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Positive Possibilities for Child and Family Welfare: Options for Expanding the Anglo-American Child Protection Paradigm

Gary Cameron

Wilfrid Laurier University, camerongary@wlu.ca

Nancy Colleen Freymond

Wilfrid Laurier University

Denise Cornfield

Wilfrid Laurier University

Sally Palmer

McMaster University

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Options for Expanding the Anglo-American
Child Protection Paradigm

G. Cameron
N. Freymond
D. Cornfield
S. Palmer

April 2001



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Gary Cameron, Faculty of Social Work,
Wilfrid Laurier University, Waterloo, Ontario, N2L 3C5

Nancy Freymond, Faculty of Social Work,
Wilfrid Laurier University, Waterloo, Ontario, N2L 3C5

Denise Cornfield, Partnerships for Children and Families Project, Faculty
of Social Work, Wilfrid Laurier University, Waterloo, Ontario, N2L 3C5

Sally Palmer, Ph.D., Professor Emeritus, Faculty of Social Work,
McMaster University, Hamilton, Ontario, L8S 4M4

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Gary Cameron
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Denise Cornfield
Sally Palmer

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Introduction and Overview

Policy and practice to protect children living in unsafe environments and to facilitate their proper development have limited common grounding across settings. There is no necessary line of reasoning that leads from the circumstances confronting children and their families to any country's particular configuration of community, service and legal responses. The creation of the 'problem of child maltreatment' and how we deal with it are best understood as particular discourses which grow out of specific histories and social configurations. "As Gelles (1979) pointed out 20 years ago, child abuse and neglect amounts to a social construction... Child abuse has been created as a social problem. It is not just there, it is a discourse... This means that objective statements are impossible because they are inherent to the social context in which the problems arise" (Marneffe, 1997, p.178).

This paper provides a counterweight to any sense of the inevitability or superiority of the Anglo-American child protection paradigm, for example as implemented in Ontario. This child protection paradigm is best understood as a particular configuration rooted in our vision for children, families, community and society. Other settings have constructed quite different responses reflecting their own priorities and desired outcomes. And "...to realize that elsewhere things are done differently, expands one's confidence in the belief that 'different' things can be done" (Hetherington, Cooper, Smith, & Wilford, 1997, p.124).

Another aspect of our argument is that every child welfare/protection system creates its particular configuration out of a necessity to balance a common set of requirements. All systems must come to terms with similar challenges and choices. It is the nature of the choices made, and the balance struck among competing priorities, that gives each approach its unique strengths and weaknesses. For example, every delivery system reflects deliberate or unconscious choices about:

- the extent to which interventions give precedence to the interests of children, families, communities, or society;
- how broad the intervention mandate should be;
- what balance is required between local discretion and bureaucratic control over decision making in helping families and children;
- how separate the child welfare/protection system should be from the broader social welfare network;
- the types and extent of authority to be used in working with children and families;
- what linkages are optimal with the judicial and police systems; and,
- what emphasis is placed on individual change, on shared provision of social resources, and on collective empowerment and action.

All child welfare/protection systems have their limitations along with their critics. There are, however, different priorities and choices reflected in the design of these systems. We see these as choices with consequences. Each configuration has its particular strengths and limitations. Most importantly, the reported consequences of these choices for children and families, as well as for service providers working in these systems, differ greatly from place to place. For example:

“Child abuse reports reveal a large degree of variance ...ranging from a low of 2/1000 in Finland to 70/1000 in California... In general, it appears that the Anglo-American countries with reporting systems oriented towards child protection register much higher rates of reporting than the family-service oriented systems such as the Netherlands, Finland, and Belgium, for the data that are available” (Gilbert, 1997b, p.235)

Child welfare/protection practices mirror the historical and current cultural and

institutional contexts in which they have evolved. These local cultures impose strong constraints on the shapes any child and family welfare project will be allowed to take in a certain setting (O'Hara, 1998). For example, the focus on individual rights and the separation of family and state in Anglo-American contexts will make it difficult for them to evolve toward more activist and collectivist orientations, which are common in parts of continental Europe difficult. Nonetheless, considering the increasing questioning of the fairness and the consequences of Anglo-American child protection paradigm, as reflected in our review of the literature, understanding other service realities can stimulate our search for improvements. Both to generate hope as well as to stimulate creativity, it is worthwhile to examine our child protection system in the light of a continuum of existing and suggested alternatives.

Child welfare has been described as an “ideological battleground” (Wolff, 1997), an arena where fundamental differences in values about children, family, and society are contested. In considering possibilities, we are not engaged in a neutral exercise. Support for existing arrangements, or for new departures, will draw on deep well-springs of emotion and strongly held convictions. How we should view children and families and how we treat those who get into trouble divide us as people and as citizens. Although this paper cannot offer proof of better options, it can begin to define the spectrum of possibilities. The readers’ consideration of these alternatives will be coloured by their values and priorities.

Organization of the Paper

This is a review paper. Our purpose is two-fold: (1) to illustrate and to comment on a range of child welfare/protection design options as manifested in Europe and North America; and, (2) to examine the place of the Anglo-American child protection paradigm within this continuum

of choices. While we make no claim to comprehensiveness, the scope of material reviewed increases our confidence about the representativeness of the broad service patterns and issues raised in our discussion. In order to accomplish the purposes of this paper, we investigated a variety of related topics. The findings of these investigations are presented in the paper as follows:

- *The evolution of Ontario's child protection system:* This brief historical overview describes the roots and main development patterns for the child protection system in Ontario. Its purpose is to provide a context for later considerations of alternative approaches;
- *Common traits of Anglo-American child protection systems:* Child protection systems in England, United States and Canada/Ontario have evolved similar operating patterns. In addition, comparable concerns are found in the literature about the child protection paradigm in all three countries. This section highlights these commonalities as a precursor to examining other design options;
- *Ideologies and contexts:* The organization of child welfare/protection takes place in settings with quite different conceptions of preferred relationships among children, families, communities, and the state. These differences influence ideas about how families should be supported and children protected. Understanding this variance provides a lens through which to consider the underpinnings of Ontario's child protection orientation and the possibilities and constraints these represent for change;
- *Explanatory models:* All child welfare/protection systems are organized around explicit or unconscious assumptions about the reasons families experience difficulties and children need protection. However, the differences in core explanations guiding policy and intervention in Continental European, Anglo-American, and First Nations approaches have

important implications for the involvements of children and parents with child welfare/protection systems. This section provides an overview of these differences and their implications for our helping efforts;

- *Choices in child welfare/protection system design:* Our review identifies several system design and service delivery dimensions along which various child welfare/protection orientations are compared. The purpose is to begin to highlight the nature and range of choices available to inform future discussions about improvements;
- *Lessons and future directions:* This section summarizes the major patterns and issues from the above topic investigations and examines their implications for future reflections about changes to the child protection paradigm in Ontario.

Section 1:
History and Characteristics of the
Anglo-American Child Protection Paradigm

Our Child Saving History

The Ontario child welfare system has recently faced a barrage of criticism about its inability to protect children from death as a result of abuse. One of the official responses to the criticisms has been the introduction of the risk assessment model, a tool that child protection investigators apply to evaluate various aspects of the care a child is receiving. The risk assessment tool purportedly adds a ‘scientific’ dimension to the difficult and often uncertain work of detecting those children most at risk of harm. Another official response has been the introduction of legislative changes that work in tandem with the new investigative procedures to ensure that the process of permanently removing children who are deemed at ‘high risk’ from their abusive parents is accelerated. This ‘crackdown’ is the latest attempt by the government to respond to the needs of children in this province.

In principle, this seems very distant from the 1984 child welfare legislation that insisted on the ‘least intrusive’ interventions in order to preserve families. How is it that in less than two short decades the preferred response to ‘at risk’ children in Ontario can seem so different? This discussion looks at the historical underpinnings of our current child welfare system and the evolution of child welfare practices in Ontario. It also explores how our responses to ‘at risk’ children continue to be constructed through a child saving lens that both frames our understanding of this work and simultaneously restricts and obscures options for intervention. This brief overview is intended to provide a reference point for subsequent discussions about a range of possibilities and choices in the design of child welfare/protection systems.

Industrialization is the historical event most associated with the beginnings of public assistance to children. Any period of history that is marked by rapid societal change finds itself caught between new understandings of human need and society’s traditional responses. In the pre-industrialized world in England, the family and the church were seen as bearing the responsibility to meet needs associated with ill health, poverty or other unexpected misfortune.

As rural farming communities gave way to the urban centres of the mid 19th C industrial revolution, the increased visibility of the effects of poverty and fears about the rampant spread of disease added new urgency to the dilemmas of responding to human need. With the sweeping changes, traditional helping mechanisms were inadequate to the task, both in terms of skill and available resources.

In England, there arose a contingent of middle class reformers who felt compelled by religious conviction to save the children who fell prey to the villains of the darker sides of social developments (Dahl, 1985). These philanthropists blamed the state for the social upheaval of the time. They considered the state to be incapable of compassion. Even though the state maintained the final authority for children in need, by way of the poor laws, these philanthropists saw the state as a dreadful last resort. Thus, the child saver became focussed on saving children from falling into the State's clutches by offering to assume responsibility for the care of the child victims of industrialism. This view gave rise to the concept of *in loco parentis*, a legal doctrine whereby parental responsibility could be assumed by others, although not by the State (Dahl, 1985).

The world of a 19th C England was viewed through Christian beliefs in which the struggle between God and Satan for human souls was the foundation. Hence much of their world was seen as either good or evil. It was a world of saviours and of villains where the ultimate figures in the struggle were God and Satan. This splitting into good and evil informed the foundations of the child saving movement. Child savers saw the state, society's moral decline and the hazards of urban life as an evil from which children required saving.

Child savers were not concerned about the feelings of the child, in fact, public awareness of the emotional world of the child came at a later period in history (Sutherland, 1976). Nor was it about rescue from any particular suffering or hardship that the child might be enduring. To save was to train, discipline and render obedient the wayward waifs, who,

once a resource in a rural economy, were now discarded on city streets. The goal was to transform them into future resources and contributors to society (Chen, 2001). It was the antidote to society's moral downturn caused by industrialization. To save was a high calling; it was a demonstration of Christian faith.

The period of the infamous British institutions followed the inception of the child saving movement. Delinquent children were sent to the reformatory and neglected children to industrial schools to learn factory work. The last half of the 1800's saw a substantial rise in the number of children interned in industrial schools. The demand for placements far exceeded available charitable resources. State grants became available and beleaguered charitable institutions were happy to accept the financial relief, despite the low status of the state at the inception of the child saving movement. The philanthropic approach to child saving was further eroded by the emergence of the professions who tended to direct their demands toward the state rather than toward private benefactors (Dahl, 1985).

In late 19th C Britain, the charitable donations of well-intentioned philanthropists had essentially been replaced by government funding and emerging professionals in social welfare, whose expertise rested on new advances in the scientific community. The state gradually became the chief supporter of the child saving movement. Children were now understood as having distinct needs, separate from those of adults; they were, in essence, blank slates, susceptible to external influences that shaped their character. Thus, when children were found in poverty, roaming the streets, or were found guilty of delinquent acts, the blame was focussed on the 'influences' responsible for the creation of these social and moral problems. Parental conduct toward children was understood as the primary influence and the chief source of difficulty when problems arose (Chen, 2001).

In 19th century England, immorality was seen by the upper class as cause of poverty. In their Christian framework, prosperity was understood as clear evidence of God's blessing. It

was the immoral who were unable to secure blessing and therefore destined to poverty. Also, the emerging positivist view of children as unfinished beings reinforced the child savers' belief that the implantation of immoral ideas leads to immoral instincts on which these children will act later in life (Dahl, 1985). Therefore, it was the transmission of the parents' bad moral influence to the children, as evidenced by their poverty, that was the cause for concern (Piper, 1999). To save individual children, and to save society from continued moral decline, the separation of the child from the immoral parent was required. The substitution of the moral parent for the immoral one is an original and fundamental underpinning of foster care.

England was the home of industrial capitalism and, in this capacity, it demonstrated to the rest of the world the impact of industrialization on society (Dahl, 1985). Decades later, when similar social problems developed in the industrializing colonies, they turned to England for answers. Their strong political, social and cultural similarities with England ensured that the remedies from the motherland were readily transported. The adoption of British solutions is clearly evident in Ontario's child welfare history. Ontario's child welfare system is firmly rooted in the 19thC British child saving philosophy that initially saw children as the innocent victims of an industrializing nation and later as products of deficient parenting.

By 1870, Ontario was facing the social consequences of industrialization. Toronto was becoming a large and important commercial centre and, although farming continued to be a vital part of the Canadian economy, concerns about the growing visibility of poverty in this urban centre were unfolding, just as they had in London a half-century earlier. Comparisons to England were frequent but, rather than institute a Poor Law to ensure a minimum standard of care, Canadian attitudes dictated that, in this land of plenty, those who could not fend for themselves were lazy and/or immoral (Jones & Rutman, 1981). As in England, middle class philanthropists led the child saving movement. They were concerned both that the souls of children be saved from a death without Christianity and that they be kept from harmful,

immoral influences to ensure a crime-free, stable future for the nation (Jones & Rutman, 1981; Sutherland, 1976).

J.J. Kelso is credited with establishing the first Children's Aid Society in Toronto. He directed its establishment and played a role in the development of similar societies across Ontario and in other English-speaking provinces. He was widely acknowledged as the "leader of the child saving movement" (Jones & Rutman, 1981; Macintyre, 1993) and as a key "moral entrepreneur" in the movement (Hagan & Leon, 1977). Like his British predecessors, he became a child saver because of the visible plight of street children in an industrializing Toronto.

When children were removed, Kelso believed it should be permanent and that they needed an upbringing in "loving Christian families" (Jones & Rutman, 1981). But he was concerned about parental rights and, in response to criticism, declared that he "invariably advocated the improvement of the home life by timely intervention, so that it might not be necessary to have children removed" (Jones & Rutman, 1981). But it was this 'home life' that was viewed as the source of the problem and the reason that children needed help. The location of the problem in the home persists today: the tension between desires for permanent removal and supporting improvements in child's home is still felt at the turn of the 20th Century.

In 1893, new legislation allowed for the establishment of Children's Aid Societies in Ontario. Their work was focussed on individual families and the chief intervention was saving children by separating them from the immorality found in their homes and communities. The legislation described the young as "dependent" and "neglected", but the older children, who already suffered as a result of prolonged exposure to bad conditions, were referred to as "immoral" and "depraved" (Bala, 1999). Without knowledge of the emotional world of a child, this saving by separation seemed to make sense for Ontario just as it had for England

and the broad discretionary powers granted to the Children's Aid Societies ensured that the practice became well established.

In the 1920s, the rise of Freudian principles of psychotherapy altered the emphasis on exposure to immorality as the chief reason that children need help. Freudian principles renamed immorality as psycho-pathology. These new ideas broadened and made more 'scientific' the understanding of why children needed help. This fresh approach identified a different parental deficiency as the reason children required saving. It did not alter or challenge the original principles of saving on which child welfare is predicated.

During the first half of the twentieth century, North American families struggled to cope with the effects of a crippling depression and two world wars. Families were devastated both by the disillusionment that hard work in the land of plenty did not necessarily secure prosperity and by the loss of lives in the wars. As families and the nation pulled together in the face of these difficulties, the public face of the child savers was very low key (Costin, Karger, & Stoesz, 1996). Rarely were parents who expressed an interest in caring for their children prevented from doing so (Bala, 1999).

In the 1960s, two important events reinvigorated the child saving movement. Kempe, an American x-ray technician, discovered broken bones in infants, a highly publicized phenomenon that became known as the "battered child syndrome". This raised new concerns about the extent to which parental psycho-pathology could place children at risk. Child savers became conscious of the need to challenge parental explanations of injuries and became more focussed on the investigative aspects of their work

Also, the issues of aboriginal child welfare, as well as provincial responsibilities on federal First Nation reserves, found resolution in the 1960s. Just as the institutional 'big houses' failed the child savers a century earlier, the residential schools, designed to assimilate First Nations children through discipline, education and separation from Aboriginal ways of

life, were publicly acknowledged to have failed (McGillivray, 1995). The 1867 British North America Act had placed First Nations under federal jurisdiction, while child welfare was a provincial jurisdiction. In 1947, the Canadian Welfare Council and the Canadian Association of Social Workers, in a brief to the subcommittee of the Indian Act, drew attention to the conditions for children on reservations. In response, amendments were made which secured the constitutional authority for the provision of provincial services on federal First Nation reserves. After considerable federal/provincial wrangling about costs for the provision of services, the federal government signed cost sharing agreements with the provinces for the provision of child welfare services on reserves (McGillivray, 1995). Saving First Nations children through practices of apprehension and adoption became standard and wide spread.

