Community-based Resources: Keystone to the System of Care

“...the essence of community is a cognitive and emotional attitude towards others that shapes behavior toward them...the enduring need for communitarian ways of thinking are rooted in human necessity. To both survive and thrive, we need to trust one another.” (Boyes-Watson, 2005, p. 372)

Overview

Each of the systems of care principles has individual importance and relational value. Together, they are building blocks that form the infrastructure upon which each community’s individualized system of care is built. The keystone to that infrastructure and the system of care itself is a community-based approach. This principle secures the others and allows the infrastructure to stand. Realizing that youth thrive in the context of their homes and communities, child welfare agencies and their partners can support a common or integrated case plan that is culturally appropriate, engages and involves the youth and family, is built upon the strengths of that family, and draws upon the assets of the community.

If services and supports are provided outside the youth’s community, the engagement of other persons, agencies, and entities necessary to fulfill other systems of care principles is more challenging. Much of the success of child welfare and partner interventions depends on the community’s ability to maintain the support and momentum once the family meets its goals and the public agencies formally withdraw. Thus, maintaining children or youth with their family or in their community with a relevant continuum of services and supports is an essential platform on which all systems of care principles are operationalized and goals met.

Improving Child Welfare Outcomes Through Systems of Care

In 2003, the Children’s Bureau funded nine demonstration grants to test the efficacy of a systems of care approach to improving outcomes for children and families involved in the child welfare system and to address policy, practice, and cross-system collaboration issues raised by the Child and Family Services Reviews. Specifically, this approach is designed to improve the capacity of human service agencies to strengthen and support families involved in public child welfare through a set of six guiding principles:

1. Interagency collaboration;
2. Individualized strengths-based care;
3. Cultural and linguistic competence;
4. Child, youth, and family involvement;
5. Community-based approaches, and;
6. Accountability.

A Closer Look is a series of short reports that spotlight issues addressed by public child welfare agencies and their partners in implementing systems of care approaches to improve services and outcomes for the children and families they serve. These reports draw on the experiences of communities participating in the Children’s Bureau’s Improving Child Welfare Outcomes Through Systems of Care demonstration initiative, and summarize their challenges, promising practices, and lessons learned. The reports provide information communities nationwide can use in planning, implementing, and evaluating effective child welfare driven systems of care.

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Elements of a Community-based Approach

Child welfare driven systems of care that reflect a community-based approach exhibit three common features:

- Child placement and the child and family case plan describe where and how services and supports to a youth and family are delivered.

- Family partners have a significant role as community guides for identifying appropriate untapped resources and engaging others in ongoing support of a family. They can provide valuable assistance in engaging extended family, friends, school personnel, church family, recreational resources, and other relevant supports that exist or are created.

- Integration of community members on policy councils and boards captures their input and support in developing and sustaining systems of care.

Research in the field and the experiences of grant communities currently in the fifth year of a 5-year demonstration grant provide useful information about these elements of a community-based approach and the challenges and strategies associated with building and sustaining community-based approaches in child welfare driven systems of care.

Defining Community-based Approaches

Traditionally, community has been defined “…as a locality or space, people or members, shared institutions and values, interaction, distribution of power, and a social system” (Warren as cited in Kettner, Daley, & Nichols, 1985, p. 18). However, the community, in the context of systems of care, refers to the concentric circles that surround the youth and families served, from the extended family and friends, to neighbors and others within the jurisdictions of the agencies providing services and support, including formal and informal service providers and community-based agencies. The concept of community within a system of care includes issues of locality, connection, and services as well as a “…social bond characterized by a sense of mutuality, care, connection, and identity, awareness and obligation to others” (Boytes-Watson, 2005, p. 362). Following a community-based approach means child welfare agencies and their partners must not only provide relevant and individualized services in the community in which a young person lives, but also must include community input in the administrative and policy-making work of building a system of care.

Community-based Approaches in Child Welfare Driven Systems of Care

Keeping children within their own community and relying on the community for services and support have been part of good child welfare practice for decades. From service delivery models from the Family Preservation movement, to practice models such as team decision-making, advocates and academics alike have emphasized the importance of the community to a child’s life and the system serving that child (Anne E. Casey Foundation, 2002; Patt, 2007).

Recently, Child and Family Services Reviews have continued the call for child welfare systems to engage the community. The Child and Family Services Reviews commitment to community-based approaches is demonstrated on two levels:
Community as a resource for child outcome improvements. The Child and Family Services Reviews incorporate seven measures to assess State performance on safety, permanency, and well-being outcomes for the children they serve. Community-based approaches are part of most of these measures. For example, the permanency measures, “Children have permanency and stability in their living situations” and “The continuity of family relationships and connections is preserved for children,” (Children’s Bureau, 2008) illustrate the importance of grounding decisions about and supports for children within a stable and connected environment.

