kinship foster parents are more difficult to supervise, and should have the sole right to raise their related foster children the way they choose without interference from the agency. Kinship workers also felt that kinship parents were more possessive of their related children than non-kinship parents. Almost all kinship social workers (92 percent) agreed that placement with a relative is better than placement with a non-relative. However, 58 percent were not in agreement to placing unrelated children with kinship foster parents. Black workers viewed kinship parents as substitute parents, therefore the placement was of a long term nature, while White workers expressed opposite views, and felt that kinship care was a temporary living arrangement.

LENGTH OF TIME IN CARE

In this section, the length of time children spend in kinship foster care is discussed. The purpose of the discussion is to assess the known reasons for children's length of stay in kinship foster care.

In a study of foster care trends in New York and Illinois, Wulczyn and George (1992) state that relative (kinship) placements tend to last longer than regular (traditional) foster care placements. The authors found that in New

York City, 88 percent of the children placed with relatives in kinship homes in 1988 were still in foster care two years later. In Cook County, Illinois, forty-five percent of the children placed with relatives in kinship homes were still in foster care two years later. The comparable figure for regular (traditional) foster care in New York City and Cook County for the same period were 50 percent and 40 percent respectively.

Wulczyn and George (1992: 279) note that the "foster care systems in New York and Illinois have come to rely heavily on relatives to provide homes for abused and neglected children." However, between 1987 and 1989, the number of children admitted to relative homes increased by 63 percent in New York City and by 24 percent in Cook County. This increase is attributed to substance abuse of parents, rising admissions and falling discharges of children in foster care, and new kinship policies that were implemented in New York in 1987 and in Illinois in 1979.

Wulczyn and George (1992: 292) raised issues related to permanency planning such as adoption of foster children by their relatives (kinship parents).

Relatives may be unwilling to adopt the children of their sons and daughters or nieces and nephews because the parental rights must be severed during what can be an antagonistic process. Practitioners are also divided over the question of supervision (of kinship foster parents).

Concerns were also raised by the authors about the financial incentives provided to relative foster parents.

The difference between an AFDC grant for one additional child and the foster care subsidy for the same child in most states is too large to ignore over the long term (p. 292).

SERVICES FOR FAMILIES

In this section, the types of services biological parents are in need of are discussed. In a position paper on kinship foster care, Ferguson and Manning (1992: 3), suggest that:

Kinship foster care can be more effective if child welfare policies and procedures will give greater value to cultural perspective, the family's kinship structure and internal supports.

The authors point out that kinship families need a wide range of wrap-around services in order to provide a stable environment for their families.

Seligson (1991) of St. Christopher-Ottillie, a private voluntary child care agency in New York City in a paper on Approved Relative Kinship Foster Care provides an overview of the agency. St. Christopher-Ottillie which began accepting kinship cases from the Child Welfare Administration (CWA) in 1990 had 2,300 children in foster homes of which 369 (16%) were in approved kinship homes. Seventy-eight percent of the children in kinship care were Black, 60 percent were between

the age of 3-12 years, and 22 percent over 13 years. The average time spent in kinship care was 2-3 years.

The agency had similar numbers of male and female children (186 and 183 respectively). The kinship population consisted of fourteen sibling groups of four children, five of five, and sixty-eight sibling groups of two children respectively. Fifty-one percent of the kinship relatives were grandparents, and 35 percent aunts/uncles. Of the 369 children at St. Christopher-Ottillie, only 9 (2%) were discharged to their birth families.

According to Seligson (1991: 4), some of the kinship children have behavioral problems, and academic deficits, but many "want to be with their birth parents." Many birth parents have substance abuse and homelessness problems, but are involved with their children. Many of the kinship parents have health problems, such as high blood pressure, diabetes, heart disease, arthritis, and obesity; use spanking as a disciplinary method, and have had a prior history working with social service agencies.

Seligson (1991) further states that 50 percent of the families need traditional monthly services such as financial assistance and other resources, and 25 percent need both financial help and access to supportive child welfare servic-

es. However, Seligson is concerned about a generation of children growing up in foster care, the relationship and responsibilities of birth parent and child, the older kinship parents, and the small number of children (2%) discharged to their birth families.

The data did not indicate the permanency plan for the children in care, but since only 2 percent were discharged to their birth parents, it can be assumed that discharge to natural parent is not the objective of the agency, or if it is the objective, the biological parent is unable to resume caring for the child due to substance abuse or other parental problems.

REUNIFICATION

This section looks at the reunification methods used by foster care agencies to return children to their natural parents.

George (1990) looked at the movement through foster care placements of 1,196 children who entered foster care in Illinois between 1976 and 1984, and the probability that reunification declines with the length of time in substitute care. Thus, George found that one-third of the children who entered foster care return to their parents after the first placement, 13 percent return after their second placement, and

after their third placement. The
children in George's sample were placed in
placements. Black children in Cook County
mean was not provided for Black
non-Black children (54 months).

It is inferred that there is a difference in
Cook County which causes Black children to stay
are longer than non-Black children. It is inferred
that there may be more differences in placement
, hence, the longer stay in placement.

. Whether the child is placed in a relative
relative exerted the greatest influence on
reunification... The home placement of great stability
to the home of the parent... children (p. 436) (italics added).

In other words, children in kinship care stay longer
than their traditional foster care placement. (p. 109) states that "most studies find that the cost
for children in kinship care is significantly
lower than for children in foster care, and is
relative care."

5 percent return after their third placement. However, 40 percent of the children in George's sample experienced more than three placements. Black children in Cook County had a much longer median (mean was not provided) duration in foster care than did non-Black children (54 months vs 18 months) respectively.

George inferred that there is 'something' about residing in Cook County which causes Black children to remain in foster care longer than non-Black children. George also suggested that there may be more difficult cases handled in Cook County, hence, the longer stay in care. George indicates that:

... Whether the child is placed in the home of a relative exerted the greatest effect on the probability of reunification... *The home of a relative is a placement of great stability: children so placed move to the home of the parent more slowly than all other children* (p. 436) (italics added).

In other words, children in kinship care tend to stay longer in care than their traditional foster care counterparts. Testa (1997: 109) states that "most studies find that reunification rates for children in kinship foster care are typically 33 percent to 66 percent lower than the rates for children in nonrelative care."

Davis, Landsverk, Newton and Ganger (1996) analyzed data in San Diego on parental visiting of 922 children who entered foster care between 5/1990 and 2/1991, were 12 years of age or younger, and were removed from their parents' home for more than 72 hours. Of the 922 children, 66 percent (612) were reunited with their families after up to 18 months in foster care, while 34 percent (310) had other permanency planning outcomes such as adoption, guardianship or long term foster care.

According to the authors, in kinship care, when mothers had a visitation plan, reunification was much more likely to occur, and when visitation is recommended by the agency worker, visitation level is usually high (more than 75 percent). For example, 89 percent of mothers in kinship care had visitation plans, and paternal visiting plans were frequent (79 percent). Davis et al., (1996: 364) made the following statement about visitation:

Parental visiting is seen as a vehicle for maintaining and strengthening the child's ties to the biological family, and enabling the child to divert emotional and mental energy from the struggle with feelings of abandon-ment to mastery of developmental tasks.

Janchill (1992: 2) felt that kinship foster care "should ordinarily be considered a temporary arrangement, and strong efforts should be made to help reconstitute the natural family unit." Providing supportive and other service needs to kinship families especially older grandparents, and the length

of time children are spending in kinship care were other concerns of Janchill.

Halpern (1992: 3), Family Law Coordinator of Legal Services of New York City, Legal Support Unit indicates that, "foster care is foster care whether the child is placed with relatives or with a stranger." However, if a child has to be separated from his/her parents placement with a relative is less traumatic and is better for the child than placement with non-relatives.

Halpern felt that placement with a relative should lead to a speedy reunification of the child with his natural parents, but that the policies of the Child Welfare Administration are not properly utilized. Halpern further states that quicker family reunification is being negated by the agency, and agency policies have "wasted the most meaningful reunification tool - frequent high quality visitation" - of biological parent and child.

This was a common sentiment among the respondents in this study. According to one of the respondents.

The agency is not trying hard enough to reunite me with my children. They could have been more helpful in assisting me get the services I need. They could also have provided longer visitation with my children in order for us to be more like a family. The time I spend with them is too short.

Halpern also felt that the natural mother is not worked with, is not invited to mandated uniform case reviews, and is not provided with the preventive services necessary for family reunification.

One respondent in this study said:

The agency should be more helpful. Once they take your children, you are neglected. Services and programs should be provided to natural parents in order to prepare us for the return of our children.

ADOPTION

Since adoption is seen by many foster care administrators and critics as a permanency planning option for children placed with relatives, it is necessary to provide an overview of the adoption process. As stated earlier in Thornton's study, kinship foster parents indicated that they were not interested in adopting their relative children since they were already a family. However, new policies have been instituted by ACS to increase the number of adoptions in the agency.

For example, the number of finalized adoptions in ACS have doubled from 1,784 in 1992 to 3,665 in 1995 (ACS, 1995), and 3,666 in 1996 (an increase of 58 percent from 1994s total of 2,312). It is important to note that the permanency planning goal of discharge to parent has been reduced from 71 percent in 1988 to 47 percent in 1995, and discharge to

adoption has increased (over 200 percent) from 21 percent in 1988 to 44 percent in 1995 (ACS, 1995). Therefore, a discussion of adoption is extremely important to this study, since adoption as the above statistics indicate is undoubtedly a preferred permanency goal of ACS, and one of Mayor Giuliani's top priorities for 1997 and beyond.

Magruder's (1994) study of adoptions in California's public agencies showed that the number of adoptive placements more than doubled from 1,704 in FY 1981/2 to 3,647 in FY 1991/2, and 27 percent of adopted children placed in FY 1991/2 were placed with relatives. Ninety-seven (97) percent of the relative placements were with families who had served as the child's foster parents. Almost all the children were adopted by grandparents, aunts or uncles. Almost half (47 percent) of the children placed with relatives were placed with a single mother. Two percent were placed with a single father, and 52 percent were placed with two parents. The median age of the adopting parent was 39 years. However, 48 percent of the adopting parents earned less than \$20,000. Therefore, it appears that based on the adopting parents low income, it is a financial incentive for them to adopt their related children.

Sifferman (1993) explains the adoption process to persons interested in adopting. The author offers a detailed, concise, easy to read methodology of the adoption process, and provides pertinent information on the history of adoption, types of adoption, an overview of the adoption system, and the legal procedures for adoption. According to Sifferman, "every parent possesses certain rights and responsibilities to his or her child" (p. 1).

About grandparents adopting Sifferman states:

Grandparents may adopt their grandchild if the birth parents agree, if the parents are dead, or if the parents have had their parental rights terminated because they are unfit or have abandoned the child. Often, grandparents are not required to be certified or approved to adopt their own grandchildren. Therefore, the adoption process goes much more quickly and easily. Nevertheless an adoption petition and hearing is still required (p. 57).

Gallagher (1991), felt that the new innovative foster care program - kinship foster care is turning into a supplementary welfare program, and resources meant for troubled families are being squandered. Gallagher points out the major differences in payment rates between Aid to Families with Dependent Children (AFDC) and kinship foster care. Families receive substantially more money as a kinship foster parent than as an AFDC recipient (\$356 vs \$112 per month respectively), and this disparity encourages relatives to view kinship care as an income supplement program and as a means to improving their living standards. Gallagher's implications are

that kinship parents receive substantially more money from the kinship program than AFDC, and money appears to be the motive for their involvement in the program. As the 'free' money provides them with a higher standard of living.

Gallagher indicates that children in kinship care are spending a longer time in care than their traditional foster care counterparts, and this indefinite length of time in care ultimately drives up the costs and divert resources from children who need them the most. The author recommends that the child welfare agency should make it a policy to encourage kinship parents to adopt their blood related kinship children, as adoption would resolve many of the problems raised by the kinship program. By adopting, the city would save money, the administrative burden of monitoring thousands of cases would be eliminated, and educational and medical decisions would be handled by the family.

In a comprehensive study of 524 children in kinship foster care in Baltimore, Maryland, Dubowitz, Feigelman and Zuravin (1993), found that 90 percent of the children in care were African American, and 75 percent were under eleven years of age. The median length of time in care was two years. Neglect was the most common reason for placement (75%), followed by physical abuse (20%), and abandonment (14%).

Forty-seven percent of the children were placed with a grandmother, and 29 percent with an aunt. Eighty percent of the kinship parents were between the ages of 20-59 years, and 20 percent were over 59 years. The median age of the kinship parent was 48 years. Forty-three percent of the caregivers were employed full or part-time. Fifty-three percent of the children were in households with a single adult. Households had a median of three children.

There were differences between the caseworkers and caregivers in the long-term plan for the child. Thirty-five percent of the caseworkers, and 20 percent of the caregivers thought return to parent was the long-term plan for the child. Fifty-eight percent of the caseworkers, and 40 percent of the caregivers felt that the child should stay with relatives. Only five percent of the caregivers, and one percent of the caseworkers thought of adoption as a long-term goal for the child.

Seventy-six percent of the children moved only once from their parents home to a kinship parent's home, and 72 percent had not moved in the past year. Twenty-two percent moved only once. This may suggest that kinship foster care in Maryland is a stable living arrangement for children with few placement disruptions. This could be seen as a problem with kinship foster care, as Dubowitz et al. (1993) does not

provide any data on the contacts made between biological parent, caregiver and children. It appears that based on the findings of this study, since kinship foster care in Maryland is viewed as a stable living arrangement for children, there is no need to work with the natural parents in order to solve their problems and reunite them with their children.

Traditional and kinship foster care were created to be temporary short-term placements. However, the previously cited studies indicate that, there is too much concentration nationally on seeking permanent and long-term care for children, while at the same time neglecting and ignoring the natural parent who in most cases - need agency assistance, support and services in order to resolve her/his problems and be reunited with her/his children.

GUARDIANSHIP

Another option considered by the child welfare agency in New York City regarding permanency planning for children in kinship foster care is guardianship. Kinship guardianship establishes a legal bond between guardian and child, but does not have the finality of adoption. However, even though it is being considered, guardianship is not one of the permanency planning goals presently used by ACS. The three primary permanency planning goals used are discharge to parent,

discharge to independent living, and discharge to adoption (ACS, 1995).

However, guardianship is presently being evaluated by ACS.

By March 1, 1997, ACS will complete its evaluation of the option of guardianship for kinship care, including the necessity for any statutory authority to make such a change (ACS, 1996: 124).

Subsidized guardianship is also under consideration by ACS as a permanency planning option.

Subsidized guardianship provides an alternative to adoption by allowing the kinship foster parent to be designated as the legal guardian of the child, without legally terminating the rights of the birth parent (ACS, 1996: 124).

The Report of the Mayor's Commission for the Foster Care of Children (RMC FCC) (1993), is the result of 22 child welfare experts, professional practitioners, guest speakers, service providers and kinship caretakers examining and giving personal accounts of the many issues relating to the provision of foster care services to children and their families in New York City.

The Commission examined the kinship foster care program and proposed recommendations for changing the current policies and practices in order to improve foster care in New York City. Among the recommendations offered by the Commission were:

Create a new legal category called 'kinship guardianship.' To provide a subsidized permanency option for those kin who wish to care for their families' children on a long-term basis but do not wish to adopt (RMCFCC, 1993: 47).

In those limited situations where it is clearly in the best interest of the child, authorize the use of 'extended relative care.' This will require the State Department of Social Services to issue regulations creating a new permanency planning goal to cover these situations, and by enacting legislation that would set specific guidelines that family court judges must follow before discharging a child from kinship foster care (p. 49).

The Human Resources Administration should provide sufficient information to prospective kinship caretakers concerning the legal implications of foster care or alternative arrangements (p. 50).

Staff training must be enhanced to prepare caseworkers working with kinship foster families, as well as staff performing home studies, in the areas of family dynamics, family intervention and cultural variation (p. 51).

Increase the availability and array of services for kinship foster parents (p. 52).

RMCFCC further states (1993: 58):

Kinship guardianship may be granted pursuant to a petition brought in the Family Court by the authorized agency having care and custody of the child, or by the prospective kinship guardian or the child's law guardian at the court's direction. Notice of the proceedings must be provided to the birth parent(s) in accordance with applicable statutory requirements. The court may revoke or modify an order of kinship guardianship upon the application of a birth parent or another interested party, including an authorized agency, on the grounds that revocation or modification is in the child's best interests.

According to kinship guardian proposals, kinship guardians would receive similar payments as foster parents, or would receive payments similar to AFDC grants. However, for those requesting voluntary guardianship, based on their income, no payment would be paid to them.

In a concept paper on kinship foster homes and the potential role of kinship guardianship, the Council of Family and Child Caring Agencies (COFCCA) (1991), offered recommendations which may strengthen the kinship level of care. COFCCA, in recognizing the traditional, cultural, familial and ethnic values of the African-American, and Latino-American families offered guardianship as a solution to the permanency planning goal of returning a child to his/her parent or relative. COFCCA suggests that "kinship guardianship would elevate the status of a kinship foster parent to a legal guardian" (p. 4), and custody of the child would be with the kinship guardian after an 18 months assessment period.

Daley and Hart (1992) suggest that in order to preserve the family unit, child welfare agencies should focus on providing families with preventive and supportive services, and child welfare agencies should address the major causal factors such as drug abuse which are influential in the children coming into foster care. The authors further state:

If the social services district relinquishes custody of guardianship, the costs of care of the child and administration of the case are no longer eligible for Federal Title IV-E funds (p. 2).

Therefore, the financial burden will be on the state and city.

Neal (1992) felt that placing children with relatives not only preserves family continuity, but lessens the trauma and stigma attached to parental separation. Neal viewed guardianship as an alternative to kinship foster care, and suggested that monthly subsidy payments be paid to relatives but "without the on-going supervision involved under foster care status" (p. 3).

This suggestion has been criticized by some, as it is felt that if relatives (foster parents) are provided with subsidy payments (similar to kinship payments), then ongoing supervision and monitoring will have to be conducted by the foster care agency, since the child is still in foster care. Some states are now considering providing families with guardianship subsidies for caring for their related children, and feel that waivers should be granted to them (states) for the permanency planning goal of kinship guardianship.

In her study on adoption, Iglehart (1994) compared 352 (36%) adolescents in kinship foster care to 638 (64%) adolescents in traditional foster care. In addition, 160 adolescents with legal guardians were studied. Forty-three percent of the

adolescents in the study were African American, 29 percent were White, and 28 percent were Hispanic. Sixty-two percent were female. Sixty-three percent were placed in foster care when they were 13 years of age or older. Forty-five percent were in their first placement, 24 percent were in their second placement, and 31 percent had experienced 3 or more placements.

Of those in placement, 44 percent of African Americans were with kin, compared to 32 percent of Whites, and 28 percent of Hispanics. Thirty-nine percent of males and 34 percent of females were in kinship placements. Forty-three percent of the youths in kinship care were in placement due to neglect compared to 29 percent for those in traditional foster care. Nineteen percent were in kinship placement due to caretaker absence compared to 21 percent for those in traditional care. Sex abuse and physical abuse were other common reasons for placement in both foster care arrangements.

Iglehart (1994) found that kinship foster care was a more stable living arrangement than traditional foster care. For example, 49 percent of adolescents in kinship care had only one placement compared to 37 percent of adolescents in non-relative foster care. A similar finding of kinship foster care stability was found by Dubowitz and Sawyer, 1994; Dubowitz et al. (1993). Sixty-three percent of the kinship

group and 66 percent of the non-relative group were in placement for two years or less. However, 12 percent of youths from both groups were in care for five or more years. A very high percentage of both groups were performing below grade level - thirty-six (36) percent of kinship youths, and 42 percent of foster family youths. Thirty-two percent of relative youths had behavioral problems in school, compared to 37 percent of the non-relative group.

The assumption in the above finding could be that foster children are not performing well in school, and are exhibiting behavioral problems because of the absence of their natural parents, who most likely would spend more quality time with them. The school performance could also be attributed to the fact that many foster children are usually one or two grades behind in school, which is due to their placement history and their placement movements (from home to home) in different boroughs. According to Dubowitz and Sawyer (1994), children in kinship care manifest more school behavior problems than their classroom peers. They score poorly in work study habits, have poor attention and concentration skills, exhibit aggressive, acting out behavior, and demand attention.

Ten percent of youths in relative care in Iglehart's study were reported to have a serious mental health problem, compared to 18 percent of youths in non-relative care. Of the 160 adolescents placed with guardians, 87 percent were with non-relative guardians. Eighty-one percent were in the same placement for two or more years, and 50 percent were in the same placement for five or more years. For 60 percent of the adolescents, it was their first and only placement.

Based on the findings of Iglehart's study, adolescents in placement with relatives are functioning slightly better than those in placement with non-relatives, however, both groups appear to be having difficulties in foster care. Although it was unclear why only 13 percent of adolescents were with relative guardians, Iglehart recommends that more attention be directed toward legal guardianship as a permanency planning option for children in kinship care.

The findings from Iglehart's study show that the majority of children (87 percent) were placed with non-related guardians, and 81 percent were in the same placement for 2 or more years. Thus, based on the above findings, children placed with non-related guardians experienced stable living arrangements, and consequently, guardianship was a successful placement option for these children.

Many child welfare experts and professionals would like ACS to create a new category called kinship guardianship, making the kinship foster parent, the legal guardian of the child. However, even though guardianship is being considered as a permanency planning option by ACS, it does not appear (at least at this time) that ACS is going to move from its standardized permanency planning goals.

Having reviewed the various categories associated with kinship foster care, it is necessary to look at the concepts of kinship, and the new initiative called kinship foster care.

KINSHIP

In this section, attempts are made to identify the similarities and differences of kinship systems utilized throughout the world. Although the concept of kinship has been studied more by anthropologists, there are debates over the function of kinship as it relates to the social, economic, familial, and historical aspects of family life. Kinship relations are directly related to the genealogical relationship existent between family members, however, "kinship remains a central problem in the theory of anthropology" (Schusky, 1983: 4).

Kinship relationships exist throughout the world. Whether it is diffuse, close knit, in response to familial problems, or voluntary, kinship relationships form a network of relations between family members. For example, an important kinship system used in Latin America is godparenthood or *compadrazgo*. In this arrangement children are placed with their godparents when their natural parents cannot care or provide the basic essentials to them.

Los padrinos or godparents according to Vidal (1988: 453):

... Would appear to offer a valuable natural support system that might provide a resource for permanency planning. Within the Puerto Rican culture, padrinos (godparents) assume responsibilities with respect to their godchildren, including the responsibility to provide a home for the godchild in the event of the inability of the parents to provide care.

Child-shifting or fosterage as is practiced in Antigua, West Indies is another form of living arrangement where children live in households without their biological parents living there (Gordon, 1987). In a study of 49 households in Antigua, Gordon found that 63 percent of the children in fosterage were five years of age or younger. This suggests that children tend to be shifted at an earlier age for reasons ranging from migration, pregnancy or death of natural parent. However, the vast majority of child-shifting occurs among close kin such as sister's kin, brother, daughter's kin, or son's kin.

In the Antiguan setting not only does child-shifting occur fairly frequently as a strategy for providing surrogate caretakers, but also the normative patterns of household formation allow for substantial elasticity in household composition (Gordon, 1987: 443).

Harris (1990) traced the development of the concept of kinship in social anthropology and provided information on the family, kinship, and economic life. Harris, a British sociologist felt that "kinship is a term which refers to a social form, and specifies a set of meanings through which the social actions of individuals are to be understood" (p. 4).

Harris focused on the significance of kinship in modern societies, particularly in Britain. In contrasting the family and kinship, Harris felt that a family may be a group of people who together form a household. It is important to point out here that Smith (1988: 8) defined a family in the West Indies as "two or more persons living together in the same household and *bound together by ties of marriage or kinship* (italics added). Harris states:

Kinship relations appear to be unique in that they are personal, diffuse, affective, ascribed and particularistic. They are distinctive, in that unlike friendship relations they are ascribed and not chosen. Unlike relationships between members of territorial groups which are also diffuse, ascribed and particularistic, they are personal and affective (p. 58).

For Harris, kinship relationships form a network. This kin network, once recognized by others can be used to communicate information to others, and can form the basis for strengthening relationships between kin.

Schusky (1983: 7) points out:

The nuclear family consisting of parents and children is the basis for kinship in nearly all societies, but the organization and behavior of members may vary considerably from what Americans or Europeans expect.

The nuclear family is created by marriage, and parents are related to their children through a consanguineal relationship or "biological ties of kinship."

Smith (1988), an anthropologist, conducted multiple interviews with 51 persons from different socioeconomic classes in Jamaica and Guyana, and used the findings of genealogical studies to demonstrate the strength of West Indian kinship and family life. More than half (59%) of the principal informants were married, 14 percent were in common law living arrangements. Sixty-one percent of the informants were female. The sampling of 51 genealogies were too small to be representative of either country under study, but were carefully selected by Smith to reveal the informants interpretations of kinship and class status in Jamaica and Guyana. Based on Smith's findings, it appears that the informants share similar ideas of kinship, marriage, and family.

According to Smith (1988: 28/29):

Kinship is a natural relationship of common blood ..., but kinship also implies a specific 'code of conduct' which says that you should support and, if possible, love your relatives regardless of circumstances.

Smith (1988: 36) further states that:

Given the complexity of the proliferating ties resulting from multiple unions and the frequent practice of moving children from one household to another, it is not surprising that close emotional ties develop between children and the person raising them.

Therefore, it is a very common practice in the Caribbean (as it is in the United States, New York State and City) to be reared by someone (such as grandparent, aunt, or older sister) other than one's natural parents.

Smith (1988: 37) points out that "almost all kinship terms used by West Indians are English; therefore the kinship system appears to be bilateral in form." It is not surprising that Caribbean kinship is similar to English kinship, and other kinship systems in the world. Europeans who settled in the Caribbean, exploited the slaves and used them to accumulate huge fortunes for themselves. They also raped, had free access to and numerous children by African women. Smith emphasizes that most Europeans in the West Indies "found it necessary to provide themselves with a 'housekeeper or mistress' (p. 86), "and the cultural assumption about marriage was - whites marry only whites, and marriage should be between status equals" (p. 89).

Kinship systems and kinship relationships are existent throughout the world. Therefore, by reviewing the various forms and similarities of kinship systems existent in Latin America, the West Indies, Britain, America, and Europe, there is a better understanding of how kinship systems are operationalized throughout the world. Thus, one can get a better understanding of what kinship foster care (as is practiced in New York City and 30 other states) might be. The differences with kinship systems and kinship foster care is that, kinship is a voluntary process between family members, while in kinship care, children are taken away from their natural parents and placed with relatives who receive a payment for their services.

KINSHIP FOSTER CARE

This section discusses the kinship relationship, and the families involved in such relationships. A kinship relationship is based on a normative familial bond existing between family members. This relationship can be conducted on a voluntary or other emergent situation and involves family members such as grandparents, aunts, uncles, sisters, brothers, and cousins.

Kinship reestablishes an interpersonal network of relations between *known members of families* (italics added) who in part are in continued contact with each other without outside agencies such as social service agencies involvement and interference. However, when outside agencies are involved, through monitoring and regulating kinship foster parents, ongoing problems arise.

Many scholars tend to view kinship foster care as being necessary for preserving the African American family, especially during times of separation and loss. The following articles while supporting this theme provide a historical look at the kinship phenomenon.

Scannapieco and Jackson (1996) discussed the increasing number of children of color entering the foster care system throughout the United States, and highlighted the resilience of the African American community in responding to the new foster care phenomenon - kinship care - for preserving the African American family. The authors identified the informal and formal techniques that African American families use to keep the family together, and traced African American families during periods of separation and loss, in order to show the strengths, bonds, and resilience of African American families.

According to the authors, the extended family network played a very important role in the family unit in West Africa, but became less important during African people's uprootment from Africa, and the slavery period they experienced in the United States. During slavery, many families were separated, and new problems such as isolation and despair arose. The role of the extended family also changed.

Scannapieco and Jackson felt that kinship care is good for African American families since it maintains the stability in the family. Therefore, child welfare agencies "must recognize the resilient nature of the African American family, and work with the 'kinship triad,' made up of the children, the biological parents, and the caregiver relatives," and direct a system of services to this 'triad' "to ensure a permanent living arrangement for the children" (1996: 194).

