

Child Welfare and Globalization: Implications for Future Direction

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Child Welfare and Globalization: Implications for Future Direction in Taiwan

I. Introduction

The concept of child welfare and children's rights are relatively new to Taiwan. The island's social welfare legislation that dealt specially with children was passed by the Legislative Yuan in January 1973. Modeled on Japan's child welfare law, Taiwan's law was more idealistic than pragmatic, a well-intentioned response to international trends. Actually, when the law was passed, children's welfare meant little more than providing financial relief for disadvantaged children.

A little financial assistance was thought to be enough to handle most social problems. After all, Taiwan's society was founded on a sound system of family-centered ethics. Everybody loved their children and wanted the best for them; nobody mistreated their children, with perhaps the exception of a cruel step-mother. Such a simple vision of society was actually held by many people.

In 1986, the news of several sensational child abuse cases and kidnappings rocked the island, and people were scandalized. For the first time, they were shocked into an uncomfortable awareness that all were not well with the society. Between January 1989 and December 1991, over nine hundred cases of child abuse were reported in Taipei City alone. Outraged and bewildered, people began a process of soul-searching. They wanted to know how such things could happen in a society based on Confucian ethics and who was ultimately responsible for protecting children.

It was only a matter of time before the island's child welfare law under examination. It was found wanting. On many of the day's most pressing child welfare issues, the legislation was vague and ill-defined. As a result, the law has been ineffective and impossible to enforce, thus affording very little real protection for children. A movement to revise the law began to grow in the late 1980s. After concerted efforts of legislators and public interest groups such as Chinese Children's Fund, Child Welfare League

Foundation, and etc., success seemed remaining; late in 1991, a draft revision to the law passed a first reading, and a final reading and promulgation was in 1993.

The proposed revisions were primarily concerned with child protection, including a system by which health care professionals, day-care workers, social workers, teachers, and police were required by law to report cases of child abuse.

Therefore, Taiwan's "Child Welfare Law" was first established and announced in 1973. It was revised in 1993 in response to the 1989 United Nations Convention on the Rights of the Child and changed again in 2003's "Children and Youth Welfare Law", which states as the following:

Children less than 18 years of age, who are injured or suffered negligent treatment, such as abandonment, physical and mental maltreatment, abduction, kidnapping, trade, seduction, and supplying with sexual videotapes which are harmful to physical and mental health.

Taiwanese society at large has become acutely aware of the problems faced by families and Children. Government, related organizations and academic institutions began voicing their concerns. Numerous concerted efforts began taking place to address a variety of children problems. The Taiwanese government has planned and implemented a national long-term child policy, focusing on promoting child welfare activities, and protecting children from harmful social conditions.

With this background, the central thesis of this paper has two objectives in mind: first, to provide some information about the trends of child welfare policies and programs from both American and global perspectives; and second, to present cross-culturally relevant considerations for future child welfare directions in Taiwan.

II. Child Welfare Services

Taiwanese take it for granted that they possess collective provisions to maintain the well-being of their children. Child welfare, an important part of the Taiwanese social welfare system, consists of both public and private provisions.

Child welfare provisions in Taiwan were shaped by two different traditions. One of these traditions perceived children as being basically their parents' property. Parent could exercise their rights over that property as they saw fit. Another set of attitudes evolved from the doctrine of *parens patriae*. This doctrine viewed the government as the father of the country, which give the government the right and the obligation to intervene on behalf of children.

The work of child welfare organizations in Taiwan is rooted in and originated from the work done by Christian organizations as well as foreign voluntary agencies, which came to Taiwan to assist the poverty-stricken children and families in the turmoil.

According to the Ministry of Health and Welfare in Taiwan, in 2013, there were 31,102 child abuse and neglect children reported in Taiwan; 25,971 investigated; and 16,322 substantiated.

The number of substantiated cases has increased 61.70% from 10,094 to 16,322 between 2006 and 2013.

The problems of child abuse and neglect have attracted growing attention in recent times due to the heightened population awareness of reported abuse and neglect cases, as well as the strengthening of legislative reporting obligations in various statutes.

