Research and clinical findings presented in this book suggest that providing quality preschool programs may be an effective way to prevent juvenile delinquency. Unfortunately, this knowledge is not reflected in the orientation of juvenile courts nor, for that matter, of social service agencies. After briefly setting the issue in perspective, Chapter 9 describes how courts and social agencies could make greater use of quality preschool programs as a form of delinquency prevention—within the context of child abuse and neglect proceedings. Included also is a description of how funds for these preschool programs could be obtained as a by-product of needed reform in child protective dispositional practices.

Juvenile Delinquency Proceedings

The establishment of juvenile courts throughout the United States at the turn of the century is generally seen as the product of a reform movement concerned with the welfare of children. Criminal prosecution was considered too harsh for young people in trouble. Misbehaving youths were to be removed from the punitive atmosphere of the criminal courts and, instead, placed under the “fatherly” care of the new juvenile courts (see In re Gault, 1967). There is, however, a revisionist view that sees the establishment of juvenile courts as “not simply a manifestation of humanitarian concern for children needing help,” but also “(1) a retrenchment of correctional practice, (2) a regression in poor-law policy, (3) a reaction to the phenomenon of immigration, and (4) a reflection of the repressive side of Quaker education” (Fox, 1970).

The optimistic goal of the juvenile court was “not so much to punish as to reform, not to degrade but to uplift, not to crush but to develop, not to make [the juvenile] a criminal but a worthy citizen” (Mack, 1909). Juvenile courts were to use the medical and social sciences to offer “scientific, objective, and dispassionate” help to the young (Lou, 1927). In this way,
young offenders would be "saved" before they progressed irrevocably along the road to criminality.

For the same reason, juvenile courts were given jurisdiction over acts of youthful misbehavior, such as truancy, disobeying parents, and associating with undesirables, that are not illegal in the traditional sense (Lou, 1927; Mack, 1909). Early on, they were also given jurisdiction over "dependency," what we now call "child abuse and neglect" (Besharov, 1974).

If any one theme characterized the approach of the new juvenile court, it was social work. Juvenile court judges were expected to be, in effect, robed social workers. As one observer put it in 1927, the methods that judges were to use were "those of social case work, in which every child is studied and tried as an individual" (Lou, 1927, pp. 1–2).

To perform this treatment role, judges needed freedom to depart from many existing procedural and constitutional safeguards. They needed freedom to discover the underlying causes of the child’s problems, through the use of social and psychological reports. And they needed freedom to fashion flexible and innovative treatment plans, through open-ended and unfettered dispositional authority. To give judges these freedoms, the rules of court procedure and evidence were substantially relaxed and the presence of counsel discouraged, and hearings were held in an informal, almost nonlegal atmosphere.¹

By the mid 1960s, a consensus developed that juvenile courts were not successfully dealing with the growing tide of juvenile crime. President Johnson’s Commission on Law Enforcement and the Administration of Justice, for example, asserted that "the great hopes originally held for the juvenile court have not been fulfilled. It has not succeeded significantly in rehabilitating delinquent youth, in reducing or even stemming the tide of delinquency or in bringing justice and compassion to the child offender" (1967, p. 80). (Horowitz, 1977, argued that the Commission had insufficient evidence on which to base this conclusion.)

In 1967, this disillusionment with the juvenile court’s ability to prevent delinquency—together with that era’s emphasis on the trappings of due process—culminated in the Supreme Court decision of In re Gault (1967).² The Court held that juveniles charged with misconduct for which they may be committed to an institution are entitled to due process of law, including notice of the charges against them in time to prepare for trial, the right to counsel, the right to confrontation and cross-examination, and the right to remain silent in court. Subsequent state and federal decisions expanded upon these rights so that, now except for the right to a jury trial, juvenile court, proceedings closely resemble their adult counterparts (Besharov, 1974). This does not mean that the juvenile court has no role to play in preventing delinquency. But, as described below, its preventive orientation must be more far-sighted.
Preschool Education as a Form of Delinquency Prevention

The juvenile court's failure to prevent juvenile delinquency is frequently attributed to a lack of funds (Keitchan, 1971; Paulsen, 1957). And it is true that, from the beginning, juvenile courts were denied the staff, operating funds, and auxiliary services necessary to fulfill their rehabilitative mission. Four-fifths of the judges responding to a poll conducted in the early 1960s, for example, said that they did not have a psychologist or psychiatrist available to them on a regular basis (President's Commission on Law Enforcement and Administration of Justice, 1967, p. 80). But lamenting the very real inadequacy of money and services obscures the fundamental inability of existing rehabilitation programs to reach the majority of seriously delinquent youths (see James, 1971). Monrad Paulsen wrote the following lines in 1968:

The juvenile court dream believed too much in man's capacity — here and now — to effect correctional change. Within the population of teenagers there are a number of dangerously anti-social persons who represent a great threat to the community and about whose rehabilitation no one has a firm idea. A youth can inflict a grievous injury which cannot go unremarked and yet the tools are not at hand "to save him from a downward career." Thus we have in fact employed juvenile court adjudications to repress rather than re-educate. The desire to save outruns the possibility of doing so (pp. 46-47).

What Paulsen said in 1968 is still true today — and will continue to be true for the foreseeable future. Wilson expresses the same conclusion when he writes that "by their middle teens, high rate offenders will (by definition) have become so deeply involved in illegal activities and so removed from the rewards attendant upon conventional lifestyles that they will be especially difficult subjects for rehabilitation" in the concluding section of this book.

However, as Wilson points out, "in the last five to ten years new findings have appeared that constitute promising leads — glimmers of hope — as to the possibility of preventing, to some significant but hard-to-measure extent, the delinquent acts of high-rate offenders."

One of these "glimmers of hope" is quality preschool education. The available evidence indicates that quality preschool programs can make lasting improvements in the social and educational functioning of the children they serve, and, by doing so, they may help prevent later delinquency (see Wilson's concluding contribution to this book). In the best-known program, the Perry Preschool Project of Ypsilanti, Michigan, researchers began in the 1960s tracking 123 students — 3- and 4-year-olds — to determine whether a 5-day-per-week, 2.5-hour-per-day program (for 1 or 2 years), reinforced by teacher visits to the home, would make a difference in the lives of impoverished children.
They found that children who attended the preschool fared much better than a control group which did not. On a test of functional competency in adult education courses, those children who went through the program were more than 50 percent more likely to score at or above the national average than were those who did not. More important, employment and postsecondary education rates were almost double, the high school graduation rate was almost one-third higher, teenage pregnancy rates were almost half, and *arrest rates were 40 percent lower* (Berruet-Clement, Schweinhart, Barnett, Epstein, & Weikart, 1984; Schweinhart & Weikart, 1983).

Many other preschool programs have reported impressive success in raising the social and educational functioning of disadvantaged children. For example, the Consortium for Longitudinal Studies, whose central staff was located at Cornell University, examined the long-term effects of 12 preschool programs and found that program graduates, after 6 to 13 years, were significantly less likely to have failed a grade in school or to have been assigned to special education classes than were children who did not attend a preschool (Royce, Darlington, & Murray, 1983). Similarly, the Frank Porter Graham Child Development Center at the University of North Carolina reports that, when the more than 90 children they studied completed the second grade, those who were in their program averaged IQs almost 10 points higher than those of children who were not; children who participated in the program experienced only half as many school failures. In addition, the program was found to have sharpened children’s language skills and boosted their achievement test scores from the bottom 25 percent to near the national average (Bridgman, 1985).

Apparently, the Perry Preschool program is the only preschool program that has made a sustained effort to measure its effect on later delinquency. And, as Wilson comments in his concluding chapter to this book, the Perry Preschool research itself leaves a number of “uncertainties and unanswered questions.” Much of the research on the effects of preschool programs suffers from questionable methodology, often caused by limited funding. For these reasons, in Chapter 7 Zigler and Hall conclude that the Perry Preschool findings “represent insufficient support for policy initiatives” (citing Haskins & Gallagher, 1984).