Everett (1995) reviewed the existing literature on kinship foster care, and discussed the dramatic increases in the foster care population. Everett attributed the growth in kinship foster care to the rise in child abuse and neglect reports, and the decline in the rate of discharge from foster care. This sudden upsurge in children needing homes generated the placing of children with relatives in kinship care. However, despite its increasing usage, "kinship care has become a controversial phenomenon," because of child welfare

agencies "inadequate efforts to rehabilitate the biological family" (1995: 240).

Everett stated that there are differences in the monitoring and supervision procedures of kinship placements "because they are perceived to be relatively stable" (p. 245). Consequently, less contact is made with kinship parents by agency caseworkers. Also, few children are reunited with their birth parents, and reunification with birth parents are usually lower and slower than for children in non-kinship placement.

The original intent of the kinship program was to keep families together by placing children with relatives.

Kinship foster care was designed with the good intention of keeping families together by placing children of abusive or neglectful parents with close relatives such as grandparents or adult siblings. It (kinship foster care) has been heartily embraced by HRA and most child advocate groups as a more humane alternative to traditional foster care (Grinker and Smith, 1993: 74).

The kinship foster home is a foster care arrangement which consists of adult extended relatives who have been licensed to board children. These adult extended relatives are related to the placed child(ren) through blood ties and/or marriage (Thornton, 1987: 2).

According to the Child Welfare League of America (1992: 1):

Kinship care is a form of parenting. It is the full time nurturing and protection of children by relatives, members of their tribes or clans, godparents, stepparents or whoever a child, child's parents and family members ascribe a family relationship.

The kinship foster home is also referred to as approved relative home. Wulczyn and George (1992: 286) stipulate that:

Approved relative placements refer to children who are removed from the home of their biological parent(s) and placed with relatives. However, ... unlike certified homes, relatives homes may be approved only for the care of designated related children (McNally, 1992: 1).

In his article, Gleeson (1995) drew concerns about the relationship between child welfare agencies and the kinship networks consisting of children, birth parents, and kinship foster parents. According to Gleeson (1995: 184):

Kinship care is the fastest growing type of substitute care funded by child welfare agencies... and most states now require that homes of relatives be the first substitute care option explored for children who must be removed from their parents home...

Gleeson felt that schools of social work should provide the intellectual leadership needed to deal with and meet the challenge of kinship foster care. Therefore, schools of social work should be able to provide answers to many of the unanswered questions pertaining to kinship care. And, kinship care should be a good area of study in the social work curriculum, especially since this may be an area that neither social work educators nor students have not practiced in.

Gleeson (like Gallagher, 1991; Wulczyn and George, 1992, Grinker and Smith, 1993, Gleeson and Craig, 1994, and Everett, 1995) raised questions about the AFDC grant which can be substantially smaller than the kinship foster care payment, and stated that the financial differences can be a barrier to the child being reunited with his/her parent.

Former Deputy Commissioner, Robert L. Little (CWA, 1994: 10/11) in outlining the vision for the state of child welfare in New York City indicates:

We believe that kinship care will continue to be the care form of choice for those committed to keeping children connected to their families, and to the principles associated with strengthening families.

Since the future plans of ACS (and many other states) are to use kinship foster care as a primary foster care placement arrangement, it is very important to know not only about other kinship foster care issues, but about the experiences of biological parents whose children are removed from home and placed with relatives. Since there are an abundant body of knowledge about the kinship foster parent and kinship foster children, anything learned about biological parents would fill the void pertaining to their experiences in the kinship foster care program.

For example, how are biological parents coping with the loss and separation of their children? Are they provided with the necessary services in order to resolve their 'problems,' and facilitate a quick return of their children? Are they receiving a fair amount of casework contacts? Are they provided with reunification services? These and many other questions will be answered in the following chapters.

CHAPTER IV

RESEARCH DESIGN AND METHODOLOGY

Introduction

Respondents for the study were selected from a number of biological parents who are known to The Public Advocate For The City Of New York's C-PLAN project. The Public Advocate is Mark Green. The Public Advocate's Office assists the public in obtaining information about problems they are experiencing with City operated agencies. They also review complaints from the public relating to services and programs, and make proposals to improve the City's response to such complaints.

C-PLAN (Child Planning and Advocacy Now), is an advocacy group consisting of biological parents, foster parents, foster children, and foster care providers.

C-PLAN was launched in May 1995 by the Office of Public Advocate (formerly President of the Council), in conjunction with a not-for-profit corporation. C-PLAN is designed to advocate and plan for the well-being of children and families involved in New York City's child welfare system, and promotes three goals: advocacy, documentation, and systemic reform (Green, 1996).

Since its inception, many complaints have been reported to C-PLAN about New York City's child welfare agencies. These complaints involve ACS, the private, voluntary agencies, the Family Court, New York State Department of Social Services (NYSDSS), and other social service providers.

To get a better picture of complaints made to C-PLAN, the following is a breakdown of the types of complaints C-PLAN received from clients in 1995 (Green, 1995: 1-6):

- I. Service Problems (58 percent). Including reports made against caseworkers (48 percent), and parental visitation reports (16 percent).
- II. Placement Problems (50 percent). Including reports pertaining to children's removal (22 percent), and reports pertaining to discharge of children from agency (17 percent).
- III. Payment Problems (31 percent). Including reports from foster parents who had not received their payments (52 percent), and reports for late payment from CWA to voluntary agencies (18 percent).
- IV. Legal Problems (13 percent). Including reports from biological parents concerning termination of parental rights (58 percent), and from foster parents who were dissatisfied with a judge's decision (42 percent).

The Public Advocate's office was chosen as a location at which to conduct this study mainly because of its responsibility and commitment to assist the public in obtaining information about the child welfare system. Having worked closely with a former President of the Council's child welfare staff, it was public knowledge that many biological parents

were involved with this office, and were complaining about and advocating for changes in the child welfare agency. The biological parents were therefore, believed to be excellent potential candidates for this study, and would in most likelihood, be able to provide rich, valuable information that would be crucial for examining the kinship foster care program from their perspective.

The biological parents known to the Public Advocate's C-PLAN project were referred by many of New York City's child welfare agencies including the family court, NYSDSS, and the private, voluntary agencies. Many were also referred to C-PLAN by their borough presidents, assembly-persons, and city counselors; because they had a complaint to make about a city agency, and the Public Advocate's office is where such complaints are made.

Requests to conduct the study were first sent to HRA, and several voluntary agencies. After submitting all relevant documentation and waiting for two years, CWA (on behalf of HRA), rejected the request to conduct the study stating that they are already engaged with the United Way to study kinship and non-kinship services provided by the child welfare system. However, permission was granted by NYSDSS. Four voluntary agencies expressed interest in the study, but indicated that because of severe budget cuts and staff reductions, they could

not help at this time.

Data Collection

Data for the study were collected from the following sources:

1. Semi-structured interviews were conducted with thirty (30) biological parents from the Public Advocate's C-PLAN project.
2. Semi-structured taped interviews were conducted with four (4) biological parents from the Public Advocate's C-PLAN project.
3. Findings from a CWA survey conducted in 1991 of the kinship foster family in New York City are used to present a profile of the kinship foster parent, the biological parent, and the kinship foster child.

A research proposal was submitted to Jane Golden, C-PLAN's Project Director, who provided approval to conduct the study (see Appendix G). Jane Golden explained the dissertation study to staff members, who explained the study to the biological parents known to C-PLAN. Parents who had children placed in foster care with relatives were identified and asked to participate in the study. C-PLAN's staff provided the names and telephone numbers of all candidates who volunteered to

participate in the study. Phone contact and appointments were made to interview respondents at their homes. All interviews were conducted in the respondents homes, and their responses to the questions posed were documented in the questionnaire.

Biological parents were told that they had the right not to take part in the study if they so desired, and that no negative consequences would result for them if they did not take part. Parents were also told that if they agreed to participate in the study, they could withdraw at anytime without any consequences. Parents who agreed to participate in the study were asked to read and sign the consent forms which describe the study, safeguard their rights, and protect their confidentiality. The consent forms were co-signed and all questions about the procedures were answered.

The data obtained from the biological parents is considered representative of over 200 natural parents who regularly attend meetings at C-PLAN. These parents though, are expected to be more knowledgeable about the City run child welfare agencies, because they attend meetings regularly (such as C-PLAN, ACS Town Hall meetings, and the Child Welfare Organizing Project meetings). They are also active in developing a common agenda in reference to ACS, share their experiences of the system, and are supportive of each other. Therefore the profile of the natural parent in this study may

be different to other natural parents in the kinship program in New York City. However, some generalizations will be made between the population under study, and the entire population of natural parents who are involved with the kinship foster care program in New York City.

Instrument Design

An interview guide was constructed for the purpose of describing the experiences of biological parents who are involved with the kinship foster care program. The instrument consisted of the following:

1. Biological Parents Interview Guide (See Appendix B).

The Biological Parents Interview Guide was designed to help provide answers and add a new empirical component to what is known about the intricacies of the kinship foster care system in New York City. In doing so, most of the prior published and unpublished material on kinship care were reviewed, and the most salient questions and vexing concerns were included, to create an interview guide that would be instrumental, in resolving the many unanswered questions of kinship foster care. Accordingly, Thornton's (1987) study on kinship foster care was carefully reviewed and was used as a guide to create new measurements for analyzing the experiences

of biological parents in kinship foster care.

The present study is different from Thornton's however, in that it incorporates many of the relevant concerns and issues that are troubling child welfare professionals about the experiences of natural parents in the kinship foster care program. The concerns, issues, and experiences of biological parents, the personal feelings and responsibilities of biological parents, obstacles to reunification, policy questions, organizational practices, and other programmatic questions will be addressed.

This study highlights the significant issues, concerns, and problems experienced by biological parents in kinship foster care. It seeks to make a significant contribution to the literature on kinship foster care, and suggests solutions to problems associated with a program initiative that is receiving worldwide attention.

The interview guide contains open ended questions. Some of the questions are based on past experiences working in various capacities (from caseworker to supervisor to Director of Social Services) in departments of the Child Welfare Administration from 1985 to 1991. Some questions are based on the input and concerns of many CWA/ACS workers who provided a list of questions they felt were very critical to improving

the quality of services delivered to natural parents and their children.

The biological parents interview guide was designed to find out the perceptions and concerns about their children's placement with relatives; their perceived reasons for the removal of their children from home; and identifying the services they feel they need in order to facilitate the return of their children. Other issues addressed were, how do biological parents view the agency's efforts to reunite them with their children, and what would they like the permanency planning goal to be for their children? A demographic profile of the biological parents interviewed in this study is presented for the purpose of understanding what the characteristics of the 'typical or atypical' natural parents are.

The average length of time for each interview was one hour and a half, as respondents had many questions pertaining to their individual cases, and about agency policies and procedures. All respondents were asked the same questions from a preprinted questionnaire.

LIMITATIONS OF THE STUDY

As is expected in any original research project, there were a number of limitations in the design and execution of the study. The interview sample was comprised mainly of biological parents whose children are presently placed in kinship foster care, who are known to C-Plan, and who attend C-Plan advocacy meetings. Biological parents in the study generally felt that participating in the study was an opportunity for them to honestly express their feelings about their experiences with the kinship foster care program.

As a result, it is difficult to determine to what extent the findings can be generalized to other biological parents in the kinship foster care program. For instance, it is firmly believed that biological parents from any ACS/DAFCS office, or any private agency would have been too scared to express their true feelings to the questions posed. Since, there is a feeling among persons (clients) involved with the agency to refrain from speaking to researchers, since it may affect their services, and there is always the fear of reprisals from the agency (Weissman, 1988). Thus, many view this "intimidatory tactics" as the major reason why there are few studies in the literature on the experiences of biological parents in foster care.

Biological parents in the study were referred to C-PLAN by City and State agencies and/or politicians because they had a problem with a city or state agency, and wanted to make a complaint against that agency. Making a complaint, for example against ACS does not necessarily mean, that a client had a negative experience with ACS. The client could be seeking a quicker solution or assistance to his/her problem. Therefore, it is unfair to assume that all parents known to C-PLAN have negative experiences and are consequently dissatisfied with ACS. On the contrary. Some may have had positive experiences because of the results obtained from the complaint made to C-PLAN. Since it could be assumed that natural parents probably had more negative than positive experiences (or vice versa) with the child welfare agency, from a research standpoint, this unknown level of satisfaction/dissatisfaction is identified as a limitation of the study.

ADVANTAGES OF THE STUDY

The major advantage of this study was that respondents felt that they were fairly knowledgeable about the foster care system, and knew a great deal about their individual case situation. However, there was an obvious lack of knowledge among them, of the child welfare agency (ACS), particularly pertaining to agency policies and procedures (see p. 116 for research findings on this issue).

Parents in the study indicated that they were waiting for an opportunity to express their concerns about ACS, and seized the opportunity to respond to the questions posed. Consequently, many of them felt that it was advantageous for them to be able to participate in this study, and therefore, let it be known what they felt about the kinship program and the child welfare agency in New York City.

Respondents had a lot to say about their experiences with the foster care agency, and felt that this was an opportunity to let their voices (and experiences) be heard. Thus, the responses to the questions are rich, revealing, and critical. Respondents were interviewed in their homes, and were consequently, comfortable and in familiar surroundings. As a result, they had a lot of information to share.

The researcher, a former employee of the agency was in all likelihood, a person qualified to conduct this study, because of past experiences and ongoing involvement with the agency. Therefore, the researcher's experiences with the agency could be interpreted as a positive advantage to the study. There is absolutely nothing exceptional in a former employee writing about a former employer. As a matter of fact, it is usually more advantageous for the study and the readers, because the employee may not be inhibited by intimidatory tactics and bureaucratic barriers, and may be able to address

the real issues plaguing the agency. Therefore, this researcher could be viewed as a positive and objective person trying to enlighten readers about a still unknown phenomenon.

Another advantage for undertaking this study was that the researcher had a great deal of knowledge from working with both the traditional and relative foster care populations in the agency under study. Consequently, the researcher was knowledgeable about the philosophical, policy and political problems of the child welfare agency (Grant, 1996). Many of the variables used in the methodology and the study findings though absolutely relevant to this study, may be innovative and ground breaking for the literature on kinship care, and should make for interesting reading by researchers of kinship foster care. Therefore, the researcher's knowledge and experience has greatly helped in identifying the many critical variables associated with kinship foster care.

CHAPTER V

FINDINGS AND CONCLUSIONS

Introduction

In this chapter a summary of the study conducted by CWA in 1991 is presented. Characteristics of the kinship foster child, and the kinship foster parent are discussed. Of this profile of the kinship foster family to this study because comparisons are made to the study's findings and CWA's previous study's findings and CWA's previous study's implications derived from such studies in identifying recommendations for the future.

Findings from CWA study

In September 1991, a survey of personnel of HRA/CWA/DAC and other contracted by CWA, for the purpose of the kinship foster family, the kinship cases in CWA and the total of 6,372 kinship foster homes, 11,648 children residing in kinship foster the profile. This total represents the total kinship foster cases in CWA.

CHAPTER V

FINDINGS FROM CWA SURVEY

Introduction

In this chapter a summary of the findings of a survey conducted by CWA in 1991 is presented. A profile and characteristics of the kinship foster child, the biological parent, and the kinship foster parent are also presented. The findings of this profile of the kinship family is extremely important to this study because comparisons can be made with this study's findings and CWA's. Relevant issues and practice implications derived from both studies were instrumental in identifying recommendations for kinship foster care now and in the future.

Findings from CWA study

In September 1991, survey forms were submitted to personnel of HRA/CWA/DAFCS and the voluntary agencies (VA) contracted by CWA, for the purpose of developing a profile of the kinship foster family. The survey consisted of active kinship cases in CWA and the VA through September 1991. A total of 6,372 kinship foster boarding homes accounting for 11,648 children residing in kinship foster care were used for the profile. This total represents more than one-half of the total kinship foster care population of 21,734 children

reported to be in care in September 1991 (NYCHRA, 1992; NYCHRA, 1993; RMC FCC, 1993).

Kinship Foster Children Characteristics

Seventy percent of the children in CWA's study were Black, 25 percent Latino. Fifty-one percent were females. Forty-two percent spent up to 2 years in kinship care, 45 percent spent from 2-3 years, and 13 percent spent from 4 years and over in kinship foster care. The totals for children in traditional foster care were 34%, 49%, and 17% respectively. Fifty-four percent of the children were six years old or younger, 43 percent were between 2-5 years of age, and 35 percent were between 7-13 years. According to the above (CWA, 1991) data, children in traditional foster care are spending a slightly longer time in care than their kinship counterparts (except for the first category), however, 15 percent of both groups are spending 4 years and more in foster care in New York City.

The primary reason for placement of children in kinship foster care was parental substance abuse (77%), of which drug abuse accounted for 74%. Neglect accounted for 14 percent of the placements. Physical and sexual abuse accounted for only 5 percent of the placements. Discharge to parent (75%) was the primary permanency planning goal for children in kinship care,

with 18 percent having a discharge goal of adoption.

The contradiction of the CWA study is that the permanency planning goal of discharge to parent, for 75 percent of kinship children cannot be implemented because 41 percent of the natural parents whereabouts are unknown. If the natural parent's residence is unknown, how will the permanency planning goal of discharge to parent be implemented? Will the ACS worker exhaust every possible measure to locate the natural parent, provide him/her with reunification and preventive services in order to reunite the child with the parent? The CWA study does not reflect that.

Biological Parents Characteristics

According to CWA's study findings of agency workers' case records, 39 percent of the biological parents never visit their children in kinship care. Thirty-two percent visit sporadically, and 29 percent visit either weekly or monthly. Fifty percent of the biological parents receive resources from income maintenance, 20 percent have no income, and 12 percent were employed either full or part time. Ninety-one percent were between the ages of 21-40 years, with 52 percent between 21-30 years of age. This suggests that the natural parents of kinship foster children are relatively young, unemployed, and have the time to attend and benefit from rehabilitation

services in order to solve their drug and alcohol problems and eventually take care of and properly nurture their children.

An important finding in CWA's study indicates that 41 percent of the biological parents whereabouts are unknown. This could suggest that agency workers are not exhausting all the possibilities of making and keeping in contact with natural parents. This is an old issue in foster care. Some critics contend that absent or unknown whereabouts of parents (as stated in agency case records) are deliberately stated by agency workers, so as to terminate parental rights (for not visiting or for abandoning their children). Workers subsequently will change the permanency planning goal from discharge to parent to discharge to adoption. This is a very important policy issue that needs to be addressed in future research projects.

Kinship Foster Parents Characteristics

Forty-eight percent of kinship foster parents in CWA's study were over 51 years of age, 26 percent were married, and 74 percent were either single, separated, widowed, or divorced. The average kinship family consisted of 2 adults, 2 kinship children, and 1 non-kinship child. The family composition consisted of kinship foster children (40%), non-kinship children (24%), and adults (36%). Sixty-three percent of

kinship parents were grandparents, of which 96 percent were grandmothers. Thirty-two percent were aunts/uncles, of which 93 percent were aunts.

Sixty-eight percent of kinship foster parents reached high school level of education with half graduating, 15 percent attended college. Eighty-one percent resided in rental apartments, 72 percent resided in buildings of multiple dwellings. Seventy-four percent had yearly income of under \$20,000, 47 percent had yearly income of under \$10,000. Thirty-four percent of kinship foster mothers and 62 percent of kinship foster fathers were employed full time. Thirty-one percent of kinship foster mothers were receiving AFDC.

These findings indicate that kinship foster parents are older, unemployed, on some type of government assistance, are not married, are predominantly grandmothers and aunts, and have limited resources. Therefore, the board rates received for caring for their blood relative(s) can significantly improve their socio-economic conditions and add to their limited financial resources.

This finding questions the overall intent of the kinship program. Is kinship foster care designed to decrease (lower) one family member's (biological parent's) standard of living while increasing another's (grandmother's)? If the

grandmother is helped financially by placing relative children with her, then, how is the natural parent faring? What efforts are being made by ACS to assist parents, so that children can be reunited with them? Is ACS creating poverty lifestyles and hopelessness of natural parents by breaking up their families and causing their PA budgets to be lowered when their children are removed from their homes? Once this happens (the removal), the biological parent's socio-economic status changes (is lowered) because their children are no longer in the home. Attempt will be made to answer these questions in the following chapters.

The profile of CWA's kinship foster family (children, biological parents, and foster parents) presented above shows that 95 percent of the children in kinship care are Black and Hispanic, 58 percent have spent 2 or more years in kinship care, and parental substance abuse is the primary reason for their placement. The majority of biological parents are under 40 years of age, and 61 percent of them visit their children in care.

Although CWA's sample size consisted of 6,016 biological parents (natural fathers represented a small sample size and were excluded from the report), not much information was presented (and not much was learned) from their study, in order to understand the experiences of biological parents

involved in the kinship foster care system in New York City. CWA's study could have answered many of the troubling questions pertaining to the role of natural parents in kinship care, but for whatever reasons, they failed to provide much needed information on natural parents. For example, why were only five characteristics of the biological parents provided in CWA's study? Why were age, income, visitation, home situation, and whereabouts the only variables presented? The unreported findings from CWA's large sample study remain a mystery.

CHAPTER VI

PRESENTATION AND ANALYSIS OF DATA

Introduction

In this chapter, a descriptive profile of biological parents in the study is presented. This profile is meant to be helpful in getting a clearer picture of the demographics of the key informants, and is presented for the purpose of providing helpful data on a neglected area of foster care research. A comparison of this study and CWA's was undertaken to look for similarities in both studies. Research findings from this study, and themes emerging from interviews with thirty biological parents are presented. A summary of themes emerging from the interviews are also presented.

ANALYSIS OF FINDINGS

Descriptive Profile of Biological Parents

Fifty-seven percent of the respondents in the study were Black, 27 percent Hispanic, and 10 percent White. Most (ninety percent) were female. Forty-seven percent were single, 23 percent married, and 30 percent were either divorced, separated or widowed. One half of the participants were Catholic, 33 percent were Protestant, and 17 percent were of other religious denominations.

The average age of the respondents was 34 years, with the youngest being 25 years, and the oldest 49 years of age. Forty-three percent had some college education, with 7 percent attaining BA degrees, 50 percent had a high school education. One half of the respondents were unemployed, while those who were employed performed jobs ranging from supervisor (child welfare), assistant manager, counselor, security guard, mechanic, cashier, and clerk. The average income of those employed was \$29,667, with the highest being \$40,000, and the lowest \$20,000 a year. One half of the respondents received AFDC. The average income from AFDC was \$172 a month, with \$478 being the highest, and \$120 the lowest (Table 3).

RESEARCH FINDINGS OF THIS STUDY

Child neglect (57 percent) was found to be the primary type of mistreatment among the respondents studied, with substance abuse (37 percent) being the primary reason for placement of the child. Abuse accounted for 43 percent, with corporal punishment/physical abuse (23 percent) being the most frequent type of mistreatment. The largest number of children one parent had was 9. Overall, sixty-two (62) children were placed in kinship foster care, for an average of 2 children per parent, and twenty-two (22) children could not be placed with relatives (for unknown reasons) and were placed in traditional (with strangers) foster care (Table 4).

The children of study respondents spent an average of three years in kinship foster care. One child spent 10 years in care. Children spent an average of 1 year in nonkinship care with the longest being 7 years. Only 8 children (13 percent) were returned to the biological parents during the period the data was being collected. Seventy percent of the kinship parents were either maternal or paternal grandmothers (MGM/PGM), 23 percent were maternal aunts (MA), and 7 percent were of other relationships to the biological parents (Table 3).

TABLE 3	
***	***
Biological Parents Characteristics	
	% (N=30)
Age of Parent	
25 - 29	17
30 - 39	70
40 - 49	13
Gender	
Male	10
Female	90
Ethnicity	
Black	57
Hispanic	27
White	10
Other	6
Religion	
Catholic	50
Baptist	20
Christian	13
Other	17
Marital Status	
Single	47
Married	23
Widowed/Divorced/Separated	30
Education	
BA degree	7
Attended College	43
High school	50
Employed	
Yes	50
No	50
Relationship to Kinship Parent	
Grandmother	70
Aunt	23
Other	7
Number of Biological Children	
1 - 4	77
5 - 9	23
(Mean = 4)	

TABLE 4
***** Primary Type of Mistreatment / Reasons for Placement *****

	%
	(N=30)
Primary Type of Mistreatment	
Abuse	43
Neglect	57
Reasons for Placement	
Corporal punishment/Physical abuse	23
Sexual abuse	13
Domestic violence	7
Cocaine usage/Positive toxicology for cocaine	37
Left children unsupervised	10
Educational neglect	10

A COMPARISON OF STUDY FINDINGS

There were two major differences in the two studies. The first is that this study was done with a small sample of biological parents who were individually interviewed. The second is that CWA's study was extracted from agency worker's case records, and not from face to face interviews. The findings are also very different.

In CWA's study sample of 6,064, 61 percent of the biological parents visited their children either weekly, monthly, or sporadically, while 93 percent of the natural parents in this study visited their children daily, weekly, and monthly. Thirty-nine (39) percent of parents in CWA's

study never visited their children, compared to only 7 percent in this study (Table 5). In CWA's study, 41 percent of biological parents whereabouts were unknown, and 10 percent were comprised of mothers who are incarcerated, deceased, in rehabilitation programs etc... However, of the known home situations (49 percent), only 12 percent were reported to be adequate for the return of their children. Since 88 percent of the home situations were inadequate, what is ACS doing to assist these parents who are interested in having their children returned to them?

In CWA's and this study, 50 percent of the biological parents received resources from AFDC. However, 50 percent were employed in this study, compared to only 12 percent in CWA's study (n=2,342). This finding suggests that the parents in this study have employable skills and good education (50 percent have attended college), and also had good paying jobs (average salary is \$29,667). There were slight differences in the age of biological parents. In CWA's study (n=4,714), ninety-one percent were between 21-40 years, while this study showed 87 percent below 40 years of age. Thus, the failure of CWA's study is its inability to provide pertinent information about the biological parent involved in the kinship program (Table 5).

In both studies, the findings show that the biological parents are relatively young, at least half of them are unemployed, and have the time to attend and benefit from drug and other rehabilitation services. In this study, the respondents need reunification services (housing, financial assistance, employment, household furnishings...) in order to assume their parental responsibilities and take care of their children.

TABLE 5		
***	Study Comparisons	***
	CWA Study	This Study
Age of Mother		
<18 - 30	56	17
31 - 40	39	70
41 +	5	13
	(N=4,714)	(N=30)
Income		
AFDC	50	50
Full/Part Time Employment	12	50
Social Security	5	0
Other	13	0
None	20	0
	(N=2,342)	(N=30)
Visitation		
Daily	0	7
Weekly	20	17
Monthly	9	69
Sporadic	32	0
Never	39	7
	(N=6,064)	(N=30)
Whereabouts of Mother		
Unknown	41	0
Incarcerated/Deceased/In Drug Rehab...	10	0
Known	49	100
	(N=Unk)	(N=30)

CHAPTER VII

THEMES EMERGING FROM INTERVIEWS

Introduction

In this chapter, the major themes relating to children's removal from home, the problems parents' experienced with their children's removal, and parents experiences with the child welfare agency are presented. Respondents knowledge of ACS, their feelings about the kinship placement, and their concerns about the contact they had with their children are also discussed.

Many related themes and patterns emerged from the interviews with the biological parents. For many, it was a traumatic, sad, and angry experience talking about their involvement with the child welfare agency, as they unhappily recounted and relived the ordeals again. However, some justification and relief were attained from speaking about their experiences.

Interviewing the parents in their home environment was very relaxing and eventful (for both researcher and respondents), and they responded favorably to the researcher. For example, respondents were shown the researcher's college identification upon entering their homes, and this initial 'professional' contact, in some way, made the parents more at

ease with the researcher. Parents were very eager to respond to the questions posed and many expressed a sense of gratitude for being selected to participate in the study.

A summary of the major themes derived from the respondents is presented here for clarification purposes (Tables 6 and 7).