Of the cases reported in 2006, 37.7% of children were victims of physical abuse; 26.7% of neglect; 7.2% of emotional abuse; 7% of sexual abuse and 21.4% of others. In regards to the perpetrators, 79.2% of children were abused by their own parents; 8.8% were abused by caregivers; 5% were abused by relatives and 7% were abused by others. The reasons or motivating factors for such behaviors were found to be lack of parenting skills (34.6%), divorce (19.2%), and drug/alcohol abuse (12%), poverty (7.7%), unemployment (6.5%), mental diseases (3.3%) and others (16.7%). In regards to the reporters, 61.65% of the abused cases were reported by mandated reporters; 38.35% by non-mandated reporters. In regards to the placements, 80.28% of abused children stayed in home while receiving child protective services; 3.51% stayed in relative home; 7.01% in foster family home; 4.38% in residential care; and 4.38% in others.

Of the cases reported in 2013, 35.31% of children were victims of physical abuse; 11.26% of neglect; 10.31% of emotional abuse; 14.14% of sexual abuse and 19.66% of others. In regards to the perpetrators, 68.13% of children were abused by their own parents; 5.10% were abused by caregivers; 7.11% were abused by relatives and 19.66% were abused by others. The reasons or motivating factors for such behaviors were found to be lack of parenting skills (44.24%), divorce (22.36%), and drug/alcohol abuse (7.31%), poverty (8.33%), unemployment (3.39%), mental diseases (4.49%) and others (9.88%). In regards to reporters, 89.02% of abused cases were reported by mandated reporters; 10.98% by non-mandated reporters; In regards to the placements, 78.47% of abused children stayed in home while receiving child protective services; 0.74% stayed in relative home; 3.87% in foster family home; 5.97% in residential care, and 10.95% in others.

Since the author used to be Executive Director of Chinese Children Fund (CCF) during 1995-1997 and CCF is the major organization to provide children services programs in Taiwan. The author will mainly take the CCF as an example to describe its following programs. CCF started its work on orphanages in Taiwan from 1950 to 1964. Christian Children Fund (CCF) set up the first family-style Cottage System Plan, founded an orphanage for blind children, and organized Student Centers to meet the education needs of the aborigines. To help poor children stay in their homes, CCF established 23 Family Helper Projects (Branches) one by one all over Taiwan since 1964. In 1977, CCF started Taiwanese sponsorship program and tried to promote other kinds of service programs. In 1983, the name was changed to "Chinese Children's Fund" and "CCF" was still kept as the abbreviation. Because of the support from the general public in Taiwan, Chinese

Children's Fund became independent of Christian Children's Fund from United States in 1985 and no longer received financial support from foreign countries. In 1987, CCF started the Foreign Poor Children Sponsorship Program to help poor children in other countries. To expand services from children to families, the name was changed again to "Chinese Fund for Children and Families/Taiwan (CCF/Taiwan) in 1999. The programs are:

1 Services for Needy Children, Youth, and Families

Taiwan started to work on orphanages in 1950. A number of orphanages with different missions had been either set up or subsidized with the foreign resources introduced by CCF/Taiwan from 1950 to 1980. During those days when Taiwan was still a poor country, the resources of CCF/Taiwan played a very important role in the society. And the financial situation improved, most of the orphanages became independent and only Ta Tung Children's Home is still under the supervision of CCF/Taiwan now.

Because of the society change, child abuse problems are getting more and more serious. Therefore, Ta Tung Children's Home also provides services for abused children. With the integration of community resources, Ta Tung Children's Home has further provided early intervention services to developmentally delayed children since 1999.

Then, CCF started to create Domestic Sponsorship Service for poor children and families. Since "home" is the best place for children's growth, CCF/Taiwan has set up 23 Branches over all the country to integrate local resources for poor children to grow up in their own homes. Children admitted into the sponsorship program receive love and care through financial assistance (living expenses, emergency subsidies, and scholarship) from sponsors, different kinds of counseling programs, home visits, interviews, and activities. When admitted families become self-reliant and no longer need assistance from the public, the children often return to local Branches to assist children/Families with similar backgrounds. In 2013, more than 51,301 children in Taiwan are admitted in the sponsorship program.