Can the promising results of these studies be replicated on a broad scale? The results cited above come from a handful of very carefully planned and administered projects. The teachers in the Perry Preschool program, for example, “all had postgraduate degrees (masters’ in education), a staffing pattern used because of the experimental nature of the program” (Schweinhart & Weikart, 1985, p. 9). Although Schweinhart and Weikart report that the New York State Prekindergarten Program, operating in dozens of sites, was found to reduce “special education placements and grade repetitions by one third, from an expected 26 percent of students to an actual 18 percent” (1985, p. 9), research on the nation’s major pointing res

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Such better postsecondary persistence in Head Start programs than in similar national programs is encouraging and indicates that Head Start graduates were doing better than their PECE counterparts (Clement, Green, & Weikart, 1985).

Success in these programs depended on the central importance of the effects of Head Start. For 6 to 13 years of age, the difference between Head Start and non-Head Start children is clear. (McKey et al., 1985). Similarly, at the Universities, they found that Head Start program graduates were more likely to enroll in advanced courses as many as three years after graduation than those who had not attended Head Start programs (McKey et al., 1985).

The report did find that Head Start graduates tended to be “less likely to fail a grade in school or to be assigned to special education classes than children who did not attend. However, this finding is based on only a few studies” (p. 9).

This study reinforces the results of a 1969 evaluation—the Westinghouse study (Westinghouse Learning Corporation, 1969)—that found few long-term gains from Head Start participation. The Westinghouse study was widely criticized on methodological grounds, and its weaknesses allowed Head Start’s supporters to overlook the critical results. Some Head Start advocates have resorted to criticizing the methodology of the CSR study to explain its failure. (For a thoughtful—and fair—critique of the CSR study, see Schweinhart & Weikart, 1985.) But the persistent inability to detect long-term gains undercuts this argument. Moreover, no one really doubts that Head Start has serious problems, as documented by a number of other studies, and that these problems prevent it from making a lasting impact on disadvantaged children.

The impression that Head Start “works” stems largely from the publicity received by one study (Consortium for Longitudinal Studies, 1983). Lost in the publicity surrounding this research was the fact that only two of the preschool programs studied were Head Start programs. The other ten were funded at significantly higher levels than were their Head Start counterparts, and (unlike Head Start) they were professionally staffed (McKey et al., 1985, but see Schweinhart & Weikart, 1985, p. 8). Indeed, the Consortium report specifically warned that “caution must be exercised in making generalizations [about its findings] to Head Start” (Condry, 1983, p. 27).

The absence of documented long-term cognitive gains from Head Start

9. Giving the Juvenile Court a Preschool Education

nation’s major preschool program, Head Start, continues to show disappointing results.

According to a recent study prepared for the Department of Health and Human Services—the Head Start Evaluation, Synthesis and Utilization Project—Head Start makes an immediate difference in students’ intellectual skills, emotional development, and general health (McKey et al., 1985). But long-term educational and social gains are another story. The study, conducted by CSR, reviewed 1600 documents relating to Head Start, including the research results of 210 previously funded Head Start research projects. It found that Head Start’s immediate impact on children disappears within 2 years:

One year after Head Start, the differences between Head Start and non-Head Start children on achievement and school readiness tests continue to be in the educationally meaningful range, but the two groups score at about the same level on intelligence tests. By the end of the second year there are no educationally meaningful differences on any of the measures (McKey et al., 1985, p. 8).
does not mean that quality preschool programs cannot make lasting improvements in the functioning of disadvantaged children. Other research studies such as those cited above and what we know about child development (Zigler & Hall, 1984) illustrate that they can. But Head Start's problems do signal a warning. Social and academic benefits do not come automatically with a child's enrollment in a preschool program. Head Start is a distinctly low-budget operation, spending about 60 percent less per child than did the Perry Preschool program. Head Start is also a loosely monitored program which provides little incentive for individual grantees to maintain high levels of program design and management.

In Chapter 6, Schweinhart summarizes the characteristics of an effective preschool program as follows:

1. Staff who have adequate early childhood training and maintain a curriculum focus through inservice training
2. Use of a validated curriculum model, derived from principles of child development, that permits children to plan or choose their own activities
3. Support systems to maintain the curriculum model, such as daily team planning and evaluation, and curriculum leadership by the administration
4. A ratio of teaching staff to children of about 1:8 and a classroom size of about 16
5. Collaboration between teaching staff and parents as partners, with teachers as child development experts and the parents as experts on their own children

In this era of federal fiscal problems, quality preschool programs are not likely to be made universally available, even if the research results were more definitive. Head Start, for example, with an annual budget of more than a billion dollars, serves less than one-sixth of the eligible low-income children, a proportion that has been falling as the poverty rate for children is climbing. Nevertheless, it seems reasonable to propose the expansion of quality preschool education to situations in which available research suggests that it would be effective. As Wilson states in his concluding section:

[W]e find no reason to believe that children similar to those in the Perry project (or in the Head Start projects generally) will be harmed by such programs and some reason to believe they will be helped. Therefore, we recommend that such programs be expanded in areas and for populations similar to those for whom favorable results have already been obtained.
An Opportunity for Early Case Finding: The Relationship Between Child Maltreatment and Later Delinquency

Assuming that quality preschool education is not provided on a universal basis, the question of targeting arises. How can preschool education be provided to children it will most likely benefit? Some have suggested variations of early diagnostic screening to identify those children at greatest risk of later delinquency, but any diagnostic profile that could conceivably be developed would be so unreliable that it would arouse strong and justified civil-liberties objections.

There is an alternative, though, which does not appear to be objectionable. Long before juveniles appear as offenders, the juvenile justice system comes into contact with many children who later become delinquent. And these children apparently include some who will become the most serious, high-rate offenders. These children enter the system, often as infants and toddlers, because they are abused or neglected.

It is widely believed that child maltreatment, even if it does not produce serious physical injury, causes long-term emotional and cognitive damage to children (Hunner & Walker, 1981). Schmitt and Kempe (1975), in a widely quoted passage, have written: “Untreated families tend to produce children who grow up to be juvenile delinquents and murderers, as well as the child batterers of the next generation” (p. 982). The common perception is that parents who maltreat their children were maltreated themselves as children. It is also widely believed that maltreated children will later vent on others the violence and aggression that their parents visited upon them, that even when they do not become violent, socially destructive adults, the emotional and cognitive scars they carry make them a continuing burden on community social service, mental health, and welfare systems.

Actual findings of carefully conducted research studies, however, are not as definitive as these unqualified assertions of the sequelae of child maltreatment suggest. (See, for example, Chapter 2 of this book.) A research paper prepared for the National Institute of Juvenile Justice and Delinquency Prevention (1980) for example, reflected these limitations in its conclusion: “Though no one study reviewed is conclusive, taken together the studies form a fairly consistent picture: that is, they point in the direction of a considerable link between abuse, neglect, and juvenile delinquency” (p. 129). Moreover, although most studies point to an association between child maltreatment and later emotional and social problems, even the best are plagued by severe methodological shortcomings that limit the conclusions that can be drawn from them (Toro, 1982).

Furthermore, a few studies have found no lasting damage to children caused by maltreatment per se. Elmer (1979), for example, followed...
abused and matched nonabused, low-income children for an 8-year period. She was unable to tell whether the physical abuse or the general poverty of the children in her sample was responsible for their social and developmental problems. She concluded with the following hypothesis: "Whether or not the child is the target of physical insults, as part of the family he is inevitably caught up in the stress and privation to which his family is prey" (p. 50). But, as in the case of research finding the existence of a relationship, serious methodological questions cloud the significance of such studies (Lynch, 1977; Wilson & Herrnstein, 1985).

Wilson and Herrnstein (1985) summarize this body of research and explain the inconsistency among studies:

There is strong evidence that abusive homes produce more aggressive children, and there are good reasons for supposing that early aggressiveness in the family is associated with later aggressiveness outside the family. But when we look for a direct connection between broken or abusive homes and subsequent criminality, we find that it is less clear-cut than we had supposed. The reason for this, we suggest, is that a broken or abusive home is only an imperfect indicator of the existence of a complex array of factors that contribute to delinquency (p. 261).

Thus, as Wilson and Herrnstein conclude, our understanding of the precise causal link between child maltreatment and later delinquency is incomplete. It is not clear, for example, whether maltreated children often become delinquents because of the emotional dynamics of abuse or neglect or, simply, because their socioeconomic status—and problems—individually make them prime candidates for delinquent behavior (Elmer, 1979—compare with Alfaro, 1981). Furthermore, existing research does not even raise the possibility of a biological explanation (see Wilson & Herrnstein, 1985, Pt. II).

