

APSAC Presentations at the First Russian-American Child Welfare Forum

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Presentation by Dr. Ronald C. Hughes at the opening plenary session of the First Russian-American Child Welfare Forum in Ulan-Ude, capital of the Republic of Buryatia, Russian Federation, August 2, 2011. The presentation was televised throughout the Republic and in school classrooms.

A civil society is a society that recognizes, supports, and is guided by fundamental and essential ethical principles of moral discourse. These principles are liberty, justice, human dignity, and a fourth, which I will explain shortly.

These three principles ... liberty, justice, and human dignity ... are transcendental principles. By this we mean that their recognition, justification, and acceptance are not dependent on any particular human experience, similar or disparate histories, or their utility, although their normative power is paramount. Their justification transcends these things. Their legitimacy and power are derived from their logical necessity. It is impossible to engage in any moral discourse, any discussion of ethical practice, without a recognition that such a discussion must concern these basic moral concepts and the recognition that the conceptualization of any one of these transcending moral concepts requires a conceptualization of the others.

How does the recognition and acceptance of the essential nature of these defining characteristics of a civil society translate to child welfare?

For children, the concept of freedom must be put into a developmental perspective. Children do not have all the same freedoms, right to self-determination, privacy, or the concordant responsibilities of adults. Freedom for children means to be free to grow and develop, to be free from environmental assault, coercion, and deprivation that can undermine their development as healthy, productive, and moral social beings. Thus, it means the right to be free from abuse and exploitation, to be free from neglect. To be set free to grow and develop requires that children have safe and stable families who will provide basic care and nurturance. Freedom and liberty are about the right to choose from possibilities, and possibilities can only exist for children in a safe and nurturing environment, free from abuse, neglect, and exploitation.

Any conceptualization of justice for children must take into consideration their special developmental needs and vulnerabilities. Children have relatively little capacity to obtain needed resources or to assure their own safety. They do not choose their circumstance and have little power to change them. Justice for children requires that certain developmental rights be universally applied to children, such as the right to a safe and stable family and the right to basic care and nurturance.

In our respective societies, we have often come up short in our responsibility to treat children with inherent respect and dignity. Our institutions have often failed to protect them from exploitation and dehumanizing conditions, or worse, have been the source of such abuse. The human trafficking of children for sex [and] their exploitation in child pornography are graphic examples of the treatment of children as dehumanized commodities. Their worth as human beings is discounted when we do not

redress the failures of those with responsibility to nurture and protect them; when we allow those who abuse or neglect them to do so with impunity, when we turn a deaf ear to their needs and our moral responsibilities because they do not have voice.

To these fundamental and transcending moral principles of a civil society—human dignity, liberty, and justice—I would add a fourth: beneficence, or in its universal conceptualization, altruism. It is logical to conceive of a normative moral order that includes liberty, human integrity, and justice without normative sentiments regarding benevolent intent or behavior. In fact, justice is most often conceived as the balancing of selfish interests, not benevolent intent. There are no laws requiring good Samaritans. Benevolence is often referred to as supererogatory ... in other words, it is not a moral prerequisite of a normative ethical system; it is beyond moral duty. Yet, it is considered by nearly all ethicists to be the highest moral good. To quote Emmanuel Kant, “The only thing good, in and of itself, is goodwill.” We cause children to be. They cannot choose their circumstances. Their needs are great. Their vulnerability is complete. They have little power or influence to pursue their interests. Children are totally dependent upon the goodwill of others. Our society’s responsibility to its children is its most fundamental moral obligation.

For this reason I include it as a fourth moral foundation of a civil society. I believe it is a profoundly necessary moral imperative, one that cannot be legislated, but the one most important in informing the general will of a civil society if the other principles of liberty, justice, and human dignity are to sustain.

Finally, there is one additional instrumental ethical requirement recognized by all mature civil societies: the normative conceptualization of the rule of law. Constitutional and legislative codification of liberty, human dignity, and justice, applied equally to all, both sustains and informs a civil society. Thus, I include it as the final



Dr. Ronald Hughes, APSAC President

fundamental moral concept in our discussion of the ethical foundations of civil societies and moral basis for our fight against child abuse. Armed with this combination of duty and goodwill, we will work together over the next few days and hopefully, long into the future, to better the lives of children and families in our two great countries.

Additional comments from Dr. Hughes regarding the role of nongovernmental organizations (NGOs) in civil society's efforts to prevent child abuse and neglect.

NGOs are a natural evolutionary expression of group of individuals with similar interests, concerns, hopes, and commitment within an open, liberal democracy, that is, a civil society. The mission, goals, and objectives of an NGO can be as varied and diverse as the individual interests, concerns, hopes, and civil commitment of the individuals within a society. NGOs play an important, even essential, part in the moral and just development of a liberal democracy. They provide the means for like-minded members of civil society to combine their resources, their energy, their strategic efforts, and thus their influence and effectiveness in seeking shared goals. In the early twentieth century in the United States, NGOs evolved into a powerful moral and political phenomenon for both advocacy and service delivery to marginalized and disenfranchised populations. One subgroup was children.