TABLE 6
Summary of Findings
Themes from Biological Parents

Experiences With Child Welfare Agency

Heard many bad things about the agency
 Had bad experiences with child welfare agency
 Had scary, terrible, unpleasant experiences with agency
 Had traumatic, painful and upsetting experiences with agency

Feelings About Kinship Foster Care Placement

Have positive feelings about children's placement with
 relatives

Satisfied with care provided by relatives

Children are in competent hands with relatives

Children are being properly cared for and nurtured by
 relatives

I do not like anything about kinship foster care

My children's medical needs are not being taken care of by
 my relatives

I should be caring for my own children

My mother is too old to care for young children

Relatives are mainly interested in the financial resources
 they are receiving

I don't get along with my parents/relatives

Agency workers are not helpful

Agency workers have denied me the opportunity to see my
 children

Agency workers should be doing more to help families

The agency is not helping families

Agency workers are helping me

Feelings About Services Received

Satisfied with preventive services received such as
 counseling, therapy, parenting skills training, drug
 rehabilitation...

Have benefitted from preventive services

Have learnt new ways to care for children

ACS does not have sufficient preventive programs for
 families

I had to find preventive programs on my own

I do not need preventive services

TABLE 7
Summary of Findings
Themes from Biological Parents

Feelings About Services Needed

Need a more structured drug rehabilitation program
 Need closer monitoring
 Need more one-to-one supervision

Services Needed For Children's Return

Need reunification services such as housing, household furnishings, furniture, financial resources, financial assistance, employment, homemakers, baby sitters...

Need preventive services such as drug programs out of the City
 Need stress and trauma services

Need on-going family counseling and therapy
 No longer need any services

Feelings About Reunification Efforts Made By Agency

The agency is trying to help reunite the family
 The agency has helped me a great deal
 My worker is in favor of my children being returned to me
 My worker worked hard to get us reunited

The agency is not trying to reunite me with my family
 The agency has shown no interest in reunification
 The agency has shown no interest in reuniting me with my children
 The agency is not trying to help
 The agency is trying to take my children away from me

Suggestions For Improving Kinship Foster Care

Reduce children's length of stay in kinship foster care
 Have more unsupervised visits with children
 Have more available preventive programs for families

Kinship parents should save part of their allowance for their related children

Agency should have better trained, caring, empathetic workers
 Agency should be a more family friendly child welfare agency

The major themes emerging from the interviews with the biological parents were:

REASONS FOR REMOVING CHILDREN

There were many reasons attributed to parents having their children removed from their homes and placed in kinship foster care. Having a baby born with positive toxicology for cocaine was a recurring theme for many parents. Several parents said:

My baby was born with positive toxicology for cocaine. I used cocaine during my pregnancy. The baby and my other two children were removed from my home by BCW workers.

My baby was born with positive toxicology for cocaine and marijuana, and my other children were taken away by agency workers.

My baby had positive toxicology for cocaine at birth. He was put on a hospital hold and then placed in a private agency.

Some parents, because of their addiction to cocaine and marijuana sought help, on their own, from community agencies and hospitals, and were reported to ACS.

I had a drug problem. I was addicted to cocaine. I went and took a blood test at the hospital and the hospital reported me to CWA, and they removed my 7 year old son.

I went and enrolled in a methadone program. My one year old child was tested in the hospital and found positive for methadone. He was subsequently removed from the home by BCW.

I voluntarily placed my 7 children with my mother so that I could enroll in a drug program. My mother made a report against me, and I was accused of neglecting my children.

Leaving children alone (unsupervised) was a common theme for some parents, and was the reason for their children's removal.

I was using crack-cocaine, and I used to leave the children alone at times. Someone (my aunt) reported me to the child welfare agency and my children were removed.

I left my three young children unsupervised for a few hours. My husband made a report to the police, and they came and removed them from the home.

I left the children alone in the house and went to the grocery. Someone reported that the children were 'home alone,' and the police came and removed them.

I left my three children in the house and went to the store. I was only gone for 30 minutes. I had no one at the time to supervise them. Someone called the police and they removed the children. BCW later accused me of abandoning my children, and placed them with my mother.

Educational neglect was also one of the reasons for the removal of children. Two parents said:

My children missed two months of school because I was having personal problems. The school reported me to the child abuse hotline and my children were snatched at school.

I was sick and I could not care for my children. They missed three weeks of school. I believe that the school made a report to the child abuse hotline, stating that my children were not coming to school. BCW investigated and removed the children.

Corporal punishment accounted for one half of the abuse cases. However, many parents did not view the disciplinary method they used such as corporal punishment as being child abuse. Parents interpretation of disciplinary measures were:

I disciplined my children by beating them for stealing money. Someone (my neighbor) reported it. The agency investigated and removed the children.

My baby had a blister on his hand. We went to the hospital burn unit, and then to the precinct. The doctor felt that he was burnt with a cigarette. We were interrogated by the police, and he was taken away from me by a police officer, even though CWA told her not to remove the child. Eventually, all eight children were removed because they felt that I was abusive to my children.

I agreed to make a submission of guilt for beating my two children ages 12 and 14 - with a belt, for staying out late in the streets. They were removed from me before I made the submission, even though they said they would return them.

One parent reported that his child had an accident in the home. The doctor was suspicious about his account of what happened and reported it to BCW.

My child had a fracture of the leg. His leg got caught in the space by the headboard. He was taken to the hospital, and the doctor reported it as physical abuse to the hotline. My child was put on a hospital hold, and BCW removed him from the hospital.

Sexual abuse was also a primary reason for removal. Various related themes were expressed by the respondents.

My daughters were sexually abused by their step-father, and they were removed from the home by CWA workers.

I could not believe that my husband would sexually abuse his child. I was hurt, and I did not know who to believe.

My daughter tested positive for gonorrhea in the hospital. The social worker felt that she was raped by her father. She was subsequently removed and placed with my mother.

I was shocked. I could not believe that he would do such a thing to our child. I was also shocked that I was penalized for something I did not do.

I was hurt and upset. I felt betrayed by their father. I believe that they could have remained at home with me. CWA did not have to remove them.

Two respondents stated that they were the victims of domestic episodes.

My husband picked me up and threw me across the room. I suffered a concussion and had to go in the hospital. My children were placed with his mother.

I reported a domestic violence incident to the police against my husband. CWA got involved and after investigating the circumstances, removed my children from the home.

PROBLEMS EXPERIENCED BY PARENTS WHEN THEIR CHILDREN WERE REMOVED

The respondents overall reaction to their children's removal were generally negative. Most experienced loneliness, trauma, depression, sadness, increased stress, and anxiety.

I felt depressed and sad. It was a horrible experience. It was a very traumatic experience not having my children around.

I felt hurt, sad, and depressed. I felt let down. The agency violated me. They removed my child from school without notifying me.

I was devastated. I was depressed. The removal of my children only compounded matters. It made my life more difficult.

It was horrible and sad. I could not believe what was happening to me. I suffered emotionally and physically.

As a result of their depression and loneliness, several respondents contemplated committing suicide.

I was worried for myself and my children. I am supposed to raise my children even though I had a drug problem. I contemplated committing suicide. I was really thinking about committing suicide.

I was depressed and stressed out. I could not eat or sleep because I missed my children. Their removal created personal problems for me. It was pure hell not having my children around. I thought of committing suicide.

I experienced loneliness and hopelessness. I even lost my spirituality. I was emotionally drained. I could not cope. It was a traumatic experience for me. I was very depressed, and tried, though unsuccessfully, to commit suicide.

One respondent felt that she would get help from the agency, but felt deceived when her children were removed.

It was hard for me at first. I felt hurt and deceived. The caseworker told me that the children would not be removed but they still removed them.

Another parent thought that someone had kidnapped her child, only to learn later on that it was BCW who took her child.

I was scared and shocked. At first, I thought that someone had kidnapped my children, but I learned later that it was BCW workers.

Another had no idea where her children were, as the school did not notify her of the removal by BCW.

I was very upset. At first, I did not know where they were. The school never notified me. The BCW worker left a note under my carpet notifying me of the removal.

One parent felt that she was not going to see her children again, and felt that she would not get them back.

I felt that I was not going to see them or I would not get them back. I did not feel that the agency was going to help me. Of course, I did not know agency policies. I knew about the agency from what I saw on television.

Respondents also reported that they did not know what to do about their situation. Their feelings are expressed:

I did not know what to do. I was too drugged up to understand what was really going on. I only realized what was happening when the children were taken away.

I was under the influence of cocaine, crack, and heroin, so I did not feel anything, when my children were removed. My emotions were suppressed by my drug addiction. I couldn't help them because I did not know what to do. I was lost.

I was petrified. I did not know what was going on. I was upset and scared. I did not know what to do and no one told me what I was involved in.

Respondents expressed how painful and sad they were when their children were removed.

It was painful. I was more hurt because the children were removed in the presence of police officers. That was very painful for me and the children.

It was very painful and sad for me. I almost went out of my mind. I almost died when the children were removed. The program has not helped me. In a sense, it appears as though, they are on a course of destroying families.

I was sad and upset. It is not easy for a parent to have her child taken away and placed elsewhere. It was a very traumatic experience.

At first, I did not understand what was happening. When I did, I felt hurt and saddened by the worker's decision to remove my children.

I felt like dying. Suddenly I did not have my children with me. The decision to remove them was done too hastily.

One parent experienced serious problems with her child's removal.

It was hell. I went out of my mind. I was upset with the world. I could not eat or sleep. I was not myself. I almost lost my job because I used to miss days from work.

Two respondents realized that they had serious medical problems and expected some type of help from the child welfare agency, but were disappointed when they did not receive it.

I was traumatized and upset. I knew that I was sick (I was HIV positive), and I thought that the agency would help me get better. I am very disappointed.

I have been using cocaine for the last ten years. I was tested positive for the Human Immunodeficiency Virus (HIV), and BCW workers, came and removed my children. One of my children is also HIV positive. I really thought they were going to help me, but they have not.

PAST AND PRESENT EXPERIENCES WITH THE CHILD WELFARE AGENCY

All respondents spoke of having bad experiences with the city's child welfare agency. Two-thirds (66 percent) of the respondents indicated that they had prior experiences with BCW, SSC, or CWA, and the experiences were scary, terrible, traumatic and unpleasant. Many expressed strong sentiments about the agency and its workers. These sentiments are illustrations of their experiences.

In 1987, I became involved with SSC. My children were removed and returned to me. They were taken away again in 1995. It was a terrible, bad experience. Agency workers do not listen to parents. Once you are accused, the agency feel that you are guilty. Once the children are taken away, services are not provided to the parents. The waiting list for services is usually too long anyway.

I have been involved with BCW since 1986 for child abuse. My mother did not like my husband, and she made a report against me. I did not know much about the agency then, but I had heard many terrible things about BCW. I realize now, that what I heard was true. The agency is cruel to parents.

In 1980, my son was kidnapped by his father. I had to go to court to get him back. That was my first experience with BCW, and it was not a pleasant experience for me. The workers were not helpful and did not appear to be interested in helping me.

I became known to BCW seven years ago. The experience has been hell. The agency has good and bad workers. The workers said that they wanted to help me, but in most cases, their hands are tied. The agency usually don't have funds to provide services and other things I need. They also do not provide resources to keep my family together, and they do not arrange visits for me to see my children.

It is two years now, and it has been a bad experience for me. The agency has not done its job in this case. They removed my child without notifying me, and they are going to pay for that.

My first involvement was in 1988. The experience then was traumatic and painful. The agency has not been very helpful to me. I thought that they would help me put my life back together, but that did not happen.

In 1987, I was accused of neglecting my children. The experience was very upsetting and traumatic. Having your children taken away from you is very painful and depressing.

In 1993, I was going through marital problems and I placed my children voluntarily. I had to fight to get back my children. It was a very upsetting experience.

I had a case in 1988. My baby had a positive toxicology for cocaine. I did not know then, that if a baby is born with positive toxicology for cocaine, the agency (BCW) could take the baby. It was a scary experience for me. The case was reopened in 1992, as an allegation of physical abuse was made against me for burning my daughter on her face with a cigarette.

Even respondents with no prior experiences with the agency were traumatized and scared and suffered painful experiences. A few also expressed hearing bad things about the agency.

This is my first experience with ACS. I feel terrible. I feel scared. I did not know what to do. They removed the children without notifying or contacting me.

It is a very painful experience. I almost died when my children were taken away. I almost lost my mind when they were removed. It was very painful and sad.

This is my first experience with the child welfare agency. I heard rumors about BCW, but I did not get first hand experience until 1995. It has been a painful experience.

I haven't had any prior experiences but I have heard many bad things about the agency. So far, my experience has been depressing and chaotic.

This is my first experience. It has been terrible so far. The workers have not been very helpful to me.

LACK OF KNOWLEDGE OF THE CHILD WELFARE AGENCY

A related theme in this study was the respondents lack of knowledge of the child welfare agency. Many of them did not know the agency's policies and procedures, and did not have any available resource to gather that information. Consequently, many followed, sometimes thoroughly, their caseworkers advice and recommendations, which usually ended up with them

making an admission of guilt in order for their children to be returned to them. As expected, many of the respondents felt that they were not treated fairly by agency workers, and workers failed to explain the policies and procedures of the agency, and the procedures to follow in order to get their children out of foster care.

Respondents felt that the agency and its workers were disrespectful and cruel to parents, and should instead be supportive and positive towards parents.

Agency workers are very disrespectful. They do not try to help. They do not listen to our problems, and they do not try to work with families. They get on as though they are doing us a favor. They are rude, crude, and mean.

The workers should have a positive reaction to parents. They should treat parents with respect. They should really help us but they are not.

I did not know much about the agency then, but I had heard many terrible things about BCW. I am now realizing that what I heard was true. The agency (BCW) is cruel to parents.

The agency should support the family, by providing services to the mother in order for her to get her children back.

One parent described her feelings:

I really thought that the agency would leave my children at home. The caseworkers could have left the children in the home once their stepfather left. Instead, they kept the children in foster care with my mother.

Two parents shared their feelings about what the agency should be doing for families.

The agency should be trying to keep families together not separate them. The agency is not seeking my interests. Sometimes, it seems as though, they do not care about me and my children.

The agency should keep the nuclear family together. They should not break up families, and they should stop playing games with people's lives. They are doing a disservice to families.

Another parent experienced a number of let downs, and felt that the agency is too bureaucratic and political.

I have experienced a number of let downs. The agency makes me do unnecessary things which do not help me. The agency is too bureaucratic and political. They play with our lives. They need to change the laws of the agency, because they are not helping us. As a matter of fact, they are slowly destroying us.

Respondents were also not satisfied with their attorneys and felt that they should have had better legal representation.

The agency should have better lawyers for families. Families (parents) should have better legal representation, and attorneys caseloads should be smaller.

I would like to stop this termination of my parental rights, but all my attorney tells me to do is take urine tests. I need a better attorney, but I don't have the resources to pay for one.

FEELINGS ABOUT KINSHIP FOSTER CARE PLACEMENT

Although they preferred their children to remain with them, study respondents generally had positive feelings about their children's placement with relatives. They were generally satisfied with the way their children were being taken care

of. Many felt that their children were in competent hands, in safe environments, and would be properly cared for and nurtured by their grandmothers, aunts and sisters. Parents expressed their feelings about their mothers' taking care of their children.

I am very satisfied with the way my mother is taking care of my son. She is doing a very good job.

I am extremely satisfied. She is performing admirably with my children. She is doing a great job.

My children are properly cared for. My mother provides excellent services to my boys. I am very satisfied with the type of care they are receiving.

I feel very good. My son is receiving the best of care from my mother. She is a good woman, and is a good mother to Joseph.

I feel happy because he is with a relative. My mother takes good care of him. We have a good understanding, and we get along well.

I feel good that my children are placed with my mother, and I wish that my daughter was with her also. Knowing that they are with her, has decreased some of the problems I have when I think of my situation.

I feel good about my mother taking care of my child. She does everything a parent would do for her own child. She is a good parent.

My mother is the perfect choice to care for my two babies. She is doing a good job with them, and I am grateful to her for that.

I am satisfied with the children's development. My mother disciplines them in an appropriate manner, and the living conditions are excellent. I am thoroughly satisfied.

One respondent was satisfied with her mother's nurturing, but felt that she should be caring for her own children.

My mother was willing to take care of my children, and she is doing a fantastic job with them. However, I should be caring for my children.

Another parent shared her feelings about the financial resources her mother is receiving.

The only thing I like about the program is that my mother is getting financial resources to help my children. My mother is an excellent parent, and she is better than any stranger.

Respondents also showered praises on their aunts. Some said:

My aunt is doing her best to provide for them. They are good children, and they don't give her much trouble. I am satisfied with my aunt's work with them.

My baby was placed with my aunt. I did not have objections to that because she is a good woman.

Placing my children with my aunt is the only thing I like about kinship care. The agency can go to hell for my part. They are a bunch of kidnappers.

Two parents described their satisfaction with their sisters caring for their children.

I am satisfied with the way my sister is caring for my children. They are healthy and they go to school everyday.

My older sister does a good job with my daughters. I am satisfied with the way she is caring for them.

One parent had a general outlook on kinship care.

The children are placed with relatives, therefore, there is more flexibility in the interaction between biological parents and children.

Two parents cited the fact that they do not get along with their relatives.

I am satisfied that my mother takes good care of my child. My problem is that we do not get along.

One of my children is placed with my aunt, the other two are placed with strangers. My aunt and I don't get along, and I would prefer that all my children be placed together. My aunt is not cooperative, and she does not tell me much about my child.

Several parents expressed having problems with their inlaws, the fact that they don't get along, and their problems with their children being placed with them.

Since my mother-in-law and I don't get along, I feel as though she is turning them against me. I have tried to cooperate with her but I have not been successful.

I don't get along with my ex-husband's family. They pretend that I don't exist. They do not encourage my child to call me, and it seems like they want him to forget me.

My ex-husband's mother is working against me. She wants to get custody of my child. Since her son and I are not together, she wants to take my son away from me.

Two parents expressed dissatisfaction with their mother and grandmother respectively.

I did not want my children placed with my mother, because she is not a good mother. She uses excessive corporal punishment on the children, and I do not appreciate that.

I do not appreciate my grandmother (PGM). My child was placed with her behind my back, because I did not consent to the placement. The other PGM was fine then but not now, since they both want to keep my children. They have gotten used to the money, so they don't want to part with the children. If they do, they would not receive any more money.

Some respondents expressed concern about placing their children with relatives. Concerns were raised about the foster parents' old age, the type of care provided and the disciplinary methods used with their children. Old age was a common concern of these parents.

My mother is a good mother, but she is too old to care for young children. She needs to enjoy her late life not take care of children. She raised three of us already.

In a way, it is good and bad, because my grandmother is 65 years old. She is not able to provide them with proper care. She disciplines my children by hitting them, and we don't have a good relationship because of her behavior.

My mother is providing good care to my child, and she is genuinely concerned about him. I just have a problem with her age.

My aunt is taking good care of my children. My only problem is that she is 65 years old, and she needs to be relaxed and comfortable - not caring for young children.

Several respondents felt that money was the motivating factor in becoming a kinship foster parent. They felt that their relatives were mainly interested in the financial resources they received from the agency for taking care of their related children, and were concerned about the way the foster parents spent the money they received.

Parents expressed the following statements regarding money.

My mother uses the money for her personal uses. She buys things for herself and neglects the child.

I am not really satisfied with how my mother is caring for the children. I feel that she is more interested in the money, than in caring for my children. The money she receives is more important to her now.

At first, everything was fine. When I was accused of neglecting my children, things between my mother and I changed. She took my children away from me in order to get money for them. My mother is sick and unstable, but the agency prefers to keep my children with her.

I am not satisfied with my aunt because she uses the money on herself, not on the children. I believe that she neglects my children.

My ex-wife's mother is not fit to raise anyone's children, least of all my children. She is a generational welfare mother who raised five children, of which two became substance abusers. She is in the program for the money.

The program is bad. I believe that the money given to my sister is spent on drugs. My sister uses drugs, and the children should not have been placed with her. I don't think that she was thoroughly investigated by the agency, otherwise, they would not have put them there.

I was unhappy with my cousin's care of my child. Supervision was minimal, and the house was not suitable for my child. She was also using drugs and spending the money on herself.

This respondent had a more general and frank perspective about the money paid to parents.

The money that is paid to parents is misused and spent badly. They use the money to purchase things for themselves, not the children. The money is for the children not the parents. This corrupt practice should be investigated by the agency.

Some respondents felt that agency workers (caseworkers and supervisors) are not helpful and should be doing more to assist families. These statements reflect their feelings about

agency workers.

I am disappointed by the failure of ACS workers to follow through with their promises. I was told that my children would be returned to me, but so far, it has not happened.

The workers are totally irresponsible, unprofessional, and incompetent. No one wants to be accountable, and it seems like they don't know what they are doing.

Agency workers are not professionals. They barge into our homes without showing identification. They act like they are the police. They are supposed to help not break up families.

The program is a problem. The workers do not return phone calls. Only when I go over the caseworker's head and call the director, do I get assistance. The workers are not always helpful.

The agency should not have workers who are not working with families. They do not refer me for services, and I have to find programs for myself.

I feel sad about the entire situation. My child is not with me, where he should be. My worker has not been very helpful. She is just making me do unnecessary things - such as going for counseling and parenting skills training.

One respondent felt that agency workers deliberately denied her the opportunity to see her children.

It has been a bad experience for me. The workers have denied me the opportunity to see my children. The caseworker and my mother are working against me, and they do not want me to get my children back.

Further exploration revealed other responses from the respondents regarding the child welfare agency and its workers. Respondents expected to get help from CWA but did not and expressed their disappointment in not receiving the help they needed.

I thought CWA would have helped me with my drug problems, but they did not. I also thought that the kinship program would help families resolve their problems and reunite them quickly. The program did not do that for me.

The agency is helping my children but they are not helping me. I need a program to cure my addiction - not a short term program but a long term program. Drug addiction cannot be cured in six weeks.

Once my children were taken away, agency workers avoided me. They have not provided me with the services I need, in order to get back my children.

The agency is not helpful. Instead of helping me, they threatened me. They threatened to take my children away from me if I did not cooperate with them.

Overall, it has been a very traumatic and sad experience. I thought that they were going to help me straighten my life out, but they did not. Instead, they tried their best not to let me see my children.

Some parents expressed dislike for kinship foster care.

I do not like anything about kinship care. The agency give us hope but they mentally abuse us. They lie to us all the time. They also lie to my children. They tell them that they will be going home to their mother soon. It is 2 years now.

I do not like anything about the kinship program. The kinship program should be more helpful to families. Since our children are with relatives, the placement should be much shorter.

I do not like anything about kinship foster care. Kinship breeds fraud and greed. Parents and relatives should not be allowed to make raising family members, a lucrative, financial situation.

There is nothing to like with kinship foster care. The agency stinks. The agency is dictatorial and don't care about families. They treat us with disdain. They are animals.

There is nothing positive about the kinship program. The agency is not helping families or children. They are destroying families and children.

This parent made an interesting statement about the program.

The kinship program is a waste of tax payers money. The money should be spent on families who are experiencing problems.

However, a few respondents had some positive feelings about the kinship program and its workers.

The kinship program provided my family with counseling and therapy. The caseworker helped me a great deal.

The workers have been helping me. They helped arrange visitations, and they convinced my mother to bring the children to see me.

My worker worked with me. He appeared to be on my side, and we got along well.

One parent felt that by removing her children, their lives were saved.

When the agency removed the children and placed them with my sister, they saved their lives because I was strung out on drugs, and I was totally irresponsible. At that time, I was incapable of caring for them.

There were other concerns from some parents about the level of supervision provided to their children by their relatives.

My children could be better taken care of. My mother leaves my children with other relatives sometimes, and that upsets me. Overall, I am not satisfied with the supervision they are receiving from my mother.

I don't feel good about the placement. My mother leaves my children with her brothers, and I don't like them supervising my children. They are not their foster parents.

Some respondents felt that their children's medical needs were not properly taken care of by their relatives, and their relatives failed to take their children to the clinic for medical appointments.

My mother does not take good care of my children. She needs training to properly take care of my children. She also needs assistance in providing medication to them, and skills training in reading, writing etc...

My mother is not taking care of my children's medical needs. She is not taking them for their shots. She does not buy clothes for the children, and the money she receives is misappropriated and spent on other things.

I am not satisfied with what my aunt is doing with my children. She does not take good medical care of my children. She needs training and assistance in attending to my children's medical problems.

The level of care could be better. I am not notified of my children's medical needs, and I feel that I should be. I also see them in the same clothes sometimes, and I feel that my mother-in-law is not providing them with adequate clothing.

I feel that their medical needs are not being met. It is not a good environment for the children, and it is not safe. There are drugs there, and the house is overcrowded. At least eight people live there.

One respondent was concerned about the way his teenage children were being cared for by his mother.

My mother is providing very negative care and is turning my children into teenage tramps; in the hope of them getting pregnant, so that they can collect welfare benefits. I am very disappointed with the agency for allowing her to manipulate them for the purpose of getting money.

LACK OF CONTACT WITH CHILDREN

All respondents expressed concerns with the lack of contact they had with their children, since they were placed with relatives. Respondents felt that they would be able to see their children as often as possible, because they were with relatives and they were familiar with the addresses of their relatives. Many parents felt disappointed with the limited visitation provided to them, since they expected to see their children in a more timely manner. This foster care arrangement (kinship) was a big disappointment to them, as they felt that they were treated as though their children were placed with strangers (non-relatives) in foster care.

Sixty-nine (69) percent of the parents saw their children once/twice a month, 17 percent – once/twice a week, and 7 percent each saw their children every day or did not see their children at all. Forty-eight (48) percent of the parents saw their children at the private, voluntary, foster care agency, 38 percent at the ACS/DAFCS office, and 14 percent saw their children at either their mother's or aunt's home (Table 8). This is an interesting finding as it suggests that a few parents had regular access to their relatives' home despite the supposedly close scrutiny of child welfare workers, and despite the tough, strict, visitation policies of the agency, which only allow a parent one/two visit(s) per month.

TABLE 8
***** Frequency / Location of Visits / Contacts with Worker *****

	8
	(N=30)
Frequency of Visits with Children	
Once/ Twice a month	69
Once/ Twice a week	17
Every day	7
Do not see children	7
Place Parents Visit Children	
DAFCS office	38
Foster care (voluntary) agency	48
Kinship parent's home	14
Frequency of Contacts with Agency Worker	
Once/ Twice a week	53
Once/ Twice a month	27
Limited or no contact	20

There were many variations in the frequency of parents' visits to see their children. Some respondents saw their children every day, twice a week or twice a month.

I see my children every day, at my mother's house. I used to see them at their father's house, but he started to create problems for me, so I see them at my mother's.

I see them twice a week at my aunt's house.

I see my children once a month depending on the foster parent's (my aunt) availability to take the children to the ACS/DAFCS office.

Two parents had not seen their children in the last two years.

I haven't seen or spoken to my children since they were removed from home in November 1995.

I last saw my children in 1994. My mother has moved to Mt. Vernon, and I don't have the resources to go there.

It should be mentioned here that parental visitation is very important for maintaining close ties with children in foster care, particularly so, for children placed with relatives. Many studies have pointed out the importance of parental visitation (Davis et al., 1996). For instance, Cantos, Gries and Slis (1997: 311) felt that "children who are visited frequently are more likely to be discharged to their parents than those who are visited infrequently."

Children who are visited on a regular basis spent significantly less time in foster care, "and had fewer externalizing behavior problems than those who were visited irregularly or were not visited at all (Cantos et al., 1997: 324). Therefore, regular visitation should be encouraged by ACS, as children in care benefit from regular contact with their parents, and parental visiting is directly related to children making a good adjustment and exhibiting good behavior while in foster care.

FEELINGS ABOUT SERVICES RECEIVED

Almost 50 percent of the participants stated that they had received services such as counseling, therapy, parenting skills training, drug rehabilitation, and day care... from various child welfare agencies. Many were satisfied with the services they received, and felt that the services were a prerequisite for them to get their children back. For some, it was mandatory that they attended the sessions as it was necessary for them to comply with the agency requests (orders) - and to show that they were cooperating with agency workers. Many participants felt that they benefitted from the above services, and learnt new techniques, which would not only help them in caring for their children but in other aspects of their life as well. Counseling was the common service received according to parents.

The counseling and therapy sessions were good. My wife and I enjoyed both. Since we have to go, we decided to make the best of it.

I have been to all types of programs, from parenting skills and counseling to drug rehabilitation. However, I enjoy the counseling sessions the best.