Nevertheless, the cumulative weight of these research studies establishes, beyond doubt, a fundamental association between child maltreatment and later delinquency. Simply put, without claiming a causal link, families who maltreat their children substantially overlap those that later have a delinquent adolescent. This overlap was most exhaustively documented by research conducted by the New York State Assembly Select Committee on Child Abuse (Alfaro, 1981). The Select Committee used the records of child protective agencies and juvenile courts in eight counties of New York State—Broome, Erie, Kings (Brooklyn), Monroe, New York (Manhattan), St. Lawrence, Suffolk, and Westchester—to study the official histories of over 7000 children.

The children were divided into two groups. The first group, the 1950s sample, consisted of children reported as suspected victims of child maltreatment in 1952 or 1953 and their siblings. These 5136 children from 1423 families were traced forward through the records of the local juvenile court to determine whether they later became delinquent or ungovernable.

The second group included in the study was a comparison of the same counties in a substantial example. New York County gained the distinction of being the county with the most delinquent children. The study estimated that 25% of all children were delinquent by the time they were one year old. The study also found that children who were taken into custody at any age were more likely to become delinquent than those not taken into custody. The study concluded that early intervention and support for families is crucial in reducing the likelihood of delinquency.
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The second group, the 1970s sample, consisted of children brought to the juvenile court as delinquent or ungovernable in 1971 or 1972, using selection criteria similar to those of the 1950s sample. (No siblings were included in the sample because records in juvenile court cases, unlike records in child protective cases, do not regularly contain data on brothers and sisters.) These 1963 children from 1851 families were traced backward through the records of the local juvenile court and child protective agency to determine whether they had earlier been abused or neglected.

The absence of a control group prevented the study from establishing a causal link between early maltreatment and later delinquency, but its findings are still of immense significance. In counties where child protective records were intact:

- About 50 percent of the maltreating families from the 1950s had at least one child who was later taken to court as delinquent or ungovernable.
- About 25 percent of the boys and about 17 percent of the girls who had been maltreated in the 1950s were later taken to court as delinquent or ungovernable.
- Delinquent children who were earlier found to be maltreated tended to be more violent than other delinquents.

Furthermore, these statistics unquestionably understated the association between child maltreatment and later delinquency. First, as suggested above, significant numbers of court and agency records were not available in three counties because they had earlier been destroyed. Second, the study was county-based; there were no intercounty (let alone interstate) comparisons made, so that the study counted only families that lived in the same county for the entire 20-year period, even though there was substantial movement in and out of counties. (Between 1950 and 1970, for example, New York County lost 31 percent of its population and Suffolk County gained 166 percent.) Thus, the later delinquency of many children maltreated in the 1950s could not be discovered because they were no longer in the county; similarly, the earlier maltreatment of many children delinquent in the 1970s could not be discovered because they were not in the county at the time of the maltreatment. Third, in determining later delinquency, only children taken to court were counted; this excluded an estimated 60 percent of the juveniles arrested for delinquent behavior (but not taken to court). Fourth, the study did not review adult criminal court or mental health records. Fifth, 11 percent of the maltreated children were too young to have a subsequent delinquent contact with the court during the study period. Sixth, in the early 1950s, child abuse reporting was only about one-fifth as efficient as it is now, so that the courts and child protective agencies were not aware of the maltreatment of many of the delinquent children. Finally, many children were lost from the study because they were permanently institutionalized, placed in foster care, or
adopted, or because they died (1 percent of the 1950s sample had died by the time data were collected).

Hence, the actual overlap was probably much higher, as suggested by the more complete data from Monroe County. In 1970, Monroe County had a population of 711,000; the county contains Rochester, the state's third largest city, with 295,000 people. A separate analysis of the almost 600 children in the study from Monroe County revealed the following:

- Of the maltreating families from the 1950s, 64 percent had at least one child who was later taken to court as delinquent or ungovernable.
- About 36 percent of the boys and about 53 percent of the girls who had been maltreated in the 1950s were later taken to court as delinquent or ungovernable.
- The rate of delinquency and ungovernability among maltreated children was five times greater than that in the general population. (Monroe was the only county for which this comparison could be made. Alfaro, 1981, pp. 192–193.)

Even these numbers probably understate the overlap between child maltreatment and later delinquency.

Whether or not there is a causal link between child abuse and later delinquency, this research sadly documents the failure of past child protective intervention. Here are families known to public child welfare agencies for 10 and 20 years, and yet their delinquency rates are very high, many times higher than the population at large. If there is no causal link, then child protective intervention increased the risk of later delinquency. If there is a link, perhaps things would have been much worse without the intervention, but that only argues for more effective intervention.

Moreover, the Select Committee's study provides preliminary evidence that delinquents who have been maltreated tend to be more violent than those who have not. The study states: "Except for unauthorized use of autos and possession of burglar's tools, the correlation between delinquency referral reasons in the 1970s sample and earlier reported child abuse or neglect drops consistently in the non-violent categories" (Alfaro, 1981, p. 197). This agrees with other research findings. Welsh (1976), for example, found that previously abused delinquents were two times more likely to commit a physical assault, 58 times more likely to commit rape, and 24 times more likely to commit arson than were delinquents who had not been abused (see also Easson & Steinkilber, 1961). A study conducted for the National Institute of Juvenile Justice and Delinquency Prevention (1980) reported that:

... abused and neglected children [later] adjudicated as delinquents or status offenders tend to spend considerably more time in the system compared with other children who have been adjudicated delinquents. Recent evidence indicates that abused average alm.

The basic child maltreatment rate is high, and the high-rate communities are appropriate to remediate.

The Ga...
that abused children who were also delinquent or status offenders spent on the average almost twice as much time in the system as the other two groups (p. 36).

The basic point is clear: Regardless of any causal relationship between child maltreatment and later delinquency, child protective programs serve a high percentage of families whose children will later become serious, high-rate offenders. These maltreated children, or at least some of them, are appropriate candidates for a quality preschool program designed to remediate the effects of child maltreatment—and to reduce the future propensity of maltreated children to become delinquent.

The Gap in Child Abuse Services

The past 20 years have seen an enormous expansion of programs to protect abused and neglected children. In 1984, more than 1.5 million children were reported to the authorities as suspected victims of child abuse and neglect. This is about ten times the estimated 150,000 children reported in 1963. Specialized child protective agencies have been established in all major population centers (Besharov, 1985). However, this comparison does not reflect the constant increase in the proportion of "unfounded" reports, a separate problem beyond the scope of this chapter.

Although efforts to prevent and treat child abuse face severe problems (Besharov, 1983), some of which are discussed below, one cannot review the present status of child protective programs without being impressed by the steady increase in their scope and quality. Nationwide, there now exists a basic infrastructure of laws and agencies to protect endangered children—and it has made a difference. Increased reporting and specialized child protective agencies have saved many thousands of children from death and serious injury. In New York State, for example, within 5 years of the passage of a comprehensive reporting law which also mandated the creation of specialized investigative staffs, child fatalities were reduced by 50 percent from about 200 a year to fewer than 100 (N.Y.S. Department of Social Services, 1980, Table 8).