Children are an existentially dependent and powerless group in any society, who, by this reality, are inherently susceptible to many kinds of individual, institutional, and social abuse, neglect, and exploitation. Thus we, in all our histories, have seen times when children were exploited in labor, discounted in law and legislation, treated as social commodities, rather than with human dignity and human rights, whose well-being was not assured by civil institutions or [who] were actually exploited by these same institutions; and whose families were sometimes the source of unchecked exploitation, abuse, and neglect.

NGOs are the most significant social and political advocacy structure for identifying, developing and sustaining our efforts as a civil society to meet the needs of maltreated children. NGOs are



Dr. Michael Haney

the primary source for research and program development of new and effective models of intervention and service.

I think it is safe to say that the history of progress and improvement in the services to maltreated children in the United States over the last 100 years has been a history of the development, growth, sophistication, and effectiveness of nongovernmental organizations whose moral and scientific missions have been to improve the safety and welfare of children.

Presentation by Dr. Judith S. Rycus at the opening plenary session of the First Russian-American Child Welfare Forum in Ulan-Ude, capital of the Republic of Buryatia, Russian Federation, August 2, 2011

I have been asked to talk with you about the importance of training in an effective system of child protection. To do this, I would like to present and explain some fundamental principles about training.

Few people would dispute that training is important to job success. However, in the child protection field, training is far more than "important" ... it is *absolutely essential* to effective child protection work.

Let me start with an analogy.

Let's suppose you were just diagnosed with a brain tumor. Fortunately, you're told that it can be surgically removed. You checked your surgeon's background and credentials and learned that he had taken three classes on brain surgery and, on a few occasions, he had watched an experienced surgeon perform the surgical procedure that you need.

Would you allow this surgeon to operate on your tumor?

The analogy may seem far-fetched because child protection workers don't cut out brain tumors. But all too often, we do cut children out of their families to ensure their safety, and the trauma and loss can be just as great ... and the long-term consequences equally devastating for children, and for their families.

Child protection is an extremely complicated field of practice, and it requires high levels of professional knowledge and skills—or as we call them, competencies. Therefore, training is essential to prepare and sustain a skilled child protection work force, and a training program will be most effective if it follows several fundamental principles.

First, training is a *process*, not an *event*. We often think of training as attending classes on selected topics, and we generally think of training as most important for newly hired staff members. However, effective training is an ongoing process that makes training available and easily accessible to staff throughout their careers.

Initially, training helps staff learn the fundamental and essential competencies to do their jobs. We call these “core” competencies, because they are equally important for everyone who performs that same job. But Core is only the beginning. We must also help staff [members] become proficient in more specialized and advanced skill areas, some of which cannot be mastered without considerable training, practice, and feedback over longer periods of time. To be most effective, training should be included in an ongoing professional development plan for each staff person in the organization.

The second principle is that in healthy organizations, *training is a part of management*, and arranging training is the responsibility of the organization. Managers who hire staff who lack the ability to do their assigned job are essentially shooting themselves in the foot; if staff cannot perform their jobs, the organization cannot achieve its mission and goals. Effective managers rely on training to build their staff’s capacity, thus helping the organization to be successful.

The third principle is that *all staff* need training—not just the staff who work directly with families and children. Most organizations make the same mistake; they put considerable energy into training direct service staff and tend to ignore other staff groups, including supervisors and managers. Or, they train direct service staff first, and only then do they provide training to others, as an afterthought.

This presents several problems. An organization must be well managed in order to achieve its mission. Further, in order for direct service specialists to apply what they’ve learned to their jobs, the organization must create an environment that *facilitates* and *supports* them. Creating such an environment is the responsibility of managers and supervisors. If managers and supervisors cannot effectively manage, or if they lack a thorough understanding of child protection work, it doesn’t matter how much training we provide to direct service staff—they won’t use what they’ve learned in training because their work environment doesn’t allow it.

An effective training system always trains managers and supervisors first or at the same time as direct service staff. And sometimes, it is most effective to train direct service staff and their managers together, so they learn the same principles at the same time. This can generate a commitment for both to apply what they have learned back in the workplace.

The final principle is that organizations need a *system* for training. It is not enough for staff to attend random training events that they might find interesting or valuable. The goal is to establish a training system that allows staff to attend the training they most need in order to do their jobs—*when* they need it.

To do this, a training system must have several components. One is the capacity to assess the individual training needs of each staff



Dr. Viola Vaughn-Eden, Ms. Tricia Gardner, Ms. Sandra Marchenko, and Dr. Vincent Palusci

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member and to provide training that meets individual needs. It's true that some knowledge and skills are needed by all staff. We referred [to] these "core" skills earlier. These need to be trained in a standardized way to promote a common understanding of the work and a common approach to achieving it.

