

Applied Social Sciences

Engaging Families and Communities in the Care and Protection of Children

In the most severe cases of child abuse and neglect, child welfare professionals remove children from their parents' care to protect the children from additional harm. Rather than leaving a social worker to make these choices in isolation, an alternative approach called Team Decision-Making (TDM) was developed in Ohio and is now used throughout the United States. TDM includes a meeting of community representatives, family members, and social workers who review every decision to remove a child from his or her parents, or make any change of placement, including reunification or adoption. Led by a skilled facilitator, team meetings allow the members to make the best decision possible in each case with the last resort being the removal of the child from the home.

Recognizing the serious challenges facing the country's child welfare system, the Annie E. Casey Foundation developed the reform initiative called *Family to Family* to identify strategies and tools to confront these very real problems. With TDM as one of the program's core strategies, the foundation selected **David Crampton, Ph.D.**, assistant professor of social work at Case's Mandel School of Applied Social Sciences to join a national research team that is evaluating *Family to Family's* implementation. Dr. Crampton, the lead investigator for the analysis of TDM, is working with Tom Crea, a doctoral candidate from the University of North Carolina at Chapel Hill, and Anne Abramson Madden, a doctoral student at the University of California at Berkeley. Together they visited Cleveland, Ohio; Denver, Colorado; Louisville, Kentucky; and Orange County and San Francisco in California and conducted 74 focus groups and interviews involving 180 administrators, caseworkers, community partners, supervisors, and TDM facilitators across these five *Family to Family* sites.

The study articulates the strategies that these five communities used to implement TDM and to overcome the challenges it presented. For example, while child welfare staff members were generally supportive of TDM, they were concerned about the amount of time needed to organize and attend meetings, adding the time demands of TDM to work that is already very time-intensive. In order to address this concern, the child welfare

agency's leadership must provide sufficient resources to support TDM and demonstrate its benefits by providing data that shows how it improves the lives of the children and families the agency serves. Dr. Crampton will continue to work with the national research team to evaluate the *Family to Family* strategies that will help strengthen these efforts.

"Team Decision-Making is an effective way to increase family and community input into the most critical decisions made by child welfare staff. Our goal is to help identify how child welfare agencies can improve their use of TDM—not only in Cleveland, but across the United States," said Dr. Crampton.



DAVID CRAMPTON