CCF/Taiwan started school social work program in 1976, trying to effectively benefit school children with a complete set of programs, detailed plans, and cooperate with social workers, teachers, as well as community people. Recently, the increase of school dropout criminals and their deviant behaviors has aroused the public's attention and concern. Therefore, CCF/Taiwan has started School Dropout Service since 1996. Nineteen of the Branches received contracts with local governments to provide the service.

In 1979, CCF/Taiwan started Home-maker Service to help families who have emergency needs. House wives who are willing to serve people are trained to assist household duties or caring for children, the aged, sick people, the handicapped, and those who have just delivered their babies.

When families cannot take care of their children and have to leave children without parents' or family's care, family day-care service, a kind of supplementary service, provides necessary services to make up for the missing care. In 1987, CCF/Taiwan adopted family day-care service from Singapore to help parents in double-income families with their child care problems. CCF/Taiwan also encourage housewives to join the training to empower them the ability of getting into the job market. The service was first tested in Taipei City and both training of day-care providers and follow-up counseling were included. After the government made the policy that all day-care providers should have licenses to ensure the service quality in 1996, CCF/Taiwan provide necessary assistance and counseling for pour trained day-care providers to be qualified under the policy.

Because of the rapid increase of double-income families in Taiwan, different problems of latchkey children come up. In 1982, CCF/Taiwan provides professional counseling and many kinds of learning activities to care for latchkey children. CCF/Taiwan also organized parenting education courses to provide rearing knowledge for parents.

2. Early Intervention Service.

Some infants are born with functional defects and are diagnosed as "disordered children". Some of them are not progressing t the same rate as other children the same age that are called "developmental delay children". Developmental delay can be caused by complication s of pregnancy or environmental risk after birth. Even though there are no signs of functional defects or retarded development, it may have increased risk for developmental delays. The first three years of a child's life are the critical time for development and what happens during those years stays with a child for a lifetime. That's why it's so important to watch for signs of delays in development.

There is a group of children who need special care and assistance besides parents' care. Their growth rate and developmental orders are different from those of the other children because of genetic defects, diseases, psychosocial or environmental factors, etc. These children need extra care, assistance, and treatment from the concept of early intervention in Taiwan and are trying to integrate medical, educational and social welfare resources to provide timely and appropriate service to children with developmental delay problems.

CCF/Taiwan has started the early intervention service since July 1996. The major services provided are case management and day care. In case management, CCF/Taiwan records the development of children through home visits, evaluation and follow-up consultation. CCF/Taiwan also help plan a series of early intervention treatment to them after being diagnosed. Day-care service means to provide an environment for developmental delayed children to receive individual treatment during daytime. In 2012, there were 1,464 served in the program.

CCF/Taiwan started its service from orphanages, a kind of substitute service. Then it realized that the best environment for poor children to grow up is their own homes. Thus, Branches were established to provide supplemental and supportive services. CCF/Taiwan is also doing the best to protect and take care of children as well as strengthen the family functions.

3. Child Protection Service.

CCF/Taiwan set up a five-year plan for child protection in 1987. Through the organization of Child Protection Committee, we invited different professionals, such as doctors, lawyers, psychiatrists, consultants, education staff, social workers, and even media people to help abused children and youth by means of services and programs like emergency shelter, family treatment and long term follow-up consultation, livelihood maintenance, medical assistance, mental trauma rehabilitation, parenting education, legal consultation, and parenting activities. In 2013, there were 3,760 abused children served by CCF. Serious neglect (36.8%), physical abuse (21.6) and poor parenting (28%) are always the major types in child abuse cases. There were sexual abuse (4.6%) and mental abuse (6.6%).

