Prosecutors or Helpers: An Institutional Ethnography of Child Protective Services Casework

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Prosecutors or Helpers:

An Institutional Ethnography of Child Protective Services Casework

by

Anna Maria Rockhill

A dissertation submitted in partial fulfillment of the requirements for the degree of

Doctor of Philosophy

in

Social Work and Social Research

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Portland State University
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Abstract

Millions of families come into contact with child welfare every year (U.S. Department of Health & Human Services, 2020). The mission of child welfare is to strengthen the ability of families to care for their children and to protect children and provide aid, services, or referrals to families where maltreatment is said to have occurred (Congressional Research Services, 2020). The vast majority of the families who become involved with child welfare are multiply disadvantaged (e.g., Mersky et al., 2009; Sedlak et al., 2010; Testa & Smith, 2009) and child welfare is a key feature of the array of public supports for struggling families. However, the institution fails many of the families it serves (e.g., Dworsky et al., 2013; Juvenile Law Center, 2018; Okpych & Courtney, 2014; Wade & Dixon, 2006). Despite recent efforts by those in the field to promote collaboration and engagement, many parents experience child welfare as neither empowering nor helpful (e.g., Altman, 2008; Bundy-Fazioli et al., 2008; Dumbrill, 2006; Palmer et al., 2006; Schmid & Pollack, 2009) and many families do not get the assistance they need (e.g., Alpert, 2005; Ferguson, 2009; Kazdin, 2000; Mueller & Pekarik, 2000; Toros et al., 2018).

My project assumes that caseworkers and casework are key sites for exploring and understanding the problems facing child welfare. I use Institutional Ethnography (IE) to explore how it is that casework happens as it does—more specifically, how caseworkers come to act in ways that both caseworkers and families experience as
unhelpful, despite caseworkers’ stated commitment to partnership and empowerment. IE explores how policies, discourses, and other institutional processes affect the day-to-day actualities of professionals and the people with whom they work (Campbell & Gregor, 2008; Devault, 2006; Pence, 2001). Of particular interest are situations in which the everyday interactions of individuals are organized in ways that conflict with or subjugate their interests (Smith, 1987, 2005).

I analyze data from interviews, observations and document reviews to explicate how the local “everyday” of CPS casework is drawn into extra-local relations of ruling that organize that work in accordance with principles and interests that are in large measure antithetical to the development of collaborative and empowering relationships. More specifically, the analysis makes visible the power of maltreatment and other concepts and categories associated with what I refer to as the dependency legal regime as caseworkers orient to concepts (e.g. allegations) and categories (e.g. types of abuse), standards (e.g. reasonable cause) and methods for building textual representations of actualities (e.g. case records and court reports) that constitute the known-in-common social context of child protective services (Smith & Griffith, 2022). As caseworkers’ practices and subjectivities are organized by the dependency legal regime, they see parents’ struggles as ‘maltreatment’ (rather than the result of marginalization and disadvantage) and understand their job as ‘proving the case’ (rather than collaborating with parents and providing support).
Dedication

To the people struggling to take care and do right in the face of poverty, trauma, mental illness, violence, pain, disabilities, discrimination, fear, despair, injustice, and the daily indignities of life on the margins.
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Chapter 1: Introduction

Child Welfare and Public Supports for Struggling Families

The child welfare system in the United States touches millions of children and families each year. According to the U.S. Department of Health & Human Services, in 2018, public child protection agencies screened allegations of abuse or neglect involving approximately 7.8 million children—mostly from calls to child abuse hotlines. These agencies carried out investigations or other protective responses involving 3.5 million of those children. Child welfare agencies provided supports to the families of 1.1 million of those children including, for example, case management, referrals to services, and information about other resources. Approximately 263,000 of the children were removed from their homes and entered foster care (U.S. Department of Health & Human Services, 2020).