I am receiving counseling and drug rehabilitation. The counseling for HIV is good, but I feel bad knowing that I am HIV positive.

The only service I received was parenting skills training. I enjoyed it because it made me a better person, and I now know other alternative methods to discipline my children.

The services I have received are good. I have received parenting skills and counseling, and have been able to better understand my role as a parent.

I am very satisfied with the counseling. I am learning how to deal with my problems, in order to better understand my child.

I received counseling at Bronx Lebanon three times a month. The counseling relieves a lot of my tensions.

My worker has done a lot for me. He has provided me with counseling and is always available to assist me. He is an excellent worker, and he is trying to get my children returned to me.

Some of the respondents did not feel that they needed the services the agency workers ordered them to go to.

I received counseling and parenting skills classes. I did not need them, but I went anyway.

I am not satisfied with the counseling sessions. I don't feel that I belong there because I am not an abusive parent.

I have followed through on everything the agency has asked me to do. I have taken parenting skills, counseling and therapy sessions - services I really did not need.

Some respondents felt that they needed a more structured type of drug rehabilitation program where they could be monitored closely.

I needed someone to monitor me closely. The drug rehabilitation program has helped me but I am surrounded by drug users and a drug environment, so it is difficult for me to stay away from using drugs.

I do not feel good about the services I received. I expected to be rehabilitated but I was not monitored, and I returned to using drugs.

I do not feel good about the drug program I went to because I was not monitored. I need a rehab program away from the City, where I will get one-to-one supervision. I need to go away and get cured.

I went to drug rehab classes but that did not help much because I was not monitored. Therefore, I am still using drugs. The agency should be more involved with parents like me.

Several respondents felt strongly about the agency not having sufficient preventive services for parents to attend.

Consequently, they had to utilize the community to find their own resources in order to fulfill the agency's requirements.

I did parenting skills and drug rehab on my own. The agency referred me for counseling but I never got an appointment. I had to get it on my own.

I am not getting any services. I have to make referrals for myself. I have gone to parenting skills and counseling on my own.

I have gone to parenting skills training, substance abuse counseling and an outpatient program, therapy and counseling. These programs were all found by me - not the agency.

The agency does not provide any services. They only tell us what we have to do, and we have to find the services for ourselves. I received parenting skills on my own.

I am not receiving any services from the agency. I received drug rehab services in Queens on my own.

SERVICES NEEDED FOR CHILDREN'S RETURN

Many (67 percent) of the respondents felt that they needed a more focused array of services in order to facilitate the return of their children. This is an interesting finding because almost one-half of them stated that they had received some services from various child welfare agencies already. However, the services they received were mainly to fulfill the agencies requirements and were not geared towards reunification. Consequently, many felt that they were not ready for the return of their children, and needed 'reunification' services such as housing, furniture, financial resources, baby sitters and homemakers; and preventive services such as drug programs far away from the City, and stress and trauma services to better prepare themselves for their children's return.

These statements are illustrative of the services parents identified as necessary for the return of their children.

I am fine now. I have completed all the necessary programs successfully. I will need financial resources to take care of the children when they are returned.

I would need financial help. I would also need a new apartment and some furnishings.

I would need housing for myself and my children. I would also need a baby sitter to care for the children, so that I could return to work. My PA budget is too small.

I would need a baby sitter to take care of my child. I would also like to continue my education since I only need ten credits to graduate.

Before the children are returned, I should be provided with a worker and a homemaker to monitor and help me if any problems come up.

I need stress and trauma services. Sometimes I feel angry and furious with the system - and I need help, but they are not providing it.

Some respondents expressed their desires to get off drugs. They were very frank in discussing their drug addictions and problems, and voiced the need for drug rehabilitation programs away from the City.

I need to get off drugs. I need to cure my addiction. I also need a program which will cure me of my addiction. That is my main concern. I need to be clean so that I can get back my children.

I need a drug program upstate. The programs in the City are not effective enough. We need to get out of our communities in order for us to stay clean and away from drugs.

Some respondents felt that they should be receiving on-going family counseling and therapy. They felt that they will need someone (a professional) to talk to, to ease the burdens that they have been carrying - and counseling and therapy sessions would provide that.

I would like to continue receiving counseling for myself and my children. When they are returned, I would like to receive counseling. I would also like to return to school to take some courses to make me a better parent.

I would like to continue counseling, to better understand the adolescent child in the 90s, and to learn new techniques in disciplining children especially adolescents.

The agency worker wants me to go for parenting skills training, but I don't think I need it. However, if that is what I have to do to get my children back, then I have no other choice.

I would like on-going therapy for the loss of my children to the foster care system. The pains I have gone through are not healing. They are worsening. Maybe, my children will be the cure.

Several respondents indicated categorically, that they are ready to care for their children once the agency releases them from their custody.

I am ready to care for my children. My drug tests are negative, and I no longer need parenting skills training. I don't have a drug problem anymore, but the agency want me to take urine tests, so I am complying.

I am ready to care for my children. I don't use drugs now. I have recovered - thanks to the drug rehab program. However, I don't see the worker. She does not visit me anymore. I have done everything they have asked me to do. Now I want my children.

I am an average parent. I don't have any problems in order to care for my children. I go for therapy because it helps me deal with all that is happening in my life.

Some respondents felt that they did not need any services from the child welfare agency.

I don't need any other services. I am an able parent who is ready to properly nurture my children. My family have been torn apart by CWA, and they are not interested in returning my children to me.

I do not need anything from CWA. I just want my children, and to be left alone to live my life. This has been a sad experience, and I want to put it behind me.

Since I am employed, I have resources to take care of my children. I just want my children. I am ready and capable of providing proper nurturing for my children.

EXPECTATIONS ABOUT REUNIFICATION

Only a few respondents felt that eventually, they would be reunited with their children. Their feelings were based on promises made by their caseworkers and the fact that they were working closely with them towards reunification.

The agency is trying to help. The caseworker is trying to help reunite the family. I think she wants to reunite us.

My worker is in favor of my children being returned to me. He has done hard work on my case, and he is convinced that I am ready for my children.

Two respondents felt lucky that their children were reunited with them after spending six months in kinship foster care.

My worker worked hard to get us reunited. I complied with his requests. I took counseling and therapy sessions and I was successfully reunited with my children.

The agency has helped me a great deal. The caseworker was very helpful in reuniting me with my children, when I was discharged from the hospital.

However, the majority of the respondents felt that the agency had no interest in reuniting them with their children, and expressed that reunification was unheard of in BCW. The general feeling was that no efforts were being made by agency workers to reunite them with their children. Many stated that the agency and its workers were not trying to help them, and were not concerned with reuniting parents with their children.

Their sentiments are illustrated:

They are not trying to reunite me with my children. They want them to stay with my aunt, and they want them to be adopted by her. The worker feels that the children would be better off with my aunt.

No one has shown any interest in reuniting me with my children. Reunification has not been discussed with me by my CWA worker. Only the Seamen's (a private agency) worker has discussed reunification.

They never really showed any interest in reunification. One good worker never documented progress notes in the case record, and the other workers never provided appropriate information for me to know what to do to get back my children. Apparently, they do not want to return my children to me.

The agency is trying to take my children away from me. They are not trying to reunite us. The agency worker does not show any interest in getting us back together.

The agency is not trying to help us get back together. They haven't provided me with the help I need. It seems like they want me to stay addicted, so that they can say I am an unfit parent, and take my children away from me for good.

Several respondents felt that agency workers are opposed to reunification, and those who are not, do not keep their promises.

The agency has not done much to reunite me with my children. Agency workers make promises but they don't follow through. They are on the agency's side, not on the parents' side. They don't really want to help us.

The worker's attitude is bad. She does not want my children returned to me. She wants them to stay with my mother. The agency is not doing anything to reunite me with my children.

My children should have been with me already. My paramour left the home after the incident, and my children have not been returned. They haven't kept their part of the deal. They said that they would return my children, and I am still waiting.

ACS is not for reuniting families. This is what the caseworker told me. It is more than one year, and I still do not have my children. ACS workers lie to you.

Reunification is unheard of in ACS. The reality is that ACS is not mandated to reunite children and families but to destroy families. Their mission has been reversed. They are now the enemy of the people.

The agency worker is not helping me. He did not tell me about the procedures to take to get my children back. He also never told me about my parental rights.

Some respondents felt neglected by the agency.

The agency should be more helpful. Once they take your children, you are neglected. Services and programs should be provided to natural parents in order to prepare us for the return of our children.

The agency is not trying to reunite us. Instead of involving me in planning for my children's return, I am neglected by the agency. If I don't call, the worker will never call me.

PARENTS' PERCEPTIONS OF AGENCY WORKERS

Respondents experienced a number of problems with agency workers assigned to them. Related themes were the unavailability of workers when contacted by telephone, workers' attitude towards parents', and their authoritative and policing mannerisms. Some participants felt that workers' actions strongly affected the strained interaction between workers and parents, and only exacerbated their problems. Respondents felt that they had to initiate contact with workers, in order to facilitate them seeing their children on the assigned visitation days. However, 53 percent of the respondents had some kind of contact with agency workers once

or twice a week, 27 percent - once or twice a month, and 20 percent had limited or no contact with their workers. Parents reported that telephone contact is made, but workers are usually unavailable and or not cooperative.

Phone contact is made but it is a problem to get the worker. Anyway, the worker is not cooperative, and is not helping me. He is never in the office and he never returns my phone calls.

The workers are never available. They do not return my phone calls. It is very sad the way they treat families.

I call every week to arrange visitation, but the worker is always out of the office. I leave messages but she never returns my calls.

Limited contact is made with caseworker. She is not cooperative, and does not want me to have my children.

PARENTAL LONG TERM GOALS

All respondents expressed strong desires for their children to be discharged to them immediately. Respondents felt that their children belong to them, and in most cases, should not have been removed from the home. Some felt that they have paid for their mistakes, and are ready to assume parental responsibilities in caring for their children - since they felt that their children's best interests lies with them (their parents).

I want my children to be discharged to me, since they belong with their parents. If there is a problem in the home, we should be helped.

I want my children returned to me, so that I could restabilize them and get them to be functional and independent.

Discharge my children to me as soon as possible. Since the allegations were unsubstantiated, the children should be returned immediately.

Discharge my children to me with financial assistance to get an apartment and furnishings.

PARENTAL ROLE WHEN CHILDREN ARE RETURNED

Although all respondents wanted their children discharged (returned) to them immediately, many expected problems from their children when they return home. Respondents felt that their children did not know them anymore, and they were like strangers to their own biological children - due to the long separation and the infrequent and short, conditional visitations between parents and children. Several parents noted:

The baby does not know me, so I would have to work with him. The other children behave like they don't know me. I would have to work with all of them. My small children don't know me because I only see them twice a month for one hour. They are small, so they don't understand. How can they?

I expect them to act out because they are not around me. They don't know me anymore and I don't know them. We would have to learn to be a family again. The removal and separation have hurt us all.

I would have a lot of work to do. They act as though they do not know that I am their mother. It is sad but I know that I will have to work very hard to bring them back to the way they were.

Respondents expressed their concerns about other issues relating to their children whenever they are returned to them.

I expect hell. They have experienced different things living at their grandmother. It may be difficult to get them to behave appropriately. They are sexually active and that is a problem to me.

It would be difficult with the younger child. He is being brainwashed by his grandmother, so I would have to work harder with him. The older child is not a problem though.

I don't know what to expect. My children are confused due to the separation. They are different now. Their aunt does not properly nurture them. I would have a lot of work to do in order to change them back to the way they were.

Some respondents felt that they would have to do a lot of work in order to bring the children back to the way they were before they were removed from home.

They still know me and I am grateful for that. I know I will have a lot of work to do, to bring them to the way they were before they were removed.

I expect them to react like my children. I know that we have been separated for a long time, but we should be able to adjust to each other.

I expect them to try and forget the pains and anguish they have gone through. I expect us to be a family again, but it may take hard work on my part.

Some respondents expressed confidence and optimism, and expected their children to adjust and behave appropriately when they are returned home.

I expect them to behave appropriately. I expect them to go to school, and treat each other kindly, and be loving towards me.

I hope that they behave like they used to before they were taken away. We were one family then, hopefully, we will be one family again.

Since I see the children often, they know who I am, so I don't expect problems with them. I expect them to behave appropriately.

STRENGTH GAINED FROM SUPPORT SYSTEMS

Respondents identified family members such as their mothers and husbands as being mainly responsible for strengthening them, and giving them positive support when they needed it.

My mother talks to me about my drug problems. She is my only support, as my husband is not helpful.

My mother who lives in Florida, and my friends provide valuable support to me. My two children at home also keep me going.

My husband helps me cope with my problems. He provides me with strength and support.

Several respondents cited their job responsibilities and employment as major support systems to them.

I receive very good support from my job responsibilities. My job keeps me busy, and makes me forget my problems. I work with troubled children and it is very challenging and rewarding.

Full time employment, parenting skills training, and the self-help program I attend provide all the support I need. Everyone in the self-help program has similar problems like me, and we learn from and support each other.

I have been able to salvage my business even though it has been difficult. My job responsibilities and business ventures keep my mind off my personal problems.

A few respondents received inspiration and motivation from God, prayers and church – and used their religious beliefs and spirituality to help them get back their children.

I go to church regularly, and I pray and ask God to help me get my children.

I go to church regularly, and church and the bible are my main supports. My private social worker helps me understand the system and my situation.

Some respondents were extremely satisfied with the C-Plan advocacy meetings, and felt that they received encouragement and valuable information about their cases at C-Plan meetings.

I was referred to C-Plan by a friend, and in many ways, they provide support and encouragement. C-Plan gives me hope that I will get back my children.

At C-Plan, I am around people with similar experiences, and it helps me understand and cope better.

The C-Plan support group helps me a great deal. We talk about our problems and listen to other people's problems.

Respondents indicated that counseling and therapy sessions were very helpful to them, because the sessions helped them cope with their problems, and decreased the sadness and pain they were going through.

I get counseling and parenting training at McMahon (a private agency). The counseling is good, and it has made me aware of things I should not do.

The counseling and substance abuse sessions are very helpful to me. I feel good after attending those sessions.

The counseling and therapy sessions give us support. I have benefitted from taking those sessions.

BIOLOGICAL PARENTS CONCEPT OF A MORE FUNCTIONAL AGENCY

Respondents offered a number of suggestions to the child welfare agency, for assisting families involved in the kinship foster care program. Parents for example, felt that if the child is removed from the home, every effort should be made to reunite the family in a faster (quicker) manner.

The agency should return our children to us faster. They should assist families who need help - financial, medical or social. The agency should be helping families. How can they help us, when they are taking our children away?

The agency should return our children to us in a more expeditious manner. We made mistakes, so why penalize us for so long?

The agency should return our children as quickly as possible. The bonding between parent and child should not (never) be broken.

The agency should reunite us quickly. The longer we are separated, the more difficult it would be for us to adjust to each other. The agency should help us, not penalize us. They are breaking up families.

Respondents suggested that keeping the nuclear family together should be the top priority of the agency,

The agency should keep the family together. They should try to keep families together as much as possible, and should be more helpful to families.

The agency should keep the family together at all costs. If necessary, provide services to us in a quick fashion. *The agency should stop separating and breaking up families and traumatizing children. (italics added)*

The agency should keep families and children together, and should help us get our children back. The agency should help us get our lives together again, and should be more helpful to families and children.

Respondents generally felt that if services were provided to families, and workers were more helpful and understanding, then families would have the required resources in place, which would aid in stabilizing and strengthening the family unit.

The agency should provide us with services such as day care, counseling, after school programs for working mothers...

Help us with drug rehab services and drug abuse counseling. Many of us need help and the agency should provide us with assistance.

The agency should be more helpful and understanding. They should provide services and programs to families. They should also have confidential treatment centers for HIV positive persons.

Workers should make parents more aware of agency policies and procedures. They should be helpful to families and children, and should be warm and friendly, and treat us with dignity and respect.

Respondents felt that agency workers should be more empathetic to families, should listen to parents problems, and try to help them.

Caseworkers need to treat clients like people. They should be empathetic to clients, and should not intimidate us.

Workers should listen to our problems and try to help us. Don't traumatize us by taking our children, but provide services and referrals to help stabilize families. Some families need help and don't know where to turn. We should be helped.

One respondent suggested that ACS should fire the incompetent workers.

ACS cannot do much for anyone until they fire their incompetent workers. The agency has to clean its house. They are not helping but destroying families.

Another felt that kinship foster parents should be properly investigated.

The agency should investigate kinship foster parents properly and not give money to anybody. Kinship foster care is corruption.

SUGGESTIONS FOR IMPROVING KINSHIP FOSTER CARE

Respondents offered many interesting suggestions, which if implemented, could greatly improve the overall functioning of the kinship foster care program in particular, and the child welfare agency (ACS) in general. Respondents felt obligated to highlight the many problems they have encountered in kinship care, and since they are directly involved in the program, it was felt that these recommendations could eventually change the way in which biological parents and their children are treated by foster care providers.

Among the suggestions offered were: reducing the length of time children are spending in kinship care, longer, unsupervised visits with their children, the need for kinship parents to save part of their allowance for the kinship children, the need for a more family friendly child welfare agency, better trained, caring workers, and the need for making available preventive programs for families who are experiencing difficulties in rearing their children.

Some respondents felt that children should not spend a long time in kinship foster care, and every effort should be made to reunite families in a timely manner.

The length of time children are staying away from their natural parents should not be so long. Children should be returned home in a speedier fashion.

Many things can be improved. The agency should shorten the length of time children are spending in kinship care. The agency should also work closer with families and their children, and agency workers should be more honest with families.

Continued interaction should be made with the biological parent, and proper referrals should be made in a timely manner. No child should remain in foster care longer than one year.

Some respondents were not satisfied with the agency's visitation policies, and felt that the visitation policies are not geared towards reunification of parents and their children.

I would like to see my children more often. I do not feel like I am their mother whenever I see them. How can we be a family when I am only allowed to see my children twice a month?

I would like longer visitation and unsupervised visits with my children. One hour a week is not sufficient time to spend with my children.

The financial resources kinship parents receive for caring for their related children was seen as causing rifts between family members. Several parents said:

Kinship parents should save money for the children and not spend it all. The child welfare agency should focus more on the natural parents, as they are the ones who need the help.

In my case, my mother has turned against me, because she is getting paid handsomely to care for my children. The agency should not make families feud against each other over money.

There should be a mandatory process in place to determine parents eligibility to become a kinship foster parent. There should also be a reduction of the money paid to kinship parents.

Many respondents indicated that agency workers were in need of sensitivity training when dealing with parents and children, and should be more informed about agency policies and procedures. They also felt that workers should be retrained, and should be more empathetic to families. The following statements were expressed:

BCW should have better caseworkers. They should be empathetic to families, and should ensure that children are prepared for while in foster care.

BCW workers should be more family centered. Workers should be trained to keep families together, as families should not be separated. The agency should also have more resources available to assist families.

Workers should return phone calls. I cannot get through to the worker. The agency is not helpful, and they take too long to reunite families. I wonder if they know that they are destroying families.

The way workers talk to families, they act like they are doing us a favor. They also lie to us. BCW workers should be family friendly.

The agency should focus on helping families resolve their problems. Agency workers should be friendlier and more professional.

One respondent felt that there should be a closer monitoring of cases, and parents should know what they have to do in order to get back their children.

There should be closer monitoring of cases in order to help the biological parent regain custody of her children. The agency should clarify what a parent has to do to get her children back. Once these tasks are completed, the children should be returned expeditiously.

Another parent had problems with the way the agency handles cases.

I don't like the way the agency handles cases. They should talk to neighbors to find out more about families. They should question our families to find out more about our backgrounds. The agency should be more helpful to us.

Generally, respondents felt that the agency should be more involved with parents, and should provide more resources and services to families.

The agency should emphasize more assistance to families. There should be programs, resources, services, and preventive programs for families and their children.

The agency should have more supportive programs for troubled families. They should also be trying to keep families together instead of breaking them up.

Families should be provided with more one-to-one counseling by agency social workers. There should be an emphasis on assisting and strengthening families. *The agency should also be more helpful and creative (italics added).*

CHAPTER VIII

SUMMARY OF FINDINGS OF RESEARCH QUESTIONS

This chapter provides in detail, a summary of the findings of the research questions and a brief overview of themes which emerged from the interviews. The following are findings from the research questions.

Respondents expressed mixed feelings about their experiences with the kinship program. Some felt that placement with relatives is a better placement objective than placement with strangers, while some felt that the kinship program is taking children away from their biological parents and putting them with relatives. Thus, instead of helping families, they view the program as separating and destroying families and children. Some respondents felt that agency workers are not helpful and deliberately deny them the opportunity to see their children, and felt that workers should be doing much more to keep families together.

Child neglect (57 percent) was found to be the primary type of mistreatment among the parents studied, with child abuse accounting for 43 percent. Substance abuse and corporal punishment / physical abuse were the frequent type of mistreatment. Children were removed from parents who were using drugs, and who gave birth to children with positive toxicology for cocaine. Other reasons for removal were: leaving children

unsupervised, not sending children to school, sexual abuse, corporal punishment, physical abuse, and domestic violence. Many respondents admitted that the allegations were substantiated, but felt that they could have been given a chance to correct their mistakes, while keeping their children in the home and keeping the family unit together.

Respondents generally had positive feelings about their children's placement with relatives. Many felt that their children would adjust well, because they are with blood related family members, whom they know. Respondents felt happy and satisfied with the placement arrangement, and generally felt that their relatives were doing a good job in taking care of their children. However, some parents felt that because of family differences which existed between them and their relatives, their children should not have been placed with relatives.

Many respondents felt that they needed a more focused array of services in order to facilitate the return of their children. Many also felt that the services they have already received was not sufficient, and more reunification type services would be needed to accommodate their children. Housing, financial resources, furniture, baby sitters, and homemakers were identified as badly needed reunification services which would assist and prepare them for their

children's return.

The majority of the respondents felt that the agency has shown no interest in reuniting them with their children, and little or no efforts are being made by the agency and its workers to reunite parents with their children. Many felt that reunification is unheard of in ACS, and the agency is preventing families from being reunited with their children. Consequently, only a few parents felt that eventually, they would be reunited with their children. The majority felt that the child welfare agency has already made other plans for their children such as adoption.

Respondents were primarily women (90 percent) with a mean age of 34 years, and were predominantly Black and Hispanic (84 percent). Most (77 percent) were either single, divorced, separated or widowed, 43 percent had some college education, 50 percent were unemployed, and received an average income from AFDC of \$172 a month. Ninety-three (93) percent of the kinship parents were grandmothers and aunts. Respondents had an average of four children with a mean of two children placed in kinship care, and one child in non-kinship care. The mean length of time spent in kinship and non-kinship care were three and one year(s) respectively. Neglect (57 percent) was the primary type of mistreatment.

Respondents viewed BCW/ACS as being hostile and unfriendly to them, and felt that agency workers did not have to remove their children from the home environment. Respondents admitted to having problems such as substance abuse, and using corporal punishment against their children, but expected the agency to help them get rehabilitation and learn other disciplinary methods.

Many respondents had bad, prior experiences with BCW/ACS, and expressed strong sentiments about the agency and its workers. Generally, many were not knowledgeable about the agency's policies and procedures, and did not have any available resources to gather that information. Many also did not know or did not understand their legal rights, and in most cases, were not told of their rights by their legal aid attorneys.

Respondents generally felt that their children were in competent and safe hands. However, some expressed concern about their relatives age, and the disciplinary methods used with their children. Respondents found the kinship program to be unfavorable, and felt that agency workers could do more to keep families together. Some expressed their dislike for the kinship program because they felt that the agency is taking children away from their natural parents and putting them with relatives.

Respondents expressed mixed feelings about the type of care their children were receiving from their relatives. Some were satisfied and some were dissatisfied. Some felt a degree of satisfaction with the level of care their children were receiving, while others felt that their relatives were mainly in the program to benefit themselves financially. Many respondents felt disappointed with the limited visitation provided to them, and felt that since their children are placed with relatives, they would be able to see them often.

Almost one half of the respondents received services from the child welfare agency, and felt that the services were a prerequisite for them to get back their children. However, many felt they needed a more focused array of services in order to facilitate the return of their children. The majority of the respondents felt that the agency had no interest in reuniting them with their children, and no efforts were being made by the agency to reunite the family.

All respondents expressed strong desires for their children to be discharged to them immediately, but expected problems from their children when they return home. Parents indicated they would have a lot of work to do in order to bring their children back to the way they were before they were removed. Parents identified family members, employment, spirituality, C-Plan, and various counseling and therapy

sessions they attended, as mainly responsible for strengthening and giving them support when they needed it.

Respondents suggested that keeping the nuclear family together should be the top priority of the agency, and the agency should provide services to keep the family unit intact. Parents generally felt that if services were provided to families, and workers were more helpful and understanding, then families in need would be provided with resources which would aid in stabilizing and strengthening the family unit. Respondents felt that workers' actions strongly affected the strained interaction between workers and parents, and parents had to initiate contact with their workers, in order to stay informed about their children. Respondents also felt that children should not spend a long time in kinship foster care, and every effort should be made to reunite families in a timely manner. Generally, participants felt that ACS should be more involved with families, and should provide more focused resources and services to families.

OVERVIEW OF THEMES EMERGING FROM INTERVIEWS

Many of the parents viewed the Administration for Children's Services (ACS), as being hostile, cruel, and unfriendly to them, and the majority felt that agency caseworkers did not have to remove their children from the home environment (Green, 1995). Many respondents felt that the agency could have kept the family unit intact and provide services (such as referrals for counseling, therapy, drug rehabilitation, home attendants, baby sitters etc.) to the intact family in the home (Grant, 1996; Daley and Hart, 1992).

The respondents preferred to call the agency Bureau of Child Welfare (BCW), as they felt that the changing of the agency's name from Bureau of Child Welfare (BCW) to Special Services for Children (SSC) to Child Welfare Administration (CWA) to ACS generally meant nothing to them. Despite the name changes, respondents felt that the agency continues to offer no hope for families and their children. Thus, by using the abbreviation BCW, respondents were identifying with the past, and with the knowledge that BCW is an investigative agency, which removes children unjustly from their homes, placing them unnecessarily in foster care. As poverty, unemployment and other environmental problems continue to greatly affect Black and Hispanic families in New York City and elsewhere (Grant, 1996; Seligson, 1991), these families continue to be more

vulnerable to child abuse and neglect reports made against them.

Once removed from the home and placed in foster care, little or nothing is done for the biological parents (Halpern, 1992), and it is extremely difficult to be reunited with their family again. In other words, the respondents generally felt that BCW/SSC/CWA/ACS separate children from their siblings and families, and ultimately aid in destroying families. The overwhelming perception of the respondents is that the child welfare agency in New York City is not helping families but separating and destroying them.

CHAPTER IX
IMPLICATIONS FOR SOCIAL WORK PRACTICE

What are the implications in this study for social work practice? What are the implications for the child welfare agency, and for agency policy? This chapter provides some answers to the above questions, but focuses more from a practical agency related perspective.

This qualitative study of biological parents whose children were removed from their homes due to allegations of child abuse and neglect, and placed with relatives in kinship foster care adds to the sparse body of knowledge available in the literature. The experiences and concerns of biological parents involved in foster care systems throughout the United States have not been well documented, and this effort attempts to (partly) fill that void.

What is most unique about this study is that the respondents who were interviewed, identified themselves as foster care advocates, who were working tirelessly advocating for not only the return of their children, but for changes in the child welfare agency in New York City. As stated throughout this study, respondents indicate that their lives have been shattered and destroyed by the child welfare agency, and many have decided to advocate for changes in ACS, and the

return of their children.

There are clear implications in this study for social work professionals. The notion that biological parents whereabouts are usually unknown, and that they are not interested in their children's welfare must be highly refuted. This study of biological parents (though small) are of parents who are not only available but are vocal and committed, and have a mission - a combined mission - to change the way foster care is operationalized in New York City. They also want their children returned to them.

The study findings show that most social work functions are not provided by ACS workers, but by the contracted, private, voluntary agencies which provide clients with psychosocial assessments, counseling, therapy, parenting skills training, and make referrals for other services for them. Respondents generally felt that the agency is an investigative agency and not a social work agency, and whatever social work related functions they need, they have to find it for themselves or go to the private agencies.