A major gap, however, exists in this otherwise promising picture. Except for a handful of unusual and richly funded projects, all the programs so far established provide only short-term, unsophisticated treatment services. (The best-established program is the residential, Mother-Child Program at the New York Foundling Hospital, Fontana & Besharov, 1977.) Table 9.1 lists the major services offered through child protective agencies; by definition, these services can be successful only with parents who are already motivated to accept help or who can easily be encouraged to do so. They do not work for those parents, estimated at about 40 percent of substantiated cases, who have serious and deeply ingrained personality
TABLE 9.1. Services provided through child protective agencies

<table>
<thead>
<tr>
<th>Service</th>
<th>Percent of Families*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Casework counseling</td>
<td>83.0</td>
</tr>
<tr>
<td>Homemaker services</td>
<td>4.3</td>
</tr>
<tr>
<td>Day care services</td>
<td>5.8</td>
</tr>
<tr>
<td>Foster care</td>
<td>11.8</td>
</tr>
<tr>
<td>Shelter care</td>
<td>8.8</td>
</tr>
<tr>
<td>Health services</td>
<td>27.0</td>
</tr>
<tr>
<td>Juvenile/family court petition</td>
<td>14.4</td>
</tr>
<tr>
<td>Criminal action taken</td>
<td>4.5</td>
</tr>
<tr>
<td>No action taken</td>
<td>14.8</td>
</tr>
<tr>
<td>Other protective services</td>
<td>12.8</td>
</tr>
</tbody>
</table>

* Multiple responses exist for most families.


disturbances. Many neglected mothers, for example, fit into the “apathy-futility syndrome,” a term coined by Norman A. Polansky, Regent’s Professor of Social Work at the University of Georgia. Polansky and colleagues describe them as “passive, withdrawn, lacking in expression. Upon being interviewed, they showed many schizoid features, resembling in this way a number of patients from more fortunate economic backgrounds with whom we were familiar in private psychiatric hospitals” (Polansky, Chalmers, Buttenwieser, & Williams, 1981, p. 39).

If they are to be reached at all, these hard-core parents, as child protective workers tend to call them, require intense, sustained, and skilled casework. According to Kaufman (1965), caseworkers often must serve as an auxiliary ego, to help these parents “develop modes of functioning which accommodate the impulses of the client, reality demands and community standards” (p. 205). Based on the clinical experience of programs such as that at the Bowen Center in Chicago, successful treatment of such parents requires weekly casework home visits for long periods—usually for years—coupled with an array of sophisticated and expensive support services (Sullivan, Spasser, & Penner, 1977). Even then, success is mixed, at best. The evaluation of the first round of child abuse demonstration projects found that, to achieve even a minimal reduction in recidivism, parents must be “in treatment for at least six months” and must be seen “on a weekly basis at least during the first six months of treatment” (U.S. Department of Health, Education and Welfare, 1978, p. 123).

This kind of intensive treatment for parents is simply not available. Child protective agencies cannot provide it, because staff expansions, although substantial, have not kept up with the rapid increase in reported cases. Moreover they for their jc degree, let alone handle, casework they require, as new reports that foster care, the over a 6-month social services: (Mayberry, 1976) skilled workers usually believe deeply disturb me.

Community agencies also citizens are willing maltreating par capacity to mo drop out of tre.

There is even any effort to mental emotional cases, less that day care (or H even with rela maltreated chi of demonstratment, which f assessments a programs, the ceived develop received any (U.S. Depart)

Furthermore viewed as s stresses of c Foster care children, but the child’s pr Child prote gap in servig assistance, d pressures an cation serviv give parents
cases. Moreover, few caseworkers have any real training that prepares them for their jobs: many states do not require them to have a college degree, let alone training in social work. With more cases than they can handle, caseworkers cannot give individual cases the amount of attention they require. As workers must abandon pending cases to investigate the new reports that arrive daily on their desks. Unless the child is placed in foster care, the average family receives approximately six home visits over a 6-month period, after which the case is referred to a community social services agency, closed, or ignored in the press of other business (Mayberry, 1979). These sporadic home visits are made by inadequately skilled workers under conditions that no knowledgeable observer seriously believes can make a meaningful difference in the functioning of deeply disturbed parents.

Community agencies such as mental health clinics and family service agencies also cannot provide the needed treatment services. Some agencies are willing to provide counseling and family support treatment to maltreating parents. But, without additional funding, they do not have the capacity to monitor parental participation and to follow up when parents drop out of treatment.

There is even less for children. Few child protective programs make any effort to meet the maltreated child's heightened need for compensatory emotional nurturance and cognitive stimulation. As Table 9.1 indicates, less than 6 percent of all substantiated cases receive a referral to day care (or Head Start). The extent to which child protective agencies, even with relatively unlimited funds, ignore the basic emotional needs of maltreated children was documented by the evaluation of the first round of demonstration child abuse projects supported by the federal government, which found that 90 percent of the parents received psychological assessments and 50 percent received special treatment. In the very same programs, though, less than 10 percent of the maltreated children received developmental assessments, and less than 1 percent of the children received any treatment to remediate the effects of past maltreatment (U.S. Department of Health, Education and Welfare, 1978).

Furthermore, the children's services that are provided are usually viewed as a support service for parents (to give them a respite from the stresses of child care) rather than as a treatment service for children. Foster care, it turns out, is the major treatment service for maltreated children, but it is not suited for this role and, in fact, can often aggravate the child's problems (described in the next section).

Child protective specialists have called for increased funding to fill this gap in services. They call for more support services, such as financial assistance, day care, crisis nurseries, and homemaker care, to relieve the pressures and frustrations of parenthood. They call for more parent education services, such as infant stimulation programs and parent aids, to give parents specific guidance, role models, and support for child rearing.
And they call for more individual, group, and family counseling and mental health services to ease personal and marital problems (U.S. General Accounting Office, 1980; U.S. National Center on Child Abuse and Neglect, 1980).

Past expansions of child protective programs were able to rely on the relative availability of supplementary funds through Title XX of the Social Security Act. During the period of greatest expansion, most states had not yet reached the ceiling in their Title XX allotments, the major federal funding program for social service, and thus were able to obtain 75 percent federal reimbursement for any increases in their child protective staffs. Benton, Field, and Miller (1978) stated: "The majority of (state administrators and federal staff surveyed) agreed that Title XX had the greatest positive impact on the children's protective services category" (p. 72). Federal expenditures for child protective services rose from a few million dollars a year in 1960 to over $325 million in 1980 (U.S. Department of Health and Human Services, undated, p. 126).

Now, at all levels of government, social service programs are being cut back rather than being increased. Funding of treatment services in the quantity and quality needed would be enormously expensive and far beyond anything remotely possible in the present fiscal atmosphere. Consider only the costs associated with supervisory home visits: Increasing the number of home visits for the 300,000 families needing them from the present 6 to the needed 40 a year (at an average cost of $50 for each visit) would add about half a billion dollars to the nation's bill for child protective services. As one adds the costs for enriched counseling and psychiatric and psychosocial services, the additional investment in treatment services would easily exceed a billion dollars. No level of government is seriously considering this kind of increased spending.

Even if such enormous amounts of new money were somehow forthcoming, there is little reason to believe that they would substantially improve treatment capabilities. Demonstration treatment projects have been able to prevent the recurrence of abuse or neglect in only about 50 percent of all cases, even when the parents have received intensive services (U.S. Department of Health, Education and Welfare, 1978). Carefully conducted studies of other treatment programs report similarly disappointing results (Herrenkohl, Herrenkohl, Seelch, & Egolf, 1981; Magura, 1981). The plain fact is that almost half of all maltreating parents are beyond the reach of existing treatment technology.

Up to now, treatment for parents has been viewed as the only real response to child maltreatment. When treatment fails to improve parental functioning, as it inevitably must in so many cases, judges and social workers throw up their hands in despair and let the case fade away, not realizing that they could still aid the child. Or, if the situation appears bad enough, they place the child in foster care, not realizing that they may be doing more harm than good—and that there is a better alternative.
The Mixed Quality of Foster Care

Because of the realities described above, there are actually only two forms of child protective intervention: (1) brief periods of home counseling by inadequately skilled caseworkers, and (2) foster care. If the child’s home situation is bad enough—this ambiguous and nonotechnical phrase is used deliberately to indicate the absence of standards for this crucial decision—the child is removed from the home and placed in foster care. Less than 20 percent of all substantiated cases result in the child’s placement in foster care. (See Table 9.1; “Foster care” and “Shelter care” are essentially the same service, one long-term and the other short-term.) But this is 20 percent of the approximately 400,000 substantiated reports now made each year. Thus, the expansion of child protective efforts has led to a concomitant increase in the number of children taken away from their parents and placed in foster care. In 1963, about 75,000 children were placed in foster care because of abuse or neglect. (This is the author’s estimate, based on U.S. Children’s Bureau, 1966, p. 13.) In 1980, more than 300,000 children were placed in foster care for these reasons. (In 1977, a total of 502,000 children were in foster care, but only about 60 percent were there because of abuse or neglect. U.S. Children’s Bureau, 1979, pp. 109, 117, Table 5-3.)