The late 1970s and the 1980s ushered in concerns about the effects of the renewed child saving efforts of the 1960s. There was an emerging concern about the broad discretionary powers of social workers and the violation of the rights of parents and children, concerns that were firmly lodged in family autonomy and the individual rights movements. It became incumbent on social workers to more clearly articulate and defend decisions to apprehend children. Secondly, there were increasing reports of the overuse of apprehension and adoption policies, particularly among First Nations (Hepworth, 1985). There was continued First Nations resistance both to the cultural destruction caused by provincial child welfare policy and to the erosion of individual Aboriginal identity through foster care and adoptions outside the community.

In addition, concerns were raised about the number of foster children adrift in the child protection system, without adequate attachment to a primary caregiver. The ideas of (Goldstein, Freud, & Solnit, 1973; 1979) advocated the need of children for continuity of care. It is an argument that underpins the current emphasis on permanency planning for children and has been used both in support of family preservation and as a rationale for early removal and

adoption of children.

The result was an emphasis on parental rights and on family preservation in the 1984 Child and Family Services Act, which insisted that agency intervention encompass “least disruptive” alternatives. This legislation also added a new dimension to the “best interests” of the child by recognizing needs for attachment through continuity of care and stable family relationships. Thus, from 1980-1989, the number of foster children in Ontario dropped by an estimated 22% (Trocme, 1991). However, this family preservation orientation was handicapped by the fact that there were no fundamental changes to the way child welfare services were organized. Furthermore, throughout the 1980s, social service expenditures in Ontario stayed relatively constant, despite dramatic increases in the numbers of families receiving in-home support services (Trocme, 1991). The family preservation orientation was further handicapped by the ‘saving’ mentality of child welfare professionals, as many workers lamented that their efforts to save children were frustrated by the number of opportunities given to parents to make changes.

In the 1980s, the child saving movement became focussed on child sexual abuse. The Badgley Report in 1984 spoke of the widespread occurrence and the massive under-reporting of child sexual abuse. Adult disclosures of childhood sexual abuse contributed to increased public awareness, which, in turn, caused a sharp increase in the number of reported cases and the increased availability of treatment. In the 1990s, attention has shifted to addictions that interfere with parenting, and the controversies around mothers who expose babies to illicit drugs when they are pregnant. Moreover, public concerns about the number of children who die as a result of abuse and ensuing legislative changes have effectively dismantled the earlier emphasis on family preservation.

There was a shift in the social climate of the 1990s. Neo-conservative political policies stressed individual responsibility, fiscal restraint and increased judgments toward those who

are seen as inadequate parents. This strengthened the emphasis on reporting 'child abuse' and on the quasi-scientific assessments of risk by social workers. New definitions in the 2000 amendments to the CFSA also widened the scope for involuntary state intervention into families. Accelerated legal processing, and the use of sophisticated psychological testing to assess children's attachment to their families, all converge in pointing to a future where the reliance on apprehension and out-of-home placement rivals that of the 1960's.

For the past 100 years, child saving principles have been the foundation of Ontario's child protection system. Regardless of the appropriateness of these principles, they function to restrict the range of our responses to concerns about children's welfare. Child welfare has been characterized as engaging in solutions that have been tried before, which suggests a reform process that somehow fails to benefit from the wisdom of hindsight (Van Krieken, 1986). As long as child welfare is understood as child saving, our ability to respond innovatively to the complexities facing children and families is limited by the very principles on which our system is based.

Regardless of the passage of time, child saving principles continued to influence our child welfare system. 'Saving' implies a rescue from danger, and it implies that someone or something places children in danger. At the root remains the belief that child maltreatment is the result of parental psychological difficulties and/or immorality. It is from the influence of these damaged or unworthy parents that children must be saved. Concerns about immorality continue to seep into and blend with psychological explanations (Swift, 1995). Separation from the 'psychologically deficient' person and placement with a family that is 'psychologically healthy' remains central to the child welfare system.

Saving obscures other explanations for child maltreatment. It ignores exposure to social conditions such as poverty, crime and pollution, which compromise the well-being of children. It ignores communities that fail to offer children social, educational and health

opportunities, economic conditions that disenfranchise, and government policies that increase the burden on families.

As we enter the new millennium, Ontario Children's Aid Societies are grappling with new procedures designed to accelerate their child saving efforts. The criticism that this is a re-packaging of the same thinking still applies. The nature of child maltreatment is complex, defying simple solutions. Conversely Ontario's child welfare system has always had a narrow range of response to these complexities. Saving confines us to a polarized world of good and bad, saviours and villains, when the very complexity of child and family well-being demands holistic, flexible, and innovative approaches.

Common Traits of Threshold Systems

To understand the current child protection system in Ontario, we need to understand some of the core characteristics of our system, and other child protection systems such as England's and the USA's, which function in a similar manner. In this paper, these Anglo-American systems will often be referred to as 'threshold systems', making reference to the shared trait that families must meet minimum levels of 'dysfunction' to qualify for formal entry into these systems.

Although there are strong advocates for the appropriateness of these threshold child protection systems, our review suggests that these arguments are being heard less often than in the past. Discussions in the recent literature often centre around concerns about the ways children and families are treated by Anglo-American child protection agencies. Equally striking, these concerns are quite similar across countries which have created threshold systems. Before discussing a range of possibilities for child welfare/ protection systems' design, this section describes the common characteristics of these Anglo-American threshold systems. In addition, this discussion summarizes both the rationale for current threshold systems and the emerging critiques of these systems.

Traits of Threshold Systems: The child welfare/ protection systems in Canada, America, and England have evolved quite similar ways of working. All share roots in Anglo-American liberal democratic traditions. These are threshold systems in which English thinking initially dominated, although since World War II they have been heavily influenced by American ideas. Not surprisingly, very similar observations about these three systems have appeared in the literature.

Threshold systems function within societies which place great emphasis on individual

responsibilities and rights. This valuing of personal discretion is seen in their ideas about family rights and responsibilities, where parents are deemed to have sole privilege and responsibility for the care of their children. Swift (1997) comments that, in Canada, there is a “belief that parents bear the primary responsibility for the welfare of their children and a concomitant right to raise their children in accordance with their own wishes” (p. 38). Intrusion by the state into the private lives of families is only permitted when parents violate minimum standards for the care and treatment of their children. Even then, agents of the state are required to prove these allegations of parental maltreatment in court before the parents’ right to privacy can be overridden (Larner, Stevenson, & Behrman, 1998).

Because of this legal requirement to demonstrate parental incapacity or misconduct before the state can intervene, much time is spent by workers gathering evidence suitable for use in formal legal proceedings (Larner et al., 1998; Swift, 1997; Pires, 1993). As well, the primary mandate is to protect children from harm in their immediate living environments, most often their parents. As Trocme and his colleagues (2001) note, in 1998, 61% of child investigations in Canada involved allegations against biological mothers. Families who are investigated, and whose circumstances are not judged to be serious enough, have their cases closed and are sometimes referred elsewhere for services. However, many families do not receive any assistance from the child protection agencies. Furthermore, these agencies have only minimal working linkages with other social welfare institutions of potential assistance to families such as child care, recreational programs, scholastic assistance programs, and so on (Hetherington et al., 1997; Lawrence-Karski, 1997; Waldfogel, 1998). In addition, rather than voluntarily seeking out help, the majority of parents and children who become involved with threshold systems do so because of an agency-initiated investigation of their lives.

Both the USA and Canada have mandatory child abuse reporting legislation. Service professionals and others must report any suspicions they may have about child maltreatment (Child and Family Services Act [CFSA], section 72). Over the past three decades, the number of reports received by these threshold systems has increased greatly (Family and Children's Services of Guelph and Wellington County, 2000; Parton, 1997; Waldfogel, 1996). For example, a local Children's Aid Society reports a 60% increase in community reports about child abuse over the past four years (Family and Children's Services of Guelph and Wellington County, 2000).

The threshold system's required first response to each abuse report received is a formal investigation to determine the validity and seriousness of the alleged abuse. Only families which fall below the prescribed minimum child care standards will enter into the formal child protection system. If, based on this initial assessment, parents do not fall below this minimal level of care, their investigation is closed and they generally do not receive any services or assistance from the agency (Chen, 2001; Ontario Ministry of Community and Social Services, 2000b). In addition, the proportion of families who have no involvement beyond an initial investigation is increasing. For example, according to Lawrence-Karski (1997), in 1976, 70% of reports investigated in California received services beyond the initial screening; whereas in 1992, only 6% of reports received these services. Likewise, in Canada, 64 % of cases were closed after the initial investigation in 1998 (Trocme et al., 2001).

The standard repertoire of responses from these threshold systems after an investigation has been completed include referrals to other programs that may assist the family with their difficulties, supervision contracts/orders (voluntary and involuntary) to ensure parents are complying with agency expectations of parental standards, and out-of-home

placement of children (usually involuntary). As well, there is extensive and increasing use of an adversarial legal system to ensure that parents comply with the expectations of child protection professionals. For example, between 50% and 70% of the cases open at the two Children's Aid Societies presently participating in the Partnership for Children and Families Project involve a formal application to the court (personal communications, September 2000). Because of the importance placed on individual rights and due process in court applications, legal representation typically is required for all parties to the dispute – the agency, the parent, and older children – as soon as the court becomes involved in a family's case.

Protection of children (usually from physical or sexual harm by caregivers) is the primary mandate for these threshold systems (Ontario Ministry of Community and Social Services, 2000b; Panel of Experts on Child Protection, 1998). Therefore, although child neglect still constitutes the largest proportion of cases that are opened in the threshold systems, physical and sexual abuse have become more prominent issues since the 1960s. In fact, child abuse has become the organizing framework for much of the child protection legislation, within which neglect is a sub-category (Swift, 1997; 1998).

Furthermore, although it was stated in the Ontario Child Welfare Act (1965) that “every Children's Aid Society shall be operated for the purpose of providing guidance, counselling, and other services to families for the prevention of circumstances requiring the protection of children” (McEachern & Morris, 1992, p.157), the focus of Ontario Children's Aid Societies almost exclusively centres on child protection. Legislation and funding criteria are increasingly concentrated on the protection of children from physical, sexual, and emotional maltreatment. Initiatives for prevention of abuse and optimization of child well-being invariably receive lower priority. (Costin et al., 1996; Larner et al., 1998; Luckcock,

Vogler, & Keating, 1996; McEachern & Morris, 1992).

Another defining trend in threshold systems is the decreasing amount of discretion given to child protection workers in working with families. This move toward standardized procedures stems both from lack of willingness to trust workers' judgements about what to do, in part as a result of public inquiries into system 'failures', and from increasing belief in the power of 'science' and 'rational' organization of procedures to predict when children are at risk of being harmed and to protect them from harm (Lawrence-Karski, 1997; Ontario Ministry of Community and Social Services, 2000b; Parton, 1997; Swift, 1997). A by-product of these standardized procedures and the legal recording requirements is that workers invest more time in assuring compliance with these expectations, leaving less time to spend with families (Chen, 2001; Swift, 1995). As Regehr and her colleagues (2000) noted in their recent study of the Children's Aid Society of Toronto:

... at times workers were seeing people to write something about them instead of helping them... they felt their work at the agency was focused on meeting the needs and requirements of legislation, rather than providing service to clients (p.7).

Rationale for the Ontario child protection system: A clear argument for this child protection system is found in the rationale for the 2000 amendments to the Child and Family Services Act. Those who advocated for the amendments describe the benefits of moving to a child protection system which is standardised and more focussed on the rights of the child. In response to the deaths of Ontario children who were receiving child welfare services, a panel of experts was brought together in 1998 to make recommendations about legislative changes that would help to prevent further tragedies. Their recommendations were for more emphasis on standard risk assessments, definite time lines for investigation, recording, and intervention,

and a broader definition of what constitutes a child ‘in need of protection’ (Panel of Experts on Child Protection, 1998). The results of these recommendations were changes in the legislation which moved the Ontario child protection system in the same direction as the systems already existing in the United States and England.

The paramount principle in the current Ontario child protection legislation is that “each child is entitled to safety, protection and well-being... and that all other purposes are secondary” (Panel of Experts on Child Protection, 1998, p. 13). The Panel of Experts on Child Protection (1998) stated that the legislation must be clear that all other objectives are of lesser importance because in the past “these other objectives have been interpreted in such a way as to overemphasize the rights and interests of parents rather than the needs of the child... In the event of conflict between the rights of the parents and the needs of the child, the lack of clarity as to which principle has priority has compromised the safety, protection, and well-being of some children” (p.13).

In addition, it was argued that the definition of a child ‘in need of protection’ needed to be broadened to include the ‘risk that the child is likely’ to be in danger of maltreatment [CFSA 37(2)]. This amendment broadened the previous definition, which required that the child be at ‘substantial risk’ of harm; the change was intended to more adequately protect children by allowing child welfare workers to intervene earlier in the family. Proponents of this threshold system want child protection workers to be able to investigate families at the first signs of potential harm to the child in order to prevent or to minimize harm to children:

The ability of protection workers to intervene early and assess the family’s ability to meet the child’s physical, developmental and emotional needs is crucial. The focus on non-intrusion into the family by the state has contributed to barriers in obtaining crucial information about a child... It is hoped that earlier intervention will prevent or at least minimize the damage to vulnerable children and increase the opportunities for effective

and earlier services to children and parents (Panel of Experts on Child Protection, 1998, p.8-9).

Advocates of the Ontario child protection system argue that having to prove that a child is in serious danger of being harmed restricts workers' ability to protect the child: "the use of the test of substantial risk has left children in dangerous situations" (Panel of Experts on Child Protection, 1998, p.17). Child protection workers should be able to investigate families as soon as it is determined there is "risk that the child is likely to be harmed" (Ontario Ministry of Community and Social Services, 2000a).

Furthermore, these proponents wanted a more consistent approach to service delivery across the province and advocated for a standard means of assessing if a child is in need of protection. As a result of tragedies involving Children's Aid Societies, there has been much public criticism about the quality of workers' judgements about children and families. Standardised tools were seen as potentially useful in helping workers make more informed and consistent child protection decisions (Ontario Ministry of Community and Social Services, 2000a).

A few authors have argued that the investigative focus of threshold systems is justified from a public safety perspective on child abuse. Those who support this argument, which is especially prevalent in the United States, contend it is important to be able to gather evidence and prosecute offenders. They point out that abuse of children should be understood in the same light as other forms of assault. As Costin (1996) notes, "in order to provide children with safety, it is necessary to criminalize child abuse and neglect" (p.181). From this perspective, there is no logical difference between criminal violence against women and the violence done to children. Some proponents of this idea support the division of the child

protection system into one which would perform policing functions and another which would provide support for families who need assistance but do not pose a serious threat to their children (Costin et al., 1996).

Common Critiques of Threshold Systems: The child welfare/protection literature from England, United States, and Canada shows that common criticisms of these systems are emerging across these settings. American authors voice the strongest concerns about the manner in which their child protection system is evolving; however, similar criticisms are surfacing about the 1989 child protection reforms in England. Although the reforms to the Ontario child protection system are more recent, these reforms already seem to be producing effects similar to those in England and the US. Our review of the literature suggests that concerns about non-threshold child welfare/ protection systems are not being expressed as frequently or as forcefully as those about the threshold child protection paradigm. The following section of this paper presents an overview of the most common critiques of Anglo-American threshold systems found in the literature.