The agency workers' role in kinship foster care is of a social work nature. That is, they should be having on-going interaction with kinship foster parents, foster children, and biological parents, and should be providing their clients with

referrals, resources, advice, counseling etc. Therefore, ACS kinship workers should have MSW degrees like their counterparts in the voluntary agencies. Many ACS workers do not have MSW degrees and consequently, are not expected to perform social work functions with the families and children they work with. However, if ACS mandates that all personnel working with the kinship population have MSW degrees, then, ACS workers would have the skills and would be able to provide social work related functions with families. Families therefore would be strengthened and empowered, and their lives would be greatly enhanced by the intensive services provided by their workers. However, ACS must make its position clear in reference to the use of its social workers.

IMPLICATIONS FOR THE CHILD WELFARE AGENCY

Kinship foster care has become the preferable resource for children needing temporary, substitute homes, and the emphasis of ACS is to place children with relatives rather than with strangers. The problems with this placement arrangement are that little or no efforts are being made to resolve the problems biological parents are experiencing, and ultimately, no efforts are being made to reunite the family unit.

If the goals of the kinship program are to find alternative placement for children whose parents are encountering difficulties, then the agency has been successful. But if the program goals are to strengthen, stabilize and reunite families, obviously, the agency has been blatantly neglectful, and efforts must be made to correct this flaw of the agency. Therefore, ACS should review its reunification policies, and make every effort to identify the reasons why reunification is such a difficult proposition to implement in the agency.

Child welfare workers should be provided with training in reunification techniques, and should know what procedures to follow, in order to return children to their parents (Grant, 1996). Reunification must be practiced (in reality) by agency workers, and not discussed with trepidation as is so often the case, for fear of something happening to the child when s/he is discharged from the system.

ACS must pay attention to the needs of biological parents, and must have resources available to address their problems. If families are provided with the necessary resources, in a timely manner, then they would be able to fulfill the requirements of the agency, and ultimately be reunited with their children expeditiously. This would mean that workers would have to work closer with families, and provide them with supportive, reunification and other services which will

increase the likelihood of them being reunited with their children.

IMPLICATIONS FOR AGENCY POLICY

The findings of this study show that biological parents have positive feelings about their children's placement with relatives, because they are in a safe environment, in competent hands, and are with blood related family members. However, many parents thought that they could visit their children at their relatives' home as often as possible, without the agency worker's knowledge or approval. Upon realizing that this was not possible, many parents expressed disappointment and disgust with the kinship program.

Questions about the role of biological parents whose children are in kinship foster care have troubled the child welfare agency since implementing the program in 1986. Should kinship parents determine the frequency of visits of their related family members, and should these visits be conducted at the relatives home? Should the visits be supervised or unsupervised? Should the agency worker be involved and informed of the visitation? Should biological parents be able to take their children away from their foster parents for any unspecified period of time? These are vexing but important questions which need further clarification and should be

answered in future research on kinship foster care.

A highly charged debate is made by some foster care critics that kinship foster parents should not be treated any different from non-kinship foster parents. Therefore, biological parents should not be visiting their children at the kinship foster parents (relatives) home, and should not be encouraged to visit or call or take their children out of the home (Dubowitz and Sawyer, 1994; Dubowitz et al., 1993). Consequently, critics have called for standard agency policies on the role of biological parents in kinship foster care, a visitation policy for parents and family members, and a policy for the reunification of children with their parents. Therefore, it is important that the child welfare agency clarify their policies on the above questions, and make them known to child welfare workers, foster care providers, foster parents, and biological parents.

Finally, further clarification is needed on visitation policies and procedures. Are visitations designed towards reunification between parents and their children? Or is visitation disguised as a deliberate method to keep children away from their biological parents for an indefinite period of time? So that they would not know their natural parents, and would become accustomed to someone else, and would not want to be with their natural parents. Thus, these children will

become accustomed to their relatives (kinship parents), and will not want to be with their natural parents. This will make it easier for the parental rights of the natural parents to be terminated, and their children will be put up for adoption.

If visitation is supposed to be a mechanism for reunification, and for keeping families (parents and their children) together, why are parents only allowed one visit of one hour duration every two weeks, or one - one hour visit every month. Is this the policy to be used for family reunification? How can families be strengthened and stabilized when they are separated and not allowed to see one another for any substantial period of time?

CHAPTER X
RECOGNIZED NEEDS OF BIOLOGICAL PARENTS

One major finding in this study was in recognizing the needs of birth parents. These needs are presented along with suggestions for kinship care practice, and areas for conducting further research on kinship care.

A related theme of this qualitative study was in recognizing the needs of the respondents. One major finding was that many would have preferred to be involved with a private, non-child welfare agency instead of BCW/ACS, as they felt that BCW is too anti-family, bureaucratic and investigative in nature. Parents also felt that there was an emergent need to have the following services available for families in New York City.

1. A private preventive agency for families involved with ACS, where they can go for advice, counseling, and to get information pertaining to their case.
2. A private agency for families to go to when they are experiencing problems at home, or problems with their children. This agency should be able to make referrals for services such as counseling, therapy, substance abuse problems..., and should not be affiliated with the child welfare

agency.

3. A private legal agency where families can get legal assistance about their legal rights. This agency should also be mandated to provide legal representation to families involved with ACS, and should be able to represent them in court. Advice on what families should and should not do in the court system should be of primary importance to agency attorneys.

4. A private agency which will monitor and scrutinize the family court system. This agency will monitor the length of time it takes for cases to be adjudicated, and will petition the court for speedier trials, and speedier ending of cases.

5. A private agency which will provide families with counseling for trauma when their children are removed from their homes. There are no programs or services to refer families to when they experience the sudden loss of their children, and unfortunately, families and children are left to fend for themselves.

6. Support groups (like C-Plan) where families who are going through traumatic experiences due to the loss (removal) of their children, can go to for support and help. Usually, parents are left to survive on their own mechanisms, which is

usually limited, while they grieve and mourn over the loss of their children.

7. Biological parents' support and advocacy groups where parents can meet and discuss their experiences with the child welfare agency. The group can also fill the need of most parents - who want to talk to someone who is experiencing similar problems. The group can act as a catalyst for strengthening and empowering parents, and can provide badly needed support systems for parents whose children are removed from their homes.

8. Biological parents involved with child welfare agencies throughout the United States should form advocacy groups in order to put the problems they are experiencing in child welfare on the political agenda. Chapters should be established throughout the US. Biological parents should advocate for themselves, and should lobby politicians to change the cruel policies of child welfare agencies in New York City and throughout the United States.

SUGGESTIONS FOR KINSHIP FOSTER CARE PRACTICE

Kinship foster care as is practiced by the child welfare agency in New York City today, is to disregard and ignore the biological parent, who is (regardless of her problems) the social mother of her child. Once the child is removed from the home, s/he is denied the relations and bonding of the most important ingredient of his/her young life - his natural parent. If the true meaning of kinship is practiced by ACS, the natural kin network would not be broken but would be supported and strengthened when problems surface.

Instead of removing and placing the child out-of-the-home with relatives or strangers indefinitely, every effort should be made to provide the natural parent with the necessary preventive, supportive and reunification services to stabilize, bring comfort to the home, and keep the family unit together. Therefore, ACS must generate programs for strengthening family life. These programs must focus on maintaining the biological network of social relations that is practiced by a normative familial bonding existent between family members.

Is the child welfare agency concerned about the emotional, psychological, and physical damage done to birth parents when (and after) their children are removed from the home? If they are, what have they done (are they doing) to

help natural parents during this difficult and traumatic period of their lives? Are they referred to social support systems and networks, where they can get assistance, or are they left on their own to survive the horrors of seeing their families broken up and separated (and destroyed)? The answers to these questions are presented throughout the study findings, and are issues for further discussion. Therefore, it is necessary for child welfare agencies in New York City and throughout the United States to learn from the experiences of natural parents, and implement policies and programs for strengthening and maintaining parents' lives.

Kinship foster care is seen as being appropriate for kinship parents (grandmothers, aunts, sisters...), but very inappropriate for the natural parents (mother and/or father), whose personal problems created the need for an out-of-home placement for his/her child in the first place. Because of the agency's focus on kinship foster parents and kinship foster children, biological parents are not provided with the attention, services and casework interventions necessary for rehabilitating them, so that they can resume their parental responsibilities. Consequently, natural parents feel that the kinship program is failing them. The program is failing them (parents) because of the length of time their children are spending in kinship care (away from their natural parents), the breaking up of familial relationships (caused by the

placement), the strictly enforced limited visitation policies of ACS and the voluntary agencies, and the lack of focused reunification services available for parents.

Some kind of financial resources should be made available by the child welfare agency to assist biological parents when their children are returned to them. This money would ensure that natural parents have available financial resources to provide (purchase) needed household items such as furnishings and other accessories. This resource would be a great financial asset to parents, and would eliminate the financial burdens usually experienced by them when their children are returned from foster care.

Placement in kinship foster care should be of a short term, temporary nature lasting for no longer than one year. Once the child is placed, all arrangements should be made by the worker to reunite the child with her parents expeditiously. This means that ongoing regular casework contacts would have to be made by the worker with the natural parent(s). Regular casework contacts would therefore eliminate the accepted agency practice of saying, "a parent's whereabouts is unknown."

All kinship cases active longer than one year should be reviewed and evaluated by an independent body of foster care experts, for ascertaining the reasons for the prolonged placement. This should be an end-of-the year practice of the child welfare agency, and the results of this review should be made available for public scrutiny.

The kinship foster care program should be closely monitored, reviewed, and evaluated on a yearly basis by an independent body of foster care experts. All case records, files, computers, foster care staff etc. should be made available to these experts. Questions posed to staff members should be open ended and inconsistent, as too often the Union officers interfere with and prevent workers from answering questions. Or they coach workers in ways to answer questions.

Biological parents should be encouraged and assisted by agency workers to complete the agency requirements such as going for parenting skills training, counseling, therapy sessions, and drug rehabilitation. These services should be required of the parent only if it is absolutely necessary, and not ordered by the worker, as an authoritative measure. Too often, parents are ordered to get services that they do not need. Once the parent has fulfilled all agency requirements, her children should be returned to her (depending on the court's jurisdiction), and not left in foster care - for

another allegation to be reported against her.

Once the child is removed and placed with relatives, regular (monthly) group meetings between caseworker, supervisor, manager, foster parent(s) and biological parent(s) should be conducted and maintained. This is important for keeping the natural parent informed of the progress of the child (about school, medical and other issues). It is also important for maintaining good communication, interaction and collaboration among families and professionals. Meanwhile, the agency worker is working with the entire family unit in the hope of reuniting the family (child and natural parent) in a speedy fashion.

The Family Preservation Program (FPP) should be the program initiative used to stabilize and strengthen families involved in the foster care system in New York City. If properly implemented, FPP would be a better program initiative than the kinship foster care program. However, FPP should not be limited to 8-10 weeks of intensive, intervention services, but should be for an indefinite period of time based on each family's needs.

Families who have been experiencing a number of familial breakdowns in raising and nurturing their children, cannot resolve those problems in 8-10 weeks. That is almost impossible. As a matter of fact, why limit FPP to 8-10 weeks,

while allowing children to be placed with relatives in kinship care indefinitely (in many cases for over four years)? This question is puzzling to many inside and outside of the child welfare agency, and this policy needs to be clarified by ACS administrators.

The intensive services and direct worker involvement that families receive in FPP are the type of program initiatives families in foster care need and would benefit from, and should be the long term objective of the child welfare agency, that is, if they really want to help families and children.

The current controversies over family preservation's accomplishments and limitations have not done much for this child welfare initiative to be used more extensively by child welfare agencies (Maluccio & Whittaker, 1997). However, more vigorous efforts should be made by ACS to make the FPP program, the program of choice for families involved with the foster care system in New York City.

Karger and Stoesz (1997: 4) offer this suggestion to child welfare agencies:

If (the) child welfare (agency) is to be rebuilt, it will happen because dedicated professionals are willing to learn from the past...

FURTHER RESEARCH ON KINSHIP FOSTER CARE

This study, though limited by the small sample size, with an advocacy group of biological parents involved in New York City's foster care system, raises questions about the efficacy of the child welfare agency. Is kinship foster care viewed (by the child welfare agency) as a replacement for natural parents who are experiencing difficulties raising their children? Whether that problem is substance abuse or using physical abuse against their children, shouldn't something be done to help them (CWW, 1997; Grant, 1996)? Is kinship foster care designed to break up families? That is, to take children away from their biological parents and place them indefinitely with relatives such as grandmothers and aunts; while neglecting the biological parents, and failing to provide them with the necessary services which will aid in reuniting children with their parents.

Many questions have been answered in this study, and many remain unanswered, but suffice it to say, the unanswered questions such as those above, are creating great concern among professionals and others about the real intentions of kinship care. Unquestionably, placement with a relative is better than placement with a stranger, but if natural parents are neglected and abandoned, and the placement (with family members) creates ongoing feuds and rivalry among blood

relatives, then surely, much scrutiny must be placed on this living arrangement. There is a need for more empirical data on the relationship between kinship parents and natural parents after a child is placed with a relative. This is an area which has not been addressed, and further research would be extremely helpful in understanding this serious family issue.

Kinship foster care is a placement of convenience for ACS workers. That is, it is easier and less time consuming, for a worker to place a child with extended family members, than it is to secure traditional out-of-home placements with non-relatives or strangers. The worker, by placing the child with a relative drastically decreases the burdensome task of having to remove a child from his/her natural home, transport him/her to the field office, refer the case to the division of placement, and await (sometimes for hours) a placement for the child.

This is a lengthy process for the worker. In some cases, the child may be placed inappropriately - in an unsuitable home - and a replacement (another home) has to be found within days. In other cases, based on the child's age and placement characteristics (behavioral problem, fire setter, medical problems...), the child may be placed temporarily on a short term basis. This scenario is not evident when placing children with relatives, and obviously, kinship is the

preferred placement choice of many ACS workers. Is kinship placement the practice of choice for workers because it is easier to implement? Is this practice consistent in other states? Some clarification on workers placement preference would shed some light on this placement issue.

Are kinship parents trained according to agency standards, before becoming a kinship foster parent, like non-related foster parents? Perhaps a study of both types of foster parents would provide some answers to this question. It is important to note that training is provided to kinship parents after the child is placed, however, the training is not like the training provided to non-related foster parents (Thornton, 1987). Thus, are kinship parents given preferential treatment or coerced by ACS workers, in order for them to keep the child in their home, and thus, avoid the burdensome task of having to seek a non-relative foster home for the child.

Another area of concern for future research is the kinship foster parent. Since related children are placed with them (suddenly and without warning), are kinship parents mentally, emotionally and physically prepared to provide proper care for their grandchildren, nephews and nieces? Thornton (1987) found that most workers felt that:

Many kinship foster parents have family motivations and feel that other family members expect them to provide care for the related foster children placed in their care.

But are kinship parents more suitable to provide nurturing and parenting to foster children than non-related foster parents?

When caseworkers can decide who a child is better off with, without making any efforts to assist the biological parents in order to facilitate a speedy reunification, then many things are fundamentally wrong in the way foster care is practiced in New York City. Caseworkers have a powerful role in the operational fabric of foster care services in New York City, no one will deny that. But are they working together with natural parents in order to ease their burdens. For example, once a child is removed from the home, caseworkers can arrange for the parent(s) to get preventive services in order to resolve the parental problem, and can refer parents to other service provider agencies. They can also work towards reuniting the family unit in a timely manner. But is this done?

More research is needed (especially by private researchers who are not affiliated with (nor controlled by) the agency to be studied) on the foster care system in New York City. A replication of this study using the same instruments, with a larger, more representative sample size would enhance the findings of this study. Further research on natural parents whose children are placed in traditional (non-kinship) foster care, foster parents (both kinship and non-kinship),

and foster children (kinship and non-kinship) would provide badly needed information on the different facets of the foster care experience in New York City.

Comparative studies of biological parents in kinship and nonkinship care are needed to identify the similarities of birth parents' experiences in the foster care system. Since the present study did not look at natural parents in nonkinship care, separate studies of natural parents in nonkinship care would provide valuable evidence of their experiences in the traditional foster care arrangement. Additional research is needed on the above kinship foster care issues, to guide policies and programs, and to provide answers to the many unanswered questions pertaining to kinship foster care.

CONCLUSIONS

This qualitative study of biological parents whose children are placed in kinship foster care attempted to add to what is already known about kinship foster care. The study also attempted to make a contribution to the foster care literature. Since more is known about the other facets of kinship care, namely kinship foster parents, kinship children, and kinship workers (Thornton, 1987, 1991; Wulczyn and George, 1992; Iglehart, 1994; Dubowitz, 1994; Dubowitz and Sawyer, 1994), the information obtained in this study will provide

some answers to birth parents experiences in the foster care system.

It is difficult to use this study sample to generalize about other biological parents in New York City and elsewhere, but there is an implicit significance, that their experiences could be very similar to what other natural parents are having in the foster care system. It can be argued that the respondents in this study are not representative of the 'typical' birth parent, due to their high level of education and income, and their high degree of advocacy. But, if they are categorized as 'atypical,' and they are having so many difficulties with ACS, it may be frightening to learn about what the 'common' natural parents are going through. Therefore, this study is even more important because of what these unusual parents have to say about kinship foster care.

The study findings show that parents generally had mixed feelings about the kinship program. Some felt that placing their children with relatives was better than placing them with strangers, but many felt that they should be taking care of their own children. Respondents had mixed feelings about the level of care their children were receiving, and some experienced conflicts with their relatives.

Respondents generally felt that ACS has shown little interest in reuniting them with their children and consequently, the agency is not trying to reunite the family. Parents felt that they need an array of reunification services to prepare them for the return of their children, and would like to continue receiving family counseling and therapeutic services when their children are returned.

Parents felt that if a child has to be removed from the home, every effort should be made by ACS to reunite the family in an expeditious manner. One parent expressed this feeling:

The agency should reunite us quickly. The longer we are separated, the more difficult it would be for us to adjust to each other. The agency should help us, not penalize us. They are breaking up families.

Many parents generally felt that ACS is breaking up families, by taking their children away from them and placing them with relatives.

Although a very small number (7 percent) did not see their children at all, respondents expressed concerns with the limited visitation or short period of time (one hour) they were allowed to spend with their children. Although parental visitation is strongly related to the reunification of parents and their children (Davis et al., 1996; Cantos et al., 1997), it does not appear that the practice of regular visits in ACS

leads to the early discharge of a child.

This study has provided answers to many philosophical, practice, and policy questions pertaining to biological parents in kinship care in New York City, and justifies the need for further research on this and other kinship issues. Much more can be learned from biological parents in foster care, in both kinship and nonkinship arrangements. Therefore, the more evidence (empirical or otherwise) that is available, the better will be the understanding of biological parents who are involved in the foster care system. This understanding could also be used to measure service outcomes and service delivery for biological parents and their children.

APPENDIX A**KINSHIP FOSTER CARE SURVEY****BIOLOGICAL PARENTS INTRODUCTION**

Hello! My name is Trevor Grant and I am a Doctoral Candidate at the Graduate School and University Center of the City University of New York. I am conducting research for a doctoral dissertation (degree) on **The Kinship Foster Care Program In New York City.**

I am interested in what you have to say about your experiences in the kinship foster care program, and would like to know your perceptions of the kinship program. The findings from the study will be submitted to agency administrators, so that they can better understand the experiences of natural parents who are involved with the kinship foster care program. Your recommendations will also be instrumental for improving service delivery to children and families involved in the kinship foster care program.

Your participation in this study is entirely voluntary and anonymous, and will not in any way affect the services you are receiving from the agency. Every question in this survey is important. However, if there is any question you are unable to answer, you may not answer it. The information you provide me with, will assist in identifying issues that foster care professionals should be made aware of, in order for them to work more effectively with children and their families in the kinship foster care program.

The results of this study will be reported without names, and any statement you make which may be so unique as to reveal your identity will not be included in the report or will be disguised in order to protect your identity. A summary of the study findings will be submitted to the agency director upon completion of the project. This researcher can also be contacted to obtain a copy of the research findings and to explain the study findings to you.

Please do not put your name anywhere on this survey.

**APPENDIX B
KINSHIP FOSTER CARE SURVEY
BIOLOGICAL PARENTS INTERVIEW GUIDE**

RESEARCH QUESTIONS

PERSONAL

1. How many biological children do you have?
2. How many of your biological children are in kinship foster care?
3. How many of your biological children are in traditional (non-kinship) foster care?
4. How long have your children been in kinship foster care?
5. How long have your children been in traditional foster care?
6. How often do you see your children?
7. Where do you see your children?

REASONS FOR PLACEMENT

8. Have you had prior (past) experiences with the child welfare agency? What was that like for you?
9. What has been your experiences with the kinship foster care program?
10. What were the reasons for the removal of your child(ren) from home?
11. What if any, were the most serious problems you experienced when your children were removed from your home?
12. How often are you in contact with agency workers ie. caseworker, social worker, or supervisor?

EXPERIENCES/PERCEPTIONS

13. How do you feel about your children being placed with your relatives?
14. What is your relationship to the relatives?
15. How do you feel about the type of care your children are receiving from your relatives?

16. How do you feel about the services you are receiving (if any) from the child welfare agency?
17. What services do you feel you need in order to facilitate the return of your children?
18. What are your views about the agency's efforts to reunite you with your children?
19. What support systems do you have in place at this time?
20. What if any, are your expectations from your child(ren) when they return home?
21. What would you like the permanency planning goal (long term goal for children in foster care) to be for your child(ren)?
22. What would you like the child welfare agency to do for families involved with the kinship foster care program?
23. What are some things that you really like about the kinship foster care program?
24. What in your opinion could be improved with the kinship foster care program?

DEMOGRAPHICS

25. Age
26. Gender
27. Ethnicity
28. Religious Denomination
29. Education (Highest grade or degree completed)
30. Marital Status
31. Type of employment/occupation?
32. What is your yearly income from employment?
33. If NO income from employment - What is your source of income?
34. What is your income from the above source?

THANK YOU FOR YOUR PARTICIPATION

APPENDIX C
KINSHIP FOSTER CARE SURVEY
BIOLOGICAL PARENTS VERBAL SCRIPTS (PROBES)

2. Kinship (placed with relatives).
3. Non-kinship (placed with strangers).
6. see / visit.
8. Were you ever involved with the child welfare agency before?
12. ... contact (talk with, visit, see).
13. Tell me your feelings about your children being placed with your relatives.
15. Are you satisfied with the way your relatives are raising your children?
17. ... services (financial, medical, housing ...).
18. Are you satisfied with what your worker is doing to reunite you with your children?
19. Who/whom is helping you at this time?
What type of help are you receiving at this time?
20. Do you expect your children to be upset with you for the separation?
Do you expect your children to be different than they were before they left home?
21. Do you know what permanency planning is?
Do you understand what it means?
23. State some things you like about the kinship foster care program.
24. State some things which can improve the way the agency works with biological parents.
33. How are you being supported?

APPENDIX D
INFORMED CONSENT
Instructions to the Research Participants

PLEASE READ THE FOLLOWING CAREFULLY

Participation in this study is voluntary. There will be no penalty or loss should you decide not to participate. Withdrawal from this study at any time, even after you begin, will not affect you in any way. Your identity as a participant in this research will remain confidential with regard to any publications and oral presentations of the results of this study. Your records in this study will be kept confidential to the extent permitted by law.

If you believe you have experienced any problems as a result of your participation in the research you should contact:
 Ms. Jane Golden, Project Director: C-PLAN
 Phone (212) 669-4955

If in the course of the research we find that a follow-up is required, we will let you know.
 - No follow up is required for this study.

As a participant I will be asked to do the following:
 - I will be asked to answer the following questions (in the questionnaire) to the best of my ability.

The following risks may be involved as a result of my participation:
 - I have been told by the researcher that there are no risks in this study.

The following benefits are expected to result from the study:

- The findings from the study will be used to make agency administrators and policy makers aware of the concerns and views of biological parents in the kinship foster care program.

I volunteer to participate in the research study under the supervision of Trevor Grant. I understand the information provided about what I will be asked to do as a participant, and I have had the opportunity to ask questions with respect to my participation. All of the questions I did ask were answered to my satisfaction.

 Signature of Participant

 Date

 Signature of Researcher

 Date

APPENDIX E

Office of Research Administration
 Social Research
 Research Foundation of CUNY



To: Trevor Grant
 c/o Irish Women
 Social Work

From: Robert J. Buckner 

Date: March 2, 1986

Re: Human Subjects Review

Project: 'An Analysis of the Irish Foster Care Program in New York City'

The Hunter College Committee for the Protection of Human Subjects has approved your project with one proviso. The Committee is concerned about the statement "any sensitive findings will be referred to the director for immediate action." The Committee suggests this statement be removed as it violates the patient's confidentiality.

Good luck with your work!

Hunter College of the City University of New York 695 Park Avenue New York NY 10022

NEW YORK STATE

DEPARTMENT OF SOCIAL SERVICES

40 NORTH PEARL STREET, ALBANY, NEW YORK 12243-0001
NELSON WEINSTOCK
Acting Commissioner



Anona Joseph
Deputy Commissioner
Division of Services and
Community Development

189

APPENDIX F

April 17, 1995

L. Trevor Grant
90-20 169th Street
Suite 4D
Hillcrest, New York 11432

Dear Mr. Grant:

We have reviewed the research proposal pertaining to kinship foster care that was attached to your March 28th letter to Anona Joseph, as well as a revised consent form you faxed to Jamie Greenberg on April 5th. We have no objection to your going forward and carrying out your research design as long as the following conditions are met:

- 1) You obtain administrative approval from the Human Resource Administration to interview the parents.
- 2) The informed consent form that you faxed to us is utilized.
- 3) Prior to the worker introducing you to the parents who are attending the training class, such worker will clearly state to the participants that their decision to participate in the research is purely voluntary, and that no consequences in relation to their relationship with HRA/CWA will result, regardless of their decision.
- 4) As stated in your letter, no information identifying the participants may be published or made public in any manner.

We wish you success in carrying out this research, which has the potential to inform policy and practice in relation to the use of relatives as foster care resources. We would be pleased to learn of the results of the study.

Sincerely,

(Judith Gallo
Judith Gallo
Director

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

APPENDIX G**November 20, 1995**

**Public Advocate Office
C-PLAN
1 Centre Street
New York, NY 10007**

Dear Mr. Grant:

I have reviewed your dissertation research proposal, and I am happy to inform you that approval to conduct the study has been granted.

Your qualitative research study using thirty biological parents from C-PLAN, would be extremely useful to us, and would help us better understand the problems these parents are experiencing with the foster care agency.

This is a timely and important project, that would be beneficial to both C-PLAN and the Administration for Children's Services (ACS).

We look forward to assisting you in every way we can.

Sincerely,

A handwritten signature in dark ink, appearing to read "Jane Golden", with a large, stylized initial "J".

Jane Golden

Project Director, C-PLAN

APPENDIX H
AUTOBIOGRAPHICAL STATEMENT

L. Trevor Grant received his Doctor of Social Welfare (DSW) degree in May 1997, from the Graduate School and University Center, and Hunter College School of Social Work of the City University of New York (CUNY). His dissertation is entitled: **Biological Parents Views Of Kinship Foster Care: A Neglected Perspective Experience**. Dr. Grant received Bachelor's and Master's degrees in Computer Science and Social Research respectively, from Hunter College, CUNY.

Dr. Grant was formerly Director of Social Services, Administration for Children's Services, New York City, and was employed by ACS from 1985 to 1991. Dr. Grant is presently the publisher and editor of Yacos Publications, and the author of two books: *The Politicization of Foster Care in New York City* (1996), and *Undocumented, Illegal and Scared: The Experiences of an Illegal Alien* (1997). He is also the author of forthcoming books; *A Chaotic System: Foster Care in New York City... As Told by CPS Workers*; and *Breaking Up Families: Kinship Foster Care... As Told by Biological Parents*.

Dr. Grant has appeared frequently on television and radio discussing child welfare issues, and has presented papers at professional conferences in the USA and Canada.

APPENDIX I
CASE STUDIES

While conducting the interviews for the dissertation, respondents indicated that they had plenty more to say, and needed more time to highlight the critical elements of their experiences with the child welfare agency. Consequently, four parents had a lot more to say (than the others) about their involvement with the agency, and were selected to participate in an extensive, taped thirty minutes interview. The respondents provided in great detail a series of issues relevant to their involvement with the child welfare agency.