4. Foster Care Services.

Foster care is one of the substitute services in child welfare service. When children are abused and those families are unable to take care of them (for example, parents were dead, in jail, or divorced); the service provides them home with love and full attention. In order to help fostered children to return to their families as early as possible, CCF offers different kinds of services and consultation to their biological parents for helping them solve problems on child's education they encountered and upgrading their capacities on parenting skills at the same time. These children return to their original family after the situation improves. The county/city governments have entrusted CCF/Taiwan to provide foster care service since 1981. In 2013, there were total 2,301 children served by foster family homes; an average of 1,459 children/youth received CCF's 914 foster care service every month. There were 103 new foster family homes and foster care has become one of the best choices for child protection in Taiwan.

5. Residential Services Program

Residential services are the third line of defense as well as the substitute services to protect the needy children and youth when facing the abuse, neglect or showing delinquent behavior. In order to help the vulnerable children and youth, the placement institution called "Hope Center" was established in accordance with this objective, function, and the service content. In 2013, there were 298 placed in residential service programs; there were 231 abused children, 33 sexually exploited teenage girls, and 34 delinquent youth placed in residential care.

In regards to the program to serve 33 sexually exploited teenage girls, CCF/Taiwan has worked on child prostitute related issues since the Ministry of Interior pronounced "Prevention Act for Sexual Transaction for Children and Youth" on August 11, 1995.

CCF/Taiwan has set up emergency short-term shelters at 4 Branches for abused or sexually exploited teenage girls since July 1996. The program targets at teenage girls who perform or are prone to perform commercial sex. More than 50% of the girls' parents do not have harmonious relationships and about 40% of the girls have poor relationships with their parents. Many studies have shown that the majority of girls who perform commercial sex came from broken families. The girls were lack of love and care because of the family structure, parents' attitudes towards rearing, relationships among family members, deviant behaviors of family members, and etc.

Social workers also found out that most girls had mental and physical troubles when they first entered the shelter. To effectively assist these girls, social workers integrate medical, psychological, educational, and even religious resources for them. We also use the community resources to teach the girls some living skills so that they are prepared to return to the society.

In regards to serve 231 abused children and 34 delinquent youth to keep them away from their original dangerous environment and develop themselves in a more secure way, CCF provides the services as follow:

- Accommodation: a secured protection system, an emergent or short-term placement was set up through cooperating with police to prevent children and youth from any mistreatment. After their condition had resumed stable no matter in physical or emotional stable, they would be transferred to foster families or relative for caring.
- Life counseling: daily schedule was arranged to assist children and youth to learn positive attitude and values.
- Medical care: the medical care should be provided once the children and youth need the treatment. If there was any disease to be diagnosed CCF helps them refer to health care centers for a better therapy.

- Psychological rehabilitation: CCF provides specific treatment and counseling to meet a child's individual needs.
- Educational and career counseling: CCF provides educational and career counseling that depended on child's situation.
- Family function restoration: CCF aimed to help restore the parent-child relationship and improve the communication between abused children and their parents.
- Recreational activities: CCF expected to boost their confidence, upgrade the adaption to the society and develop the capacity in life skills through recreational activities.

III. Global Trends:

- 1 Children are entering various systems of care younger, more disturbed and from more dysfunctional families.

No matter which agency one looks at, the children entering its doors typically younger, more disturbed and from more dysfunctional families. Not only are they entering out-of-home care at earlier ages, but also they are staying longer. In fact, the institutional systems are emerging as long-term parent substitutes-custodians who often fail to provide the permanency which children so desperately need for their healthy development.

2. Children of color are disproportionately represented in out-of-home care.

A disproportionate number of children entering foster care, mental health and juvenile delinquency settings are children of color. For instance, in Los Angeles County while only 11 percent of children are African American, they represent 44 percent of children in foster care.

3. The lack of basic family supports and community-based services also contributes to increases in out of-home placement.

Increases in out-of-home care can also be attributed to a lack of basic supports for families, such as adequate housing, health insurance and prenatal care. Community-based services, particularly early intervention services and in-home support services are also scarce. In United States of America nationally, for every \$10 spent to maintain a child in an out-of-home placement, only \$1 is spent to prevent such placement. Many parents are simply not able to get the in-home support services and parent education they need to function effectively in an increasingly stressful world (Saunders & Daly, 1992).

4. Existing community services are uncoordinated, inaccessible and unevaluated.

More often than not, children and their families have needs that cross traditional agency boundary. Yet, those services, which do exist, are often uncoordinated, inaccessible, and unevaluated.