Within these threshold systems, the number of child abuse reports has increased dramatically over the past three decades (Family and Children's Services of Guelph and Wellington County, 2000; Waldfogel, 1996). Partly because they are required to formally investigate every report, the rise in reports is described as overwhelming child protection agencies (Larner et al., 1998; Pires, 1993; Regehr et al., 2000; Waldfogel, 1996). The problem does not seem to be simply one of insufficient resources; it appears that the new procedures draw more families into the investigative system. These systems are described as overwhelmed by reports that must be investigated, leaving inadequate time to provide useful assistance to families under duress. Furthermore, the system's inability to deal with the

increase in reports appears to lead to increased job pressures for workers and higher levels of worker frustration, resulting in higher turnover (Regehr et al., 2000; Waldfogel, 1996; 1998). In fact, according to a recent study of the Children's Aid Society of Toronto, intake workers stayed with the agency for a median of only one year, and family services workers stayed with the agency for a median of only three years. The same study also reported a two-year turnover rate between 46% and 90% for child welfare practitioners in Ontario (Regehr et al., 2000).

Threshold systems have been criticised for formally investigating too many families whose difficulties stem from shortages of resources and parents who are struggling with child care responsibilities. Consequently, there is less emphasis on providing appropriate assistance and guidance to these families. In America, this results in 70% of cases either not being investigated at all or being closed after the investigation (Waldfogel, 1998). In addition, because so much time is spent investigating families who could benefit from less coercive services and supports, fewer resources are available to intervene effectively with families where children are truly at risk of harm.

Within threshold systems, there has been consistent debate over child protection agencies' dual mandates (to care for and to control families). Some critics argue that this dual focus results in neither function being carried out effectively and that these functions should be separated into a formal 'policing' operation and a separate system providing positive supports (Besharov, Robinson Lowry, Pelton, & Weber, 1998; Callahan, 1993; Costin et al., 1996; Hetherington et al., 1997). In many non-threshold settings, there is greater capacity to provide non-coercive assistance to families and managing the dual mandates of caring and controlling are viewed as compatible. However, because of the heavy emphasis on control in threshold

systems, dissatisfaction with the dual focus may stem from a perceived imbalance in the functions of care and control, rather than the dual mandate itself.

The challenges that face families coming into contact with the child welfare/ protection systems are multiple and complex (Cameron & Rothery, 1985; Peirson, Laurendeau, & Chamberland, in press; Schorr, 1989; 1997). However, the responses offered by threshold systems are quite limited and are not very adaptable to the needs of particular families (Besharov et al., 1998; Waldfogel, 1996; 1998). As Lindsey (1994) comments, the problem in child welfare is that “instead of freely choosing from among a spectrum of services, clients have only one choice, for which they must qualify” (p.47).

The first step for every family that comes in contact with the threshold systems is an investigation, the results of which disqualify the great majority of families from service (Lawrence-Karski, 1997; Parton, 1997; Waldfogel, 1998). For families deemed in need of help, instead of receiving practical and meaningful supports, ‘assistance’ often comes in the form of expectations with which they must comply, or in some cases, the removal of children from the home. The most common system response to clients of the Ontario child protection system is an intervention in which the system prescribes certain requirements that the family must meet to ensure that the children are not at risk of harm. This intervention can take the form of a supervision order or an agreement with the family (although these agreements are often involuntary). Although evidence is available about positive supports which could help many of these families, critics of the threshold approach complain that the response from these systems continues to be singular and unchanging (Besharov et al., 1998; Lindsey, 1994; Waldfogel, 1996; 1998).

Additionally, threshold systems have been criticised for their excessive focus on the

protection of children from abuse by their caregivers. Children are often left in impoverished homes with little thought to their long-term health and well-being, provided there are no immediate ‘safety’ risks. In threshold approaches, human miseries other than child ‘safety’ are often not considered in decisions to intervene (Besharov et al., 1998; Chen, 2001; Swift, 1995; 1998). Furthermore, when the state does intervene, the decision to remove children from their homes can be problematic as well. While out-of-home placement is an improvement for some children living in dangerous or severely dysfunctional homes, the ability of threshold systems to provide loving and nourishing long-term environments for children has proven to be questionable (Hepworth, 1985; Kufeldt, Vachon, Simard, Baker, & Andrews, 2000; Lindsey, 1994; Swift, 1998; Wharf, 1992). Kingsley and Mark (2000) note, “mental health workers, foster parents, and DSS [Department of Social Services] workers all indicated that the current system takes children and youth with attachment disorders and puts them in situations that intensify that disorder” (p.38).

The societies in which these threshold systems operate tend to have individualistic ideologies about family and parental responsibilities. Some critics argue that threshold systems evaluate families’ situations out of the context of their daily living realities, thereby overlooking important factors which impact both on their functioning and on the opportunities available to them (Callahan, 1993; Cameron, Vanderwoerd, & Peirson, 1997; Swift, 1998; Wharf, 1995). Additionally, although the official rationale for intervention is the ‘protection’ of children, a more covert dynamic is the allocation of blame and appropriate punishment to wrong doers. Social and economic reasons why parents may not be able to adequately care for their children are largely irrelevant to this accounting and are seldom a focus for helping strategies (Chen, 2001; Hughes, 1995).

The challenge thrown by threshold systems at all child welfare/ protection alternatives that do not place a clear priority on the ‘protection’ of children is that the safety of children is being sacrificed to the interests of the parents. However, in our review, there was no evidence that children in contact with non-threshold systems are being hurt with greater frequency or severity than those dealing with threshold systems. Across the different child welfare/ protection systems reviewed, children are removed from situations perceived to be dangerous with similar frequency (Gilbert, 1997a). However, in non-threshold systems, the removal of children is more often done with parental agreement, while threshold systems typically face the resistance of parents to the decision to remove a child. In light of this information, threshold systems’ overarching justification for their, often coercive, interventions (that they are better at protecting children from harm) loses much of its power. While the rationales of holding families responsible and punishing transgressions remain, these motives seem less persuasive and are apt to be less convincing as a public rationale for threshold systems.

The threshold systems in England, USA , and Canada are currently experiencing serious problems with recruiting and retention of staff. Child protection work in threshold systems can be emotionally demanding, frequently requiring workers to interfere in dramatic and coercive fashions into the lives of struggling families. Furthermore, child protection work has changed rapidly in these settings with professionals having much less discretion in their jobs, more adversarial relations with families and spending a great deal more time complying with new documentation requirements (Costin et al., 1996; Pires, 1993; Swift, 1995).

Between 1997 and 1999, the Ontario Ministry of Community and Social Services “twice invested additional funding for hiring nearly 1000 new front-line workers” (Chen, 2001, p.10). However, despite this increase in available funding and intense recruitment efforts, agencies

are having difficulty finding well-trained professionals to work in the field and are experiencing serious retention problems (Personal communication with the Executive Director of a Children's Aid Society, September 2000; Regehr, Leslie, Howe, & Chau, 2000). These employment issues are generally not highlighted as problems in non-threshold child welfare/protection systems and service professionals are typically described as being more satisfied with their jobs (Hetherington et al., 1997).

A less common but persistent criticism of threshold systems is that they are systems of oppression focussed on the most disadvantaged parents and children in our society. The threshold systems' roots are in the 'child-saving' movement in which one class of established people 'rescued' children from a lower class of 'bad' parents and the 'immoral' influences of poor communities (Swift, 1995). This tendency continues today; almost all of the families coming to the attention of the threshold system are working class and poor (Cameron & Rothery, 1985; Cameron, Hayward, & Mamatis, 1992; Callahan, 1993; Costin et al., 1996; Courtney, 1998; Swift, 1995). Conversely, middle and upper class families rarely are drawn into these systems; when they are, they have shown a greater capacity for organized resistance (Martin, 1985). Also, the evidence is overwhelming that, in North America at least, it is the poorest of minority families – First Nations, Black and Hispanic - who have a disproportionate number of their children removed (Pires, 1993; Saskatchewan Children's Advocate Office, 2000; Swift, 1995; 1997). Critics also point out that many of the mothers coming within the mandate of threshold systems have been victims of personal violence and addictions in their childhood and adult homes. They often live in unsafe and deteriorating neighbourhoods where it is hard to hold to hope (Belsky, 1993; Hughes, 1995).

While these factors are well-known to many of the architects and employees of

threshold systems, they are clearly of secondary concern and are viewed as illegitimate focusses of helping. Indeed, one of the paradoxes of the new formalized risk assessment procedures used in threshold systems is that concerns such as poverty have been emptied of their emotional and political content. They have become technical demerit points in the assessment of child safety rather than reasons for compassion and assistance (Callahan, 1993; Chen, 2001; Swift, 1998).

There have been many concerns expressed in the literature about the manner in which the threshold systems operate and the consequences that their interventions may be having on families and children. The recent moves to more standardisation, bureaucracy, and evidence-gathering seems have drawn a lot of criticism, not just in the literature, but also from parents and service professionals in the Partnerships for Children and Families project. However, despite these concerns about threshold systems, there is less clarity about what approach should be taken. In Canada, many service professionals and members of the public assume that the threshold or child protection paradigm is the only available option. However, an examination of arrangements in other countries and in First Nation communities can open our thinking to other possibilities. The remainder of this paper will highlight some of these alternatives for ensuring the well-being of children and families. Our challenge is to step off well-worn pathways and to be open to considerations of other ways of relating to children, families, and communities.

Section 2:

Ideologies and Explanatory Models

Relationships Between the State, Communities, Families, and Children

Concepts of children and families vary greatly across cultures. They are shaped by historical, political, and cultural contexts and directly influence our views on protecting children and supporting families. This section examines the ideologies colouring perspectives on the relationships among children, families, communities and the state in selected societies. Specifically, the ideologies framing these relationships in Anglo-American, selected continental European, and First Nation cultures are discussed. The implications of these relationships for child welfare/ protection systems also are examined.

Our intent is to provide a brief overview of these various viewpoints. This discussion does not do justice to the complexities of these relationships in each setting; nonetheless, these cross-cultural comparisons help to clarify the rationale behind policy choices, stimulate awareness of alternative views, and help with placing the emphases of various child welfare/ protection orientations in a context.

Stasis in Ideologies. Values and ideologies are developed over long periods of time and are firmly entrenched in the history and culture of a society. These ideologies set the boundaries for what is acceptable in the development of public policies. As well, these differences help to make the variations in public policy from one country to another understandable (O'Hara, 1998). Clearly, society's perspectives on children, families, communities, and the state are reflected in their child welfare/protection policies and practices.

Because these ideologies are so entrenched in the culture and history of particular places, child welfare policy and practice tend not to undergo radical changes, nor cause significant shifts in established relationships between the state, communities, families, and children. As Majone (1989) notes, "major policy breakthroughs are possible only after public

opinion has been conditioned to accept new ideas and new concepts of the public interest” (as cited in O'Hara, 1998, p.47).

Thus, despite tremendous growth in our knowledge of children and families, and their changing needs over the past century, the mandate and structures in Ontario's Children's Aid Societies have tended to vary only within narrow parameters. Child welfare service delivery ideas and programs that fall outside the established ideological boundaries have remained on the fringes of mainstream thinking and methods in these societies. This being said, we do not see such arrangements as completely immutable. For example, Sweden changed from a having an extremely high level of coercive removals of children from their families in the first half of the 1900s to a very strong emphasis on social provisions and supporting families (Olsson Hort, 1997). A beginning point in any reconsideration is understanding the reasons for current arrangements, along with an examination of alternative possibilities.

Anglo-American Rugged Individualism

The ideology of rugged individualism, which values individual initiative, ambition, self-sufficiency, and the principle of competition, has become Canada's moral, social, political, and economic ideal. Societies which embrace this ideology feel that people must be free to pursue their interests (Djao, 1983; Sapiro, 1990). Individualism is rooted in a laissez-faire approach to economics, based on the 18th century writings of Adam Smith (1723-1790) who contended that government interference in business is harmful. As well, he argued that individuals pursuing their own interests will ultimately produce the highest level of good for the most people. This ideal is also rooted in the writings of Thomas Hobbes (1588-1679). A century earlier, Hobbes had asserted that the state should only become involved to prevent wrongdoing arising from unchecked individual self-assertion. He believed that the state's role

in relation to the rest of society was one of a provider and a regulator of a social and moral framework (Hetherington et al., 1997).

Concepts of Family. The ideals of rugged individualism, and of laissez-faire economics, have set the family apart from the state in Anglo-American societies. The effects of late 19th century industrialization and urbanization fragmented extended families, which were crucial for survival in farming communities, and ushered in the nuclear family as the preferred model for families (Macintyre, 1993). Extended family networks, once the chief caregivers to children, were replaced by biological parents whose dominant virtue, through the lens of individualism, became self-reliance (Swift, 1995). The nuclear family ideal became the standard to which all Anglo-American societies aspired, as well as the standard by which all families were to be evaluated within these societies:

So effective were the nineteenth and twentieth-century promoters of the Victorian family model that today's society has great difficulty accepting the fact that other models have developed in other parts of the world and that alternative family models exist in growing numbers within our own society (Pence, 1985, p.237)

In individualistic societies, it is assumed that families should survive in a free market based on their own talents and efforts, and that internal family matters should be protected from the state. As Baker and Phipps (1997) have noted, in Canada (and other Anglo-American societies), laws and policies “have incorporated the values of self-reliance, individualism, and family privacy” (p.105). Thus, in social welfare programming, a residual approach dominates, whereby state aid is available primarily in situations where parents have failed to adequately provide for the needs of family members. According to individualists, social welfare is for emergencies only, and should be withdrawn once the proper balances

between the individual and marketplace have been restored, lest it erode the ideal of family responsibility (Baistow, Hetherington, Spriggs, & Yelloly, 1996; Djao, 1983).

Child welfare, as part of the range of social welfare programming, is also intended for emergency or crisis situations. Ideally, temporary provisions for the care of children are provided by state until such time as the family regains its own means of providing for its children (Swift, 1997). Critics of the system contend that disenfranchised single mothers are most often the focus of child protection interventions in Anglo-American societies because they are ideologically distant from the ideal of self reliance (Pires, 1993; Swift, 1998; Thorpe, 1994). Interventions are concentrated on those parents who fail both to meet minimal standards of child care and to demonstrate economic self-reliance. These critics argue that the child protection systems are not equipped to respond to issues of child care in middle and upper income families; when economically self-reliant parents fail to meet the prescribed minimum child care standards, they are much less likely to come under the purview of child protection authorities (Costin et al., 1996; Martin, 1985).

Concepts of Children. In Anglo-American societies, the State's relationship to children varies considerably from its relationship to families. The state is in the conflicted position of wanting to both protect family privacy and enforce parental obligation, while at the same time ensuring the protection of children from harm (Nelken, 1998; Ronen, 1998). Changing constructs of childhood have shaped this dilemma. For example, in both England and Ontario, school attendance rose sharply during the late 1800's. Children of all types, as opposed to distinct groups, could be studied in this setting. This gave rise to studying children as a distinct group from adults, which laid the foundations for ongoing studies in child development (King, 1998).

School attendance also was a major contributing factor to making visible the plight of the children who had become the casualties of the Industrial Revolution (Hendrick, 1990; Sutherland, 1976). Coupled with emerging ideas about the social, educational, and psychological needs of children, were constructions that framed childhood as a period of vulnerability that required protection.

Because Anglo-American societies were so steeped in individualism, the consistent and the compassionate response to such a public demonstration of need was to both protect the vulnerable children and to equip them for survival in a society that valued competitive capitalism. In turn, it was felt that society would be protected from becoming overburdened with future costs associated with the deviancy that might result from past cruelty and neglect of children (Armstrong, 1995; Bala, 1999). Foster placement – and particularly placement in middle class, nuclear families – seemed to be the best solution. Today foster care remains as one of the system’s foremost interventions.

One of the chief complaints that critics have of the Anglo-American system concerns its disregard of the importance of family relationships. The state’s relationship to the child and the state’s relationship to the family are seen differently. Parents are often cast in the role of villain and children in the role of victim (Besharov et al., 1998; Chen, 2001). Although there may be specific cases where this perspective is accurate, there are many situations where the child’s best interests are served by strengthening the relationship between parent and child. However, the Anglo-American system is not designed to actively support parent-child relationships and often sees the interests of parents and children as pitted against each other (Besharov et al., 1998; Chen, 2001; Swift, 1995).

