Informed decisions in child welfare:
The use of attachment theory

Ferol E. Mennen*, Maura O’Keefe

University of Southern California, School of Social Work, MC0411, Los Angeles, CA 90089, United States

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Abstract

The purpose of this article is to help child welfare workers better understand and utilize attachment theory in their decision making with abused and neglected children. The authors review attachment theory, research on the effects of maltreatment on attachment, and research on foster care and attachment. Guidelines and specific interventions supporting children’s secure attachments during involvement with the child welfare process (e.g., before placement, at time of placement, during placement, and at reunion) are provided.

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1. Introduction

The child welfare system is entrusted with protecting children from maltreatment by their parents or other caregivers. The primary goals of child welfare and mental health professionals serving these maltreated children are to ensure their safety and protect them from further abuse, to help them heal from any physical or psychological effects of the maltreatment, and to provide opportunities for them to become healthier and well functioning children and adults. The reality of the outcome for a significant number of children who enter the child welfare system is different. There is a long history of research attesting to the serious consequences of both abuse and neglect (Brown, Cohen, Johnson, & Smailes, 1999; Finzi et al., 2001; Horwitz, Widom, McLaughlin, & White, 2001; Mennen, 2000; Paolucci, Genuis,
and the potentially negative consequences of being in foster care (Bohman & Sigvardsson, 1985; Courtney & Barth, 1996; Dumaret, Coppel-Batsch, & Courand, 1997; Triseliotis, 1983). Although there are many reasons for the poor outcomes of these children, some are the result of poor decision making in the system. This article will look at one theory that can aid decision making and thereby improve outcomes for these maltreated children entering the system-attachment theory.

Attachment theory has helped children’s services professionals to understand the importance of the relationship between a child and her/his caretaker(s). The quality of a child’s attachment has been found to predict adjustment in many domains, including social, psychological, behavioral, and cognitive domains (Arsenio, Cooperman, & Lover, 2000; Cicchetti & Toth, 1998; Fergusson, Woodward, & Horwood, 2000; Kestenbaum, Farber, & Sroufe, 1989; Oppenheim, Sagi, & Lamb, 1988; Wakschlag & Hans, 1999). Given this importance, attention to children’s attachments is essential for increasing the likelihood of positive outcomes for children in the child welfare system. While certainly not the only theory that needs to be utilized to make decisions in the system, greater reliance on attachment theory could help avoid some of the problems that make child welfare intervention potentially harmful to children.

The numbers of children who are victimized by child abuse and neglect continues to rise with approximately 903,000 children confirmed as having been victims of maltreatment in 2001 (U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau, 2003). Of the 290,000 children entering foster care in 2001, 38% were under 6. There are currently over a half million children in foster care with 42% of these children having been in care more than 2 years (U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau, 2003). In 1998, for those children in care more than 2 years, 47% had at least three placements (U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau, 2000).

Child welfare policy strives to use children’s attachments as a guide to decisions about placement, but the demands of the system can interfere with this ideal. Increased caseloads, poorly trained workers, media attention, and political pressure often combine to lead to decisions that are not in children’s best interests. Here are examples of two cases in the system which were handled quite differently.

Case I
Jean and Sonia are a white lesbian professional couple who had been together for 15 years. They wanted to become a family and began this effort by fostering a 4-year-old drug-exposed, African–American girl, Tanya, whom they hoped to adopt. Tanya had been with them for a year. She was placed with them because of their desire to adopt, willingness to take a child of a different race, and one with developmental problems. The process to adopt Tanya was going well, when they were asked if they were willing to take an infant girl. Tanya’s mother, still a drug user, had given birth to her sixth drug-exposed baby. Jean and Sonia agreed to take the baby on the condition that they could move forward with adoption. The baby was placed with them from the hospital, and they began the task of helping this infant recover from drug exposure and integrate into their family. After some initial jealousy about another child in the family, Tanya was embracing her new sister. The irritability from the drug exposure diminished. When the infant was 9 months old, they received a visit from their adoption worker who informed them that a relative had turned up and the baby would be placed with an aunt who had previously shown no interest in any of her nieces or nephews. They later learned that the worker, who had religious objections to their sexual orientation and also did not want to see a black child with a white family, had looked for a relative to care for the baby. The placement with the aunt failed. The baby was placed with another foster family without notifying Jean and Sonia.
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