5. Costs for care are rising due to fiscal incentives which favor the most restrictive and most costly types of care.

Fiscal incentives in United States of America at the state and federal level have also led to an increase in out-of-home placements. In child welfare, for instance, Title IV-E of the Social Security Act (SSA), a federal program which provides matching funds for foster care expenses, is an open-ended entitlement. Every child who is removed from his or her home will receive federal matching funds to support that placement. By contrast, Title IV-B of the SSA, which supports child welfare services designed to prevent placement, is capped. Limited amount of money which must be appropriated by Congress each year.

6. Out-of- home is not necessarily more effective in the healthy development for most children.

In addition to being more costly, foster care, in-patient mental health care and juvenile justice facilities are usually not more effective than community-based care. Rather, studies show that for most youth, community-based care is just as effective, and may be even more effective, than out-of-care, since it treats the child within his or her natural environment and support systems, such as school, family and friends. Similarly, research demonstrates that when families can be helped to care for their children more effectively, children are better off with their families than in alternative settings.

Services designed to preserve the family have been shown to reduce child abuse, improve family functioning, and prevent more costly out-of-home care in the child welfare, mental health and probation fields.

Given that out-of-home placement is often less appropriate and more costly for families, child welfare services providers often have developed an overall plan to strengthen and preserve families, with the goal of intervening as early as possible.

7. Family has undergone substantial change.

World- wide, the family is an institution has undergone substantial changes, divorce and blended, reconstituted, alternative family patterns are now part of the common family systems, especially in developed nations. The single-parent, female-headed household- an exception in the past-is becoming a way of life for increasing numbers of children.

Demographic projection in America indicates that half of all first marriages made today will end in divorce. Sixty percent of second marriages will probably fail. One-third of all children born in the past decade will probably live in a stepfamily before they are 18. One in four (25%) children today is being raised by a single parent (Moore & Vandivere, 2000).

The challenge of child welfare becomes even more important as many societies continue to age, with fewer children and more elderly becoming a demographic reality. We have seen the 1980s and 1990s reflected by a marked shift from child centered to family-focused services; increased networking among child and family services providers; widespread training for foster parents, child care workers, and social work staff; and more attention to respecting the cultural diversity of clients.

IV. Cross-culturally Considerations

1. Inadequate attention has been given to prevention services:

The literature revealed that in Taiwan limited attention was given to prevention of abuse or neglect as a key strategy to improve child safety. Instead, a costly and often ineffective strategy of waiting for children to be harmed has been seen and then emergency resources were provided. Currently, services typically do not begin until a child or family has contact the child welfare system. This is far too late to keep children safe.

In addition to reducing the pain and suffering of innocent victims, prevention reduces the significant costs of child welfare intervention and decrease s poor societal outcomes for children in the foster care system.

As part of preventive education to safeguard against child abuse, it is necessary to ensure opportunities for interaction among different age groups in school education, for example by including child-rearing experience activities in the general study program. At the same time, it is vital to promote the kind of education that will allow children to protect themselves.

Since there have been numerous cases in which the isolation of parents during child-rearing has invited child abuse, there is a need to make efforts to ensure places where parents who are currently raising children can interact and exchange information. Moreover, in order to make it easier for fathers also to fulfill their child-rearing responsibilities and especially for parents of growing children to engage in child-rearing relaxedly and with pleasure, it is vital to take steps to improve the labor environment, in particular by shortening working hours.

Since it is vital for the prevention of child abuse to identify high-risk groups as early as possible and then to take appropriate action, we should establish a system that makes it possible, while paying due attention to individual privacy, on the occasion of pregnancy examinations, prenatal-period checkups, and health examination for infants, to identify the high-risk group of guardians and expectant mothers who do not want to give birth to a child.

Although health examinations for infants are effective in the early detection of child abuse, it is important to take action especially in cases where families do not come in for their examinations. To this end, it is necessary to grasp the child-rearing environment in such families by, among other things, making public health nurses and other professionals proactively visit their homes.