Concepts of Community: As well, the role of the broader community in ensuring the

well-being and protection of children is not central in the Anglo-American child protection paradigm. For example, Ontario's 54 provincially-funded Children's Aid Societies are administered by local boards of directors who, in theory, have the responsibility of identifying community needs and allocating service resources appropriately. Ideally, the community is accounted for in such an arrangement; however, in practice, the province seldom makes funding available to surpass the minimum requirement for required day-to-day operations (McEachern & Morris, 1992). Alternative approaches such as family preservation, mutual aid programs, and family group conferencing have shown considerable promise, but remain outside the mainstream service delivery (Cameron et al., 1997).

Some child welfare critics see a possibility for community involvement in child protection systems as an intermediary structure between the state and the family. They contend that organized community involvement can help children, parents, and communities to find voice and to engage the state in meaningful dialogue (Wharf, 1992; 1993).

Implications for Child Welfare. Although ensuring the protection and well-being of children encompasses many possibilities, in Anglo-American societies, it is typically conceived of as state intervention into private family matters. The Anglo-American emphasis on individualism means that parents are assumed to have the sole rights and responsibilities for raising their children (Swift, 1998). There is a belief that most families will raise their children with little difficulty and that the state should refrain from interfering into their private affairs. If a family experiences difficulties, the parents are often held responsible for ensuring the well-being of their children; any societal factors contributing to the family's problems are generally overlooked (Swift, 1998). As a result, to a great extent, child protection work is carried out with families on a case-by-case basis:

Investigations take place in the private domain, with particular families as their focus... The case-by-case approach instructs us to see the problem as individualized; our attention is directed to the unique circumstances and behaviours occurring in this particular family and to the specific effects on particular children... This way of organizing child welfare moves the social and economic issues affecting these families to the background (Swift, 1998, p.169).

First Nations Notions of Interdependence

First Nations ideas about children, family and community are rooted in beliefs about the interdependence among the environment, people, and the Creator; many First Nations emphasise the necessity of living a balanced life in relation to all creation. When change occurs in an individual, it necessarily impacts the family, community and surrounding environment; therefore, to speak of the individual as self-reliant is contrary to a First Nations world view (Maidman & Connors, in press; Morrissette, McKenzie, & Morrissette, 1993).

These Aboriginal principles embrace, not only interdependence, but also total inclusion. This perspective is meant to ensure that all members of the community, each of whom is seen as uniquely gifted, contribute to the survival of the community as a whole (Maidman & Connors, in press). Hence, there are no conceptual separations between the community, family, or children. The elders lead through the sharing of wisdom, but actual decision-making is accomplished through consensus of all community members (Morrissette et al., 1993).

Concepts of Family: Aboriginal desires for families differ in fundamental ways from Anglo-American nuclear family ideals. Extended families play an active role in the care of children. In many First Nations communities, children are raised by their grandparents or others in the family (Morrissette et al., 1993). Maidman and Connors (in press) argue that “these kinship patterns and traditions result in a person identifying numerous people as kinship

equivalents of fathers, mothers, and siblings” (p.396). According to tradition, in First Nation communities, all members in a family have some responsibility for the upbringing of children.

...within the tribal family: (a) older siblings provide protection, love, and teaching, (b) parents provide love, teaching, food and shelter, (c) elders/ grandparents provide love, care and teaching, (d) aunts and uncles often act as additional parental figures, and (e) clan members and community members monitor and provide expectations for socially appropriate behaviour (Maidman & Connors, in press, p.385).

In Aboriginal communities, there is a great emphasis placed on keeping children within their family and the community. It is believed that all other forms of care are secondary, and above all, community members should support the efforts of parents in trying to raise their children in a safe, healthy environment (McKenzie, 1995; Wharf, 1992).

Concepts of Children: In Aboriginal thought, the child is not a separate entity; her or his identity is understood in relation to others in his/ her family or community. As members of the community, ideally, children have certain responsibilities to fulfill and they learn that neglecting these expectations can cause hardship to themselves and others in the community (Maidman & Connors, in press; Morrissette et al., 1993). Ideally, First Nation children can attain a sense of individuality and belonging through tribal traditions which allow them to develop their potential, while still acting in harmony with the needs of the family and community (Maidman & Connors, in press).

The late 19th century concept of childhood in Anglo-American societies made a significant contribution to the State’s rationale for practices of assimilation that centred on the separation of Aboriginal children from their tribal communities (Morrissette et al., 1993). However, it has been argued that it is inappropriate to attempt to separate the well-being of Aboriginal children from those of their families and communities and that the practice of large-

scale removals of First Nation children from their homes and communities has culminated in a legacy of cultural destruction (Kingsley, 2000; Morrissette et al., 1993; Royal Commission on Aboriginal Peoples, 1996; Saskatchewan Children's Advocate Office, 2000)

Concepts of Communities: Aboriginal perspectives are steeped in principles of interdependence, seeing the well-being of children in relation to strengthening family and community. Large extended family networks and others in the local community ensure the provision of adequate care for children (McKenzie, 1995). Continued community membership and communal responsibility for caring for each other ideally ensures children's survival in an Aboriginal community.

Implications for Child Welfare: The ideals of rugged individualism have always been at odds with Aboriginal ideology. These differences ultimately led to the mass destruction of First Nation communities and Aboriginal ways of life. The colonists sought not merely to conquer territory, but to secure their claims through acculturation so that all children would receive Anglo-Canadian citizenship in a Christian culture (Kingsley & Mark, 2000; Maidman & Connors, in press; Morrissette et al., 1993; Royal Commission on Aboriginal Peoples, 1996; Saskatchewan Children's Advocate Office, 2000). The dominance of individualism, its ethnocentricity, and its impact on child welfare philosophy have marginalised Aboriginal ideology and have alienated most First Nations communities from ways of life that sustained them for thousands of years:

[Intrusion into First Nations communities has been] ... paternalistic in nature, condescending and demeaning in fact, and insensitive and brutal... children have been taken from families and communities first by residential schools and then by child welfare authorities. Both... have left Aboriginal people and societies severely damaged (Manitoba. Public Inquiry into the Administration of Justice and Aboriginal People, 1991, p.509).

It is only through Aboriginal resistance to the destruction of their communities (caused in part by child welfare policies of apprehension and adoption into non-native homes), and the persistence of First Nation communities in obtaining self government, that Aboriginal ideology is now beginning to be heard in child welfare (Maidman & Connors, in press; McKenzie, 1989; Morrissette et al., 1993).

First Nation concepts of children, families, and community have strong implications for the design of child welfare/ protection systems. Ideals for First Nation child welfare include the use of traditional teachers and healers in its practice, because there is a need for healing both within families and within communities (Morrissette et al., 1993; Saskatchewan Children's Advocate Office, 2000). Aboriginal families do not place an emphasis on the individual rights of children; they focus on working with parents to support them in their roles, and remove children from their families and communities only as a last resort (McKenzie, 1989; 1995; 1997; Wharf, 1992). As well, because of the emphasis on collective responsibility and interdependence, First Nation child welfare ideals involve consultation with parents, extended family, and the local community to make decisions about the well-being of a child (Morrissette et al., 1993; Wharf, 1992).

Continental European Notions of Collective Responsibility

Similar ideas of collective responsibility for the well-being of children and families are shared among some western European nations. Although these countries are influenced more by ideals of individual achievement and responsibility than First Nation ideals, there are competing ideologies that influence their ideals about relationships between state, community, family, and children. Political theorist, Rousseau (1712-1778), believed that the basis of any

state was a collective consciousness and that the people must remain sovereign, both in the development of their society and in the exercise of their own rule making (Bronowski & Mazlish, 1960). The role of the state is to express the will of the people and the role of the law is to operate on the consent of the whole population. The state gives political expression to social character (Hetherington et al., 1997).

In contrast to Anglo-American laissez-faire and individualist ideals, Europe's dominant ideologies have been protectionist and collectivist (Heidenheimer, Hecllo, & Teich Adams, 1975). One caution is that it is difficult to characterize one model that typifies Europe; there are important differences among European countries that will not be captured in this general overview. Overall, principles of social solidarity and subsidiarity are key notions in European social ideology. These principles are emphasized in varying degrees throughout continental Europe (Hetherington et al., 1997).

Subsidiarity and Social Solidarity. The subsidiarity principle forms the basis for understanding relationships among the state, the community, and the family. Subsidiarity is predicated on Catholic social philosophy, which is embodied in the 1931 encyclical of Pope Pius XI, *Quadragesimo Anno*. This thinking dates back to 1871 when the Catholic Church explored alternatives to socialism and liberalism. It states:

(Sections 79-80)...it is an injustice, a grave evil and a disturbance of right order, for a larger and higher association to arrogate to itself functions which can be performed efficiently by smaller and lower societies. ...The State therefore should leave to smaller groups the settlement of business of minor importance, which otherwise would greatly distract it...Let those in power, therefore, be convinced that the more faithfully this principle of subsidiary function be followed, the greater will be both social authority and social efficiency, and the happier and more prosperous the condition of the commonwealth (as cited in Lorenz, 1994, p.25).

Social solidarity encompasses ideals of mutuality, reciprocity of obligations, and social cohesion. Solidarity lies primarily within the family, secondly in the community, and thirdly in the state, an order reinforced by subsidiarity (Hetherington et al., 1997). It postulates a strong relationship between the family and the state, an emphasis on social inclusion, as well as an emphasis on maintaining family integrity. In countries such as Sweden, Norway, Finland, and Denmark, solidarity is so strongly embedded in the culture that distinctions between state and society are blurred. Scandinavian vernacular refers to the welfare state as *folkhem*, literally ‘the people’s home’ (Leira, 1994).

Social solidarity and subsidiarity combine to define an ideal of “...a state whose legal, economic and social system is founded on the principle of social security (avoidance of material distress for the citizen), social justice and social equality (of opportunity)” (Dyson, 1980, as cited in Lorenz, 1994, p.26). Hetherington (1997) describes the social context these principles provide for child welfare as follows:

Where services for children are enshrined by the principles of social solidarity, subsidiarity and citizenship, one consequence is that the institutions which organise, deliver, and shape local responses to child protection are structured into, and derive their authority from a total conception of society (p.34).

A ‘total conception of society’ ensures that child welfare is understood in broad ways. Countries like Denmark, for instance, make little distinction between policies aimed at well-being and those aimed at risk. In Germany, the general thinking is that, in one way or another, all families could be understood as at risk. It is expected that those who need help can and will seek it (Pringle, 1998; Wolff, 1997). For example, in Sweden, it is “part of the normal course of life” that families receive public welfare services (Olsson Hort, 1997). However, some critics are concerned that such an inclusive approach to child welfare opens the possibility that child abuse will not be recognized and/or will not be taken seriously enough,

thereby leaving children in potentially dangerous situations (Pringle, 1998).

Concepts of Family and Children. In many European societies, the family is identified as a fundamental social institution and the state's role is one of protecting broadly the health of families; a right to family support is assumed. The family is understood as having basic rights and "conflicts of rights between family members are likely to be subordinated to questions of family welfare" (Hetherington et al., 1997, p.94). Thus, from this perspective, it is inconsistent to sever child and the family connections in trying to protect children, unless other options have been explored first. Living with the biological family is valued as the most desirable environment for children. Therefore, family maintenance and support is often the dominant to approach to child and family welfare (Madge & Attridge, 1996; Olsson Hort, 1997; Poso, 1997; Tuomisto & Vuori-Karvia, 1997).

The idea that the child is an inseparable part of the biological family is deeply embedded in most European societies, and the social welfare emphasis is on family services, therapeutic help, and prevention (Cooper, Hetherington, Baistow, Pitts, & Spriggs, 1995). When necessary, the placement of a child is often accomplished in a co-operative arrangement between state and family, with permanent severing of the parent-child connection less common than in Anglo-American jurisdictions (Baistow et al., 1996; Hetherington et al., 1997). However, concern has been expressed about the degree to which the child's perspective may be obscured. These orientations also have been criticized for not dealing with the realities of oppression and power imbalances in families where child abuse does occur (Pringle, 1998).

Conceptions of Community and Child Welfare: In many European countries, fostering proper child development and care are not seen as the sole responsibility of their parents. For example:

“...children are not just the private responsibility of parents, but rather are a collective resource that add to France’s demographic and economic strength, and therefore have a place in state policy” (White, 1998, p.13).

Many European societies have acknowledged this responsibility in material ways, through supporting relatively high levels of taxation to ensure higher levels of care and provisions for all families and children. Likewise, European communal ideologies often value prevention and community development initiatives:

... the principles of subsidiarity and solidarity give social work a broader, preventive, and community development mandate: not to separate individuals from society, but to promote healthy relations between and within groups, and to see that as a process of encouraging participation of the marginalised from below, aided by resources from above (Cannan, Berry, & Lyons, 1992, p.46).

Concluding Remarks

It is essential that we understand that child welfare/ protection systems manifest preferences about the complex representations of the relationships among state, community, family, and children. Child welfare/protection mirrors these relationships, which are rooted in the historical, economic, and cultural underpinnings of the society. These roots present barriers to transporting what appear to be good ideas from one culture to another. Nonetheless, these barriers are not impermeable; as mentioned in the introduction to this paper, knowing about the existence of other ways of helping families and protecting children tells us that strategies other than those most familiar to us are indeed possible.

The intent of our discussion was not to weigh the relative merits or disadvantages of the different ways of understanding these relationships among children, families communities and the state. Rather, the purpose was to acknowledge that there are many ways of understanding these relationships. These differences are often neglected in discussions of possibilities in child welfare/

protection, as we are limited by conventional understandings of the context in which we live. It is hoped that this discussion will broaden our understanding of the variance in interactions among the state, communities, families, and children. In addition, this understanding provides a context for the discussion in the balance of the paper about choices in the design of child welfare/ protection.

Why Do Families Experience Difficulties?

At the root of every child welfare/ protection system are ideas about the nature of child maltreatment and the reasons why families have difficulty providing adequate care for their children. Child welfare/ protection systems are constructed around these values and explanations, which are deeply rooted in the societies in which they have evolved. It is helpful to understand the ways in which family difficulties are viewed; these explanatory models influence the interventions favoured by various systems. There is no single set of explanations of child maltreatment common to all child welfare/ protection systems. By examining the range of ways in which family difficulties are conceptualized, we encounter a spectrum of possibilities outside the realm of current preoccupations.

There is near unanimity in the literature that child maltreatment is a very complex problem with many contributing elements (Ammerman & Hersen, 1990; Cameron et al., 1997; National Research Council, 1993; Peirson et al., in press). Every child welfare/protection system acknowledges the contributions of challenges with parental history, parental functioning, emotional and physical illness, substance abuse, lack of knowledge, social isolation, lack of developmental opportunities, violence, economic distress and community disintegration make to family breakdown. Nonetheless, few, if any, child welfare/ protection systems are organised with this full range of contributing factors carrying equal weight in their understanding of distressed families. Likewise, no system is solely influenced by only one explanatory model. Each child welfare/ protection system places greater emphases on some of these rationales, and the particular combination of perspectives emphasized influence the ways help is given to distressed children

and families within that system.

Table 1 summarizes various models or explanations about why children are maltreated which have emerged from our review. Some of these perspectives exert great influence on existing child welfare/ protection systems, while others have achieved recognition only within smaller pilot projects. This section discusses each of the explanatory models in Table 1.

Parental Deficiency: One approach taken is to hold parents solely responsible for providing adequate care for their families. This is the de facto emphasis in threshold systems, which have evolved in ‘child saving’ societies. Historically, their emphasis was on ‘rescuing’ children from incompetent or immoral parents and removing them from the dangerous and deviant influences in their living environments. As Swift (1995) notes, in Canada, “both the system and our conceptions of child neglect have remained remarkably [sic] consistent to the original [child saving] model” (p.4). In threshold systems, parents are both entitled, and expected, to provide proper care for their children. If minimal norms for child care are violated, it is because the parents will not or cannot take proper care of their children (Marneffe & Broos, 1997; Martin, 1985; Schene, 1998; Swift, 1995; Tunstill, 1997).

Within this perspective, parents are often described as having personality characteristics which prevent them from adequately providing and caring for their children. As a result, interventions often focus on producing change in individual parents (usually the mother) rather than in the environments they live in (Martin, 1985; Tunstill, 1997). Hughes (1995) argues that, in Canada, government services “tend to attribute poverty to personal defect and emphasize remedial casework strategies presumed to help break the ‘cycle of poverty’” (p.783).