According to the U.S. Congressional Research Service (2022),

The broadest mission of public child welfare agencies is to strengthen families so that children can depend on their parents to provide them with a safe and loving home. More specifically, child welfare agencies work to prevent abuse or neglect of children by their parents/caregivers. If abuse or neglect has already happened, the agencies are expected to provide aid, services, or referrals as needed to ensure children do not re-experience maltreatment.
Efforts to support struggling families have taken a variety of forms in the U.S. In the early 1800s, orphanages and industrial schools were designed to offer “professional attention to the needs of the children” (Lindsey, 2004, p. 13). Starting in the 1860s, “orphan trains” took immigrant Catholic children from cities in an effort to deal with the social problems spawned by the Industrial Revolution and placed them with “proper” families—mostly Midwestern farm families—so the children could learn morals and good behavior (Gordon, 1994). By the late 1800s, the focus of the Children’s Aid Societies and the Societies for the Prevention of Cruelty to Children in larger Northeast and Midwest cities advocated working with parents and providing “protective services” consisting of advice, instruction, referrals, and limited economic support so that children could continue to live with their own families (Costin, 1985; Thomas, 1971). Settlement Houses and white-dominated philanthropic societies, such as the Children Aid Societies, were not focused on improving the conditions of black children and families (Lasch-Quinn, 1993). However, many black communities established their own voluntary associations or mutual aid organizations, which provided support to struggling black families (Hounmenou, 2012).

The federal government first became involved in 1909 at the White House Conference on Child Dependency, convened by President Theodore Roosevelt. Attendees concluded that “Home life is the highest and finest product of civilization” (U.S. Children’s Bureau, 1967, p. 4), and urged that children remain home with their parents or be placed in a family setting if they had to be removed. The conference also
called for the establishment of the federal Children’s Bureau, which was founded in 1912 to focus on a range of topics related to the welfare of children and families—including infant mortality, orphanages, juvenile courts, desertion, dangerous occupations, accidents and diseases, and employment (Lindsey, 2004; Shireman, 2015).

The first tangible federal support targeted to impoverished families, the Aid to Dependent Children (ADC or AFDC) program, was part of the 1935 Social Security Act and provided support for needy children in their own homes when one parent, typically the father, was disabled, absent, dead, or in prison (Abramovitz, 1996; Gordon, 1994). The act similarly made support available on the basis of need for people over 65, people who were blind, unemployment compensation, and the first iteration of old age insurance, which came to be known as Social Security.

Title IV-B of the 1935 Social Security Act also included some limited funding for protective services for children who [were] dependent, neglected, or in danger of becoming delinquent. This funding continued through the early part of the century, administered by private agencies within the states. In 1962, through amendments to the Social Security Act, the federal government increased support for child protection activities, and many, though not all, states enacted legislation that created state ‘protective services’ (Thomas, 1972, p 348). The federal Child Abuse Prevention and Treatment Act (CAPTA) of 1974 mandated that doctors, teachers, and social workers report suspected child abuse (Costin, 1985). CAPTA also required states to prevent, identify and treat child abuse and neglect. CAPTA included funding for a wider range of
services than previously (Pecora et al., 1992); however, the level of federal funding fell short of what was necessary for states to respond to the increased number of reports (Costin, 1985).

Other significant child welfare legislation has included the Adoption Assistance and Child Welfare Act of 1980 (Public Law 96-272) and the Family Preservation and Family Support Services Program of 1993 (Public Law 103-66), both of which included funding, albeit limited, for prevention and support services (Child Welfare Information Gateway, 2019). The Family First Prevention Services Act (FFPSA), passed in 2018, allowed states to spend money heretofore designated for foster care on a range of evidence-based services related to mental health, substance abuse treatment, and parenting skills.

Over the years, there have been significant changes to cash assistance programs such as the Omnibus Budget Reconciliation Act of 1981, which restricted eligibility and added work requirements. This was followed by the Family Support Act of 1988, which provided for job training, child care, and assistance with finding employment (Patterson, 1994). The federal government has also made funding available for other basic needs. For example, federal support for housing for people with low incomes began with the Housing Acts of 1937 and of 1949 (Congressional Research Service, 2019) and Medicaid, which was established by Title XIX of the Social Security Amendments of 1965.

These resources have never been sufficient to meet the needs and realities of families. The programs offered by the Children’s Aid Societies relied on moral
persuasion rather than concrete assistance and were critical of the norms and practices of immigrant and other impoverished families. What is more, as described above, the funding available for prevention and family preservation has consistently fallen short of what is needed. Federally funded programs, especially when significant discretion has been left to the states, have a long history of denying public benefits to black and brown families and enabling courts and caseworkers to remove their children (Bell, 1965; Mink & Solinger, 2003).