Despite recent media publicity about the abuse and neglect of foster children, the vast majority receive substantially better physical care away from their parents. Stanford law professor Michael Wald reports on his ten-year study of children in foster care:

It appears clear that removal lowers the chances of reabuse or neglect. Although some children are, in fact, injured by foster parents, the rate of reported abuse by foster parents is lower than that of the general population and far lower than the rate of reabuse by those who have once abused a child. Foster parents are less likely to neglect children’s physical needs. For the most part, foster parents do not leave children unattended; they virtually always provide adequate food or shelter; they send foster children to school; their households tend to be stable and their care of the child regular (1985, p. 9).

If foster care is judged solely by its ability to protect children from physical harm, it is undeniably successful.

Moreover, the available research indicates that foster care meets the emotional needs of many children. Many maltreated children do very well in foster care. Wald summarizes the most important research on the subject:

First, several studies of large numbers of adults who grew up in foster home found no evidence of greater criminality, mental illness, or marital failure than in the general population (Theis 1924; Meier 1965). In a more recent study, Festinger (1983) interviewed 277 adults who had spent a substantial period of time in foster
care in New York City and had been living with foster families or in group homes when they reached their eighteenth birthday. The majority of participants reported quite favorable views of their foster homes. Festinger concluded that "overall, (the former foster children) were not so different from others their age in what they were doing, in the feelings they expressed, and in their hopes for the future" (p. 294). Other studies have found that children in foster care do not have especially low self-esteem or poor self-concept (Seligman 1979; Lemmon 1975), nor do they have especially high rates of delinquency (Runyan 1985).

Moreover, several recent studies indicate that the impact of foster care may be positive, at least for some children. Kent (1976) reviewed case records of over 500 neglected and abused children who were under court supervision in Los Angeles. The cases were chosen so as to have an equal proportion of physically abused, sexually abused, and "grossly" neglected children. Using information found in the case records (a significant methodological problem), Kent found that a substantial number of children who had been in foster care at least a year were rated by their social workers as being better off, in terms of physical health and social adjustment, than at the time they entered foster care. Similar results, again using case records, were found by Palmer (1979) with respect to a decrease in "behavior problems" exhibited by foster children from the time of placement until discharge. Leitenberg et al. (1981) compared the school attendance and the police contacts of 187 neglected and "unmanageable" children, aged 11-16, some of whom were in their own homes, some in foster homes, some in group homes, and some in a state "reform" school. The children in the foster homes exhibited the lowest level of problem behaviors. There is even evidence that children who remain in foster care exhibit fewer problems than children returned to their biological parents (Fanshel and Shinn 1978; Zimmerman 1982) and that some children prefer foster care over return to their parents. One study of 70 children, aged 12-15, found that 47% preferred foster care while 44% wanted to return home (Lemmon 1975). Bush (1980) found that children in foster care described themselves as generally more satisfied than did a group of children at home who had been in foster care for a period of time.

The most important research is the longitudinal study done by David Fanshel and his colleagues at Columbia University (Fanshel and Shinn 1978). They assessed the development, over a five year period, of 500 children, ages 6 months to thirteen years, placed in foster care in New York City in 1966. The children were placed for a variety of reasons, with approximately thirteen percent officially categorized as abused or neglected. Although their findings are complex, making it difficult to draw any generalizations, careful analysis of their data indicates that the well-being of the majority of the children improved in terms of physical development, IQ, and school performance after a six month period in foster care. Most children maintained improvement in these areas throughout the five years. The children did not seem to have "identity" problems, nor did most show evidence of serious emotional or behavioral problems associated with the fact of placement. Moreover, the positive findings applied to children who experienced multiple placements as well as those in a single placement. There were, however, significant differences depending on the age at which the child entered care. Younger children adjusted better, especially if they had stable placements (1985, pp. 12-13).
There is a dark side of foster care, however, as suggested by the last line in the foregoing quotation. The research described above tends to gauge the quality of foster care across all children who are placed. It shows positive results because, for many children, foster care is an extremely beneficial experience. But for a large subset (in general, children who cannot be quickly returned home or freed for adoption and instead are moved through a series of unstable placements), foster care is deeply harmful.

In theory, foster care is supposed to be a short-term remedy designed to protect children from harm while parents have time to respond to treatment. However, because existing treatment programs are usually unable to break deep-seated patterns of child abuse and neglect (Besharov, 1983, p. 165), the reality is far different. More than 50 percent of the children in foster care are in this "temporary" status for over 6 years; over 30 percent are away from their parents for over 6 years (U.S. Children's Bureau, 1979, p. 120). As the U.S. Supreme Court recognized, these children are often lost in the limbo of the foster care system (Smith v. Organization of Foster Parents, 1977).

Although recent efforts to reduce the number of children in foster-care limbo through periodic reviews and permanent planning show great promise, even the most extensive and well-funded efforts have produced only a 20 percent reduction, largely accounted for by more frequent terminations of parental rights (Lahti et al., 1978 at p. 3, Table 1).

Long-term foster care can leave lasting psychological scars. It is an emotionally jarring experience which confuses young children and unsettles older ones (Katz, 1971; Weinstein, 1962). Over a long period, it can do irreparable damage to the bond of affection and commitment between parent and child. The period of separation may so completely tear the already weak family fabric that the parents have no chance of being able to cope with children when they are returned.

While in foster care, children are supposed to receive treatment services to remedy the effects of past maltreatment. Few do. Worse, children who stay in foster care for more than a short time, especially if they are older, tend to be shifted through a sequence of ill-suited foster homes, denying them the consistent support and nurturing that they so desperately need (U.S. Children's Bureau, 1979). A study of foster children in Jackson County, Missouri (which includes Kansas City) found that 29 percent had been in four or more homes in fewer than 5 years (Mushlin, Levitt, & Anderson, 1986; Wald, 1985). Increasingly, many graduates of the foster care system evidence such severe emotional and behavioral problems that some thoughtful observers believe that foster care is often more harmful than the original home environment (Goldstein, Freud, & Solnit, 1980). These realities led Marion Wright Edelman, president of the Children's Defense Fund, to call
the conditions of foster care as "a national disgrace" (Children's Defense Fund, 1978, p. xiii).

The foregoing description of the harmful effects of foster care was not precise in identifying the number of children harmed by foster care. A host of methodological limitations prevent researchers from being more specific and, even, from identifying the factors that lead foster care to be harmful to many children. Wald (1985) describes the problems caused by "lack of comparable children," "mixing populations," the absence of a "prospective longitudinal design," and "inadequate measures" (pp. 13-17).

However, combined with other evidence about child maltreatment and child protective decision making, this research provides sufficient information to identify what types of situations in foster care cause more harm than leaving the child at home—the situations in which foster care is misused.

The Misuse of Foster Care

Foster care is the only action that can protect some children from serious injury and even death. In fact, child protective agencies have been successfully sued for damages when a child was killed by parents after the agency failed to remove the child (Besharov, 1985).

Therefore, if foster care were used solely to protect children from physical harm, we would have to balance the apparently unavoidable emotional harms suffered by some foster children against the possibility of future physical injury at home, and we might well decide that protecting children from serious physical harm is worth the risk. But foster care is also used to protect children from emotional harm, and this drastically alters the public policy calculus.

News stories regularly remind us that there are upward of a million maltreated children (including those that are not reported). This is a reasonably accurate estimate, but the word maltreatment encompasses much more than the brutally battered, sexually abused, or starved and sickly children that come to mind when we think of child abuse. In 1979 and 1980, the federal government conducted a National Study of the Incidence and Severity of Child Abuse and Neglect. According to this congressionally mandated study, which collected data for 12 months from a representative sample of 26 counties in 10 states, only about 30 percent of these maltreated children are physically abused, and only about 10 percent of these children (3 percent of the total) suffer an injury severe enough to require professional care. (Each year, about 1000 children die in circumstances suggestive of child maltreatment.) About 7 percent are sexually abused (probably a low figure), and about 20 percent are emotionally abused, mainly by "habitual scapegoating, belittling and re-

jecting behavior" (1981, p. 18). Almost 50 percent of children who are physically abused in single-parent households are those in which they live.