Table 1 – Why Do Families Experience Difficulties?

Explanations	Implications of this Model
<p><u>Parental Deficiency</u></p> <ul style="list-style-type: none"> Parents who maltreat their children often have problematic personality characteristics which are the root of the problem. Parents are solely responsible for the care and well-being of their children. 	<ul style="list-style-type: none"> State, community, and extended family members are not expected to contribute to child well-being. Parents will not come forward voluntarily for assistance. Parents are generally assumed to be the major source of risk to children. Thus, children should be removed from parents, if it is thought to be in the child’s best interest. If families have problems, parents are responsible.
<p><u>Family Breakdown</u></p> <ul style="list-style-type: none"> Child maltreatment occurs when the family is not functioning as a healthy unit. Poverty, environmental stress, and lack of appropriate supports contribute to family dysfunction and child care problems. 	<ul style="list-style-type: none"> Emphasis is placed on supporting families and maintaining child-family connections. Children will only be removed from the family’s home without the parents’ permission in extreme cases. Parents expected to voluntarily seek help, if they need assistance. Emphasis placed on higher levels of support and social provisions for families.
<p><u>Societal Breakdown</u></p> <ul style="list-style-type: none"> Child maltreatment results from inadequate support and resources. Child care and development are shared responsibilities of society. Family breakdown is as much a failure of society as individuals. 	<ul style="list-style-type: none"> Emphasis placed on high levels of support and social provisions for families. Greater involvement of the community in the functioning of families. Parents expected to voluntarily seek help, if they need assistance. Children removed from home as a last resort, usually only temporarily.
<p><u>Continuum of Normal Behaviour</u></p> <ul style="list-style-type: none"> Child maltreatment is an exaggeration of normal behaviour in society. At some point in their lives, most families will receive some sort of assistance. 	<ul style="list-style-type: none"> Emphasis placed on high levels of support and social provisions for families. Children will only be removed from the family’s home without the parents’ permission in extreme cases. Parents expected to voluntarily seek help, if they need assistance.
<p><u>Risk and Protective Factors</u></p> <ul style="list-style-type: none"> There are risk and protective factors that contribute to the likelihood that families will experience difficulties. Families with several risk factors are likely to experience more problems than others. 	<ul style="list-style-type: none"> To be effective, treatment and prevention programs should address many of these risk and protective factors. Programs may need to cross service jurisdictional boundaries, and may need to be intensive and long-term.
<p><u>Economic Distress and Community Disintegration</u></p> <ul style="list-style-type: none"> Family difficulties result from economic distress and community disintegration. Most consistent predictor of child welfare involvement is living in extreme poverty and deteriorating neighbourhoods. 	<ul style="list-style-type: none"> Focus on placing child and family healing within the context of the healing process for the whole community. Emphasis placed on high levels of support and social provisions for families.. Focus on maintaining children within their communities and/or extended families.
<p><u>Systems of Oppression</u></p> <ul style="list-style-type: none"> Child maltreatment issues are rooted in economic, class, gender, and racial oppression. Child welfare/ protection agencies are seen as reinforcing these oppressive relationships and being destructive of the ways of living of the people they ‘target’. 	<ul style="list-style-type: none"> Agencies need to reform relations with oppressed groups. Emphasis placed on high levels of support and social provisions for families. Focus on collective, participatory responses to empower communities. Calls for child welfare/ protection workers to advocate for social change based on their knowledge of their clients’ lives.

Also, there is an implicit assumption that families do not normally need assistance with their child care. As well, it is presumed that families in trouble will not realize they need help or will not seek help voluntarily (Armitage, 1993). Consequently, the majority of families are brought into contact with the system through third party reports and agency investigations. Furthermore, because parents are often considered to represent a danger to their children, there is an insistence that they carry out their child care responsibilities or the children can be moved to another home where they can be adequately protected (Schene, 1998).

Family Breakdown: In some continental European systems, child maltreatment is seen as a symptom of family dysfunction or breakdown. Within this frame of reference, the concern is with the health of the families as basic units of socialization and child development and with the help families need to function properly. Family and parenting problems are exacerbated by external circumstances such as poverty and environmental stress; viewing family problems as resulting only from parental inadequacies is considered ‘blaming the victim’ (Fox Harding, 1991). This view of family difficulties leads to an emphasis on supporting families and maintaining child-family connections. This perspective has been influential in Belgium where:

“Both the abuser and the child are perceived as victims influenced by broad sociological and psychological factors beyond their control... Protection of the child is a priority, but the child is more often maintained in the child’s family together with the provision of services to support the parents and help them cope.” (Marneffe & Broos, 1997, p.181)

Only in exceptional cases, where children are in severe danger, will a child be removed from the family home without the family’s permission. Within this approach, it is assumed that families will voluntarily seek out help with their children (Marneffe & Broos, 1997; Olsson Hort, 1997;

Roelofs & Baartman, 1997).

Societal Breakdown: A different perspective is taken by First Nations and some more collective European societies, who view child development as a shared responsibility of the society. Family breakdown and child maltreatment are as much a failure of society as of individual families. This approach leads to an emphasis on social provisions to support families and children. Denmark exemplifies this perspective, as their “social infrastructure reflects a cohesive national concept of what constitutes quality of life for the individual and a belief that society has a collective responsibility to ensure that individuals have equal access to attaining quality of life” (Pires, 1993, p.47). As well, this way of viewing family difficulties leads to cultural support for greater involvement of the community in the functioning of families and in the care for children. Evidence of this frame of reference can be seen with Aboriginal societies, as exemplified by the Champagne/ Aishihik Band where the “planned involvement of family members and friends transforms the private matter of child welfare to a community concern” (Wharf, 1992, p.116-117).

Continuum of Normal Behaviour: Another influential perspective on child maltreatment was developed in the Berlin Child Protection Centres. This perspective views child maltreatment as a continuation or exaggeration of patterns to be found in most families and in society as a whole. In fact, child abuse does not differ significantly from patterns of oppression and violence that are both obvious and even praised elsewhere in society (Marneffe & Broos, 1997). From this perspective, there is no stigma attached to families seeking help and no implication that they are somehow abnormal. Under the proper conditions, any of us is capable of inappropriate caregiving.

In systems influenced by this perspective, child abuse is not separated out as a specific problem and is not a necessary or even typical precursor for families' involvement. Finland exemplifies this viewpoint with a child welfare system "in which child abuse as such is seldom reported or diagnosed as a specific problem for treatment... From this perspective, it is difficult to identify child abuse as a separate problem requiring special treatment" (Poso, 1997, p.160).

Within the continuum of normal behaviour, it is assumed that at some point in their lives, most families will receive social welfare assistance (Marneffe & Broos, 1997; Olsson Hort, 1997; Poso, 1997). This perspective leads to the design of systems in which a heavy emphasis is placed on making resources and supports available to all families. As well, there is an emphasis on maintaining the parent-child bond, whenever possible (Wolff, 1997).

Risk and Protective Factors: Another perspective has evolved from research on risk and protective factors for various social problems, including child maltreatment. This research concludes that these complex difficulties are influenced by multiple factors. Families involved with child welfare/ protection agencies generally have difficulties in many areas of living, such as family functioning, addictions, physical and mental health, economic distress, and socially disintegrating communities. As well, research shows that many of these difficulties 'cluster' together into common profiles for many distressed parents and children. Furthermore, various disadvantaged populations, such as young offenders, psychiatric populations, and child protection clientele, have quite similar content clusters (Cameron, O'Reilly, Laurendeau, & Chamberland, in press; Nelson, Laurendeau, Chamberland, & Peirson, in press; Peirson et al., in press).

Within this framework, there is no clear theoretical or empirical way to isolate one or more problems as the key points for intervention. To be effective, a range of risk and protective

factors for both parents and children needs to be addressed simultaneously and sequentially. Proponents of this perspective believe that prevention of neglect and abuse should include targeted programs to assist children with many aspects of their lives . Promising programs tend to cross many service jurisdictional boundaries and provide access to help that is both intensive and frequently of long-term duration (Cameron et al., 1997; Cameron, O'Reilly et al., in press; Nelson et al., in press; Schorr, 1989; 1997). In North America, quite a few demonstration projects with multiply disadvantaged populations have produced superior results building upon these principles. Unfortunately, despite these encouraging results, such promising initiatives have remained at the margins of threshold systems (Cameron, Karabanow, Laurendeau, & Chamberland, in press). Perhaps, with their greater use of a range of social provisions for children and families, some continental European child welfare/protection systems have made this a more central perspective (Poso, 1997).

Economic Distress and Community Disintegration: Another perspective is to view family breakdown and child maltreatment as outcomes of economic distress and community disintegration. Proponents of this explanatory model point out that the most consistent and strongest statistical predictors of having an open child protection case are living in extreme conditions of poverty and neighbourhood dissolution; this relationship is even stronger for families with children in out-of-home care (Costin et al., 1996; Courtney, 1998; English, 1998; Lawrence-Karski, 1997; Peirson et al., in press).

In addition, during economic hard times, the number of families experiencing difficulty caring for their children increases, as does involvement with the child welfare/ protection system (Hughes, 1995). Also, economic hardships for families is more prevalent in countries with lower

levels of social provision (Phipps, 1999). For example, Canada's poverty rate is almost double those of many European countries (Hughes, 1995).

Some First Nations have focussed on placing child and family healing clearly within the context of the healing process for the whole community (Maidman & Connors, in press; McKenzie, 1989; 1995; 1997; Morrissette et al., 1993). From this perspective, it is futile to blame individuals or families for their difficulties:

Innu and Inuit concepts of justice are very different from white concepts of justice... the words 'guilty' and 'innocent' don't even exist in Inuktitut... the emphasis in Inuit culture is on solving the problem, not punishing the offender (Toughill, 2001, February 3, p.K3)

Attempts at community healing are relatively new and ill-understood efforts about which we have a great deal to learn. However, there are a few examples in the USA where a community healing rationale has been the basis of intensive and multi-faceted neighbourhood development projects, which have included an emphasis on child welfare and protection. The results from some of these projects are encouraging for children, families and communities (see examples in Cameron, in press).

Systems of Oppression: As well, some authors see family breakdown and child maltreatment rooted in economic, class, gender, and racial oppression. Threshold systems are seen as reinforcing these oppressive relations and as destructive of people and traditional ways of living (Armstrong, 1995; Callahan, 1993; Swift, 1998; Thorpe, 1994). For example:

... because the foundation of patriarchal public policies is based on the traditional beliefs about women and their place in society, these policies become self-fulfilling... stingy services are provided by ill-paid women to women and their children, selected because of their inability to provide for themselves. The status quo is maintained (Callahan, 1993, p.196).

This perspective prescribes a radical shift in thinking and in existing relations. Proponents favour more generous social provisions and, in particular, they propose collective and participatory responses which respect and empower families and communities (Maidman & Connors, in press; McKenzie, 1989; 1997; Morrissette et al., 1993; Swift, 1995; Wharf, 1992).

This perspective on systems of oppression has been influential in First Nations conceptions of child welfare and in a small number of North American neighbourhood demonstration projects (Cameron, Karabanow et al., in press; Maidman & Connors, in press). As well, some feminist social services have been heavily impacted by this point of view. For instance, in her 1993 review of feminist service organizations, Callahan argued that their most important attributes are their commitment to social change and their attempts to meet the often overwhelming needs of those who come to them for assistance (Callahan, 1993).

To improve outcomes for children and families, it is essential that we first realise that there are various ways of conceptualizing the reasons why families experience difficulties. Perspectives on the cause of child maltreatment and neglect dramatically influence the approaches taken to assist children and families. Because culture and values play such an important role in how the world is understood, it is easy to forget that there are alternatives to our way of seeing children, families and communities. As well, these possibilities have the potential to expand the boundaries around our existing notions about how to help families and children.

Section 3:

Choices in Child Welfare/ Protection System Design

CHOICES IN CHILD WELFARE/ PROTECTION SYSTEM DESIGN

Gilbert (1997) proposes that child welfare/ protection systems can be classified into the following categories: (1) child protection systems¹ (for example, USA, Canada and England); (2) family service systems with mandatory reporting (for example, Denmark, Sweden and Finland); and, (3) family service systems without mandatory reporting (for example, Belgium, Netherlands and Germany)² (Gilbert, 1997c). One trait shared by all three of these orientations is that they focus their interventions on the circumstances of particular children and families. Our review suggests a fourth orientation: (4) community healing systems (for example, some First Nations communities). This orientation places helping children and families within the context of a healing process for the community as a whole. While this orientation is much less common and not well-established, it represents a more communal understanding of the problems facing children and families and how responses are best organized (Maidman & Connors, in press; McKenzie, 1989; 1997; Morrissette et al., 1993). When examining possible choices in child welfare/ protection system design in the balance of this section, reference will be made to these four orientations.

Our review of child welfare/protection systems identifies dimensions along which these systems may be compared. These are summarized in table 2. Our purposes in these comparisons are to identify a spectrum of possibilities in system design and to demonstrate that there is nothing inevitable about how child protection is organized. Our particular child protection system, which represents choices among a substantially broader set of alternatives, is grounded

¹The discussion in this monograph often refers to this orientation as Anglo-American threshold systems.

²This monograph will discuss family service systems as one orientation, rather than separating them based on their reporting requirements as Gilbert has done.

Table 2 - Choices in Child Welfare/Protection System Design

TOPIC	QUESTIONS	CHOICES
Managing Dual Mandates	<ul style="list-style-type: none"> • What is the system’s first response to families in difficulty? 	<ul style="list-style-type: none"> • Investigation of the family to assess risk of harm to the child. • Offer of services to support the family.
	<ul style="list-style-type: none"> • How is the use of legal authority viewed? 	<ul style="list-style-type: none"> • Use of the formal, adversarial legal system to force parental compliance. • Use of informal, inquisitorial legal processes to negotiate a plan of action that is agreed to by the family. • Avoidance of the legal system whenever possible. Family, friends, and others in the community are brought together to develop a plan of action for the family.
	<ul style="list-style-type: none"> • Who provides services for families? 	<ul style="list-style-type: none"> • Family services are in-house and integrated into the overall child welfare/ protection system. • Family services are often contracted out to other agencies and not viewed as an integral part of the child welfare/ protection system.

Table 2 - Choices in Child Welfare/Protection System Design (continued)

Relationship with the Legal System	<ul style="list-style-type: none"> • What is the role of the police and formal legal authority? 	<ul style="list-style-type: none"> • Child welfare workers work in tandem with police to investigate parents and gather evidence in case it is needed later in formal court proceedings. • Child welfare workers attempt to avoid the involvement of police and court-mandated interventions whenever possible, for example, through the use of voluntary services, informal negotiations through the Judge for Children’s Office and lay mediation committees, and community involvement through First Nation band councils.
	<ul style="list-style-type: none"> • How is authority conferred to child welfare/ protection workers ? 	<ul style="list-style-type: none"> • Child welfare/ protection workers’ authority is enforced through the power of the legal system. • The well-being of children is understood as a collective responsibility of the community. Parents feel entitled to support and often interventions are negotiated with families, lessening the need for coercive enforcement.
	<ul style="list-style-type: none"> • Who is most involved in decision-making in the child welfare/ protection system? 	<ul style="list-style-type: none"> • Child welfare/ protection is the realm of professionals; non-professional voices are rarely heard in the development of intervention plans for families. • The Child welfare/ protection system makes some use of non-professionals in decision-making (e.g., boards of lay people). • Non-professionals are highly involved in decision-making and services are often governed by the community.
	<ul style="list-style-type: none"> • Is reporting of suspected cases of child maltreatment mandated by law? • Is mediation provided as an intermediary between voluntary involvement and legal coercion? 	<ul style="list-style-type: none"> • Reporting to the child welfare/ protection system is mandatory. • Reporting to the child welfare/ protection system is voluntary. • Access to the legal system is the primary dispute resolution mechanism. • Intermediary mediation bodies are part of the normal intervention options.