An effective training system must also offer a continuum of learning activities with a variety of delivery strategies. Classroom training is an effective means of learning, but it is not the only one. Distance learning enables staff to access training through the Internet, or to use self-instructional techniques, without having to travel anywhere. Coaching and on-the-job training are essential to help staff master complicated skills and use them effectively in their natural work environment. Most important, supervisors must be skilled in educational supervision, using everyday activities as "learning moments" to help their staff strengthen their skills. It is the training system's to ensure that supervisors have the ability, and the tools, to do this. Educational supervision is the best means of promoting what we call "transfer of learning," which is essential if newly learned knowledge and skills are ever to be used on the job.

Ultimately, our goal is to set up a comprehensive system for training, one that is integrated within the management structure of the organization, one that is sustainable and that stays relevant and current over time. We want a training system that does more than simply build the capacity of specialists and managers. We want a training system that exerts continuous pressure toward excellence and pushes the service system toward achieving best practice for children and their families.

Presentation by Dr. Vincent J. Palusci to the Child Protection Workgroup of the Bilateral Presidential Commission (Obama-Medvedev) in Ulan-Ude, capital of the Republic of Buryatia, Russian Federation, August 2, 2011.

Mr. President, Madame Chairwomen, distinguished Ministers and Members, and Guests of the Child Protection Workgroup: I am proud and honored to be here today representing the American Professional Society on the Abuse of Children and American physicians. I am a pediatrician and epidemiologist specializing in care and research for abused children at the New York University School of Medicine. I work at Bellevue Hospital in New York City treating children and also work with the City's Administration for Children's Services. I will be attending the First Russian-American Child Welfare Forum presenting

information on medical issues with Dr. Lori Frasier and on prevention with Dr. Michael Haney.

It is important to put medicine's contribution to the care of abused and neglected children into historical context. While physicians have always cared for children with injuries after maltreatment, our formal involvement is more recent.

- It has been 350 years since Buryatia joined Russia,
- It has been 275 years since Bellevue Hospital was founded,
- Last month, we celebrated 235 years of American independence,
- It has been 136 years since the founding of the New York Society for the Prevention of Cruelty to Children in New York City,
- It is just 50 years ago that child abuse and neglect was officially recognized in medicine with the publication of C. Henry Kempe's landmark article, "The Battered Child,"
- But only during the last 25 years have we had an organization such as APSAC and scientific studies to understand child abuse and neglect in its many forms.

We now know that, from before birth through adulthood, there are certain basic needs that, if not met, will negatively affect child and adult health and development throughout the lifespan. As you develop your social and professional responses to child abuse and neglect in Russia, I want you to learn from our successes and failures from the perspectives of medicine and public health.



Dr. Judith Rycus, Mr. Luke Dembosky, and Mr. Dimitry Grigoriev (NFPC).

Keep in mind:

- The response to child abuse and neglect should be approached as a medical and public health issue. Child welfare in the U.S. was first left to social workers and government, but we now realize that violence in families must be addressed by all members of civil society and its professionals.
- Physicians and public health practitioners need to be included in the systems of care you design. We as physicians can do more than just treat the physical and mental injuries after child abuse and neglect, and we can help lead your efforts to develop a truly encompassing care system.
- Physicians and public health practitioners need your help to understand child welfare issues beyond our clinical care for children and families. We need your assistance but can bring the strength of our scientific knowledge to design, implement, and measure the outcome of your programs. I am pleased that the Minister of Health is here today, and you must be sure to include medical and public health professionals in this ongoing discussion.

So how does this look in practice? On any given day at Bellevue Hospital, I may be asked to provide care to a young sexual abuse victim seen in the general pediatric clinic, an infant with a head injury being cared for in the intensive care unit, a runaway teen with psychiatric needs who also may have been abused and who is being seen in the emergency department, or an abandoned child referred from a foster care agency where there are additional concerns of abuse and neglect. All of these children need a comprehensive medical assessment in addition to services and evaluation from our governmental and private child welfare agencies, law enforcement, and judiciary systems. All these children need specialized care provided in a child-

friendly environment that will not further traumatize them. And all of these children can benefit from our services to prevent further injury and to maximize their health and development.

This background supports the following recommendations based on our experiences:

1. Include physicians and public health professionals in your policy making groups, advisory boards, nonprofit organizations and multidisciplinary teams,
2. Include training on an ongoing basis for everyone in your child welfare system on the medical and public health issues facing children and families,
3. Include training for medical and public health professionals on child abuse and neglect issues both during initial professional training and ongoing,
4. Provide support for professional development for all the roles in your child welfare system you create. This includes respect and financial support for professional growth, specialization, and certification as appropriate to recognize the special roles and competence needed to perform these critical tasks for children and families in your system.

Thank you for inviting us as the representatives of APSAC, the American people, and the professionals who care for abused and neglected children and their families in the U.S. We are proud to join you in your efforts at this First Russian-American Child Welfare Forum to improve your systems of care. Your warm welcome and the opportunity to share our experiences

with you have been gratifying and life-affirming. We are excited and pleased to join you in this important work and look forward to continued cooperation between our countries to address these important issues for children and families in both Russia and the United States of America.



Dr. Lori Frasier and Dr. Judith Rycus