Community members as stakeholders in system improvement. In addition to being part of the solution for serving children and families better, the community is becoming a growing part of the process of improving the system itself. According to the Center for the Study of Social Policy (2003, p. 17), “Some states have used the CFSR [Child and Family Services Reviews] process to engage judges and court personnel, provider and other agency stakeholders, foster parents and community members not only as sources of qualitative information as the on-site interview process requires, but also as partners in PIP [Program Improvement Plan] development.” While the center’s report asserts these stakeholders are not usually involved in the implementation of PIPs, it cites examples from several States that have broadened the definition of “stakeholders” to include the community and deepened the engagement of such stakeholders to drive the design as well as the implementation of system change.

A child welfare driven system of care focuses on establishing a stable and supportive community that assists with placement and case planning, encourages community members to guide families and staff in building a supportive community network, and actively engages the community in decision-making.

1. Placement and case planning. Keeping youth in their community when they must be placed outside their home is a challenge for child welfare agencies. While recognizing the importance of maintaining the valuable connections children have with friends, extended family, neighbors, and perhaps most importantly, their school, keeping them in their community and school is difficult.

Contra Costa County, California, has successfully recruited foster parents by asking at school meetings if a family would care for a child from their school. Foster homes must be available before a neighborhood placement can occur. The systems of care coordinator in Contra Costa County explains, “First it was necessary to educate the community and neighborhood service providers about community-based support before we could secure help within the neighborhoods. We routinely turn to our foster parents to recruit additional foster parents within their own neighborhoods. We are developing strategies to ensure our staff, including support and information technology staff and system partners, are active foster parent recruiters. People are willing to help but have to understand the needs and be engaged as true partners in addressing those needs.”

In Contra Costa County, the care plan for each child and family specifies services and supports that respond to the unique needs of the child and family in order to meet care plan goals.

2. Family partners as community guides. Family partners can be instrumental in helping agencies locate neighborhood resources for children and families to address case plan goals. According to Ungar, Manuel, Mealey, Thomas, and Campbell (2004, p. 560), “The guides demonstrate that a practice that strives to be attuned to the local context of those with whom professionals work is much less distinguishable from what a community already does to help itself.” Other researchers have articulated the need for social workers to find the community members who play pivotal roles “guiding those excluded back into the associational life of the community” (p. 551).

“Since being employed by the child welfare agency, [the KinCare liaisons] have received more referrals from child welfare workers, feel more empowered and respected by child welfare workers, and believe that communication has improved between them and child welfare staff.”

—Kathy Kopiec, National Evaluation and Technical Assistance Center Evaluation Liaison for Nevada
Family partners working as guides in the grant communities have uncovered resources that are helpful, logical, and accessible to the family; often are less expensive; and engage the family’s community. The Las Vegas, Nevada, grant community developed KinCare Liaisons, composed of former kin caregivers whose relatives were placed through the child welfare system. They have provided essential links among the families, community, and the child welfare system. “[Our] KinCare liaison knew what her families needed because she had been one of them,” reports the project director. “She had almost instant credibility with them because she was from their community and had walked in their shoes. She could find out what people needed and help match them to local resources faster because she knew what was and wasn’t there for her.”

3. Integrating the community into decision-making bodies. Grantees have worked to engage members of community-based organizations and other service providers, family members, youth representatives, and faith communities in policy councils and decision-making groups that guide their systems of care. The collective knowledge and support have been instrumental in the success of the grants. By sharing information and working together, agencies become less insular, families are more empowered, and ownership for positive outcomes for youth and families is broadened.

In Reno County, Kansas, the local Family-Centered Systems of Care Steering Committee, led by family partners, developed a comprehensive community resource directory and secured resources to maintain the directory online. The Jefferson County, Colorado, grantee revised its social worker training program to bring community service providers into the agency to increase knowledge of community resources in high-needs areas among frontline workers.

Three distinct areas of Contra Costa County have partnership meetings that include representatives of community-based organizations, faith community members, and other interested community members. Based on questions they had about how the program worked, these participants contributed input to help shape the design of data presentations to internal and external audiences that described grantee operations and activities. Additionally, the county’s System of Care Advisory Board, which oversees grantee activities, has representation from multiple agencies, families, and the community. They continually address the continuum of care with an eye toward keeping children and youth in their schools and neighborhoods, and utilize data to develop benchmarks of success.