Table 2 - Choice in Child Welfare/Protection Systems Design (continued)

Separate or Embedded Child Welfare Organization	<ul style="list-style-type: none"> • How is responsibility for child welfare/ protection services allocated? 	<ul style="list-style-type: none"> • Responsibility is allocated solely to a specialized unit (e.g., Children’s Aid Societies) • Responsibility is shared across several social welfare units, such as health, education, recreation, financial assistance services, etc. • Care is separated from control, so that some units are responsible for the investigation of families and others are responsible for any services provided. • All or most child welfare/protection functions are the responsibility of the same unit.
	<ul style="list-style-type: none"> • How do families enter the system? 	<ul style="list-style-type: none"> • Services are given only to families with ‘confirmed’ danger of child maltreatment. • Services are only offered to families deemed to be ‘at risk’. • Services are accessible to all families. • Services are provided at the insistence of the child welfare/ protection agency through legal mandate. • Services are given on the basis of a family’s request for/ acceptance of support. • There must be evidence of child maltreatment for services to be provided. • Families must demonstrate need of assistance before assistance is given. • Services are given to families who request them.

Table 2 - Choice in Child Welfare/Protection Systems Design (continued)

<p>Maintaining Families and Supporting Children</p>	<ul style="list-style-type: none"> • How is ending the parent-child relationship viewed? 	<ul style="list-style-type: none"> • Permanent state guardianship and adoption are common interventions, often without the permission of the parents. • Permanent state guardianship and adoption are rare and generally with the permission of the parents.
	<ul style="list-style-type: none"> • How much effort is expended before severing the parent-child connection is considered? 	<ul style="list-style-type: none"> • If parents cannot comply with agency demands to ensure the child's safety, the child will be removed. Few services are offered directly by the agency, although the family is often referred to other services available within the community. • Permanent removal of the child is a last resort. Many services and supports are provided to the families before severing the parent-child connection is considered.
	<ul style="list-style-type: none"> • How do conceptions of children and families affect intervention priorities? 	<ul style="list-style-type: none"> • Societies which emphasize individual rights typically make the well-being and safety of the child their paramount concern. The child's 'best interests' takes precedence over the well-being of the family. These societies are more likely to permanently remove children from their parents. • Societies which place great importance on the well-being of families typically do not place greater emphasis on the child's rights than on the rights of the family. Families of origin are seen as fundamental to children's well-being. Family maintenance is a priority. These societies tend to avoid the permanent severing of parent-child relationships.

Table 2 - Choice in Child Welfare/Protection Systems Design (continued)

<p>Maintaining Families and Supporting Children (continued)</p>	<ul style="list-style-type: none"> • What is the organising framework for the child welfare/ protection system? 	<ul style="list-style-type: none"> • Child abuse is the organising framework. The system focusses on finding children who are at risk of harm and protecting them. Parents are often considered to be the source of risk to the children and are seen as being responsible for the problems. • The well-being of the child and the family within the community is the organising framework. All families are eligible for services and support. Factors such as health, financial difficulties, and family dysfunction. are viewed as sources of difficulty.
<p>Discretion and Control</p>	<ul style="list-style-type: none"> • How much discretion is available to child welfare/ protection workers? 	<ul style="list-style-type: none"> • Workers rely on standardized tools to assess risk to children. Time lines and guidelines must be met to ensure workers are following procedures and protocol. • Workers are trusted to use their discretion and experience in assessing risk to children and developing intervention plans.

in our values, priorities and institutional contexts. As mentioned at the beginning of this paper, child welfare/ protection systems are not neutral responses to problems; they represent some of our most powerful statements about children, family, community and state.

Managing Dual Mandates

Each of the above four child welfare/protection orientations operates within a dual mandate, incorporating partially compatible requirements to provide care (offering preventive, supportive and remedial assistance to children, parents and families to enhance their well-being and functioning) and to exert control (using professional and communal authority as well as legal/police mandates to enforce community standards of child care). Notwithstanding the generic nature of these dual mandates, there are important differences in how various child welfare/protection orientations manage these mandates.

First Response and View of Legal Authority: Threshold orientations increasingly are focussed on monitoring and controlling the behaviours of parents in ‘high-risk’ families, as well as providing minimal supports to families. The initial response of threshold systems is one of a mandatory, legal investigation of allegations of child maltreatment, with any ‘care’ responses coming later in the process if at all:

“In England, the response... was to extend control to more and more families via a framework of investigation, regulation, procedure, and through child protection conferences which moved ‘therapeutic’ intervention to one side.” (Hetherington et al., 1997, p.27)

On the other hand, family service systems typically emphasize the provision of service to maintain the family and the parent-child bond as an initial response. Except in extreme situations, family service systems focus on finding ways to support family functioning. In Finland, where

preventive, non-stigmatising, and supportive measures and services are emphasized, the focus has shifted to interventions that encourage and support the maintenance of children in their own homes:

Maternity and child health clinics have expanded and diversified family training, and intensified co-operation with families. In day care, various forms of co-operation supporting parental participation were developed. Also home help services have been developed to support child rearing by parents (Tuomisto & Vuori-Karvia, 1997, p.92).

In these family service systems, the option to use formal and legal authority is still available, if necessary. However, coercive and legally mandated interventions are regarded as last resorts and are generally avoided, if possible. Conversely, legally-contested, formal court proceedings are much more common in threshold systems. In fact, as European commentators noted:

...[it is] interesting that all of the countries except Canada and the United States were moving to clarify in policy the concept of the state as an agent for empowering parents to carry out their responsibilities to their children.... [in European countries]... state efforts to assist parents are construed as strengthening, not diminishing, parental rights, roles, and responsibilities. Participants also pointed out that this attitude toward state role coincides with policy efforts to achieve greater involvement of parents in decision making and a greater preponderance of voluntary placements of children who require care (Pires, 1993, p.68).

Some family service systems (for example, France and Belgium) make frequent use of the authority of family judges (often specially trained for this purpose) in a less formal fashion in negotiating intervention plans with families and service providers. Other countries such as Finland, Germany, and Denmark have also legislated informal negotiations with families to resolve child care concerns. This legislation is based on the principle that assistance to families should be framed as an offer of help, rather than as a command from a legal authority; the intent is to offer parents some freedom of choice about their families and to foster a feeling of self-help, rather than

control (Bering Pruzan, 1997; Wolff, 1997).

In their approach, First Nations community healing systems also stress providing support to families and maintaining children in their own community. They place the highest emphasis on the involvement of relatives and others in the local community in the process:

Aboriginal social work practice will include the use of traditional teachers and healers, a community based approach to the planning and implementation of service, and the incorporation of traditional methods of healing (Morrisette et al., 1993, p.103).

The approach taken by the Champagne/Aishihik Band reflects these principles of healing and involvement of the local community by working together with parents, extended family, and community members, to develop a plan of action and identify resources for the family within the community. Parents' hardships are acknowledged, and although they are not blamed for these problems, there is an insistence that parents take ownership of the difficulties and take an active role in problem-solving. Involvement of the community can facilitate parents in connecting with helping resources and can provide support for the family (Wharf, 1992).

Who Provides Services for Families: Child welfare/ protection systems also differ in the extent to which they house the care and control dimensions of their mandates within one agency. Threshold systems usually invest the child protection mandate in a single public or para-public agency. These systems operate under specific legal guidelines and have close connections to the courts, and increasingly to the police. Other social service and community organizations (unless under contract to supply specific types of child protection services such as foster care or in-home supports) have a minimal and unclear involvement in the protection mandate.

Conversely, many family service systems involve their broader social service networks, as well as particular support agencies. For instance, Confidential Doctors Offices (CDO) in the

Netherlands act as a first line for providing child and family welfare services, including working with families where child maltreatment is a concern. In the Netherlands, families are approached on a voluntary basis by the confidential doctor service, even though the CDO are officially connected to the Child Care and Protection Board. Depending on the nature of the family's problems, the CDO may refer the case to a specialized agency. Treatments range from having the school or family doctor speak to the family and offering advice on child rearing, to regular visits from social workers to provide support for the family, to individual or family therapy. More intensive treatments include out-of-home placements either on a voluntary basis, or on the basis of a child protection order (Hetherington et al., 1997; Roelofs & Baartman, 1997).

In addition, family service systems typically have separate jurisdictions where child abuse specialists are housed and where formal legal actions and child placements are managed. In addition, some family-focussed systems have created intermediate strata between voluntary service and legal coercion, which allow for less formal, but authoritative, negotiations among family members, service professionals, and judges. Belgium exemplifies this approach by having two separate functional areas for its 'care' and 'control' operations. This separation allows for "an intermediate zone in which difficult cases [can] be assessed and managed" (Hetherington et al., 1997, p.27).

Based on these examples, some critics of the threshold systems have argued that one way to improve them would be to create more intermediate alternatives between voluntary involvement and legal coercion (Hetherington et al., 1997). Also, in the United States, there has been experimentation with dividing their child welfare/protection system into two tracks:

One strategy for improving [the general threshold model]... would create an alternative less adversarial system for handling reports that appear not to present a

serious threat to the child's safety... Missouri has used this two-track system since 1994, and approximately 80% of reports of suspected maltreatment are handled in the voluntary "assessment" track. [There are similar reform initiatives in Florida and Iowa] (Larner et al., 1998, p.11)

Relationship with the Legal System

Role of Police and Formal Legal Authority: One of the central choices in constructing child welfare/ protection is defining the role of the legal system (judges, courts, police). Formal legal authority plays an important part in every child welfare/ protection system³; however, the point at which formal legal authority is used and the role of the legal system varies widely across settings.

In threshold child protection systems, families have a right to privacy, and the state as represented by the child protection agency, only becomes involved if there is suspicion that minimum legal standards of child care have been violated. From the beginning, in mandatory investigation of reports of child maltreatment, the worker must be conscious of gathering evidence to ascertain (and, if necessary, to prove in court) that a transgression has taken place, in order to justify the agency's continued intervention with the family. In England, social workers and police often work together in child protection investigations. They also have an adversarial legal system, similar to those in America and Canada, where the child's best interest is the chief consideration for the courts (Hetherington et al., 1997). In Canada, policies requiring social workers to refer many cases to the police have existed since about 1984. For many families, "a report to child welfare is a report to the police..., an eventuality that exposes the family to highly intrusive investigation" (Swift, 1997, p.52).

During the investigation, social workers must complete standardised recording forms. This

³Not enough information was available to ascertain the role of legal authority in community healing approaches as conceptualised by First Nations communities.

recording is purposeful, and is based on the legal requirements of gathering evidence that can be used in court. Preliminary discussions with the child protection agencies participating in the Partnerships Project suggest that the requirements of the legal system in Ontario are transforming the nature of front-line work (contributing to, for example, less worker discretion, more prescribed formal procedures and time lines to be followed), as well as reducing the level of voluntary involvements with families. Our child protection agency partners estimate that between 50% to 70% of their open cases involve a formal application to the courts for either a supervision order or for temporary or permanent agency guardianship of children.

Threshold systems work with ‘adversarial’ legal systems in which the role of the judge is to decide between formal arguments presented by lawyers representing each party to the dispute (often the parent, the child, as well as the child protection agency). Due process considerations are paramount in this system and have led to “new training programs, new legislation and procedures designed to increase specificity and ‘objectivity’ to the evidence gathering procedure” (Swift, 1997, p.52). Similar patterns have been described in the English child protection system:

“Local authority social workers work closely with the police in child protection investigations... The legal system is adversarial... the welfare of the child is the paramount concern of the court... The court hearings are formal and conducted by lawyers...” (Hetherington et al., 1997, p. 76-77).

The intention in family service⁴ systems is that the first responses to reports of child maltreatment be an assessment of the family’s situation and the offer of help to the family. How this help is given is guided by professional judgement and local interactions rather than by prescribed procedures or the requirements of gathering evidence for possible legal proceedings.

⁴ Relatively little detailed information was uncovered in this review about procedures in First Nations systems. Consequently, most of the comparisons in our discussions are between child protection and family service orientations. Nonetheless, we believe it is important to remember that a more communal or community orientation is part of the spectrum of choices and is being constructed by some First Nations communities.

First contact is often with systems that are in contact with a variety of families – not only families suspected of child maltreatment. Usually, there is a stated intention to maintain the family and the parent-child bond, as well as to avoid involvement with the formal legal system.

Some of these family service systems have created ‘intermediate’ structures (e.g. lay child protection boards in Belgium, the family judge’s office in France) between front-line voluntary service and formally-contested court applications. This intermediate space is where negotiations between the family members, the service workers, and the judge can take place. Family service systems typically are found in societies with ‘inquisitorial’ legal systems. This tradition allows judges to take a more active role in asking questions and gathering information than is allowed in ‘adversarial’ legal systems. In inquisitorial systems, fewer cases go to contested court hearings and most service decisions – even those involving the placement of a child – occur with the agreement of parents.

From a liberal rights perspective, these family service arrangements may allow excessive state and community involvement in families’ lives. Luckock and his colleagues (1996;1997) argue that they disguise the fact that professional and communal authority are being used to coerce parents’ compliance with professional recommendations. They favour the restraints on professional authority and the balancing of various parties’ rights that are provided by due process in the English legal system.

On the other hand, family service systems do allow for greater discretion and more ‘voluntary’, or at least less adversarial, involvements in helping. Most importantly, they shift the emphasis to offering a broader range of helping options, in cultures where this type of communal assistance is more normalized, before the full force of legal authority is brought to bear on the family. The following examples provide a brief description of these relationships in selected

European family service systems and First Nations community healing approaches.

The Belgian approach to child welfare is based on the principle of subsidiarity and has separated supportive services available to families from the coercive interventions ordered by the legal system. This separation reportedly “allows social workers, doctors, and other professionals concerned about children to consult with the VAC [Confidential Doctors Office] teams without reporting to the judicial system... The VAC... provide an intensive therapeutic service to [self] referred families” (Luckock, Vogler, & Keating, 1997, p.109). The Belgian system also attempts to avoid unnecessary court involvement with families through a lay mediation procedure. Only when all of these ‘voluntary’ involvements cannot be made to work, is the coercive power of the formal legal system typically invoked (Luckock et al., 1997). Reportedly, self-referrals by abusive parents rose from 2% to 38% under these arrangements; the risk of a child being re-injured was reduced; and, between 1986 and 1994, 81% of children in care were returned to their families (Marneffe & Broos, 1997).

In France, intermediary procedures are also introduced, usually before more coercive, legal action is taken. Families reportedly can and do make use of the Judge for Children’s Office to receive assistance and referrals. Hetherington and her colleagues note that “the process of the hearing is informal and the family is in direct discussion with the judge... By law, the judge has to attempt to get the agreement of the parents to any order he makes and failure to do this can be the grounds for appeal” (Hetherington et al., 1997, p.65). Judges in threshold systems would not see many of the cases that come before French judges – either because the families would not have met the criteria for services, or there would not have been sufficient evidence to take the families to court. In contrast, “French participants estimate that only about 10 percent of the cases that

come before children's judges involve maltreatment" (Pires, 1993, p.46). The Judge for Children receives many referrals, not only from social workers, but from parents as well. Parents are also motivated seek help from a Judge for Children because it qualifies them for access to increased social service support. It is also important to note that in France, adoption is not a option without the parents' permission (Hetherington et al., 1997).

Similarly, the inquisitorial courts in Germany provide an intermediary structure for families in the child welfare system. The German courts operate on the principle of voluntary jurisdiction or 'freiwillige Gerichtsbarkeit':

Parties can be represented and witnesses can be heard but the judge holds sole responsibility for the investigation... Judges have a mediating as well as an investigative function and will frequently conduct 'round table' discussions which take into consideration all the provisions available under the KJHG ['Kinder und Jugendhilfegesetz' - Children and Youth Services Act] to help a child and its family" (Wilford, Hetherington, & Piquardt, 1997, p.18-19).

German families are normally involved in all decisions concerning their welfare, especially when developing a plan of action in cases of crisis or need (Wilford et al., 1997). However in cases of extreme severity, or when agreements cannot be reached, interventions for families can be legally mandated (Wolff, 1997).

The legal system does not play a large role in the First Nations approach to child welfare. The adversarial and authoritarian nature of contested court procedures run counter to the importance First Nations place on self-determination and community empowerment. For example, in 1980 the Spallumcheen Band in British Columbia passed a by-law in which they assumed full control of child welfare services. The by-law allowed all authority for child welfare to be transferred to within the community. Under this by-law:

... apprehending authority and final decision-making reside with the... Chief and members of the Band Council, placement and review decisions are made by means of a vote at Band Council meetings following lengthy informal discussion by all who wish to speak (McKenzie, 1989, p.9).