Extreme cases take prompt action. As the example of the apparently irreparable case is based on one particular instance, the example, in which the child would not be in immediate danger; it builds on the serious and tective state, then and now, necessary.

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Maltreatment and neglect are thus the most common forms of abuse, and in the absence of sufficient information, they are presumed to cause more harm than any other type of abuse. For this reason, the State Children's Defense Fund concluded that foster care was not the worst type of child abuse and that foster care. A child suffering abuse at home from being neglected and left to fend for herself would have been better served by an alternate foster home or by counseling and education. This conclusion is based on the fact that the absence of proper care or the presence of inadequate measures is the most common type of abuse.

Almost 50 percent of these maltreated children are neglected, a term that includes educational neglect (27 percent of the total); emotional neglect, that is, “inadequate nurturance” and “permitted maladaptive behavior” (9 percent of the total); failure to provide needed medical care (8.5 percent); abandonment and other refusals of custody (4 percent of the total); and failure to provide food, clothing, and hygiene (3 percent of the total). Although some forms of child neglect can be just as harmful as physical abuse (more children die from neglect than from abuse), the plain fact is that the vast majority of these children face no real danger of physical injury. In fact, about 55 percent of these neglected children live in single-parent households that receive public assistance. (The comparable figure for abused children is about 35 percent.) Their maltreatment is largely related to their family’s poverty and broader social needs. Protecting these children means lifting them from the grinding poverty within which they live.

Extreme cases of parental brutality and neglect make society eager to take prompt and decisive action against child maltreatment, but this emotionally charged desire to protect innocent children obscures the fact that, as the foregoing describes, many forms of maltreatment—in fact, the majority of cases in the system—pose no immediate danger of serious or irreparable harm to the child. Rather, the danger they pose, though great, is based on the long-term, cumulative effects of inadequate care. For example, children whose parents withhold all food are in imminent danger of death; they need immediate protection. But, with few exceptions (for example, infants), children who are given chronically deficient diets are not in immediate danger. The harm caused by poor nutrition is cumulative; it builds as time passes. Certainly, at some point the harm becomes serious and irreparable; and, although these situations, too, need protective state intervention, with few exceptions, emergency action is not necessary (see Besharov, 1985, for a fuller presentation of this argument).

Recognizing this distinction reveals how foster care is often misused. According to the data collected for the federal government by the American Humane Association, up to half of the children placed in foster care apparently were in no immediate danger of serious physical injury. Researchers studying hospital records of 184 maltreated children at the Boston Children’s Hospital found similar evidence concerning the decisions of medical personnel to hospitalize maltreated children: they concluded that “children with non-physical injuries are more likely to be removed” (Katz, Hampton, Newberger, Bowles, & Snyder, 1986, p. 260). In each case, these children were removed from their parents to protect them from cumulative harm (usually because of emotional or developmental neglect).

Many of these children were placed in foster care because their parents
had inflicted unreasonable corporal punishment, for example. In most cases, however, the punishment posed no serious physical danger to the child, and there is no evidence that it would have grown into severe beatings. The harmfulness of such punishments stems from the long-term effect of assaultive behavior on the child's developing personality (Goldstein et al., 1980).

Even more of these children were placed in foster care because of the low quality of physical care they received. Usually, though, the poor care posed no real physical threat to the child; the quality of physical care was actually being used as a proxy indicator of the parents' general inability to meet their child's developmental needs. The system concludes, usually not consciously, that, since the parents are unable to maintain the household, they can hardly be able to meet the child's emotional needs. This conclusion may or may not be valid, but the point is that the danger to the child, if there is any, is not immediate.

In part, this failure to recognize that the harm to the child is cumulative in nature stems from the system's unwillingness to admit that the reason for intervention in so many cases is emotional danger to the child. Emotional maltreatment is seen as too vague and amorphous a concept on which to base coercive intervention. Putting aside the merits of this concern, repressing the real reason for intervention makes the appropriate use of foster care unlikely. For, when parental functioning fails to improve, decision makers overreact, concluding that placement is needed to safeguard the child's health and well-being.

Few children living in cumulatively harmful situations require foster care on an emergency basis. The danger they face, though great, derives from the long-term (and cumulative) consequences of the inadequate care they are receiving. Regardless of how upsetting their present situation seems to be, they have endured it for some time already, and it is not necessary to remove them from home to help their parents to care adequately for them.

If decision makers recognized the absence of immediate danger to these children, they would be more willing to forestall foster care while additional treatment efforts were made with the parents or compensatory services were provided to the child. Even when treatment efforts do not succeed in raising the level of parental functioning, the need for foster care often can be obviated through in-home, child-oriented services that compensate for parental deficiencies (U.S. National Center on Child Abuse and Neglect, 1979). Compensatory services include quality infant-stimulation programs, Head Start, therapeutic day care, homemaker care, early childhood or child development programs, nutritional services, and youth counseling programs. The failure to use these alternatives to foster care illustrates the telling gap between the fields of child protection and child development.

Despite its formidable risks, foster care is sometimes defended on the ground that the home help of the child's nurture is needed. For example, when affection is maltreated, the child must be removed to make the proper decision on how the parent is performing. Except in resiliency and in relationships of the child, the ones foster care is adopted, public housing is not necessary. However, the damage to the child is inevitable. It involves the disruptive and judgmental role of the child. Their parents must improve, and they cannot be adequately managed.

Children in foster care are at risk of permanent damage.
9. Giving the Juvenile Court a Preschool Education 227

ground that it facilitates the parents’ treatment. The child’s absence from the home is said to provide immediate relief for parents so that, with the help of treatment services, they can concentrate on reordering their lives. This argument is as therapeutically short-sighted as it is harmful to children. For parents, removing their child is a psychologically jarring experience which often damages their self-images and reduces their bond of affection for and dedication to the child. In addition, many forms of maltreatment are interactional, that is, they stem from a dysfunction in how the parent and child relate to each other (Kadushin & Martin, 1981). Except in the most unusual circumstances, separation does not aid in the resolution of such problems.

Moreover, treatment services for the parents of children in foster care are largely nonexistent. In fact, placement of the child usually reduces the level of services that parents receive. For example, a single mother’s public assistance grant will be reduced by the amount attributable to the child, often requiring the parent to move into a smaller, less attractive apartment from which she will have to move again (to a larger apartment) before she can regain custody of the child. In today’s housing market, this is no easy task. In addition, food stamps, homemaker services, and even the intermittent caseworker visits may be suspended during the time the child is in foster care. Only parents who wish to be relieved of the obligations of parenthood gain anything from their child’s placement.

Ironically, children removed from cumulatively harmful situations are the ones most likely to be trapped in foster care limbo. They are placed in foster care because they receive chronically poor care at home. Since parents who are unable to meet their children’s basic needs often have the most intractable emotional problems (Polansky et al., 1981), an improvement in parental functioning is unlikely, thus foreclosing the child’s return home. After all, the condition that required the foster care still exists. However, the termination of parental rights is similarly unlikely. Since the damage to the child is cumulative, there is no specific or particularly outrageous incident, such as a brutal beating, upon which to base a decision to terminate parental rights, nor have the parents evidenced an unequivocal unwillingness or clear inability to care for the child (Besharov, 1981). Termination is difficult, because cases of cumulative harm usually involve emotional or developmental harm to the child, and most workers and judges are unwilling to sever the parent–child bond on this amorphous ground. As a result, these children are trapped in a vicious cycle: Their parents cannot adequately care for them; existing services do not improve parental functioning; the children cannot go home; and they cannot be placed for adoption. Through it all, the children suffer an inevitably and increasingly harmful foster care experience.