We should strive to thoroughly advise those who in the position, by the nature of their jobs, to easily detect cases of children being abused, such as professionals working in schools, nursery schools, and medical institutions, of their duty to notify authorities in such a way that the abuse can be responded to effectively at the time of detection. At the same time we must continue to make efforts to develop systems for early detection/response by, among others, making these institutions elaborate their proper rules of response in such cases.

2. Training and Workforce Development:

Multiple agencies have responsibility for child safety in Taiwan. Yet, each has its own language, own definition of “safety”, and often its own information systems. None has a comprehensive plan to work in collaboration with other agencies in the service of child safety. Keeping children safe in an interdepartmental problem demands interdepartmental training. Entities must work together more effectively and better understand one another’s roles.

All related departments and agencies closely involved in the identification, prevention, protection, and treatment of at-risk children should be mandated to participate in cross-training. At a minimum, this interdisciplinary approach should include Department of Child Welfare, law enforcement, Department of Mental Health, Department of Health, Department of Public Health, and the Juvenile Court,

3. Strengthening the support network for abused children.

We need to acknowledge that today’s child welfare system is not equipped to handle the problems alone. In order to build families, there is need to build and strengthen communities through interagency and community participation. As

Schorr (1997) proposed, the well-being of children, families, and communities are inseparable. To strengthen families, one needs to combine action in the economic, service, education, physical development, and community building domains. What is needed, therefore, is the adoption of a broad, non-categorical, non-ideological, comprehensive approach. Child advocacy groups such as the Child Welfare League of America, the Children's Defense Fund, and, more recently, Children Now in California have lobbied steadfastly and valiantly in this regard. Yet, child welfare related problems are a fact of life in many parts of the world and will continue to place heavy demands on the child welfare system. There are no easy solutions to these complex problems, but sensitive, committed, and well-united child welfare support networks can make a positive difference in enhancing the quality of life for our children. The biggest challenge affecting the future of child welfare in Taiwan, in my view, will relate to the availability of resources and the development of a comprehensive social policy on the family. In this endeavor, two related support dimensions should be noted: one is the development of the capacity of the family to work continuously for its own welfare; and the other is the development of programs to meet the needs of problematic families.

To provide proper programs for abused children, while striving to ensure the quality and quantity of the professionals responsible for providing this care, we should aim at establishing and expanding short-term clinics for emotionally disturbed children and other treatment facilities. As well as we should study a suitable division of roles between treatment facilities and child-raising facilities.

To ensure the safety of children, while promoting the elaboration of objective criteria and guideline for procedures governing temporary returns home from protecting facilities and the termination of institutionalization, we must work to further improve local inspection systems devised to prevent the recurrence of child abuse.

In dealing with parents who have been abusive a treatment –type approach is indispensable. We therefore must quickly establish treatment and guidance programs that will restore the child-raising capacities of such parents.

4. Appropriate response in cases of sexual abuse.

There is an especially urgent need to improve physical and psychological care for children who have been subjected to sexual abuse. Moreover, in regard to the relevant procedures under criminal law, we should study ways to change them so that they take into account the difficulties involved in interrogating minors about such abuse. We must also work to improve the education and training of professionals involved in such cases, so as to avoid any secondary harm to the victims.

5. Reassessing the Child Abuse Protection Law:

When reassessing the Child Abuse Protection Law, there is a need to ensure first of all that the principle of respect for the human rights of children will be stipulated in clear terms in the law. The prevention of the occurrence of child abuse, early detection/response to cases of child abuse, and support for abused children should be appropriately implemented.

Regarding appropriate responses in cases of sexual abuse of children, adequate consideration to all ramifications must also be given when reviewing the Law for Punishing Acts Related to Child Prostitution and Child Pornography and for Protecting Children.

Currently there are no mandatory reporting laws imposed on social workers in child protective services in Taiwan although social services agencies are the lead agencies in handling abuse/neglect cases and delivering protective services. They do not have the legal authority in reporting abuse/neglect cases to the courts.

Social workers can only contact the local police department in order to detain the child to protect abused and neglected children. We need to revise the law in Taiwan to provide social workers with legal power to detain the abused and neglected children in order to protect them timely.