The Nature of Authority: Some parents will always resist intrusions into their homes, regardless of how they are presented to them. Eventually each orientation must be able to use formal authority to compel family compliance or to remove children from the home. However, systems differ in the extent to which they use authority other than the coercive power of the law to encourage family involvement. In threshold systems, operating in social settings which stress individual rights and family privacy, the legal power of the state is the prime mode of ensuring access to families. In more communal societies, such as some continental European countries and some First Nations communities, the well-being of children and families is understood as a more collective responsibility. Ideally, this approach allows community norms to be accepted more readily by families as reasons for their engagements with professional or community helpers. The flip side of this social contract is that families also have expectations of assistance from the collectivity with the responsibilities of child care.

A core decision in the design of child welfare/ protection systems concerns the bases of authority or legitimacy to be used in engaging families, and the timing of agency interventions. Another basic choice is the extent to which service principles are to be based in concepts of individual rights and responsibility and/or concepts of social solidarity and cooperation in the care of children. For example, in England, “the last 15 years have witnessed a consolidation of ideologies of individual rights... and a general decline in ideas of collective responsibility” (Hetherington et al., 1997, p.93). However in many family service systems, a greater emphasis is placed on the notions of solidarity, subsidiarity, and collective responsibility:

The idea of ‘solidarity’ is important in understanding the socio-political context in which many European child welfare systems are embedded... thus the [Flemish child protection] committee is understood by those involved more as a social organism than an administrative body, and as such its continued evolution, improvement, and integration within the wider social fabric is accepted (Hetherington et al., 1997, p.32).

German social policy is informed by the principle of subsidiarity... The principle needs to be understood in the context of solidarity: the social contract between citizens and state places an obligation on the state and the Federation of States to strengthen the smallest social unit at base so that it can fulfill its responsibility in relation to the community and the state... [these philosophies] view family support and child-care services as a social responsibility as well as a buttress to the family as the basic social institution (Wilford et al., 1997, p.12-13).

Likewise, First Nations community healing systems place a great value on community support and notions of collective responsibility. Within these systems, it is held that strong communities are built by strong families and there is a powerful sense of commitment to supporting others within the community (Maidman & Connors, in press). Morrissette and his colleagues (1993) note that “the development of Aboriginal culture involved the exercise of responsibility on the part of all members for the benefit of the group” (p.93).

Who is Involved in Decision Making: A related consideration is the extent to which lay people and civic groupings have an active role to play in child welfare/protection systems. In threshold systems, for all practical purposes, child protection is the purview of service and legal professionals. In contrast, non-professional involvement is most dramatic in some First Nations communities, where child protection services are directed and delivered through self-governing institutions and community networks. Consulting with nonprofessionals is heavily emphasized in some Innu and Inuit communities. For example, in these systems, when a decision must be made about the removal of a child from his/her family, ideally the judge will ask “everyone involved in

the child's life, from distant aunts to family friends, to come talk at the hearing... He understands that here people are not individuals, that [they] are a part of a very extended family" (Toughill, 2001, February 3, p.K3). Likewise, in the approach developed by the Champagne/ Aishihik First Nation in Canada:

First the primacy of family care means that any form of substitute care is by definition secondary and temporary. Where family care breaks down the first response is to provide support in the form of counselling or temporary respite care by relatives or friends. If these responses are inadequate, a placement in a Native child-care home may be required... this pattern contains the distinct benefit of ensuring that children remain in their community, can attend the same school, and can keep their friends... Second, the assistance of family and relatives is sought when parents experience problems. Family meetings are initiated and chaired by the child welfare co-ordinator to plan for the care of the children and to resolve the difficulties facing parents. In turn, this planned involvement of family members and friends transforms the private matter of child welfare to a community concern... Since they live in the small communities in which they work, child welfare staff have a comprehensive and detailed knowledge of families and child-care... Third, this approach to practice requires community-based resources. In Haines Junction and Whitehorse, Indian child-care homes have been established (Wharf, 1992, p.116-117).

To a lesser extent, involvement of lay helpers and civil society in child welfare/protection is evident in some European systems, reflecting their concepts of social solidarity. For example, in Sweden, professional roles and authority are not as institutionalized as in the threshold systems and, as a result, local social welfare committees are responsible for overseeing child protection interventions when it is felt that a child is at risk (Olsson Hort, 1997). As well, in Denmark, the power to authorize involuntary, out-of-home placements is vested in local, elected Children's Boards (Bering Pruzan, 1997). Belgium also exemplifies this involvement of lay helpers in its child welfare/ protection system:

..each Committee [Special Youth Assistance] consists of a council of 12 volunteers active in child welfare and each carries responsibility for an administrative district (Luckock et al., 1997, p.104).

Mandatory Reporting: Systems differ in whether they require by law (with the threat of penalties) community professionals and the general public to report to child welfare/ protection authorities any suspicions they have about maltreated children. Both threshold and family service systems are found in societies which have mandatory reporting requirements [for example, Ontario and Finland]. Likewise, both types of systems are found in societies without mandatory reporting laws [for example, England and Germany].

The argument for mandatory reporting is the belief that more vulnerable children will receive protection from harm. The danger is that parental fear of the intrusions of the child protection authorities, in threshold systems at least, will attach itself to other service organizations. As a result, parents needing help may be less willing to come forward. An additional concern for the threshold child protection systems which require mandatory reporting is the overwhelming number of reports the agencies receive:

[In US:] The system is so overburdened with cases of insubstantial or unproven risk to children that it does not respond forcefully to situations where children are in real danger (Besharov, 1985, p.539-540).

Mandatory reporting requirements may have different meanings for families where the system's first response is an offer of assistance, than where formal investigations are required by law. In addition, in our review, we found no evidence clarifying whether finding and providing assistance to children at risk of maltreatment is more effective in systems with mandatory reporting:

... in the United States the rate of child fatalities has continued to rise, despite mandatory reporting of child abuse and neglect and a huge rise in such reports. In Canada also over the past twenty years resources have increasingly shifted into child protection, but there has been no measurable decline in child homicide... the weight of the evidence points to the conclusion that child death rates in this and other Western countries from homicide or possible homicide have remained much the same over a long period, and that the introduction of child protection

procedures has had no effect on them (Gibbons, 1997, p.80).

Consistent with their respect for self-determination, First Nations feel that it is important refrain from interfering intrusively in families whenever possible. However, that does not mean that inappropriate child rearing practices are accepted by others in the community. Family, neighbours, and friends ideally take a more collective approach to child welfare concerns:

Tribal families promote mutual respect for the individuality of members...It is also considered important to not interfere with an individual's actions as this may show disrespect for their rights of self-determination. Non-interference is enacted within child rearing environments in which children are constantly monitored by the community and encouraged by expectation to emit socially appropriate behaviour. These styles of relating contribute to the development of strong, self-confident and independent persons [sic] who ultimately contribute maximally to the strength of the family and the community (Maidman & Connors, in press, p.385).

Mediation Authority: A related decision about the use of authority is whether to formally construct 'space' between the 'voluntary' involvement of the family in supportive services and the coercive use of legal power to force family compliance or to remove the children from the home. Where such mediating authority exists, such as in the Judge for Children's Office in France and Belgium or the Flemish lay mediation committees, the purpose is to use mediation, with the possibility of referral for formal legal action in the background, to secure an agreement among the parents, service providers, and mediators about what is to be done to remedy the concerns about the children. Both service providers and parents can and do appeal to these mediating bodies; moreover, parents and children may initiate these contacts:

Cases can be referred to the judge much more easily than in England and the process is very informal. Parents and children can ask to see the judge... The same judge will stay with a case throughout, and each case has to be reviewed by the judge at least every two years... Some families also develop a working relationship with the judge, and often ask for supervision orders to be renewed, or may seek the intervention of the judge if they disagree with the social worker... [French parents] have more say in the arrangements for the placement of their children

(although the judge can overrule them), and their child cannot be adopted against their wishes (Baistow et al., 1996, p.9-10).

Separate or Embedded Child Welfare Organization

Allocation of Responsibility: One of the basic decisions in child welfare/ protection system design is whether child protection functions are to be allocated uniquely to a specialized unit or shared across several social welfare and/or justice units. In the United States, some critics of the dual mandate of existing threshold systems call for a complete separation of the care and control functions into distinct systems. They argue that this reform would allow the police/courts and social workers to each do what they do best. In our opinion, this prescription ignores some deep requirements of creating more effective child welfare/protection systems, not to mention the danger of the care function being poorly supported in environments that are less generous in supporting families.

It is simply not possible nor humane to classify families neatly into those who merit support and those who should be investigated or prosecuted. Many families in contact with child welfare/protection systems can benefit from a mixture of compassionate and authoritative assistance. In addition, well designed systems maintain a constructive flow of involvements between units with more supportive/therapeutic mandates and those charged with investigation and enforcement. Even families with verifiable instances of child maltreatment, except in the most extreme cases, are important to their children's development and opportunity for continuity; as well, they may benefit from caring assistance. Also, most children raised in the care of the state will re-establish contact with family members when they are on their own (Palmer, 1995). It is more productive to think of creating gradations along the care/control continuum (such as opportunities for authoritative mediation or for alternative living circumstances for parents and children) rather than an artificial separation creating two polarities. Impermeable and sharp

boundaries between system components in child welfare/ protection are neither functional nor desirable:

...the difficulty of sorting cases by level of risk is a challenge for all narrowing proposals... begs the question of how the [American] system should respond to the range of families within each group, who are not all alike... means considering ways to move beyond the standardized, one-size-fits-all response to families that CPS currently provides (Waldfogel, 1998, p.110).

Threshold systems in England, United States and Canada have invested their child protection mandate in 'stand-alone' public or para-public agencies. The rest of the social welfare delivery system has no clear role in carrying out the protection mandate, although other agencies are often involved with the same families.⁵ Increasingly, these threshold systems are emphasizing the investigative and enforcement components of their mandates, with the legal requirements of control tending to dominate their work environments. Concerns about this trend are arising in the literature.

[In England]: ...how can any social consensus... be protected and given a chance to develop, flourish and contribute to renewed social cohesion rather than just the narrow project of 'protecting the child' in isolation from its social surroundings (Hetherington et al., 1997, p.34).

[US]: "While the child welfare system may indeed be 'broken and in need of fixing', it cannot be fixed by attending to child welfare alone" (McCroskey & Meezan, 1998, p.68).

In family service systems, the child welfare/protection mandate is shared across multiple partners in the social welfare and youth justice systems. It is common for local general service organizations to provide assistance to distressed families and to be the first contact with many

⁵ Preliminary information in our Partnerships for Children and Families Project indicates that there is substantial overlap between parents and children involved in the child protection and children's mental health systems.

families suspected of maltreatment. Some social service organizations, like the Confidential Doctors Office in the Netherlands, have a formal mandate within the child protection system. Other elements of the social welfare systems in these countries, such as day care and community nursing, are frequently used to enrich the protection efforts. These systems also have specialized units, usually within the youth justice system, which focus on investigation and enforcement. For example:

This non-punitive response to child abuse and neglect was developed simultaneously in several western European countries in the early 1970s. The Confidential Doctors Bureaus were the first to be created in the Netherlands... Kind in Nood (Child in Need) in Belgium... and the Fifth Province in Ireland... followed, reflected the same background philosophy as introduced by Reinhart Wolff in the Berlin Child Protection Centre in 1975 (Marneffe & Broos, 1997, p.177).

[In Finland:] The child welfare legislation reforms of 1990 emphasise preventive, non-stigmatising, and supportive measures and services. One of the central objectives of the reform was to shift the emphasis of child welfare from extra familial care to measures that encourage and support the maintenance of children in their own home. As a result, work methods of all welfare services, were adapted toward strengthening child rearing by carers. Maternity and child health clinics have expanded and diversified family training, and intensified co-operation with families. In day care, various forms of co-operation supporting parental participation were developed. Also home help services have been developed to support child rearing by parents (Tuomisto & Vuori-Karvia, 1997, p.92).

[In Germany:] Youth Offices, which oversee all child and youth services from recreation to child welfare, are mandated to work with families to prevent serious difficulties from arising. Only in the event of danger to a child's well-being and lack of parental consent for recommended services does the Guardianship Court step in (Pires, 1993, p.47).

The boundaries between the 'care' and 'control' components of these family service systems have been described as somewhat fluid, with information flowing informally both ways. For Luckock and his colleagues (1996;1997), this raises some questions about confidentiality of information about families.

Entering the System: A related choice in child welfare/protection is how families may enter the system. Entry options include:

1. through social services accessible to all families, or those focussing on families in difficulty, or agencies specializing in investigations of allegations of child maltreatment;
2. on the basis of a family request/acceptance of service, or the insistence of a child protection agency enforcing a legal mandate; and,
3. based on a request for service, demonstrated need of assistance, or evidence of child maltreatment meeting minimal criteria mandating state intervention into family life.

Threshold systems have single access points, as well as the narrowest and most coercive criteria for entering the child protection system. Most involvements come on the basis of third party reports of suspected abuse which are then substantiated or dismissed, in the process of a formal investigation of the child protection agencies. In Ontario, as the range of supports offered by Children's Aid Societies has narrowed, and as the criteria for system entry have become more specific, the number of families calling Children's Aid Societies on their own for assistance has fallen.⁶ To enter the formal child protection system, families must be 'proven' to be abusive or neglectful of their children, or likely to become so in the near future; increasingly fewer of these engagements are on the basis of mutual consent. A trend toward filtering families out of the system was also evident in a recent study in England:

At first, 25 percent were filtered out by social work staff at the duty stage without

⁶ Preliminary information from the Partnership for Children and Family Projects shows a lower proportion of 'voluntary' involvements or self-referrals than was found in a 1985 study by Cameron and Rothery of Children's Aid Societies across Ontario.

any direct contact with the child or family. At the second [stage], the investigation itself, another 50 percent were filtered out and never reached the initial case conference. Of the remainder, just 15 percent were placed on the child protection register. Thus six out of every seven children who entered the child protection system at referral were filtered out without being placed on the register... (for 44 percent of those investigated) there was no intervention to protect the child nor were there any services provided. In only 4 percent of all cases referred were children removed from home under a statutory order at any time during the study (Parton, 1997, p.7).

As noted earlier, many Continental European family service systems have several access points, including social welfare agencies serving the general population or serving a broad range of families in difficulty. Most families become involved either by a parent or child requesting assistance, or on the basis of an offer of service from the agency following up on a report of suspected maltreatment. Almost all these involvements, including placement of children, are on the basis of mutual (negotiated) agreement. There are no specific criteria indicating maltreatment necessary in order to receive assistance. For example:

[In Sweden] “Child abuse or neglect is not a necessary or even typical precondition for beginning child welfare services. It is part of the normal course of life that children receive child health and welfare services” (Olsson Hort, 1997, p.107).

[In France:] “There are no specific grounds such as being ‘in need’ that defines whether or not a child is eligible for help” (Hetherington et al., 1997, p.65).

Maintaining Families and Protecting Children

All child welfare/protection systems must balance the goals of maintaining the family as a viable social unit for child development and protecting the child’s right not to be harmed physically, sexually, or emotionally in his or her home. All systems have the capacity to temporarily and permanently remove children from their parents’ home; likewise, all have the capacity to assist families with their child rearing responsibilities. However, the differences in

relative emphasis upon supporting families across systems are striking.

Severing the Parent-Child Connection and Supportive Services to Families: In some family service systems, the connection between children and their parents is rarely severed completely (e.g, adoption is seldom used). In addition, all the family service systems reviewed place great importance upon parental ‘agreement’ with intervention plans (sexual abuse is an exception in some of these countries leading to quick involvement with the justice system). As well, all family service systems go to greater lengths to provide supportive services to families than threshold systems are able or disposed to do. For example:

An interesting and long-established response to child behaviour problems in the Netherlands has, since early this century, been to place children in special centres after school. There are now around a hundred of these centres across the country, with children attending at least three days a week over a period of around two years... The strategy is to offer group therapy to the children while at the same time working with the families. Children are screened every six months to monitor their progress and usually leave the centre when both the child and the family seem able to cope on their own. There is apparently little stigma attached to attending these centres... (Madge & Attridge, 1996, p.144).