Children in immediately harmful situations often must be placed in foster care to protect their physical safety, even if doing so puts them at risk of psychological harm. However, for most of the children in cumula-
tively harmful situations, if the choice is between foster care and no action, then they—and society—would be better off if nothing is done. Through some sort of tunnel vision, the system sees the physical improvement of these children's living conditions while in foster care as proof that the children are better off away from their parents, ignoring the often devastating effects of long-term foster care limbo on the child's emotional well-being. Goldstein, Freud, and Solnit (1980, p. 13) wrote, "by its intervention that state may make a bad situation worse: indeed it may even turn a tolerable or even a good situation into a bad one." In such circumstances, foster care ceases to be a necessary evil and becomes an unnecessary and unwarranted one.\footnote{11}

Reorienting Child Protective Dispositions

What, you may ask, does the misuse of foster care have to do with preschool education and the juvenile court's ability to prevent delinquency? Potentially, a great deal. As described earlier, the substantial overlap between child maltreatment and later delinquency suggests that effective intervention in a maltreated child's early years might prevent later delinquency. However, existing child protective interventions do little to enhance the child's later functioning; in fact, they often harm it.

Although more research would be useful, it appears reasonable to conclude that the provision of compensatory services, especially quality preschool education, would help prevent some number of maltreated children from becoming delinquent. The key to their receiving preschool services is the juvenile court, so the court must be made aware of the potential importance of quality preschool programs in the lives of maltreated children. The court must be encouraged to consider quality preschool programs a viable alternative to foster care.

Only as a last resort do child protective agencies initiate formal court action (to impose treatment on parents or to remove a child from home) (Besharov, 1981–1982). Nationwide, less than 15 percent of all substantiated cases end up in juvenile court (see Table 9.1). Less than half, and in some places less than a quarter, of these proceedings result in court-ordered foster care. Most children in foster care are there because their parents voluntarily consented to their placement, although many parents consent to their child's placement only after being told that their refusal to do so may result in court action to compel placement (Besharov, 1985).

Nevertheless, the juvenile court's dispositional orientation shapes the entire system's. Child protective agencies quickly sense what dispositions the court will make, and they conform their own decision making accordingly. Moreover, in most states, all voluntary placements must be approved by the court within a specified period (usually 30 days), and all continued placements are subject to periodic court review (Hardin, 1983).
At present, juvenile law sets no standards governing foster care decisions—beyond the conclusory “best interests of the child.” As a result, judges have almost unfettered dispositional authority (see the New York Family Court Act, 1983, for example) (Besharov, 1974). Once initial court jurisdiction is established, existing laws set no limits—and, hence, provide no guidance—about which situations require foster care: and which do not. Consequently, according to Wald (1975, pp. 1001–1002), “decision-making is left to the ad hoc analysis of social workers and judges.”

The absence of standards cuts both ways: Many children are taken away from their parents when there is no apparent need to do so, and many others who need immediate protection are not placed in foster care.

Inconsistent as it may seem, given the wide misuse of foster care, child protective workers and judges are deeply conscious of the hazards of foster care and hesitate to use it except in the most extreme cases. Unfortunately, they gauge the need for foster care by the perceived degree of the parent’s emotional problems rather than by the immediacy of harm to the child. Thus they systematically underreact to past parental behaviors which, although they caused only mild or moderate injuries, signal serious and immediate danger to the child. (Of course, some individual judges and caseworkers take the immediacy of harm into account.) When these minor injuries result from conduct that could have caused serious injury—the criminal law would call such conduct an “attempt” or “reckless endangerment”—they are strong evidence that the parent is likely to again assault the child, this time causing serious injuries (Besharov, 1985).

The result, all too often, is the child’s tragic death. Studies in several states have shown that about 25 percent of all child fatalities attributed to abuse or neglect involve children already reported to a child protective agency (Mayberry, 1979; Region VI Resource Center on Child Abuse, 1981). Tens of thousands of other children receive serious injuries short of death while under child protective supervision.

To help prevent such failures of protection—as well as to reduce the present misuse of foster care—decision-making standards governing the foster care decision should distinguish between home situations that are immediately harmful and those that are cumulatively harmful, perhaps using the following definitions:

**Immediately harmful** situations are those in which the parents’ behavior could have caused an immediately serious injury but did not do so because of the intervention of an outside force or, simply, good fortune: A parent throws an infant violently, but by some good luck the child is not injured; a parent begins to beat a child brutally, but a relative or neighbor intervenes; a parent leaves a young child home alone in a hazardous environment, but the child is found before he injures himself. Although, through some good fortune, such children did not suffer serious injury, it is fair to conclude that their parents pose a continuing threat to them.
Cumulatively harmful situations are those in which the parents' behavior will cause cumulatively serious harm to the child if it continues for a sufficient time: A parent provides a nutritionally inadequate diet for the child which, over time, will cause serious health problems; a parent inflicts repeated, but otherwise minor, assaults on the child which, over time, will make him or her into an easily frustrated, violence-prone individual; a parent provides grossly inadequate emotional support and cognitive stimulation which, over time, will lead to severe developmental disabilities. Again, although children in cumulatively harmful situations have not yet suffered serious injury, it is reasonable to conclude that they will eventually.

Immediately harmful situations, by definition, require prompt and decisive action to protect the child. Children whose parents have engaged in immediately harmful behavior continue to face an imminent threat of serious injury. Unless their safety can be ensured by some other means, they should be placed in protective custody quickly—and kept there until the home situation is safe (or parental rights are permanently terminated). Juvenile-court laws should establish a rebuttable presumption that children whose parents have engaged in immediately harmful behavior require foster care. This presumption should be rebutted only by specific evidence that the parents' emotional condition has improved sufficiently or that other services short of removal can adequately protect the child. Furthermore, if, during treatment, the parent again engages in immediately harmful behavior toward the child, the presumptive need for foster care should be revived.

Cumulatively harmful situations, by definition, pose no imminent threat of irreparable harm and rarely require emergency foster care. Juvenile-court laws should authorize the emergency removal of children only when: (1) the parents may flee the jurisdiction taking the child with them, or (2) the child's condition has deteriorated so much that irreparable injury is imminent. Moreover, the need for nonemergency foster care in cumulatively harmful situations is also limited. Even when efforts to treat parents fail, the child's well-being can often be better served through in-home, child-oriented services that compensate for parental deficiencies than through foster care placement. At times, though, foster care is needed to prevent or remedy serious developmental harm, and therefore, a blanket prohibition against the removal of children from cumulatively harmful situations is not appropriate.

However, merely advising courts to carefully consider children's long-term developmental needs would not be sufficient. After all, the law already requires courts to base their dispositional decisions on the child's best interests. The point must be more forcefully made because of the system's overemphasis on the treatability of parents. Therefore, juvenile-court acts should also establish a rebuttable presumption that the only authorized disposition in cumulatively harmful situations is a plan to pro-
behavior issues for a play program for the children of behavior-prone parents. This, in turn, gives rise to further behavioral problems and a potential vicious circle. In short, to conclude, over-protection and over-service can lead to a threat of becoming over-dependence.

A child cannot be over-protected and emotionally manipulated in this way. Normal development is possible only when the child is able to experience the world in an autonomous manner. The presence of other individuals in the child’s environment should be limited to those who are more experienced and capable of handling the child’s behavioral problems.

When children are in the care of therapists, it is important to ensure that their needs are being met in a proper manner. It is often the case that children are not being provided with effective compensatory in-home, child-oriented services in addition to treatment for parents. This presumption should be rebutted only by evidence that compensatory services would not adequately protect the child’s well-being, for instance when: (1) the parents refuse to accept or cooperate with efforts to provide needed compensatory services (motivating parents to maintain their child’s attendance in the program and to become involved themselves in the program’s activities will be a very real problem); (2) the child needs specific diagnostic or remedial services that are available only through residential care; (3) the foster care is used in response to an otherwise irreconcilable conflict between a parent and an adolescent child; or (4) the foster care is a planned precursor to the termination of parental rights and a subsequent adoption. Even in this last case, foster care still might not be needed, unless there is a realistic danger that the parents might flee with the child before their rights could be terminated.

Prohibiting easy recourse to foster care for cumulatively harmful forms of maltreatment would reconcile the inherent inability of existing treatment programs to improve the functioning of a large proportion of maltreating parents with the overriding need to protect children from serious harm—whether at the hands of their parents or the social service system meant to protect them. This is not meant to suggest that treatment for parents should be abandoned. Far from it. But treatment services for parents should be provided within the context of the system’s first responsibility—protecting the safety and long-term development of children. A more child-oriented approach to hard-to-treat parents would cause less damage to children than do existing practices, and, in fact, would probably help them. A child-oriented approach is not inconsistent with a family-oriented response to the problems of maltreatment and delinquency; it merely shifts the central focus of attention (all effective treatment programs for children actively involve parents) (Besharov, 1973).