The following are responses to questions posed to the respondents. Only a few grammatical changes were made to the responses of the respondents. Of course, pseudonyms are used to protect the identity of the persons interviewed. A brief profile, an interpretation and an update of each story is presented.

PROFILES**LINDA & WAYNE'S STORY**

Linda is a 32 years old Black woman. Her husband, Wayne is also 32. Linda is the mother of ten children, five of whom are in kinship foster care. Only one child, who was born in November 1996 is living with her. Wayne, who is employed as a Building Superintendent is the father of four of Linda's children. Linda first became involved with SSC in 1987. Linda and Wayne's case is presently active, and a dispositional hearing is scheduled for February 1997. The following is their story.

Trevor - What were the reasons for the removal of your children from home?

Linda - Two of the reasons were sexual abuse and excessive corporal punishment.

Trevor - Sexual abuse against whom?

Linda - My 14 years old daughter.

Trevor - By whom?

Linda - By her step father.

Trevor - Who made the report to the authorities?

Linda - Actually she did. She made the report after she ran away. She went to my mother's house stating that I beat her up. It all came out that it was not true.

Trevor - When was this?

Linda - That was in 1995.

Trevor - Was that the first or second report made against you?

Linda - That was the first one.

Trevor - Was that in 1995 or 1987?

Linda - That was in 1995.

Trevor - Were all the children living at home at the time the allegations were made? Who did she report the allegations to?

Linda - She went and reported it to my mother and she called the police. I guess it was her, my mother and my sister.

Trevor - And what happened?

Linda - CWA (ACS) was called and the worker came out to the home and spoke to the children, and my daughter was removed. She was already staying with my mother. They went over to my mother; came here, spoke to the children, and spoke to me. They went to the school, spoke to the teachers, spoke to the children again, and they decided that the children were going to be left in the home and my daughter would be removed. I was trying to do that for three years anyway because she was out of control. When we went to court, the lawyer for CWA and the caseworker requested that the children - that all the boys remain in the home because they saw no reason why they should be removed, and they asked that my daughter be placed

with my mother. Once the law guardian got in touch with the children and spoke with them - they decided that the children were being punished - corporal punishment - and since my daughter made those allegations, they felt that the home was not safe for them to live in.

Trevor - Were there marks on the children?

Linda - No. Nothing. It was just the allegations. The children were not taken to the doctor or anything. We took them to the doctor. The caseworker called me on the Friday before we went to court. He told me, to be on the safe side - take the children to the emergency hospital and have a sexual abuse examination on the boy. And that Saturday morning, I took them to St. Mary's Hospital to the emergency room for examination.

Trevor - What were the results?

Linda - Negative. They took tests. They took their clothes off and the doctor examined every inch of their bodies and there was nothing. No old or new bruises, scars or anything on my children's skin. There were no marks on them.

Trevor - But they were still removed.

Linda - Yes. They were still removed although we had those test results. As a matter of fact, the judge did not even get to see ...

Wayne - We had new doctor's notes and old doctor's notes saying they have never seen marks on the children. The judge didn't get to see that, and no one said that we had those results for him to look at.

Trevor - How long did it take - after the allegations were made - for the children to be removed?

Wayne - About 40 days.

Trevor - So while all this was going on, the worker was coming here making investigations and following up with the school and all that. And then, they came to an agreement that the allegations were true (substantiated) and they decided to remove the children. So the children were removed from the home. How many children were removed?

Wayne - Five children were removed from the home, but they left the 15 years old here for 51 days until the next time we went to court.

Trevor - Was that the person who made the allegations?

Wayne - No. That was her oldest son, the girl's brother. We went back to court and the police called us at 4 o'clock in the morning saying that they have him at the train station. We felt that we did not want to be responsible for him. Also we were trying to get the smaller children back. He was placed with his grandmother also.

Trevor - So the children were removed. Tell me, what serious problems did you experience? How did you personally feel about your involvement with the child welfare agency and the removal of your children?

Wayne - Well, they took the children unjustly. My children were being taken care of very well. I say that because I feel good knowing that I was taking good care of my children. The caseworker came here, he spoke to the teachers who all gave good reports about my children. My children were up on all their shots and these people did not look at none of this. Where they are saying that they have the best interests of the children - my children are being hurt now. They took my children out of a loving home and put them in a situation where in 5 months, he has been transferred to four different homes. Every time we go to see him, he has burns, scratches, knots etc. That has to make you feel bad. But I am holding my cool because they want to say something is wrong with me. They want to say that I am crazy or something. I am being patient. I am hoping that the court will prevail and they will tell me what I have to do to get my children back.

Linda - At first, when the children were taken away, I wasn't eating. I wasn't sleeping. I was depressed. I had to go and get counseling because I needed someone to

talk to beside my husband. I needed someone to help me deal with my loss. I couldn't deal with it. I could not deal with my children being taken away knowing that they were crying for their mother, and hearing their voices and having to go and see them and hearing them crying. I wasn't dealing with it at all. I wasn't dealing with it good. I took it very, very, very hard.

Trevor - What type of personal experiences did you have? By that I mean, were you depressed or anxious? Tell me about your feelings.

Linda - I was very depressed. I lost about 40 lbs. As soon as the children were taken away - within that week, I lost between 30-40 lbs. I wasn't sleeping. I was getting sick and I hated everybody at CWA because they were not trying to help us in any kind of way. I felt that the caseworker who was in charge should have spoken up at the time because he was the one who came up to the house and made the investigations. So I felt that, in court, he could have stood up and said that he had investigated the home, although he knew that the lawyer was for the children and was not going to say ... He couldn't really say anything about the allegations, or about what the children said but I felt that he could have stood up and spoken up. If he felt that the children should not

have been removed, I felt that he should have stood up and said that, and make it clear to the judge ..., and make it clear and exactly why the children should not be removed.

Trevor - Were the children removed and placed with your mother?

Linda & Wayne - Yes, with both of our mothers.

Trevor - Tell me about that experience and how you felt about that.

Linda & Wayne - It was horrible. My son got burnt with a toaster. He got kicked off the top bunk bed. Then, they sent him from her mother's house to my mother's house. In my mother's house, she beat him with a wooden spoon. He got molested over there, then when he said that my niece did it, no one wanted to believe him. In other words, they said that I wanted him to say those things. My mother admitted to drinking one 40 oz of beer while she had my children. She didn't want me at her house to see her drinking while she had my children. She said she would stop while she had my children, so I said fine. We went to the agency to see the children and my mother told the people there that she smells marijuana in the hallway and that I drink in the hallway. So these people (CWA) told me to take a drug

test and I took a drug test. I mean, it seems like everybody playing my children like pawns. It seems like I am the only one who honestly want my children just for love not for money. It seems like everybody else is getting paid. I want my children back for love. I am not looking for money from CWA, ACS, the courts, nothing. I just want my children back home where they belong.

Trevor - Tell me about your experiences with the agency.

Linda - It was and still is horrible. The caseworkers don't want to give you any assistance. **They take your children away and say to hell with you** (*italics added*). They don't want you to call them and when you do try to get in touch with them, they are very nasty. If the worker is not there, the supervisor don't want to talk to you. The manager don't want to talk to you either, and the director don't want to talk to you. Nobody want to talk to you. They just want to put it all on a rocker. If the caseworker is not there, you are just shit out of luck. Suppose you were calling - say I was calling because something happened to my children. I am trying to get in touch with my worker to let him know that something happened to my son. He could be sitting right there and they would say that he is not

there, or if he gets on the phone - he would hurry up and say - he has to go, he's in a rush. But if he took my children, he should be offering some services to me and I am trying to call to get these services. I am trying to see what services they have to offer. They took my children, now they don't want to be bothered with me.

They are very cruel.

Trevor - But then, that is contradictory because the agency is supposed to protect children and at the same time strengthen families. If a child is removed from the home, the agency and the agency worker are supposed to work with the family to reunite the family in a timely manner. Are you saying that that is not being done?

Linda - No, it is not.

Trevor - What do you mean that that is not being done? That is the mandate. That is the agency's policies.

Linda - Half of the time, we don't even talk to the caseworker, unless we call him. We haven't seen him ... He won't send the report cards. He won't let you know how Danny is doing in school. He won't give him any counseling. As a matter of fact, my counselor ... I am in therapy now and the agency hasn't paid these people yet. I spoke to these people and they want to

get paid \$45 an hour. They are telling me to go for therapy. I can't afford \$45 an hour. The people called me this morning saying they haven't received payment yet. They haven't gotten paid, so now I will be eliminated from the therapy sessions. So when I go to court - they will say that I am not in therapy. The agency is not providing any services to us. Up to this day, when our children were taken away from us - November 21, 1995 - the agency hasn't provided any services to my husband, myself or my children. The only thing the CWA supervisor want to call and tell me is, don't misquote her at the Town Hall meetings. That is when she wants to contact me, when she heard that we were going on television and radio. Or when we call our lawyers to put in a motion - that's when she wants to talk to me (us).

Trevor - She meaning the worker?

Linda - No. The supervisor. The director of CWA (ACS) told me "Don't misquote me, Mr. Wayne." Just answer my question. I said, do you feel that my children should not be home? She would not answer the question. She just said, "Don't misquote me." That's all she kept saying. "Don't misquote me." The bottom line is that she is the supervisor. If Mr. Ray, the caseworker, is under you, you should know what is going on. I told

her a convicted murderer is taking out my son. My son told the social worker at the agency. The agency allowed - in other words - they told the grandmother - it is OK for this man who is on parole - who is a convicted murderer In other words, they told her it was OK for him to take my son out. Then they would have lied and said that the whole family went out. The man's parole officer states that he can't even be around his wife because there is such a domestic violence problem with them that he can't even be around his wife, so therefore the man came to my house to speak to me and said his parole officer did not want to be in the middle of this. So why should they lie and say that the whole family went out. This man came here and spoke.

Trevor - Let's go back to the services you are supposed to receive. Do you feel that you are getting or the agency is providing any services to facilitate the return of your children?

Linda & Wayne - No. We asked the supervisor - what is it that we have to do to get our children back. She said nothing.

Trevor - So then the children should be back with you.

Linda & Wayne – Exactly. Why are the children still gone when she said we have nothing to do. Why are my children not home? They said to go and take blood tests; we both took blood tests. They came out negative. They said to go for therapy; we went for therapy. Now they don't want to pay the people, so I hope next week when I go for therapy, they will see me. These people already said they cannot see me because no one is paying the money. I don't have medicaid. My job don't cover that.

Trevor – It sounds to me like they are giving you the run around. It's easier for them to say do this, do that, but what is the end result of you doing ABCD ... I feel that, they are wasting your time sending you for drug tests, therapy etc. It becomes more and more upsetting to me since I know the system very well, and I realize that families are being taken advantage of because they don't know the system or they don't know the laws of the system nor the policies of the agency – the way I would know or somebody who used to work for the agency. But at the same time, it is clear that you are saying that no efforts are being made to reunite you with your children. But reunification is one of the policies of the child welfare agency (ACS).

Wayne - The supervisor said that it is more than likely that we are going to get our children back on June 20, 1996, but I am not taking any chances. Just tell us what we have to do or whatever. The caseworker at the agency where we visit the children (Society for Seamen's Children) told us that he is going to set up the service plan. In his service plan - he told us that we don't need any parenting skills training. We only need to go for therapy. We have been in therapy. So next Monday, we should be getting our children back. What else should I ask for? In his service plan, if he wanted us to do anything else - when he made that service plan, when we visited him in his office; he should have discussed it then and there. In the same way, he enrolled us in a new hope guild, he should have enrolled us in whatever kind of program he wanted us in. Now, hopefully, they don't say that we need parenting skills because we both have certificates where we completed 15 weeks of parenting skills. If they want us to go again, why not tell us two months ago? Six months ago when our children were sitting in, when we sat down and made the service plan, why wasn't that included in the service plan so we could have had all this completed when we return on May 20?

Trevor - So as far as you are both concerned, you have done everything the agency has asked you to do, and you are prepared emotionally, financially and other ways for the children to be returned. And that is what you are hoping will happen on June 20th. What happens if they decide to adjourn it again?

Linda & Wayne - Yes. Yes. I mean I can't take my children, then I would go to jail. I would have to do whatever they tell me to do to get my children home at this point. But I think it will look real bad on them to try to adjourn it. It has been six months. They tell me they have the best interests of my children, now they want to adjourn it again, from 6 months ago?

Trevor - Do you mean it is six months since you last went to court?

Linda & Wayne - Yes. I mean, that would look real bad on them. You mean you didn't have enough time? Well, if the judge - as a family court judge - his best interests should be the children, so he should listen to both sides of the story. Not just the law guardian and the CWA attorney. These are people he sees every day. We have lawyers also who are supposed to speak on our behalf. So I figure that the judge should listen to both sides. I cut my son's hair every week because I won't let ... I hate to see my children looking terrible; so I walk with clippers, clothes, shoes,

sneakers, raincoat, boots etc. The foster mother is stealing half of the clothes. I feel that if they took our children away, we should not have to take ... empty our closets - when we bought clothes for our children at home. We should not have to empty out our dressers when they are the ones who took our children away from the start.

Trevor - Yes. But the foster parent is getting a nice salary to take care of them.

Linda - Why should I start ... I am forced to go into my children's closet and clean out all their clothes and send them to wherever they are.

Trevor - So what is the foster parent doing with the money that she is getting to take care of the children?

Wayne - They claim that since the children are being moved so frequently The lady claimed that they were fighting. They took him out of that house. So therefore she got the \$900 and they were gone. The same thing happened with my mother. When my children left my mother's house, she got the \$900. She didn't buy them anything. So when the children were at her mother's house, she got the money. She didn't buy my children anything. So my children have not received anything new.

Trevor - Yes. But where is the money going?

Linda & Wayne - To the foster parents. They are spending it on their own children and on their home, and the agency is not even checking on none of this.

Trevor - As far as I heard, the agency is monitoring how foster parents are spending the money paid to them. They want to see how the money is being spent. A good worker would go into the closet and look at the children's clothes, to see what is new from what isn't, and inquire into what has been bought within the last month. A good worker does that. That is being done by some workers.

Linda & Wayne - There are a few good workers. I am not saying that all the workers are bad. I doubt that our worker does that though. Honestly, he has a bad stuttering problem and you can't even understand him. The man is almost cripple. I think that he should be retired because he looks that old. So therefore, it seems that he gets intimidated very easily with the law guardian and the children's lawyer. He gets intimidated so whatever they say, he agrees right away. These people haven't been to my house. They haven't spoken to the children's teachers and

principal. They haven't said one word to us. So he should inform them of the information that we have been giving him. That he has been here. That he has seen the house. If the house was drug infested and we were all on drugs, I know they would have brought that up. But since my house is intact, the children's home ... I haven't heard them say anything. Nobody wants to say anything about the children's living arrangement. But I should hope and I am going to make sure that my lawyer brings it up next week when we go to court. So when the caseworker do get on the witness stand, we are going to make sure that he brings up everything that he's seen when he came out to this house.

Trevor - How are you going to make sure that that happens?

Linda - I am going to tell my lawyer when I go to see him today, to make sure that he ask him these things. Because he is not going to volunteer any information because like I asked him before - shouldn't his best interests be in trying to get the family back together? And he told me, "Yes."

Wayne - His supervisor said, more than likely, we are going to get our children back on June 20th. But that's not telling us anything. That's not why we went and got doctor's note; new doctor's, old doctor's, the principal, the teachers, old teachers ... As far back

as we could go with our children, even the 5 and 7 year olds. So how far back can we go? As a matter of fact, we got hospital records for the newborn, one of the biggest babies that was born there. What's the problem? Where is the problem? They said that we beat our children, where is the proof? Show us. We do not beat our children. Our children never used to miss school. They never missed school. They used to be up on all their shots. We took them to the clinic - for the slightest little thing, we would rush them down to the hospital clinic. We have letters from the doctors, old doctors everything. I just hope that on the 20th - they give my children back. My children are suffering now. They are being abused. I want them to come home.

Linda - Every week when we go to see them, there is something wrong. Last week, my son came to the agency with a big swollen lip. The caseworker didn't even ask him what happened to his mouth.

Linda & Wayne - He said he bit his lip. How can you bite both of your lips at the same time? There were no tooth marks or bite marks. How can you bite both of your lips? Somebody back handed him in his mouth, and they scared him so bad that he dare not tell. I know my child. I could see how scared he is right now. When

he walked ... as a matter of fact, his mother's day card is right here. My other son had a big scar on his chin and we asked him what happened and he said, his foster mother is letting him go outside with 7 and 9 year olds - and he is only 5 years. The caseworker hasn't been out to his house for... Here is his mother's day card. The card has I Love You Mom and Dad. I love you very very much. From Danny. And this is the one, they claim, that is being abused. So I feel that if this child is going to write a Mother's Day card like this saying he wants to come home. Her mother wouldn't even let him call. The caseworker at Seamens gave him paper and crayons and told him to make a card for me for mother's day and that's the card he made. And her mother wouldn't let her son call her on mother's day. I think that's real low on her mother's part because she can't take the love from his parents - that he loves you and me. Regardless, they cannot. So no matter what, the only thing they are doing is abusing my son verbally over there - talking bad about us all the time - for him not to come and tell us what is going on over there. Like I said, the back slap, his mouth is all swollen, so now they must be beating him because he was coming to the agency telling us things. Like you said, a good worker would check out and investigate those

things. A good worker will. And I feel that the worker we have is not a good worker. They claim that since we called BCW, the money stopped for her mother. She was getting \$1400 or something like that. My son comes here with his hair all nappy. Where is the money going? The sneakers look like the same ones he left here with. Where is the money going? But they go to the beauty parlor to get their nails done, and to get their hair all fixed up. They come to the agency with leather coats. And the children are ...

And nobody wants to question that. I don't understand how they approved that house because the house is infested with roaches. The house stays in shambles. There is no supervision there and you can look at the home and tell what's going on. By the house being filthy, I feel that everyone over there is lazy. So who's supervising my child? My child was doing very well. He just got student of the month in his class, so right now, what's going on?

They don't even want to show us the report card - to show my wife and I how he is doing. Every time I call and ask the caseworker for any type of information - I want to know how my children are doing in the school. The only time I see him is on Wednesdays for one hour, and I figure that being a

caseworker, when I call and ask - he should know these things or try to get the information so that he could give it back to me. What is it that you want me to do? Just say, forget about my children so that they can go into court and say that I don't care about my children.

I don't call and ask about the children and I don't care about their whereabouts and how they are doing. That's not true. They cannot say that because I have been calling him for the whole 6 months to ask how my children are doing in school. I even asked if I could go up to the school and speak to the teacher and he told me no, because he's with a family member and she's doing that. She can't even read or write. So how in the world is she going to go up to his school and get a report and read the report to see how he is doing in school. She can't read. That's the only thing I want to know - how my children are doing in school.

Trevor - Have the agency workers ever explained your rights as natural parents?

Linda - No. The agency gave us a contract - the responsibilities of the agency. I would like to know why ACS won't give us some type of policy pertaining to the responsibility of the caseworker and the

parent.

Trevor - They won't give one pertaining to the responsibility of the worker. They won't give that out because the agency would be sued by many parents for the inhumane and cruel treatment they receive from the agency.

Linda - So how do we find that out?

Trevor - There is some information available on the worker but it is all internal and confidential. It is not published outside.

Linda - What then are the rights of the parents - the natural parents?

Trevor - They are supposed to explain that when the initial contact is made with you. They are supposed to explain what your rights are. However, in most cases, it is not done.

Linda - The only thing the caseworker told us was that its our right to fight to get our children back because they are our children. That's the only rights he told us about. And then he said that I am calling him every day. We are calling to inquire about our children because evidently, they are not concerned about them. They don't go to their school, they don't go out to where he is living.

Wayne - So why doesn't he tell the judge why I am calling him. At first, they told me they couldn't get the information of the convicted murderer. They couldn't go into someone's background just like that. I called New York State Parole and got his parole officer's name, called down there on Dekalb and spoke to the parole officer for one hour. I told my lawyer that we have a convicted murderer and a convicted felon, since the judge asked if he is a convicted murderer. They said that they couldn't deny nor confirm it. But the bottom line is, why didn't she say that the child told the social worker that this man took him out alone. The judge didn't get a chance to hear that. The caseworker said that he heard her say it. Well, that's impossible because I am not deaf. I was right there in the courtroom. I did not hear that woman say anything like that.

Trevor - Was that 6 months ago?

Wayne - No. This was when my attorney put in a motion to have my child removed from her mother and placed with his brothers - the two younger children.

Linda - They split the children up anyway because they said that he is not my husband's child. He is the only father that he has known for his four years. He is the only father that he has known. He calls him

daddy. He is the only man who has taken care of him for the four years he has lived. He lives here in the house with him, and has been living here for the last five years. So who are they to say to split them up because he is not his father. They are all my children. That's what I say. They are all my children...

Interpretation

Linda and Wayne are hoping that ACS would return their children to them. Since June 1996, they have been making plans to be reunited with their six children, only to be disappointed by another adjournment from the family court. They have fulfilled their 'contract' with the agency, and have done everything asked of them. They have gone to parenting skills training, therapy sessions, and have taken drug and blood tests, and were told by the case supervisor that there was nothing more for them to do. Yet, their children are still in foster care.

Linda and Wayne are not satisfied with the kinship placement, because their children are living in an unsuitable home, with unfit foster parents. Their children are not well taken care of, and are placed frequently in unstable living arrangements, moving from home to home. The children are also

sexually and physically abused, and have been seen with burns, scratches and a swollen lip. This is further compounded by the separation of the children - who are not placed together. Linda and Wayne are saddened by their children's removal, separation and living arrangements, and are praying to be reunited with their children. They have done everything ACS has ordered them to do, and wonder when their children will be returned to them?

Update

Three of Linda and Wayne's five children were allowed weekend visits with their parents from February 28, 1997. They were also placed on a trial discharge from March 24, 1997. Court ordered supervision is conducted by both ACS and a private agency on a weekly basis for one year. Presently, four children are at Linda and Wayne's home (including their 6 months old child). Two children are with Linda's mother. Linda and Wayne are not interested in them returning home, and since they are approaching emancipation age (18 years), they would like them to be adopted by their grandmother.

DALLIA'S STORY

Dallia is 32 years old of Puerto Rican background. She is separated, has eight children; three of whom are in kinship foster care. One of her children, a handicapped child, died in August 1996 while in city and state custody. Dallia is unemployed and is an AFDC recipient. Dallia's first involvement with SSC was in 1987. Her parental rights are to be terminated by the judge. This is Dallia's story.

Trevor - What were the reasons for the removal of your children from home?

Dallia - Child neglect. The children were not going to school. They were missing school. It was changed from child neglect to drug abuse. The agency (CWA) stated that one of my children was born with positive toxicology for cocaine. They took his urine without my knowledge or permission, and I didn't know what was going on with my child.

Trevor - Was the child a newborn?

Dallia - Yes. That was my fifth child.

Trevor - Were you in the hospital then? Did they let you know that they were taking urine tests from you?

Dallia - Yes. The doctor told me. He told me that they were going to take urine from my child to see what's wrong, and I said, "do whatever you want, just tell

me what's wrong with my child." And the tests came back with positive toxicology for cocaine. I explained to the doctor that I never used drugs while I was pregnant. I explained to him that I did not take drugs even when I was not pregnant.

Trevor - Once they found out that the child was born with positive toxicology for cocaine, they will put a hospital hold on the child.

Dallia - Yes. They put a hospital hold on the child. I had 2 children at the time. I had 2 children at home - my oldest children, ages 7 and 6. They took them from me and gave them back to me. Then, the caseworker convinced me that it would be easier on me because I had a handicap child. It would be easier on me to give the two smaller ones to my children's godmother and I said OK.

Trevor - Hold on. Your baby was born with positive toxicology. You had 2 children at home. Tell me, what happened from there - after you were discharged from the hospital. What happened?

Dallia - After I was discharged from the hospital, the doctor called Emily Sotos's house and said that he needed to speak with me. I rushed back to the hospital two days after my child was born. He put me to sit down and said that my baby was born with positive toxicology.

I looked at him like he was stupid. "What do you mean?" I asked. He went to his computer, punched in something and it said cocaine, cocaine, cocaine; and I looked at him. He asked me if I went to a dentist and I said, "Yes, I did see a dentist." He asked me if I was taking any kind of drugs and I said, "yes, tylenol." I told him I was taking tylenol-3 because I had a toothache during my pregnancy. And he just told me - this has to be reported to BCW and I told him that I understood.

Trevor - Was that your first involvement with BCW?

Dallia - No. I was already involved with BCW.

Trevor - What year was this case?

Dallia - In 1989.

Trevor - And when were you first involved with BCW?

Dallia - In 1987.

Trevor - What were the allegations then?

Dallia - Child neglect.

Trevor - Tell me what in your case situation amounted to child neglect.

Dallia - I don't know what child neglect is.

Trevor - So tell me what was your situation then.

Dallia - I had 5 children, one was handicapped. I had a home attendant. She had to be here at 8 o'clock in order to help me get my children off to school. She usually

got here at 11 o'clock. It was hard for me to get my handicap child and my other four children ready for school. That's when BCW came into the picture.

Trevor - Why? Was it because the children were not going to school? Did the school make the report?

Dallia - They said that they wouldn't tell me who made the report. They also said that they didn't know who made the report. I had spoken to the school prior to that ... I had spoken to the school to let them know that I had just moved to Pastoria Houses and I explained to them that there was always rowdiness in the hallways. There was always gun shooting outside, and my children couldn't sleep at night. It was very hard for my children to get some sleep at night.

Trevor - What type of problems did you experience on either occasions when your children were removed?
Personally, how did you feel, what did you go through?

Dallia - Empty, alone, sorry that my children were taken from me like that. The suffering they are going through right now. The abuse my children are experiencing in the foster care system.

Trevor - We will get to that (abuse in the foster care system). I just need to focus on how you felt at the time.

Dallia - Alone, confused, trying to find out what happened.

They would go to school but they would get there late. I would do everything in my power to get them to school. I was alone. I had to look at the empty apartment every day (tears). I had to look at some of their clothing, their pictures (tears). I have to wait for them to call me. I have to wait for a visit to be arranged. It is the waiting that kills me. It hurts. It hurts so much that I want my children to be home.

Trevor - While all this was going on, were you advised of your rights and responsibilities as a parent?

Dallia - No, not at all. I came to find out about my rights when I put my foot down and said - they are my children, what is going on? They explained it to me. They said, go to court and ask for a 1028 hearing and tell them that you want your children back. I did that. They gave them back. They were taken away again due to the fact that - a worker told me - it was easier for me since I have so many children and I have so many problems - if somebody could take the small ones from me, while I get the children to school and adjust entirely to having so many children. I figured that it looked good. I could then

go to school. I could move forward in life, but with the children in the system, I couldn't get anywhere. I still couldn't get anywhere.

Trevor - You have three children with a relative, how do you feel about your children being placed with a relative? Tell me what is the relationship with your relative?

Dallia - The children are with my maternal aunt, but for some reasons, she refuses to talk to me. She doesn't let my children call me. I have a 14 year old. He has been in the system for 7 years and he keeps in contact with me. He calls me on a sneak tip - she does not know that he is calling me. That's a youth slang meaning I can't talk too long Ma, and I am not supposed to be on the phone. Its hard for me. I haven't seen my baby who was positive for cocaine. I don't speak to him. He doesn't know that I am his mother. I have another son, his junior, and he wants to come home. I have difficulties with my maternal aunt. I see things that are going on with my children that only a mother knows. For instance, ever since my children have been with her, I told her my son needs glasses for school. I said, please take him to get glasses. He can't see, that is why he is doing so bad. He is not reading. He is not functioning well

in school. He just got his glasses. After 2 years, the child just got his glasses. My older son called me and said – Mom, I need a pair of sneakers. I need money, I am graduating and I need money. So Mummy has to see what she can do. Meanwhile, I feel that someone is getting paid for taking care of my children. She is getting money for the children, and for some reason or another, I can't say that she is not providing for them. I know my children are eating. I know my children are healthy. But, there are some things that the children would like. I know that sneakers are expensive but one must always make an effort for the children, no matter how many there are. If I can't get them for you this time, then next time.