Gilbert’s (1997a) data suggests that children may be placed outside the home in European family service systems as often as in North American threshold systems; however, prior to this decision, and with other families where child removal is not called for, family service systems place a much greater emphasis upon providing resources to support the family (Gilbert, 1997b). This family support is exemplified by Germany’s Child and Youth Service Act (1990), which emphasizes providing extensive “preventive and supportive measures to help with the care and education of children in their families” (Hetherington et al., 1997, p.68). This approach is also evident in Denmark’s child welfare/ protection system, which recognizes that family difficulties should be resolved in an holistic manner. Thus, Danish policy is designed to “facilitate a voluntary, family-oriented approach to the problem of child abuse” (Bering Pruzan, 1997, p.126).

Conceptions of Children and Families and Intervention Priorities: In the family service systems, healthy families are viewed as fundamental for social cohesion and properly educating children. As a result, the Swedish approach to child welfare/ protection places an emphasis “on the right of birth parents to provide continuing care and, at least, to have ongoing contact with their children if out-of-home care [is] required” (Olsson Hort, 1997, p.109). In these more communal cultures, the well-being of families is not secondary to protecting individual rights and freedoms. Direct assistance is offered to keep families together whenever possible and many of these systems place an emphasis on the prevention and the development of strong families. For example, in Belgium, 17 centres for the prevention and treatment of child abuse and neglect have been established since the mid 1980s. Marneffe and Broos (1997) list these centres’ three main functions:

1. To offer direct assistance to the families whenever possible to keep the family together: “Even if a safe place has to be found outside the family, the parents are involved in the decision making” (p.167).
2. To offer supervision, support, and counselling for social workers who have to deal with child abuse in their professions.
3. To help in prevention: “The focus is more on changing public opinion than trying to change the family because child abuse and neglect cannot be reduced to a problem of bad or pathological parents” (p.167).

Similarly, permanently severing the bonds between children and their parents is discouraged in First Nation conceptions of child welfare/ protection. Ideally, there is great emphasis placed on keeping children in their families and all other forms of care arrangements are viewed as being secondary and temporary by nature:

Placement priorities, in order of preference, are the extended family, families within First Nations communities in the tribal council area, other First Nations

families, and non-First Nations caregivers... extended family placements outside the community and family foster homes within the community were given relatively equal weight. This indicates the importance attached to community as well as family connections (McKenzie, 1995, p.644).

In Ontario's threshold system, the child's right to be protected from harm takes precedence by law over any consideration of the family's need for assistance to care for the child. Threshold systems intervene in order to protect the child from harm in his/her home and to hold the parents accountable for ensuring the child receives good care. If parents cannot or will not comply, they risk losing legal guardianship of their child. Increasingly, English and North American threshold systems offer very limited supportive services to families themselves and operate within a broader social environment which has also reduced support to disadvantaged families. For instance, American child welfare/ protection agencies are mandated only to carry out investigations of families, to coordinate and manage foster care services, and to licence child day care facilities (Schene, 1998, p.34). All other supportive services for families fall outside of their jurisdiction.

Organizing Framework: A related choice is whether to use the concept of child abuse as the organizing framework for the system or to operate within a broader framework of child, family and community welfare. Beginning with the 'discovery' of child abuse in the 1960s in America, the focus of threshold systems has narrowed from an already limited conception of child welfare and neglect to a concentration on child abuse. From this perspective, child neglect is viewed as a specific category of harm to children rather than a symptom of family living circumstances (Swift, 1995). Conversely, family service systems are incorporated into a broader philosophy of societal, family and child welfare. The concern of these approaches is not solely with protecting children from maltreatment. In fact, as mentioned earlier, in Hetherington and

colleagues' (1997) analysis of several European child welfare systems, there did not appear to be a phrase equivalent to 'child protection' as the threshold systems define the term. With the exception of the UK, the phrase 'child protection' (defined as intra-familial protection) could not be found in the European systems (Hetherington et al., 1997). In these family service systems, a more collective ideology is reflected in their high levels of social provisions and less blame is reportedly placed on families who are experiencing difficulties. For example:

[In Finland]: From the multi-problem perspective, physical violence or child abuse in the family is seen as too narrow a category that emphasizes the symptoms of the problem more than the basic causes and stigmatizes or blames the perpetrators too easily (Poso, 1997, p.153).

Discretion and Control

A fundamental choice is whether to place confidence for decision-making in the judgment and training of local service providers, or to rely on the standard prescriptions and controls characteristic of formal bureaucratic organization. This choice has been shown to have deep implications for the child welfare/ protection experience of parents and children, as well as the work environments of service providers (Regehr et al., 2000).

Continental European and First Nations systems generally use more discretion, rather than relying on detailed rules and regulations to guide assessments and interventions, as do the threshold systems in England, America, and Canada. These non-threshold systems do not use a formal standard risk assessment procedure with families, as is common in the Anglo-American systems. On the other hand, a few family service systems, such as the Netherlands, are introducing more formality into their processes; there has recently been a move toward increasing requirements in the Dutch system for social workers to provide judges with evidence of child abuse (Hetherington et al., 1997). Nonetheless, family service systems generally put more faith in

the discretion and judgments of professional social workers. These systems typically endorse welfare and social work principles as their preferences in working with families and rely upon local deliberations and professional decision-making about how to proceed (Hetherington et al., 1997; Olsson Hort, 1997; Poso, 1997). As Hetherington and her colleagues (1997) note, a Belgian social worker has no standardized procedures to rely on, nor to “reassure her that she is ‘doing the right thing’, but she does have a team who she turns to for consultation and support” (p.20). While information is limited, in one study, social workers in First nation community healing systems were described as having more discretion, as well as more input into child welfare policies :

...in a ministry often characterized by low morale and frequent staff turnover, staff of the Native unit are enthusiastic about and committed to their work.... They went on to talk about the mission – to work with and provide services to a group of people who have rarely received satisfactory services from the ministry. Thus there is an identification with a cause, a sense of being different and distinctive. The distinctiveness is revealed in part by the way clients are treated - as friends, rather than people with problems. Second, staff see themselves as innovators and creators. Rather than simply and only implementing established policy, the Native unit is helping the ministry develop policy for Native child welfare (Wharf, 1992, p.108-109).

On the other hand, threshold systems, perhaps influenced by their ‘child saving’ heritages, the pressure exerted by media-fuelled ‘crises’ about abused children, and the increasing requirements of their legal systems, have become increasingly reluctant to trust local professional and community decision-making about maltreating families.

In Ontario over the past decade, reliance on standardized information recording and ‘people processing’ procedures has increased substantially. These bureaucratic procedures have been ‘married’ to a standard child abuse risk assessment instrument intended to increase the

accuracy and ‘objectivity’ of making decisions about families. As a result, worker discretion has been substantially reduced in deciding how to interact with families, and their time spent fulfilling formal recording requirements has greatly increased. In England (and other threshold systems), there is concern that “child protection work has become an administrative routine” (Hetherington et al., 1997, p.17-18). However, compliance with standard procedures becomes one way for workers to avoid blame, should they make a decision that allows children to be further mistreated in a family. Furthermore, these risk assessment procedures are considered as a means to screen the increasing number of reports the agencies receive (Lawrence-Karski, 1997).

It is likely no coincidence that threshold systems are experiencing a crisis of confidence both from families and their own service providers. For example, a recent study of working conditions at the Children’s Aid Society of Metropolitan Toronto “...paints a portrait of front-line workers in child protection swamped by an almost impossible workload that includes more paperwork than actual visits to children at risk of abuse and neglect” (Philp, 2001, February 20). She adds “...a growing number of social work graduates are turning their backs on child-protection work, which is legendary for being stressful and has been excoriated in the media over the past several years...”. No equivalent sense of crisis is found in the literature about European family service systems, although they too are not without their ‘scandals’ and critics (Chen, 2001).

Less Explored Choices

There are options generally not found in most comparisons of child welfare/protection systems that remain nonetheless useful in consideration of possibilities for improvement. A complete discussion of these options is beyond the scope of this review. Our purpose here is to explain briefly the nature of several of these considerations.

Most discussions of child welfare/protection assume that professional casework is the dominant service modality and differences centre on how this casework can best be organized and supported. However, this predominant emphasis on work with individual cases may exclude other helping strategies of demonstrated value with disadvantaged and distressed parents and children (Cameron et al., 1997). Many studies of program models which produce the most encouraging results for people confronting challenges in many areas of their lives, emphasize that the ways in which these programs are staffed and involve participants differ in basic ways from mainline services (as illustrations, see the reviews in Cameron, O'Reilly, Laurendeau & Chamberland, in press; Cameron & Vanderwoerd, 1997; Nelson, Laurendeau, Chamberland & Peirson, in press; Schorr, 1989; 1997).

Equally important, similar operating patterns have been identified across many promising programs for a range of distressed populations. Examples include: addressing multiple protective and risk factors; allowing for high levels of involvement and continuity of involvement over longer periods of time; enabling flexible responses; tailoring of patterns of involvement to particular circumstances; incorporating informal helping; responding quickly in times of crisis; and actively reducing concrete, psychological, and social obstacles to participation. It is clear that, if we are to take advantage of these lessons from promising programs, we should investigate new and more varied service content and organizational forms for the daily work of child welfare/protection.

Many forms of assistance for troubled children and parents require neither an assessment nor an investigation by a service provider for families to access, for example, family resource centres, Alateen and Alanon, day care, and parent support groups. Both parents and children benefit from having greater opportunities to control how they will become involved. There are also many useful, collective programs involving parents and children, which are under-represented

in our thinking about child welfare/protection, such as collective kitchens, parent mutual aid organizations, recreation programs, and faith groups. In addition to professional assistance, we need to imagine ways of helping people to find each other and facilitating community empowerment. Finally, as is evident from preliminary discussions with community groups and agencies participating in the Partnerships for Children and Families Project, there is almost a complete absence of any organized voice for parents and children in existing child welfare/protection systems. When considering possibilities for the future, it is important to respect the right of parents and children to influence what happens to them in child welfare/ protection, and to ensure that the voices of professionals are not the only voices in the debate; families involved in the systems must also be heard.

Concluding Comments

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One of the overarching ambitions of the Partnerships for Children and Families Project is to articulate what a positive paradigm for child and family welfare services might resemble. In broad strokes, satisfying our conception of a positive paradigm requires designs which: (1) are welcomed by most of the children and parents involved; (2) offer useful assistance with the daily living challenges of the families involved; (3) focus on the long-term welfare of children and their healthy physical, cognitive and emotional development; and, (4) protect children from physical and emotional harm in their daily living environments.

If the analysis in this review is accurate, it is apparent that the Anglo-American child protection paradigm fails to satisfy many critics on at least some of these criteria. We concur with authors who argue that the threshold paradigm is in urgent need of reform, but that this cannot be accomplished if we restrict our thinking to protecting children from a narrow range of dangers within their homes (Hetherington et al., 1997; McCroskey & Meezan, 1998).

This paper does not make recommendations about what should be included in a revised child and family welfare system in Ontario. Such suggestions hopefully will emerge at a later stage of the Partnerships for Children and Families Project. Our intentions in this paper are two-fold: (1) to free us to imagine alternatives - to disturb conventional certainties about the inevitability or the superiority of current child protection procedures in Ontario; and, (2) to identify possibilities in various areas of system design as signposts for future explorations of positive improvements.

Observations made earlier in the paper about the persistence of the ‘child-saving’ orientation over time in the Ontario protection system potentially leads to pessimism about the possibilities of meaningful reforms in our policies and practice. Indeed, the obstacles to new ways of thinking and working are formidable. Nonetheless, our historical review highlights substantial

shifts in Ontario's child protection orientation over time; for example, there have been changes in the supports available to families, in the emphasis on apprehending children, in the reliance on bureaucratic controls, and in the nature of involvements with courts and police. It may prove fruitful to begin our search for improvements by focussing on changes which potentially are compatible with our local cultures and institutional contexts.

However, at some point, evolution confronts the barriers of the basic values and strategies of existing arrangements. There is a limit to what we can hope to accomplish within even the broad parameters of our existing child protection paradigm. Our belief is that the fundamentals of the Anglo-American child protection paradigm need to be challenged and reformulated in a more positive fashion. Such deep shifts in ideas and practice are rare, but they have taken place elsewhere; we can learn from these experiences.

If we are not to be frozen into believing in the inevitability and immutability of our current arrangements to 'protect' children, we require both a vision of what might be more satisfactory and achievable, and some steps with which we can begin our journey. This review highlights a number of topics we can begin to explore in re-considering 'how we conduct the business' of child and family welfare in Ontario. In particular:

Guiding Values: What values guide how we wish to help children, families, and communities? Ontario's system is currently preoccupied solely with protecting children from harm in their own homes. As well, the existing child protection paradigm focuses on holding parents responsible for solving the challenges of child care. These perspectives are too limited and seem to lack compassion and understanding for the lives of children and parents being served.

Conceptions of family: What are the concepts of children, families, and community we wish to promote? Specifically, how prepared are we to represent the well-being of families as a

fundamental consideration in a healthy society? Research shows an increasing level of stress on Canadian families (Rick, Charlesworth, Bellefeuille, & Field, 1999). Some authors perceive a persistent campaign against, or ‘war’ on, the viability of families (Hewlett & West, 1988). Are we prepared to act as if the protection and well-being of the children involved with Ontario’s child protection system were dependent upon the well-being of their families, schools, and communities?

First Response: What do we want the first responses to children and families from our child welfare/ protection systems to be? Can we avoid costly and unhelpful legal investigations of so many families? Is it possible to assure that most families do in fact get some useful assistance from their involvement with child welfare/protection agencies?

Respecting Families: Can we protect children from danger, while still approaching families with respect? How might we move the current emphasis on investigation, authoritative supervision, and apprehension of children to the background - readily available but not predominant? Is it possible that children in danger can be located more easily and helped more effectively by social welfare and community approaches, rather than legal investigations?

Involvement of the Legal System: The countries and settings reviewed in this paper revealed many approaches to involving the police and court systems. These possibilities raise important questions. For example, in an optimal child welfare/ protection system, what emphasis should be given to formal legal involvement and to the police? Can we reduce the requirements of evidence and documentation, which increasingly define child protection in Ontario?

Intermediate Structures: One of the most noticeable differences between Anglo-American threshold systems and those in other countries is the use of intermediary structures. Currently,

Ontario's system appears to have few meaningful interventions that occur between initial investigations of families and legal orders enforced by the child protection agency. Can we incorporate responses between voluntary service and the coercive use of legal power in Ontario? Can we devise structures and procedures for a 'semi-authoritative' mediation of differences among children, parents and child protection authorities?

Embeddedness: Can the broader social welfare and community networks in Ontario have a meaningful place in our child welfare/protection systems? What types of social provisions should we place the most emphasis on developing? What can be done in a less-than-generous atmosphere for social provisions in Ontario?

Empowerment and Voice: Our review of the literature uncovered many concerns that the Anglo-American threshold system is too limited in the responses and overly oppressive for the families involved. How can we take advantage of what has been learned about promising program models for disadvantaged and distressed children and parents? Can we move away from the standardized and limited responses of Anglo-American child protection organizations? How can we create an organized voice for children, parents, and communities in Ontario's child welfare/protection systems?

Helping Professionals: Currently, child welfare/ protection work in Ontario is very stressful, leading to high turnover and recruiting problems for agencies, as well as job dissatisfaction and burnout for helping professionals (Regehr et al., 2000). However, our review did not find the same level of dissatisfaction among child welfare/ protection workers in other countries. How can we make job opportunities at child welfare/protection agencies in Ontario more attractive to social workers and other helping professionals? How can we create ample

scope for helpers to use their talents and regain belief in the positive nature of their work?

This paper admittedly raises more questions than it answers. However, the discussion demonstrates that we do have choices in how we respond to families and begins to clarify the nature of some of these choices. If this discussion helps to provoke and guide thoughts about how we might improve child and family welfare in Ontario, the basic purposes of this paper will have been served.

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SOCIAL WORK



Partnerships for Children and Families Project

Wilfrid Laurier University
Waterloo, Canada N2L 3C5

Email: partnerships@wlu.ca

Local: (519) 884-0710 ext.3636

Toll Free: 1-866-239-1558

Fax: (519) 888-9732