In addition, this approach might also benefit parents. The system’s overemphasis on the treatability of parents often places parents in an impossible situation: The system is structured on the premise that maltreating parents are emotionally troubled or ill and that existing treatment services can cure them. Because expectations start so high, when parents fail to respond to the treatment that is actually available, the system overreacts by either explicitly or implicitly labeling these parents as “hopeless.” Perhaps some are hopeless, but for most it is more a question of misplaced expectations.

A major social payoff might result if child protective decision making was reoriented as described. More children would be provided the emergency protection they need, and many children would avoid the harmful experience of foster care. Furthermore, although the proposed approach would not change the system’s fundamental inability to treat maltreating parents, it would encourage a greater—and long overdue—focus on meeting children’s long-term developmental needs.

For the foreseeable future, the competition for reduced social service
Funds will be intense. There will be no winners, unless winning means losing less. Programs like child protective services that serve the politically powerless are in the greatest jeopardy. So, proposing a major expansion of compensatory services for children may seem like whistling into the wind.

Foster care, however, is also expensive. Depending on the community, and the child’s need for special care, family foster care costs from $5000 to $15,000 per child a year; $10,000 per year is a general average. Institutional care, involving about 15 percent of the children in placement, costs about $20,000 per child a year. Six years (the national median) of foster care placement for one child costs an average of $68,000. The placement of each additional child from the same family costs that much more. Nationally, foster care costs states and the federal government almost $3 billion a year (U.S. Children’s Bureau, 1979, p. 109).

Based on the American Humane Association’s data cited above, preventing foster care placement of children from cumulatively harmful situations would reduce foster care rolls by from 30 to 50 percent. This could save as much as $1 billion. (Given relatively fixed administrative costs, even a 50 percent reduction in foster care rolls would not translate into an equivalent reduction in costs.)

These funds might well disappear as part of general efforts to reduce government social services expenditures. Nevertheless, it is tantalizing to imagine that they might somehow be retained within the child welfare system, perhaps through a revolving trust fund. The money saved could be used to fund an expansion of compensatory services.

For each child not placed in foster care but instead provided with compensatory services, a quality preschool, say, there would be about an even trade-off in costs (assuming the time spent in placement to be about the same as that spent using the service). As the earlier discussion of quality preschool education described, child development programs capable of compensating for parental inadequacies would be expensive, perhaps as much as $5000 per child per year. Although this is about half of the cost for family foster care, the substitution of one for the other would not produce a large net saving of money. A large proportion of children in foster care are on public assistance before their placement; when they are placed, the welfare grant and other cash and noncash benefits to their parents are reduced.

Conclusion

Perhaps all this is wishful thinking. The proposed approach would be a radical departure from current practices. Nevertheless, standards based on the immediacy of harm would be programmatically easy to implement. They do not require additional funds for new service programs; they do not require a major change in the current dependency code. In practice, more support for children in appropriate child care is possible to effect these gains, and the welfare system would develop the

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not require complicated statutes or agency procedures: and they do not require a leap of faith on the part of policy makers, because they do not depend on the effectiveness of any particular treatment approach or service. Instead, they are based on the present realities of child protective practice.

Moreover, it might be possible to develop wide professional and agency support for the proposed standards. Child protective agencies could support reorienting the system toward meeting the developmental needs of children. Like us all, they want to do anything that safely reduces the inappropriate use of foster care. Child development professionals, and child advocates in general, could support a concept that seeks to expand the amount of early-childhood education programs. It might also be possible to enlist the support of existing child welfare agencies. In the past, these agencies, most of which now provide only foster care services, have felt institutionally threatened by proposals to reform foster care practices and therefore often have lobbied strenuously against them, but they would be well-positioned to provide the kinds of compensatory child development services that could be funded by the money saved by reducing the misuse of foster care.

Endnotes

1. The doctrine of *parens patriae* was used to justify this departure from standard court procedures. (The Latin phrase *parens patriae*, literally means “father of his country.”) The concept apparently was first used by the English kings to justify their intervention in the lives of the children of their vassals—children whose position and property were of direct concern to the monarch. However, because the king justified his intervention by claiming the obligation to protect children, the term grew to mean the sovereign’s general obligation to look after the welfare of children in his kingdom because they are helpless. A Chief Judge of the New York Court of Appeals, Benjamin Cardozo, described the concept of *parens patriae* as the responsibility to do “what is best for the interest of the child. He [the judge] is to put himself in the position of a ‘wise, affectionate, and careful parent’ and make provision for the child accordingly” (*Finlay v. Finlay*, 1925, 240 N.Y. at 433-434).

2. In its decision, the Court quoted from its 1966 opinion in *Kent v. United States*, where it had asserted: “There is evidence . . . that the child received the worst of both worlds; that he gets neither the protections accorded to adults nor the solicitous care and regenerative treatment postulated for children” (1966, p. 556).

3. Other promising approaches, such as changing the ethos of schools, are not discussed because they are not as easily applied to dispositions under the juvenile court’s existing jurisdiction.

4. Head Start costs about $2400 per child per year (U.S. Head Start Bureau, 1985). According to Schweinhart in Chapter 6, the Perry Preschool program cost about $5000 per child per year, in constant 1981 dollars.

5. Remember Hawkins, Catalano, Jones, & Fine in Chapter 8: “A related question is how rates of participation in parent training can be increased when parent training is offered as a preventive approach.”
6. For example, Wilson and Herrnstein (1985) state: "The scholarly studies of the causes and consequences of child abuse are large in number but uneven in quality. There is no settled definition of abuse: Some studies limit themselves to cases of willful physical injury, others include any form of physical punishment whether or not it causes an injury, and still others include mental, sexual, and psychological abuse. Most studies are of small groups of children who have been, by some definition, abused, with no effort to select the group so that it is representative of some larger population or to compare it with a control group of similar but nonabused children. Information about the family backgrounds of abused children are typically gathered retrospectively from parental interviews, with all the attendant problems of errors, distortions, and misrepresentations; when the families are observed directly, it is rarely done blindly—that is, by an observer unaware of whether the family is abusive or normal" (pp. 253–254).

7. "In three of the counties, all the reported child protective cases in the sample year were included in the study; in three other counties, the case load for two years was used to generate a sufficiently large sample. In the two New York City counties, the sample included all the cases reported in three months (February, July and October) distributed through the sample year, because of the large volume of cases" (Alfaro, 1981, p. 178).

8. The difference between "immediately" and "cumulatively" harmful situations is not the same as the difference between acute and chronic situations. An acute danger can create an immediate harm, whereas a cumulative danger grows as time goes on. A chronic danger is a long-term danger that, however great, can come and go; it can cause an immediate or cumulative harm or both.

9. They suggested three explanations: "One explanation for this result is that non-physical injuries, which include failure-to-thrive and neglect, may be perceived by clinicians as evidence of chronic family problems rather than as a single mishap. Second, the decision to admit a child who does not have a physical injury (and therefore has more limited treatment possibilities) may itself indicate consideration of removal. A third possibility is that clinicians on the surgical services (which see the majority of children with physical injuries) are more likely to send children home after treatment than are clinicians on the medical services (which see the majority of non-physical injuries)" (p. 260).

10. According to data collected for the national incidence study, fewer than one in five minor assaults or other examples of poor child care presage anything resembling child abuse or neglect, let alone serious injury (U.S. National Center on Child Abuse and Neglect, 1981, p. 18).

11. This chapter has carefully avoided arguing the unconstitutionality of foster care for cumulatively harmful situations, where the placement does more harm than good. Nevertheless, since parents have been held to have a "fundamental interest" in their children which can be abrogated only upon compelling need, the issue is likely to arise (Santosky v. Kramer, 1982).

12. It might appear that such an approach could create a moral hazard problem, with parents maltreating their children to obtain services such as day care. However, the stigma of child protective proceedings and the possibility of a more intrusive intervention minimize this possibility.

13. There is, however, a growing feeling that the movement toward a therapeutic response has gone too far and that there should be greater resort to criminal prosecution (McKenna, 1974).
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