Challenges and Strategies in Following a Community-based Approach

The grantee communities involved in the Improving Child Welfare Through Systems of Care initiative have confronted a number of challenges in the development of community-based resources. The strategies they crafted to address these challenges provide valuable

The importance of community-based resources:

- Keeping children in their homes, neighborhood schools, and local communities has a positive effect on child and family well-being. Moving, in many cases, generates unnecessary stress for an already traumatized child.
- By remaining in the community, the child is able to retain critical bonds with friends, family, and school personnel.
- When services are community-based, the work done with the child and family is in the context of where the child lives.
- The community (faith-based organizations, nonprofit agencies, neighbors, and other institutions) can offer additional positive, informal supports to the child and family.

(Child Welfare Information Gateway, n.d.)
information to other communities for implementing a community-based approach.

Identifying family members and community members to participate in meaningful ways

Challenges. While philosophical or verbal support often existed for engaging families and community members more directly in agency boards and committees, finding the right people to commit to the time and activities was challenging. Integrating former clients and community members into the agency also meant that new positions had to be developed, policies and procedures often had to be revised, and attitudes were forced to change. Training and orientation protocols were required for new participants as well as existing staff so working relationships could be defined and productive.

Strategies. The New York Administration for Children’s Services endeavored to find meaningful strategies for integrating community perspectives into protecting children from abuse and neglect, as well as helping vulnerable families in need of temporary services and supports. In alignment with systems of care principles, the agency created the Community Partnership Initiative, demonstrating that neighborhood coalitions can be partners in the complex work of improving child welfare outcomes and promoting safe and stable families.

The CRADLE in the Bedford-Stuyvesant section of New York City developed a comprehensive strategy to bring community supports to the agency. The grantee established a network of community-based agencies, service providers, and other community resources. At Lunchbox Spotlights hosted within the agency, caseworkers could eat and talk with four or five community-based service providers about available services or discuss a specific case. The agency also created a consultation protocol to receive notification of all cases involving children ages birth to 5 years in order to provide caseworkers with comprehensive information about supports available to children and families in their home community.

The Turtle Mountain Band of Chippewa Indians grant team, one of the participating Tribal Nations of the Medicine Moon Initiative in North Dakota, applied the guidance of community elders and other traditional leaders by having them translate the system of care principles into the traditional values and language of the Chippewa. These translations were featured on a poster that was widely distributed throughout the community and increased understanding of the relevance of systems of care to community members.

The Contra Costa County Family Partner program supervisor interviewed child welfare workers to help identify possible family partners and hired several family partners who are now considered invaluable assets by those caseworkers. Job descriptions for family partners were created, and training and an orientation for all staff were held.

The Jefferson County system of care established a volunteer program with a variety of positions, including mentors, child care support, clerical specialists, donation coordinators, foster and adoptive family support, computer teachers, faith-based collaborators, and tutors. By diversifying the positions, volunteers were more easily and appropriately matched to the various responsibilities.

Agency policies that restrict flexibility in working with community members

Challenges. National evaluation data reveal that even when agencies embrace systems of care principles, considerable time and effort must be committed by child welfare agency administrators to bring staffing policies in line with those principles. Two grantee communities gained considerable momentum in using new family and community engagement practices, only to reach a plateau. Caseworkers could not keep up with existing responsibilities and the time-consuming demands of the new practices. Work outside of standard business hours often was required to meet families at times or places that were convenient for them. Sometimes, caseworkers had to use leave time.

Strategies. Contra Costa County developed a curriculum for family partners to prepare them for...
representing families on advisory boards. The family partner supervisor provided the regular feedback and problem-solving support that accelerated the family partners’ contributions to the county’s System of Care Advisory Board. Their contributions are valued by the other board members and offer a family and community perspective that previously was absent.

Alamance County, North Carolina, held a series of orientation sessions for family partners to prepare them for participation on advisory boards. Monthly meetings covered topics such as confidentiality, boundaries, and an introduction to committee work.

Changing a pervasive and negative sentiment about child welfare in the community

Challenges. Developing partnerships and fostering confidence in child welfare agencies among families most affected and organizations that serve them is a challenge because removing children from homes places agencies in an adversarial position. Sincere outreach and a genuine effort to partner must be followed by actions that support dialogue between the agency and those who can sometimes be the harshest critics.

Strategies. The CRADLE launched community forums where agency management and leadership shared information with community members and responded to their questions and concerns. The strategy was designed to clarify the agency’s mission and legal responsibility to protect children from abuse and neglect and promote well-being and permanence in their living situations. The CRADLE’s consistent demonstration of eagerness to partner with community members to help families prompted many people to join its outreach efforts as well as support vulnerable families.

Through a framework of system of care subcommittees, Locally Organized Systems of Care in Dauphin County, Pennsylvania, constructed a community-based network of human service organizations, volunteers, local businesses, churches, mosques, schools, and local colleges to focus on prevention. The community network also supports formal child welfare agency staff by providing resources for families with immediate needs such as furniture for a new apartment, mentoring for youth, school supplies, leadership development opportunities for young people, and clothes. This community support for children, youth, and families led to the launch of New Beginnings Day Camp, which has evolved into an independent nonprofit organization that is fully supported by community-based institutions.