Trevor – Are you satisfied with the kind of care your aunt is providing the children?

Dallia – I am satisfied in that they are healthy and they are in school and they are doing great. But they could do better with me. They have this stress on them that Mommy is not with them so we are doing this for Mommy. Now Mommy has to do something for them. She takes care of them. I can't say that she don't. She takes care of them. She frightens them. She tells my oldest son that if your mother takes you or your

father fights for you, I am going to give you back to the foster care system. I feel that is mental abuse because the children don't need to be hearing that they are going to run from one home to another. My children have been through hell and back in foster homes and it hurts me. Because since they have been in the system, I have always been there for them - everyday. I refused to go for drug treatment. I felt that I didn't need to go to a drug treatment program. I need to be with family. I need them to know that Mommy is here. My children would doubt that their mother was on drugs. I teach my children about drugs. I let them know to say No. We watch programs together so they know what drugs do to you. About her providing for them. I speak to my oldest and he informs me about everything that goes on there. He says, Mommy don't say anything because I will get in trouble. What he tells me, hurts me. It is really affecting me and it is stopping me from going forward in life. He says to himself - Let's see how Mommy can get me out of here.

Trevor - Do you feel that she is spending the money or the majority of the money on herself and not on the children?

Dallia - Yes. Yes. Due to the fact that when she had Lazlo, I used to go over there when Lazlo was born. One time

her daughter said, they received money for Lazlo, so I picked up the baby. He was one and a half months old and I asked them - What did they get Mommy's baby, and her daughter replied... We didn't get the baby anything because we need things. Well, that put a lot of stress on me and I let them know that they are taking care of my child, and now that the check is here, my child needs things. The money is not just for you but also for the child.

Trevor - Tell me how many children you have and where are they?

Dallia - I have 8 children. I have 3 boys in the Bronx with my aunt. I have one daughter who lives with her father and I wish that he would give her to me. I have one in Florida. The handicap child is in Albany, and I have 2 at home.

Trevor - Is the child in Albany in a home?

Dallia - Yes. She is in a home for handicapped children.

Trevor - Is she permanently placed there?

Dallia - She is placed there until she is 18 years old, until they can bring her closer, to try to make it easier for Mommy to visit. I have only seen her once since she has been in the system.

Trevor - At 18, she will age out of the system and will be put in a private home.

Dallia - I guess in a private home or in another hospital.

Trevor - They are taking them out of hospitals and putting them in smaller facilities now. There is one in Pastoria - not far from here.

Dallia - I know it. I wish she would come there. My dream is to have her there.

Trevor - What is her problem? What is her disability?

Dallia - She is mentally disabled. She has a cleft palate. She has a dislocated rib. She is mentally retarded. She does not walk or talk (tears). She does not make signs or anything. She doesn't know sign language or anything.

Trevor - So how do they know when she needs things?

Dallia - She gets fed through an IV tube. When she was home - When she was born, they actually gave up on her. But I refused. I told them, I feel I can take care of her, since I did it for four years. So she gets fed through an IV tube. She had one side of her palate operated on. I took her to a doctor so she could get more operations done. When she was away from the system, they refused to do any more repairs on her. They said she could die. So I told them not to let her go under surgery. I would rather let God take his course, and they left her. There is an IV tube in her stomach. She was on phenobarbital. She takes DDADP,

that's an insulin - two times per day. She's full of drugs. The phenobarbital, when I was giving it to her, I went back to the doctor and told him, "I refuse to give this to my child, because my child does not respond." She was not responding. She was all out, spaced out. She looked dead.

Trevor - If you pass near the home in Pastoria and look at the clients - you will see how they are. They are all drugged up.

Dallia - Yes. They are all drugged up. They took my child off medication and put her on something else. As the doctor said, this is something milder. So I figured, the doctor knows best.

Trevor - Tell me about your experiences with CWA, ACS, SSC, BCW - whatever you prefer to call the agency. What was it really like for you?

Dallia - I had workers who were really on my side, who really helped me and helped me through difficult times. But then, they kept changing workers and I kept asking - "What's going on. I need you to help me." I told them that I need money to go to a drug program. If you want me to go to a drug program, you have to supply me with the fare. You have to do something for me. I have 2 small children at home and they said that

they can't do anything for the two children at home. So I said, its impossible for me to get anywhere with 2 children. Can you provide me with the car fare? And they said, we have to look at our budget. After so many years, they finally told me now that they can provide me with the car fare. Now I feel it is a little too late because the judge wants to terminate my parental rights for five of the six children.

Trevor - Does that include the two children here?

Dallia - No. They have nothing to do with my case. They told me I can go to a program and fight this but nothing has been done. I haven't been tested for drugs in four years and I feel that I am drug free. That's what I want to call it. I am drug free. For drinking a beer I am an alcoholic - that's what they want to call it. Alcohol is drugs too as far as I am concerned. But I haven't been tested for drugs. No worker has been in my home in four years. They do not know the conditions I am living in. They know how long it has been as they usually ask how things are with me.

Trevor - Do you have a court case now?

Dallia - No. I don't have a court case. I asked the worker - How can I stop this termination of parental rights and he said - there is nothing I can do about it.

Trevor - Are you saying that your parental rights have been terminated for the 3 children who are with your aunt?

Dallia - I am not sure but on Tuesday, they are going to review my case. They are going to discuss my case in Harlem. The worker said that he would call and tell me what happened but he didn't call.

Trevor - Did you call to find out what happened?

Dallia - I called to arrange a visit with my children for Friday May 24, 1996. We had a visit for May 24th, but the worker called me at 1:15 am and canceled my visit because he had to visit North Carolina with his family.

Trevor - Was it a supervised or unsupervised visit?

Dallia - They are supervised visits. I do not really know if they are supervised visits because when I am there - I ask them if I can take the children to McDonald's - so we can talk and be a family - and have some privacy at least for that hour. It is really hard but ... No one goes with me to McDonald.

Trevor - So technically, they are unsupervised visits.

Dallia - He canceled my visit Friday because he would not be there.

Trevor - So if he is not there, what difference does it make? Somebody else can supervise the visit.

Dallia - I just said ... It is stressful because I am tired being feisty and letting them know how I feel.

Sometimes I let them know how I feel but...

Trevor - Are you satisfied or dissatisfied with CWA? How do you feel about the child welfare agency?

Dallia - The agency is full of shit. I ask them for help. I know I have rights. I ask them for help but what can I do? What can they do, what can we do together? Why can't they help me? I need help. They can visit me. I haven't been visited in 4 years. Instead the worker raps to me and invites me out. I don't get any kind of help. I don't expect them to help me as much as I want them to. I know I have to help myself. The workers are not telling me anything I don't already know. The office I used to visit was small and I had no privacy with my children. My children were afraid to speak to me in my aunt's presence. They hide things until they were alone. Then they say, Mom, we have something to tell you. Mommy goes back to the worker and let him know that this is happening. And the worker says she is their foster parent and she has a job to make my children happy. If my children need something, it is her responsibility to get it. If she can't get it, I will get it. The office is small and dirty. I have no privacy. The office is on Jerome and 161 Street, Bronx. That office has now moved to Harlem.

Everything is in Harlem now. The worker advised me that he has an office now so I can be with my children privately. Some consolation.

Trevor - What services do you feel you need to facilitate the return of your children? Are you mentally, physically and emotionally prepared for your children? Tell me what services you feel you need?

Dallia - My children. I need my children to keep me functioning. I don't need anything for them to come home. I don't feel that I am an unfit parent. I know that I have many children but they are mine and I choose to have them, and I feel that I can get through to them. I don't need a home attendant coming to my home at 11:00 am and leaving at 4:00 pm. I don't need any help. I just need my children. I need them to be home. I need them to know that I am here. I need them to know that we are a family, and we will always be a family. I need CWA's help. I need the court's help. I need the judge to see that BCW is not doing their job. I had my 2 children at home in home care, so that I could go to the drug program and they were taken away from there. BCW could have filled out those papers. I am not getting any help. It is very stressful.

Trevor - How do you feel about the agency's efforts to reunite you with your children?

Dallia - What efforts. They are not making any efforts. They are not making any efforts due to the fact that I rarely see them. If I make a visit, I have 2 children at home so sometimes I cancel my visit because I am sick, or one of my children is sick, or we are all sick. I refuse to take the children to visits if they are sick. If I can make a visit and I am there, and it is 4 o'clock, and she does not show up, and its 4:30 - I say that she is not showing up and I am always right. She does not show. She cancels for the silliest reasons. She has my children calling me by my name. The efforts from CWA are more on her side than mine, when they should be with me. Even if its 50 percent, they should be with me.

Trevor - So do you feel that you are neglected by the agency?

Dallia - Yes, very neglected. Neglected by the fact that my aunt cancels my visits, and there is nothing they can or will do about it. I tell them to please have her allow my children to call me. I don't need her number. Let me know that my children are all right. Let me speak with them. I know they are fine but

maybe if they hear Mommy's voice they will feel much better.

Trevor - And that is not granted to you?

Dallia - No. They don't call me. I can't call them. I don't know where they live. She recently moved because she was having problems where she was living. She has children of her own. Her children sometimes tell my children that they are foster children, and it hurts my children because they are supposed to be one family. She does not talk or speak to me. She does not give me the time of the day, yet she has my children - and since she has my children, I feel that I should be involved in school activities, school functions, report card days etc. I was always there for these things. She took that away from me.

Trevor - What role does your husband play in all of this?

Dallia - My husband left me due to the fact that he couldn't deal with this anymore.

Trevor - Is that the same gentleman who called me? He sound so concerned and caring.

Dallia - Yes, he is. But he can't deal with it anymore. We are separated.

Trevor - At what stage did he leave?

Dallia - Since August last year (1995). We keep in contact.

His son is in the system and he tried to get his son. He has seen his son only twice - once through a window. He just can't deal with it. It is stressful. He sees me hurt and he can't cope seeing me hurt. I am not suicidal or anything but sometimes it crosses my mind and I say - that is not a way out. It is hard because I have lost everything.

I have lost my children. I have lost my self esteem.

Trevor - What keeps you going? What keeps you looking forward to the next day?

Dallia - My children. I don't know what I have to do to get them back. They say go to this program. They told me to go to parenting classes. I went and I finished but that was not enough. My 2 children who are home... That visit, I don't know when I am going to see them. Graduations, birthdays - those are things that a family looks forward to but these things are denied me, their biological parent. I have faith that we will all be together again one day, that we will be a family once again. I have faith. We will be together. We will be reunited again one day (tears). I don't have a lawyer to represent me. Every time a lawyer is assigned to me, he says go and give CWA blood and urine.

I used to give them urine and blood and nothing happened. I went to this drug program for 4 weeks and I got pregnant, got lazy, stayed home and had another child. The judge said, "Let's see how this child is going to be born." Thank God, my children are home. There is nothing I can say. I have 2 children at home. I feel that if I am neglectful to my children, why are these two children home? I have food, I have beds, clothing, everything they need. My other children have everything they need but it is hell. It is aggravating, it is stressful, it is very painful.

Trevor - What's in the future for you? What would you like for yourself?

Dallia - My children. I just look forward to having my children and starting a new life, moving away from New York and giving them a new life with Mom; even if their father is not in the picture. Knowing that they have brothers and sisters. My children in the Bronx haven't seen their sister since she was taken away one year ago. They ask for her. She ask for them and there is nothing I can tell them. They know that they are in the system. They know that Mommy is trying hard. They just don't see that. The oldest child sees that Mommy is trying her best but the

little ones sometimes feel that I don't want them or Mommy is forgetting them and that is not true. It is not true.

Trevor - So all in all, your experiences have been traumatic, and sad, and instead of helping you and your family, the agency (CWA) has destroyed your family.

Dallia - Yes. They have destroyed my family. They have destroyed my family mentally, physically, and emotionally. They have destroyed the children. I have one daughter who ran away from the system because she wanted to come home to her mother (tears). When she ran away, they didn't tell me that she ran away. I called her old worker and she told me that she was missing. She had been missing for three days. I made an effort to go and look for my daughter. I put up flyers, offered rewards, couldn't sleep at night knowing that my child was somewhere out there.

Trevor - How old was she?

Dallia - She was 11 years old. She was involved in a gang. I was really frightened for her life. She would call and tell me, "I am not going back until I go to my Mommy." After 5 days of looking for her, I got a call from Florida. My mother told me that my daughter was in Florida. I asked her how did she get out there?

Let me speak to her. I said to my mother. Let me
speak to her.....

Interpretation

Dallia feels that ACS is not making any efforts to reunite her with her children. In fact, she feels that she is losing her children to the child welfare agency, as her parental rights are being terminated by the judge. Dallia does not have the financial resources to pay an attorney to fight the termination process and does not know where to go for free legal assistance.

Dallia feels neglected by ACS, and feels that the agency could have been more helpful when she asked for (and needed) their help. She has completed parenting skills training, and taken drug, blood and urine tests, but her children have not been returned to her. Agency workers have not visited her home in four years, and have shown no interest in putting her family back together.

Dallia is not satisfied with her children's foster parent (her aunt), who does not cooperate with her, and threatens to put her children back in foster care. Dallia feels that her aunt medically neglected her son for 2 years by not providing him with glasses, and she should be reprimanded

by the agency.

Dallia is very saddened by her children's placement, and suffers emotionally and physically from not having them with her. Dallia feels that ACS has destroyed her family, her husband and children. While in foster care, one child ran away from her foster home and another died. Dallia is very saddened by all that has happened (is happening) to her.

Update

Efforts were made to contact Dallia but they were fruitless. Dallia is believed to be still living in New York City. More efforts will be made to contact or locate her in order to get a current update of her case situation.

LYNNE'S STORY

Lynne is a 37 years old Black woman. She is single, the mother of eight children; three of whom are in kinship foster care. Lynne is unemployed and is an AFDC recipient. Lynne first became involved with BCW in 1980. Lynne's case is presently active, and her next court date is in January 1997. This is Lynne's story.

Trevor - Could you tell me what were the reasons for the removal of your children?

Lynne - The police said - the first four youngest children were being battered. The police said that they were beaten with a crowbar; then they said, they were beaten with a club - the device you use to secure your car from theft.

Trevor - Tell me what happened.

Lynne - I went to take the baby to the hospital. I called the ambulance but it didn't come. The fire department came. The firemen put a clear solution on the baby's hand, saying that it was not a serious abrasion, but I should go to the hospital. Meanwhile, the ambulance and the police came. I went upstairs to get money to go to the hospital. I went upstairs and there were a policeman and a security guard in my apartment. I

went and got money and other things I needed to go to the hospital, and went back in the ambulance. They dropped me and another friend off at the precinct. My son and the rest of my children stayed home. The police said that the children would be returned to me after they took their physicals. Meanwhile, they took the baby to the burn unit. We ended up staying overnight at the precinct. Someone from ACS told the police to return the children to me but they did not. The police told me to come back at eight o'clock in the morning. I returned but the police told me that the children would not be returned to me. I asked them why and they said they couldn't tell me.

Trevor - What were your feelings at this time?

Lynne - I was very upset.

Trevor - Did you know anything about the child welfare agency then?

Lynne - No, and no one explained anything to me. No one told me what was happening and how I could protect myself. However, a Black officer told me that I should go home and they would probably return the children to me. I said, "what about the baby's bottle and milk?" They said, "give us the bottle and milk." The baby didn't have milk or bottle or pampers. They got it from us the next morning.

Trevor - So the baby was in the precinct without milk, bottle, or pampers.

Lynne - Yes. During that time, I called my sister and the policeman said - it does not make any sense calling my sister or relatives or anyone else because your children would not be going to anyone in your family, or any relative whose address you know. They told me not to call anyone else in my family. They said that my children would not be going to anyone in my family.

Trevor - Did anyone tell you what the allegations were?

Lynne - No. They then removed the children the next day out of the precinct to another place. They were afraid that there would be a riot or something, so they removed the children out of one precinct to another precinct in Flatbush. We were first in a precinct in Brownsville. All of the children were placed with my sister by the police.

Trevor - How did you feel about the police placing your children with your sister?

Lynne - At the time, I wasn't aware that my sister had serious drug problems. At the time, the safe with my money was in her house. My oldest child went up to the apartment to get things out and when he returned

from the precinct, someone robbed the apartment. They took all the children's belongings, some of my things and whatever they could get out of the apartment. When we got back, we called the police. I was still in the complex. We were staying in a shelter due to a fire in our apartment building. When we returned the following day, they went back into the apartment to move the things out. I don't know ...

Trevor - While all this was going on ... You said earlier that no one explained your rights and responsibilities to you. Did you know what was going on?

Lynne - No.

Trevor - And no one explained anything to you.

Lynne - No. My friend who was with me asked if she could go with me, and the police said No; she is a big girl, she can go to the precinct by herself. My friend asked them, "Is she going to be arrested? Does she need a lawyer?" The policeman said No. She does not need a lawyer. She is just going down to the precinct to talk to us.

Trevor - But while you were going to the precinct, did you know that you were suspected of committing a crime and that you were under suspicion for burning your child?

Lynne - No. They never said anything about the burn. They just said that they wanted me to come down to the precinct to talk. I asked them in reference to what and they said, we need to talk about the children. They didn't say which children but when I got to the precinct, they started reading things up. They said that my 14 years old daughter said this, and my other daughter said that. I asked them if they spoke to anyone in my building about my children making noise and they said No. Then he asked me, how the baby got burnt and I told him (as a matter of fact, he asked me that in the car). And he said OK. The older policeman asked me questions about the children. He asked me questions about the premises. He asked me how I ended up living there, and I told him that we had a fire and the Red Cross placed us there. That was basically all that he asked me. Then he asked the girls two questions and that was it.

Trevor - In terms of your children being placed with your sister, was that explained to you? Did you understand what that was all about?

Lynne - No. Nobody explained why my children were being removed and placed with my sister. An ACS worker said, that was the way the agency operated. You have no rights. It is not up to you. You have no say in the matter.

Trevor - Do you think that was fair? Did you ask anyone to explain what was going on?

Lynne - No, that is unfair. I asked the ACS worker, "why were the children removed from me and placed?" Even my father asked. She told me that I have no power to ask anything. She also said that my father was a good parent and he was a soon to be certified foster parent. He had a beautiful home with enough room for the children. Marilyn (my sister) was also a good potential foster parent and she had sufficient room to care for the children. The BCW worker also said the same thing about another sister whose home she never visited. I know because the day they removed the children, I was at the BCW office and from that day I haven't seen my children. The BCW worker didn't know my sister's address and I gave it to her.

Trevor - Mr. Rather, how did you get involved in this? I know that you told me you received a call from someone.

Rather - I got a call from a BCW worker who asked me for directions to my house. I provided the directions and she said that she would be here in an hour.

Trevor - Did she explain why she was coming?

Rather - No. She only said that she wanted to talk to me.

Trevor - Did she say the "talk" was related to Lynne.

Rather - She said, it was related to the children. Marilyn had some of the children and she wanted to know if I could take the other children. When she got here, I asked her, "what is this all about?" And she said that Lynne abused the children. I asked, "how did she abuse the children?" She said that Lynne beat them with a Club. I said, "a Club, what kind of Club?" She said the Club which locks the steering wheel of a car. I said, "no, she wouldn't beat the children like that. That is not like Lynne." That is what I told the BCW worker. That is not like my daughter. She does not do things like that. She is good to the children. She asked me more questions and I answered them. She inspected the house and said that I needed window guards and a smoke detector.

Trevor - Did she ask you, if you were willing to care for the children?

Rather - Yes, and I told her - Yes. I said before I let the children go any place else, you could bring them here. And she said OK. Mr. Rather, I will talk with you later and she left. About 30 minutes later, my daughter, Marilyn came with the children.

Trevor - Did you have any conversation with Lynne about her abusing her children?

Rather - No. When I spoke to Lynne, she was in Rikers Island. She was crying and I didn't know that she was in jail.

Trevor - How did you get incarcerated?

Lynne - The same day I was questioned by the police about the children - they interrogated me for about ten hours and then arrested me. They didn't even read me my rights. The policeman told me to go over there and sit down. He opened the door and told me to sit down. Another policeman asked what I was being arrested for and said that I didn't look like the type of person who would abuse her children. They arrested me for child abuse. I had two cases - one in Criminal Court, the other in Family Court.

Trevor - What happened to the criminal case?

Lynne - They dropped it. The case was dismissed due to lack of evidence.

Trevor - So we are only dealing with the Family Court matter now?

Lynne - Yes. The next court date is September 9, 1996.

Trevor - Mr. Rather, were you involved with the district attorney also?

Rather - Yes. They called and asked me questions.

Trevor - Since that case was dismissed, let's focus on the family court matter. From then to now, what has been your experience with the kinship foster care program?

Lynne - As far as my children are concerned, I haven't received any help from ACS workers. For instance, it was wrong for them to let my sister know the foster mother's phone number and address, to take my daughter out of that woman's house; and have her out on her graduation until the following morning. If they took my daughter out of the household - who gave the authorization for her to go back to my sister's house, and go out on her graduation with my sister. And my sister having the lady's number and address, and telling her not to give me the phone number and address. I never asked the foster mothers for their phone numbers or addresses.

Trevor - What other issues do you have?

Lynne - I don't like how they are taking care of my children. I don't like how they look physically and the way they dress. Their sneakers are always dirty and they only wear cheap sneakers.

Trevor - Are their immunization shots up to date?

Lynne - They don't disclose that information to me. That is another thing. They keep asking me for their medical records and since I didn't give them the records, they said that I couldn't see the children because they had to get new medical records. They have to be up to date on their shots because they cannot go into people's homes without current medical information.

They claimed that I couldn't visit them because the baby was sick from the shots. If he had his shots, why wasn't his records up to date? If the shots were already taken, why weren't they transferred from Brookwood?

Trevor - The policy is that every child who comes into the system must have a full medical evaluation.

Lynne - But they kept asking me for the medical reports.

Trevor - Who kept asking you for medical reports?

Lynne - Brookwood's social worker.

Trevor - But Brookwood is supposed to do their own. Once the child comes into placement, it doesn't matter which agency he is placed with, they are supposed to do a full medical examination on him.

Lynne - But why give the child a shot he already had? Why put him through the whole process again? My children had to go through the whole process again. They had to receive shots they already had. Now my baby is sick because of them giving him the same shots twice. He may have kidney problems. He may have other problems which may affect him.

Trevor - They are not supposed to repeat the shots. They are supposed to do a medical evaluation.

Lynne - They had to get the shots done all over again because they didn't have them when they were in the foster parents house.

Rather - When I went downtown, and they gave us the examination, the doctor said that these boys were in tip top shape. He didn't say anything about rheumatism or asthma or anything. The only thing he asked about was a rash on one of the boys which was due to his dry skin.

Lynne - When the children were taken, they asked me personal questions about the baby. The 2 year old who is sick needed an operation because one of his testicles is still in his stomach, and my other son was in the hospital with asthma. He had his first asthma attack because he is allergic to the cat and the carpet. My father had his carpet cleaned because of the child being so sick. The doctor stated that if the child had a thorough physical, why didn't they detect that he had walking pneumonia? He was in the hospital not only for asthma but walking pneumonia. My father has the papers in his room.

Trevor - Do you feel that the removal of your children and all the trials and tribulations you are going through now are justified?

Lynne - No. No. I understand them taking the baby; the 2 1/2 and 1 year old out of my sisters' Shirley house because I hadn't seen her in 17 years. I don't even know how she got into my business. I live in

Brooklyn and I called her once. When I had my baby - the same baby they put into her household... They knew where I was living, the conditions, the surroundings etc., and they still let me and my children live in that place. If they were so concerned about me and my children, they could have come and helped me when I was living in the shelter, but they were not concerned when I had my baby. My son's girlfriend brought me some things. My sister didn't come to the hospital to see if my baby was living or dead. She didn't visit us at the hospital. Besides, she is supposed to be my family and my sister. She could have bought something for the baby or she could have visited us. She knew the baby was in the hospital. She knew the baby had to stay in the hospital because he had kidney problems. My sister, Marilyn, told me that my father had moved and my sister had moved. She told me that she didn't know where my father lived, and she did not know where my sister, Robella lived. They inquired as to where I lived but Marilyn said that she did not know where I lived. All she knew was that I lived in Brooklyn. That is what she told my sister Robella. I don't know what she told my father but she knew exactly where I was. She came and picked up my daughter. My daughter won the New York Post contest for best essay

around the world. Marilyn came and picked her up from school without my authorization. The social worker could verify that. I told her not to come and pick up my children because I don't want to be bothered with them. They only come around when they want money for Susan or when they want money to buy something. The only person she was concerned about - of all my children was the 5 year old. She would come and get her every week to spend week ends. But other than that, Marilyn had no concern for me and my children.

Trevor - Lets move to the present. The children are in placement. You visit them every 2 weeks at the agency. You indicate that you don't need any services because you are a good, average parent. You are not using drugs or anything like that - so what do you feel the agency is doing to reunite you with your children?

Lynne - Nothing. First of all, the reason why they started giving me visits was because I kept going to the Director and he told me who to call to arrange visits with my children. I was told to call Brookwood to arrange visitation with my children. BCW told me to call Brookwood. They didn't give me their phone number or address. My private social worker at

Arverne found the phone number, and we called everyday until we found out who the children's worker was. My father told me where the children were located.

Rather - I found out the number and address because I kept calling the BCW workers. Every time I called, I was told that the workers were out in the field or in court. Everyone I asked for were not in the office. I spoke to a Hispanic man and he helped me. He said that he was familiar with the case and he would give me some information. However, he didn't want me to disclose his name because he didn't want to get into trouble. He gave me the name of the agency and their phone number and address. When I called the agency, they gave me the run around. I got disgusted and I said that I cannot deal with that anymore.

Trevor - So even though your children were placed, your ACS worker never called to tell you where your children were placed and other pertinent information about the placement.

Lynne - No. I got it from my father. The information was verified by Arverne's worker. It took them about 2 weeks to get a worker to handle the case because I had to personally go to the ACS office to get information about my case.

Trevor - Tell me how you feel about the child welfare agency (ACS)?

Lynne - I feel that they are not honest and trustworthy. The agency is giving money to people who don't deserve it, and they should thoroughly investigate people and their family, and find out from family members, what is going on with the family. Only your family will know what is going on with you. Every family has family secrets, but when something seriously happens in reference to your children, your family will come out because we are talking about children's lives. When somebody is using drugs, it is a serious matter. You begin to forget things. Your interest is only one thing; your drugs and drugs only. I also think that Brookwood gives money to people who don't deserve it.

They are wasting City and State tax money. I also think that ACS should be closed. I don't know how those people got their jobs. Because, anytime you can just overlook people because they are biological parents and you don't like them... My worker took my case personally. She did not like me and she took my case personally. When we first met, I asked for her assistance in securing an apartment, and she said

that the agency does not do those kind of things, and we don't help people get apartments. So I asked for her assistance in getting a home attendant and she said, "why, so you can lay up on your ass all day." Those were her exact words. And she said that in front of my children.....

Interpretation

Lynne states that ACS is not doing anything to reunite her with her children, and has not provided her with any assistance. In fact, she feels that she is unjustly treated by ACS and the family court because they keep adjourning her case. Lynne feels that agency workers could have helped her and could have told her where her children were placed. She also feels that her children did not have to be removed, as she did not abuse her children.

Lynne feels that her children were placed with an unsuitable person (her sister), who is a drug user and whom, she does not get along with. The placement of her children with her sister only increased tensions and squabbles in the family, and caused more anguish. Lynne is not satisfied with the policies of ACS and its workers, and feels that biological parents are treated with disrespect by the agency.

Lynne comments on agency workers:

Agency workers say that natural parents have no rights. We are powerless and have to do as we are told, but even when we comply, our children are not returned to us.

Update

Lynne's children are still in foster care, and are being moved from family member to family member. Lynne has not received any assistance from ACS, and has become very disillusioned with the agency. Her next court date is scheduled for April 28, 1997. Lynne hopes that her children would be returned to her then.

RENE'S STORY

Rene is a 32 years old Black woman. She is divorced, and the mother of two boys, one of whom was in kinship foster care. Rene is employed as a counselor. Rene first became involved with the child welfare agency (SSC) in 1986. Rene's older son was discharged to her in September 1996 with court ordered supervision by ACS for 4 months. Her younger son was remanded to his father's custody. This is her story.