6. Implementation of the Nation-wide Strategic plan:

It is critical that all related child safety departments and agencies are held accountable for the implementation of the nation-wide strategic plan. To effectively track the progress of the implementation, they will need to develop a project management process whereby on a monthly basis they are provided with a status on the implementation of strategic objectives.

Key performance indicators need to be established to evaluate which programs and/or initiatives are yielding the intended results and which need to be restructured and/or eliminated. If these key performance indicators are appropriately established and clearly tracked, we will be able to determine whether children and families, in or out of child welfare system, are receiving the appropriate supports and services.

7. Further studies and assessments:

Too attention is spent on studying and discussion the successes we have achieved in working with children and families. Perhaps we need to study successful children reared under adverse circumstances rather than focusing on corrective

intervention to enhance the quality of life. These efforts have a greater potential for developing preventive intervention and a comprehensive social policy.

We need further studies of methods of practice used with families in protective and preventive services. The use of multiservice family centers, short-term and long-term intensive casework services, multidisciplinary teams, comprehensive services combined with outreach and advocacy, group services, lay services, parent education, and various types of contracting bear further examination.

We need to use the computerized tracking systems that have been developed to provide data that can be analyzed to add to the knowledge in the field. In addition, child welfare practitioners can greatly assist the total research effort by testing findings in the field and by keeping an organized record of results.

There is need also to add to our existing knowledge through further research which examines the sequence of events that promote stress and impede the inability to cope with life, resulting in social isolation. Why do families fail to use available services? What services provided to what children and families under what circumstances provide the desired results?

8. Reassessing Residentially Based Services for Children:

Group homes shall be redefined as programs providing residentially-based services (RBS); that is, programs delivering behavioral and therapeutic interventions in congregate care settings—not merely placements. In this conceptualization, “group home” as a place to be given way to “residentially based services” as an intervention and means of achieving permanency.

In addition to providing treatment services, shelter and basic care, residentially based service programs shall attend to the holistic needs of placed youth, including their educational, developmental and recreational needs.

The role of residentially based service providers should be expanded to include responsibility for providing two new and critical categories of services which

RBS providers are not currently authorized or funded to provide: 1). family support services while young people are in a RBS program, to prepare families to be able to successfully care for their children when they are discharged; and 2).

post-discharge (a.k.a. aftercare) services necessary to make sure the young people are able to remain with their families after they leave the group living arrangement.

A constellation of core services shall be available at all residential treatment programs. In addition there will be a need for RBS programs to specialize in particular medical, developmental, emotional, behavioral or other areas (e.g., for younger or older populations, those with chemical dependency, sexually acting out youth, and/or youth involved in the juvenile justice system).

The quality of residentially based services shall be monitored and ensured through the use of outcome measurement and performance-based contracting that focuses on RBS providers' track records in helping the young people they serve and their families achieve positive safety, permanency and well-being.

V. Conclusions

We have acknowledged the change of concern in child welfare, which has moved from fear of children's idleness and dependency to today's focus on children's rights and that the best opportunity for optimum growth and development most often is in their own home. We have also examined in this paper how child welfare policies, programs, and services are called upon to intervene and bring about positive change in those children and youth whose families are often subjected to the broader social problems of inequality, poverty, hunger, unemployment, underemployment, lack of affordable, decent child day care, teenage pregnancy, family violence, alcoholism, drug abuse, and lack of adequate education, health, housing, and mental health. Emphasis today is on providing children with the least restrictive environment with focus on family preservation and family reunification and family maintenance. Child welfare practice is guided by the principles of prevention, deinstitutionalization, permanency planning, normalization, family preservation and managed care.

As we begin our twenty-first century journey, we have seen significant strides taken place in the field of child welfare. Children's rights, re-emphasis on the sanctity of the family, family preservation, managed care, permanency planning, normalization, deinstitutionalization, and prevention have all helped to shape the nature of child welfare policy and practice. The contribution that child welfare professionals could make in this context, along with other allied professions, will be significant, if we have the vision and courage to respond to the challenge.

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