Implications for Administrators and Stakeholders

Long-term success of child welfare services depends on building a community-based support system. Child welfare administrators can draw on the experience of systems of care grantees as they work to strengthen supportive community networks. By reaching out to families, businesses, schools, faith communities, and partner agencies to identify combined assets, agencies can reinforce the community safety net. To succeed, agencies must be considered an asset and partner by the community. Child welfare agencies building a system of care are most successful when they identify local assets and promote partnerships for change rather than acting independently.

Building a stronger connection with the community may require a cultural shift within the child welfare administration and its leadership. Before partnerships are created or strengths-based intervention strategies are adopted, agency administrators must ensure policies and procedures are aligned with systems of care principles. Consistent administrative operations based on these values create a strengths-based focus for staff, partners, and families served. Administrators must eliminate barriers to improved practice and new partnerships by managing change strategically and employing data-based decision-making. Leaders
are emerging who are changing the culture of their organizations through models that support team decision-making as they support effective casework. This shift to a partnership-focused culture has made outreach to community partners possible and must be adopted by agency leadership before it can be sustained.

Engaging community members, not just service providers, as consultants on policy and programming is essential. Residents from the communities most affected by child welfare involvement have been actively engaged in the systems of care interagency partnerships, which has improved the community’s perceptions of agencies and their mission. Partnerships have increased resources for agency-involved families and are expected to enhance the ability to meet case plan goals and objectives through added support. The most significant allies in these efforts often have been the families themselves, hired as either regular or contracted employees. Their outreach to the community and its families has had a positive effect on the community view of child welfare. Family guides working within the child welfare system have been invaluable to caseworkers and administrators, as well as interagency partners who participate with them on policy and advisory boards. Whether in urban, suburban, or rural areas or within Native American nations, the accomplishments of family guides are proving that these partnerships can be effective and should be sustained.

Community-based supports and partnerships may develop amid tensions and mistrust, but these difficulties can be overcome and should not discourage child welfare agencies. Mulroy, Nelson, and Gour (2004, p. 462) noted, “Tensions may exist on both sides of the decision table until professionals, used to working in top-down, expert-client relationships, each with his or her respective professional ‘lingo,’ learn new, egalitarian ways of relating and communicating with residents in a community setting and develop an appreciation of local knowledge.” Family partners and community guides often work as cultural translators and help diffuse some of the mistrust, allowing more energy to go into problem solving than problem identification or blaming.

Improving child welfare outcomes using a systems of care approach requires administrators to forge new partnerships within and beyond the service array. This means building upon the strong foundation of community-based practice in child welfare while revising the perception of child welfare from that of a distant bureaucracy to an engaged community resource and partner.

The systems of care grant communities have provided a road map for improved service delivery continuum, agency culture, community relationships, and child and family outcomes. Their experiences suggest that bringing family members and community guides into child welfare organizations in specific roles can prompt a tremendous impact that has the potential to lead to positive, lasting change.

“Community is a priceless commodity. How do you put a value on someone greeting us on a street, a neighbor helping in a difficult time and being part of a spiritual and/or religious community where life is bigger than one person? These are the jewels of community life. It is no surprise then that the system of care principle of community-based is so important to children and families. As hard as we might try to create community outside of community it just can never be quite the same.” (Robichaud, 2007, p. 15)

References


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### Improving Child Welfare Outcomes Through Systems of Care Demonstration Sites

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**Colorado**—Jefferson County System of Care—Susan Franklin, Project Director, SFrankli@jeffco.us

**Kansas**—Family Centered Systems of Care—Beth Evans, Project Director, bethevans@srs.ks.gov

**Nevada**—Caring Communities Project—Tom Morton, Project Director, MortonTD@co.clark.nv.us

**New York**—The CRADLE in Bedford Stuyvesant: A Systems of Care Initiative—Nigel Nathaniel, Project Director, Nigel.Nathaniel@dfa.state.ny.us

**North Carolina**—Improving Child Welfare Outcomes Through Systems of Care—Eric Zechman, Project Director, ericzechman@ncmail.net

**North Dakota**—Medicine Moon Initiative: Improving Tribal Child Welfare Outcomes through Systems of Care—Deb Painte, Project Director, debp@nativeinstitute.org

**Oregon**—Improving Permanency Outcomes Project—Patrick Melius, Project Director, Patrick.J.Melius@state.or.us

**Pennsylvania**—Locally Organized Systems of Care—Andrea Richardson, Project Director, anr63@pitt.edu