Trevor - Could you tell me what were the reasons for the removal of your children?

Rene - The allegations were for child abuse. My six years old child took \$120 of my rent money from the home. For five days, I asked him if he took the money, and he said - No, Mummy, I didn't take it and I haven't seen it. Then, his teacher called and told me that he had plenty money in his possession, and they were going to investigate how he got such a large sum of money. I went to the school and had a talk with the teacher. She asked different students to tell her where the child said he got the money. Every story he told was a white lie. It was the last day of school before the Christmas recess. I asked the teacher if I could have the child out of school, since he was not worthy of going to the Christmas Spectacular show

at Rockefeller Center. "Let another child who is more worthy use his ticket," I said and I took him home.

Trevor - Tell me about the abuse, and the methods you used to discipline him?

Rene - The discipline I used, I see clearer now. I may have overreacted but at that time, and after asking him for 5 days and having a dispossessed notice from New York City Housing Authority (NYCHA), because my rent was not paid and legal fees was being added to it. Also I am a single, divorced parent struggling to keep my family together; and for a 6 years old child to do something like that was detrimental to me.

Trevor - So, did you blow your cool?

Rene - Sort of. Yes I did. I honestly did not take action that day. I actually waited until 6 days later and something else he did took me off the edge and it all escalated.

Trevor - What did you do?

Rene - I made him take his clothes off and I beat him with a belt, and I explained to him my morals and values of growing up. That is one of the ten commandments - thou shall not steal. And I took him to the kitchen, turned on the stove and said - so you want to steal and I let him feel the heat of the stove. I did not lay his hand on the stove as they exaggerated on the report from the child abuse hotline.

Trevor - Did he cry while you were beating him?

Rene - Yes, he cried. He cried because he realized what he did was wrong, and I gather that I never whipped him like that before.

Trevor - How did this become known to the agency?

Rene - Through my nosy neighbors. They made the phone call and stated in the report that the child was caught stealing money from mother, as a result, mother beat child and burnt his fingers for stealing. Please investigate.

Trevor - So your neighbor knew why your child was beaten, and the report was made after you beat the child.

Rene - Correct. So why didn't the neighbor ring my bell and inquire? Anyway, no home visit was ever made.

Trevor - No home visit was made. So how did the agency take the child?

Rene - They waited for school to reopen on January 3, 1994. I beat him on December 28, so this was 7 days later. No phone calls, no home visit, no investigations were done. They just violated my parental rights and snatched my child from the school.

Trevor - The agency also violated its own rules and regulations because they must investigate (make a home visit) within 24 hours.

Rene - Yes. I am aware of that.

Trevor - So they went to the school and investigated.

Apparently, they examined the child, asked him questions and removed him from the school. Did they ever notify you? How long did it take for you to find out? How did you find out that your child was held captive by the Child Welfare Administration (now renamed the Administration for Children's Services).

Rene - It is my oldest son's responsibility to pick up his 6 years old brother from school at 6 o'clock. At 6 o'clock, he went to the school and was told that Anthony was not at school that day. I take him to school every day on my way to work. I give him breakfast. We get dressed and we leave the house together. So, to tell me that Anthony was not in school that day had me baffled. My older son beeped me, and I jumped off the train to call home to find out what was wrong. I was worried that something was wrong at home. I couldn't tell what had happened so fast since I spoke to him before I left work at 5 o'clock. He's crying hysterically, telling me his brother is not in school. He was not in the after school program so he couldn't pick him up, and he didn't know where he was. So I guess, to save himself from any trouble, he decided to call his mother

because this was an emergency. I got off the train and went straight to the school and I was told the same story. No, the child was not in school today. Now, I know that I am not crazy because I took the child to school on my way to work. Then, I doubled home. Since my house is carpeted, the paper from ACS was pushed under the door. The paper said that my child was in protective custody and to report to court in the morning, the following day. So I picked up the paper (it was 6:30 pm) and only then knew where my child was. He was with BCW, the feared Bureau of Child Welfare.

Trevor - What was going through your mind? What were your feelings?

Rene - This could have been a demented person who snatched my child and BCW didn't even have the courtesy to contact me or get in touch with me. The school did not get in touch with me; and they have my work and home number. I just think that this was done the wrong way. Overall, my constitutional rights were violated. I was notified when my son paged me. He dialed 911 stating that he couldn't find his brother, and nobody knew where he was. My son is the first one home every day, and he didn't see anything indicating

that his brother was removed from school. Of course, he is going to panic. He is a child. He was only 12 years at the time so ... I panicked too because I didn't know where my child was. I had a right to panic because I am a concerned parent.

Trevor - Let's say that this happens to another person, do you see another way that the agency could have dealt with this differently?

Rene - Yes. The agency could have contacted the school principal and get some contact phone numbers. If its a working parent as I am, let the person know the situation. Do not let the person work all day and eventually find out that something's wrong on her way home. To me, my child was kidnapped. Kidnapped by the hands of BCW. That is a form of legal kidnapping.

Trevor - The agency has the power to do that and get away with it.

Rene - Well, they need to change the way they kidnap children.

Trevor - How do you feel about your child being placed in kinship foster care? How do you feel about the relative your child is placed with? Are you satisfied or dissatisfied?

Rene - I am dissatisfied because the agency has taken my child out of a functional home and placed him in a dysfunctional home. He is with my ex-husband's mother. When I requested medical services such as a psychological evaluation to find out why my child steals and at such a young age. The agency worker said, "that is his father's problem. He is with his paternal parents. They will take care of his medical problems. We cannot force him to get a psychological evaluation on his child." Now, three years later, he is a kleptomaniac. I feel so sorry.

Trevor - Did he get a medical evaluation done?

Rene - No.

Trevor - Did you ask his father to get one?

Rene - Yes. He said - nothing is wrong with his child. So I feel, they can keep him until he reaches 18 years, and then he is a man on his own. And then, he probably will be a victim to society. Like I say to my ex-husband, please keep his insurance papers, someone is going to kill him and he is going to be buried. The first thing the judge is going to look at is that he comes from a dysfunctional family. His parents are on drugs, they are probably recipients of the city ... and I am none of the above. I am a single, divorced parent struggling and sacrificing to raise two boys in a household without a man. Well, I

am the man and the woman. I am both parents.

Sometimes his father is supposed to pick him up, he never shows; he never comes; he never calls; so what does the child do; he takes it out on me and his brother.

Trevor - How long ago was that?

Rene - That was three years ago. I blame most of this on his father, my ex-husband.

Trevor - Do you feel that the child welfare agency has done a disservice to you, and if so, in what way have they done a disservice to you and your family; especially your sons?

Rene - Yes, I feel that they have done a disservice to me. As a US citizen, its not what they did, its how they did it. They could have conducted an investigation, explained to me the laws and guidelines of the state regarding parenting of children and recommend me for counseling if that was necessary; but to just snatch up my child and destroy my family unit ... They should be trying to keep families together with support not break them up.

Trevor - Before this incident happened, did you ever discipline your children in this manner?

Rene - No. I did not.

Trevor - So, the reaction you took was just spontaneous based on the incident, and the type of nurturing you have provided the children. In a sense, you were disappointed in his reaction, so everything was spontaneous, and you didn't think about any after effects or repercussions. So you did what you thought was appropriate considering the severity of the crime.

Rene - Yes. I was disciplining my child. Spare the rod and spoil the child ...

Trevor - So at that time, you didn't think that you were doing anything wrong.

Rene - No.

Trevor - Since you didn't think that you were doing anything wrong, you felt that you were teaching the child a lesson, so that he wouldn't do it again. Was that the reason for chastising him?

Rene - Yes. I was teaching him right from wrong. Had he been on a train and he had his hands in somebody's pockets, they would have cut his fingers off.

Trevor - So then, in the role as child welfare agency representatives, workers should be more empathetic with you and be more understanding of the situation, and as you said earlier on, if necessary, refer you for counseling, parenting skills or other preventive

services. By doing this, they would realize that there is a problem in the home, and they would work together with you to resolve the problem.

Rene - If I was referred for counseling, I would have had no problems, even if it was supervised counseling and the monitoring of my attendance. You can tell an interested parent from one who don't care. It would show on my attendance record, and the amount of input I had in the sessions with counselors and the children.

Trevor - In other words, you felt violated by ACS.

Rene - Correct. I felt totally violated of my parental rights.

Trevor - Since agency workers should know better, it is their responsibilities to pass on that knowledge to you and other families they come in contact with. However, you say that this was not done. So what is wrong with the agency? What is wrong with BCW or SSC or CWA or ACS - whichever abbreviation you prefer to use?

Rene - They need to better train their workers. They should provide better support services to families such as counseling, parenting skills training, evaluations, rehabilitation centers etc. The agency should be more empathetic. They should look at each case individually; don't just accuse everyone of child

abuse. Agency workers don't know what made a parent react the way she did, and they should investigate all reports thoroughly and fairly.

Trevor - You are calling for reform in child welfare practice in New York City. Agency workers first choice is in removing the child under the guise of protecting the child...

Rene - And the children are more abused and neglected in foster parents homes than they were abused in their own homes. Half of the time, they don't have shoes or clothes. They don't have many things, yet foster parents receive money and they do what they want with the monetary gains, such as purchasing cars, fur coats, and other expensive items. The agency could have used that money to keep my family together, by way of providing counseling and therapy...

Trevor - If you had the chance to change the agency's concept on taking care of families and children, what would you recommend?

Rene - I would recommend supportive services to the family unit not removing children from their families.

Trevor - In other words, you would be more family focused and family centered, and you would work to keep the family unit together. Irrespective of the problems in the home, you would provide services and workers, if necessary, to assist the family. You are talking

about reforming child welfare workers. As you said before, since many workers don't have children, they don't understand what you and other natural parents are going through.

Rene - To snatch my child like that. Not even a dog deserves her puppy to be snatched like that, and not know where it is.

Trevor - So since you have gone through this, do you feel ...

Rene - This agency (ACS) has made me very hostile, very angry, and very depressed. Everything I was ordered to do - which I felt was unnecessary, very unnecessary - I have done. I have cooperated with the agency but still my child is in the system.

Trevor - While your children are in the system, what is being done to reunite you with your children?

Rene - Nothing. Nothing as of yet. All I have been doing is going to counseling. The agency don't allow me to have weekend visits. Its not like they are trying to reunite the family. The agency get more money to break up families than to keep them together. That is their goal. The more families the agency can break up, the more money the agency get from the Federal, State and City governments. That is absurd because it seems like the agency should want to keep families together; keep both parents or single parents with their children. This is the mental abuse they are

leaving the state of mind of the child with.

Trevor - Do you ever feel that ACS is trying to reunite you with your children?

Rene - No. They sugar coat it by saying that is their goal. Their goal is really to destroy families.

Trevor - Are you using yourself as an example?

Rene - Yes. I am.

Trevor - Are you saying that an ACS worker hasn't sat down with you, explain your rights, explain that based on the allegations, your children may be away from you for an indefinite period of time (days, months or years), and this is what you should do to get your children back.

Rene - Technically, the workers are not even capable of being workers. Any questions I need to know, I have to imply them and wait until I get an answer from the caseworker. The workers are very unprofessional. They are not direct. They beat around the bush. Anything they don't know, they will say - I will ask my supervisor and I will get back to you. If you don't keep up with it and keep asking them that same question, it falls right through the crack. And then, months later, they will say - you never asked me that, and that's not so.

Trevor - Do you ever think of becoming a social worker?

Rene - After this experience and ordeal, I am going through
- Yes, I have. But if I did, I would take it in a different way, from a different angle. Not just because I am a parent and have a parents point of view but you have to think what state of mind you are leaving parents in - just to snatch a child like that. We are not in slavery.

Trevor - It seems like we are still in slavery, doesn't it?

Rene - It sure seems so.

Trevor - Like they say, the more things change, the more they remain the same. They have changed the name of the agency from BCW to SSC to CWA to ACS. What does that mean?

Rene - They can change their name but the same games are being played. Just in a different shape, form and fashion.

Trevor - As far as adoption is concerned, ACS has projected adopting over 5,000 children for 1996. When you consider that there were 3,665 adoptions in 1995, and 2,312 in 1994. It means that more parental rights are being terminated thereby freeing up their children for adoption. And now ACS is trying to place Black children with White families, because more White people want to adopt than Black people, and there are many more Black children in foster care in New York

City. Forty-four percent of the children in foster care in the United States are Black. But that does not mean that 56 percent are White, because you have other ethnic groups represented in the national foster care system... So you said that you don't need any services to facilitate the return of your children to you.

Rene - No. I am ready, willing and able to care for my children. I am taking care of my elder child while he is in traditional foster care, so he might as well be home. He's walking around in a spring jacket in January in 16 degrees weather, a snow blizzard outside. What is the foster mother doing with the funds she receives for him? I had to put money from my pocket, not saying that I wouldn't because he is my child but its just the principle of it. So if I put the money out of my pocket, what does she do with the funds she is allotted from the state?

Trevor - Maybe the money is misappropriated and spent on other things.

Rene - It is spent on things for her.

Trevor - So what do advocates like yourself have to do to make the system work?

Rene - Start from the top and work your way down. Start changing the laws, retrain workers, put people out there who want to do the job, not just collect a

salary and at the same time, destroy families instead of providing help to them. Workers should explain the parents rights, explain the child abuse laws and it may be a better system.

Trevor - Do you see any discriminatory practices used by BCW based on child welfare laws?

Rene - Yes. White people are treated very differently. They keep their children in the home and provide them with all the help they need. They also help furnish their homes if they don't have adequate furnishings. They help them more and they make other nationalities suffer. I have seen this myself. I have interracial friends also, so I see first hand what happens to them.

Trevor - At C-Plan, do you discuss your case situation? Does each person discuss his/her case situation?

Rene - Yes. We do a round table discussion - around the table - no one feels ashamed. We all feel comfortable because we are all in this together. We all share three things in common; strength, sorrow, and pain. It eases the pain. It alleviates the pain that we go through.

Trevor - So it is another form of therapy, and its a support system, because you are with people who have similar experiences, and are undergoing similar trials and tribulations. So you feel that you are not alone.

Rene - Exactly and we have help, advice and someone to talk to.

Trevor - Does it lift you up?

Rene - Yes, it does. It has taken me out of my depression state. I am very glad that I was referred to this group, C-Plan. I was referred by a senior clerk at the family court.

Trevor - Would you recommend C-Plan to other families?

Rene - Yes, I would.

Trevor - What would you recommend should be in place long before you become involved in the system? Something for families who have problems and don't know where to turn.

Rene - More support groups.

Trevor - What do you see as the advantages of C-Plan? How do you benefit personally from going to C-Plan meetings?

Rene - I look forward to going weekly. I meet with other parents in the same situation like I am in. We sit, share, have round table discussions ... They help build our self esteem. They give us courage by letting us know that we are not alone.

Trevor - Does C-Plan act as a support group? Do they strengthen you? Do they raise your self esteem?

Rene - They definitely do. I look forward to going. I wish we had it 2 or 3 times a week, to be honest with you.

Trevor - Have you made friends at C-Plan?

Rene - Yes, many friends. We correspond with each other by phone. We keep in touch and we look forward to - its like a new family. I have started and grown accustomed to - besides the family I have always had.

Trevor - Suppose your children are returned to you tomorrow, would you continue to go to C-Plan meetings?

Rene - I would continue going and I would take my children also. They can possibly learn something there. There are a couple of children who have been returned to their mothers who attend C-Plan.

Trevor - So overall, are you saying that C-Plan is a benefit to the people who participate?

Rene - Yes, it is.

Trevor - But I notice that there are only women there. Where are the men?

Rene - Since women are predominantly at home with their children, ACS snatches children from women. Men come to C-Plan also.

Interpretation

Rene feels that ACS could have tried to reunite her with her family sooner. She feels that ACS could have been more helpful, empathetic, and professional in their duties. Rene also feels that ACS should be trying to keep families

together instead of breaking them up, and recommends that the agency provide supportive services to families instead of removing their children from their homes.

Rene feels that her parental and constitutional rights were violated by ACS, when they snatched her child from school without notifying her, and ACS should change the way they remove and place children in foster care. Rene feels very angry and hostile with ACS for placing one of her children in a dysfunctional home where he did not receive the help he needed. Overall, Rene feels that ACS is destroying, not helping families, and efforts should be made to change the way investigations are conducted. Rene says, "the emphasis of the agency should be on assisting families in need."

Update

Rene successfully completed a court ordered supervision monitored by ACS in January 1997. Her older son is now discharged to her care, while her younger son is remanded to his father's custody. Rene expressed relief for not being involved with ACS anymore, and states that she will never forget this experience.

BIBLIOGRAPHY

Administration for Children's Services (ACS) (1996).

Protecting the children of New York. A plan of action for ACS. New York: Author.

Administration for Children's Services (ACS) (1995). Selected child welfare trends in New York City. New York: Author.

Berrick, J. D. & Barth, R. P. (1994). Research on kinship foster care: What do we know? Where do we go from here? Children and Youth Services Review, 16(1/2): 1-5.

Billingsley, A. (1968). Black families in White America. New Jersey: Prentice-Hall.

Billingsley, A., & Giovannoni, J. (1972). Children of the storm: Black children and American child welfare. New York: Harcourt Brace Jovanovich.

Billingsley, A. (1992). Climbing jacob's ladder: The enduring legacy of African-American families. New York: Simon & Schuster.

- Bullard, R., Hicks, W., & Wadley, C. (1993, Sept./Oct.). Teenagers in the system interview Robert Little, Commissioner of CWA. Foster Care Youth United, pp. 28-31.
- Calhoun, J. A. (1980). Welfare act: A turning point for children and troubled families. Children Today, 2-4.
- Cantos, A. L., Gries, L. T., & Slis, V. (1997). Behavioral correlates of parental visiting during family foster care. Child Welfare, LXXVI, (2): 309-329.
- Carey, T. A. (1994). Spare the rod and spoil the child. Is this a sensible justification for the use of punishment in child rearing? Child Abuse and Neglect, 18, (12), 1005-1009.
- Carrieri, J. R. (1991). Child custody, foster care, and adoptions. New York: Lexington Books.
- Carrieri, J. R. (1991). Foster care - placement with relatives. New York Law Journal, 1-4.
- Child Welfare League of America, Inc. (1991). A blueprint for fostering infants, children, and youths in the 1990s. Washington: Author.

- Child Welfare Watch (CWW) (1997). An agenda for change. New York.
- Children's Defense Fund. (1992). The state of America's children: Leave no child behind. Washington, Author.
- Council of Family and Child Caring Agencies. (1991). Kinship foster homes and the potential role of kinship guardianship. Unpublished manuscript.
- Daley, T., & Hart, B. (1992). Kinship foster care: The issues, needs and possibilities. Unpublished manuscript.
- Danzy, J., & Jackson, S. M. (1997). Family preservation and support services: A missed opportunity for kinship care. Child Welfare, LXXVI(1): 31-44.
- Davis, E. B. (1995). The use of authority with involuntary clients in child protective investigation. Doctoral Dissertation, City University of New York.
- Davis, I. P., Landsverk, J., Newton, R., & Ganger, W. (1996). Parental visiting and foster care reunification. Children and Youth Services Review, 18(4/5): 363-382.

- Dozier, C. (1994). A program analysis of adult chemical dependency day rehabilitation program with a special focus on African-American clients who successfully completed treatment. Doctoral Dissertation, Hunter College School of Social Work, City University of New York.
- Dubowitz, H. (1994). Kinship care: Suggestions for future research. Child Welfare, LXXIII, 5, 553-564.
- Dubowitz, H., & Sawyer, R. J. (1994). School behavior of children in kinship care. Child Abuse and Neglect, 18, (11), 899-911.
- Dubowitz, H., Feigelman, S., & Zuravin, S. (1993). A profile of kinship care. Child Welfare, LXXII, 2, 153-169.
- Epstein, W. M. (1997). Social science, child welfare, and family preservation: A failure of rationality in public policy. Children and Youth Services Review, 19(1/2): 41-60.
- Everett, J. E. (1995). Relative foster care: An emerging trend in foster care placement policy and practice. Smith College - Studies in Social Work, 65(3): 239-254.

- Everett, J., Chipungu, S., & Leashore, B. (Eds.). (1991). Child welfare: An Africentric perspective. New Jersey: Rutgers University Press.
- Ferguson, R., & Manning, M. (1992). Position paper on kinship foster care. Unpublished manuscript.
- Ford, D. Y., Harris, J., & Turner, W. L. (Year unknown). The extended African American family: A pragmatic strategy that blunts the blade of injustice. The Urban Review, 77-83.
- Frank, G. (1980). Treatment needs of children in foster care. American Journal of Orthopsychiatry, 50(2), 256-263.
- Gallagher, M. (1991). Foster care as welfare. The City Journal, 16-19.
- Garcia, A. A. (1989). The impact of ethnic matching in foster family placements: The experience of Hispanic children in foster care. Doctoral Dissertation, University of Denver.
- Gebel, T. J. (1996). Kinship care and non-relative family foster care: A comparison of caregiver attributes and attitudes. Child Welfare, 75(1): 5-18.

- George, R. M. (1990). The reunification process in substitute care. Social Service Review, 422-457.
- Gleeson, J. P. (1995). Kinship care and public child welfare: Challenges and opportunities for social work education. Journal of Social Work Education, 31(2): 182-193.
- Gleeson, J. P., & Craig, L. C. (1994). Kinship care in child welfare: An analysis of states' policies. Children and Youth Services Review, 16(1/2): 7-31.
- Gordon, S. W. (1987). I go to 'tannies': The economic significance of child-shifting in Antigua, West Indies. Journal of Comparative Family Studies, XVIII,3, 427-443.
- Grant, L. T. (1997). A lack of reunification services for biological parents in kinship foster care. Manuscript submitted for publication.
- Grant, L. T. (1997). Kinship foster care: Biological parents' concerns. Unpublished manuscript. Hunter College School of Social Work.
- Grant, L. T. (1996). The politicization of foster care in New York City. New York: Yacos.

Grant, L. T. (1993). A concept paper on kinship foster care. Unpublished manuscript. City University of New York.

Grant, L. T. (1993). Kinship foster care: The solution or more problems? Unpublished manuscript.

Grant, L. T. (1989). Factors associated with the placement of children into foster care. Unpublished master's thesis, Hunter College, New York.

Gray, S., & Nybell, L. (1990). Issues in African-American family preservation. Child Welfare, LXIX,6, 513-523.

Green, M. (1996). Second annual review of New York State department of social services. Child fatality reports. New York: Author.

Green, M. (1996). Creating a child welfare system for the 21st century. New York: Author.

Green, M. (1995). Expanded C-Plan analysis: Individual and systematic advocacy. New York: Author.

Grinker, W., & Smith, D. (1993). HRA adrift: Social spending without direction. The City Journal, 72-77.

- Halpern, M. (1992). Statement on the kinship foster care program. Unpublished manuscript.
- Harris, C. C. (1990). Kinship. Minneapolis: University of Minnesota Press.
- Hegar, R. L. (1993). Assessing attachment, permanence, and kinship in choosing permanent homes. Child Welfare, LXXII, 4, 367-378.
- Heger, R., & Scannapieco, M. (1995). From family duty to family policy: The evolution of kinship care. Child Welfare, 74(1): 200-216.
- Holton, J. (1992). African-America's needs and participation in child maltreatment prevention services: Toward a community response to child abuse and neglect. Urban Research Review, 14 (1), 1-5.
- Iglehart, A. (1994). Kinship foster care: Placement, service, and outcome issues. Children and Youth Services Review, 16(1/2), 107-122.
- Janchill, M. P. (1992). New York City's kinship foster care program. Unpublished manuscript.

- Karger, H. J., & Stoesz, D. (1997). Learning from family preservation. Children and Youth Services Review, 19(1/2): 1-4.
- Kramer, R. (1994). In foster care, children come last. The City Journal, 63-70.
- Magruder, J. (1994). Characteristics of relative and non-relative adoptions by California public adoption agencies. Children and Youth Services Review, 16(1/2): 123-131.
- Maluccio, A. N., & Whittaker, J. K. (1997). Learning from the "family preservation" initiative. Children and Youth Services Review, 19(1/2): 5-16.
- McNally, K. G. (1992). Kinship foster care: The law in New York. Unpublished manuscript.
- Minkler, M., Roe, K. M., & Robertson-Beckley, R. (1994). Raising grandchildren from crack-cocaine households: Effects on family and friendship ties of African-American women. American Journal of Orthopsychiatry, 64(1), 20-29.
- National Court Appointed Special Advocates for Children (CASA). (1991). Kinship care: Keeping it in the family.

Neal, L. (1992). An African-American perspective on kinship foster care. Unpublished manuscript.

New York City Human Resources Administration, Child Welfare Administration. (1994). City council committee on general welfare. New York: Author.

New York City Human Resources Administration, Child Welfare Administration. (1992). Preliminary report on kinship foster family profile. New York: Author.

New York City Human Resources Administration, Child Welfare Administration. (1993). Foster care overview. Fiscal years 1992 - 1993. New York: Author.

New York City Human Resources Administration, HRA Facts, 1991-1996.

Patton, M. (1990). Qualitative evaluation and research method. California: Sage.

Petro, B. J. (1989). Boarder babies: Permanency planning and discharge status. A one year follow-up study of 100 infants placed in foster care, 1987-1988. Doctoral Dissertation, Fordham University, New York.

- Ratterman, D., & Freedman, N. (1992). Child welfare law. A manual for caseworkers. American Bar Association. Washington. Author.
- Report of the Mayor's Commission for the Foster Care of Children. (1993). Family assets: Kinship foster care in New York City.
- Sawyer, R. J., & Dubowitz, H. (1994). School performance of children in kinship care. Child Abuse and Neglect, 18,(7), 587-597.
- Scannapieco, M., & Jackson, S. (1996). Kinship care: The African American response to family preservation. Social Work, 41(2): 190-196.
- Schneider, D. M. (1984). A critique of the study of kinship. Ann Arbor: University of Michigan Press.
- Schusky, E. L. (1983). Manual for kinship analysis. Lanham: University Press of America.
- Scott, J. (1995). Sociological theory. Contemporary debates. Vermont: Edward Elgar Publishing Company.

- Segalen, M. (1986). Historical anthropology of the family.
Cambridge: Cambridge University Press.
- Seidman, I. E. (1991). Interviewing as qualitative research.
New York: Teachers College Press.
- Seligson, E. (1991). Families helping families.
St. Christopher - Ottilie's first impressions of approved
relative kinship foster care. Unpublished manuscript.
- Sifferman, K. A. (1993). Adoption: A legal guide for birth and
adoptive parents. Arizona: Makai Publishing Group.
- Smith, R. T. (1988). Kinship and class in the West Indies.
A genealogical study of Jamaica and Guyana. Cambridge:
Cambridge University Press.
- Taylor, R. J., Neighbors, H. W., & Broman, C. L. (1989).
Evaluation by Black Americans of the social service
encounter during a serious personal problem. Social Work,
34, (3), 205-211.
- Testa, M. F. (1997). Kinship foster care in Illinois. In J. D.
Berrick, R. P. Barth, & N. Gilbert (Eds.). Child Welfare
Research Review (2). (pp. 101-129). New York: Columbia
University Press.

- Thornton, J. L. (1987). An investigation into the nature of the kinship foster home. Doctoral Dissertation, Yeshiva University, New York.
- Thornton, J. L. (1991). Permanency planning for children in kinship foster homes. Child Welfare, LXX,5, 593-601.
- Tobis, D. M. (1989). The New York City foster care system, 1979-1988: The rise and fall of reform. Doctoral Dissertation, Yale University.
- Vidal, C. (1988). Godparenting among Hispanic Americans. Child Welfare, LXVII,5, 453-459.
- Weissman, H. (1988). Planning for client feedback: Content and context. Administration in Social Work, 205-220.
- Wolf, A. (1983). A personal view of Black inner-city foster families. American Journal of Orthopsychiatry, 53(1), 44-51.
- Wulczyn, F., & George, R. (1992). Foster care in New York and Illinois: The challenge of rapid change. Social Service Review, 66,2, 278-294.

Zuravin, S. J., Benedict, M., & Somerfield, M. (1993). Child maltreatment in family foster care. American Journal of Orthopsychiatry, 63(4), 589-596.