Child welfare can be considered part of the broader array of publicly funded services for struggling families in the U.S. that provide cash assistance, food, child care, housing, health care, and education. Current programs include Temporary Assistance for Needy Families (TANF); Women Infants and Children (WIC) and the Supplemental Nutrition Assistance Program (SNAP); Employment Related Day Care; Section 9, Section 8, and other public programs related to housing; Medicaid; and Head Start. Most of these programs were designed to support families per se; for example, AFDC was originally conceived as a replacement for the wages of the white male breadwinner that would allow white women to continue in their role as mothers (Abramovitz, 1996; Gordon, 2012). Medicaid is available to pregnant and early post-partum (parenting) women. In addition, benefits are calculated based on the composition of “the family,” for example, the number and ages of the children.

Child welfare is unique among these programs in a variety of ways, including its explicit focus on the quality of parenting. For example, the description of child welfare
services offered by the Congressional Research Services references parents’ ability to provide a “safe and loving home” in which children do not experience “maltreatment.” It is also the case that child welfare services are not means tested; that is, eligibility is not tied to a measure of the family’s income or financial resources. Typically, families become involved in the child welfare system in response to concerns about the care being provided to their children.

**Families Involved with Child Welfare**

The children and families who receive services do not represent a cross-section of the population, however. Many of the families face significant challenges in their daily lives such as illness, disability, unemployment, poverty, and the impact of trauma; as a result, they are likely to encounter difficulties providing adequate care for their children (Budd et al., 2000; Cancian et al., 2013; Phillips et al., 2004). Indeed, the vast majority of these families are multiply disadvantaged (Mersky et al., 2009; Sedlak et al., 2010; Testa & Smith, 2009).

For example, ample research suggests that families experiencing poverty and material hardship are at a heightened risk of child welfare involvement (Berger & Waldfogel, 2011; Bywaters et al., 2016; Pelton, 2015; Putnam-Hornstein & Needell, 2011). Poverty is among the most important predictors of child maltreatment (Bywaters et al, 2022; Conrad-Hiebner & Scanlon, 2015; Dettlaff et al., 2011; McLaughlin, 2017; Pelton, 2015), and this is particularly true for neglect (Brandon et al., 2014; Font & Maguire-Jack, 2020; Hood et al., 2021; Slack et al., 2004).
Other studies have found that unstable or inadequate housing increases a parent’s risk of child welfare involvement (Cowal et al., 2002; Culhane et al., 2003; Dworsky, 2014; Font & Warren, 2013; Fowler et al., 2013). Housing challenges were identified as a risk factor for 28% of child maltreatment victims in 2021 (U.S. Department of Health & Human Services, Children’s Bureau, 2021). Significant child care demands as well as access to affordable child care has also been linked to parents’ challenges with supervision and neglect (Maguire-Jack et al., 2019; Merritt, 2009; Yang et al., 2019).

Single-mother households are disproportionality represented in child protection investigations and in out-of-home care placement (Berger et al., 2009; Trocmé et al., 2005). Research suggests that single parent households, young parents, and large families are at increased risk for maltreatment (Aff et al., 2015; Keenan et al., 2003; Oliver et al., 2006; Stier et al., 1993). A significant body of literature exists regarding the overrepresentation of black and Native American/American Indian children and families as well as families from immigrant communities in the child welfare system (e.g., Cross et al., 2000; Derezotes et al., 2004; Holt, 2001; Roberts, 2009; Whitaker, 2011).

Parents with disabilities are also overrepresented within the child welfare system (Lightfoot & DeZelar, 2016; National Council on Disability, 2012; Singh et al., 2012; Taylor et al., 1991). Compared with parents without disabilities, disabled parents—and parents with intellectual disabilities, in particular—are reported to the child welfare system at higher rates (DeZelar & Lightfoot, 2021); abuse or neglect in
these families is more likely to be substantiated (Lightfoot et al., 2021). Child welfare-involved families face other health issues. For example, mental health challenges have been associated with child maltreatment (Banyard et al., 2003; Chemtob et al., 2013) and child welfare involvement (Park et al., 2006). A history of trauma including childhood abuse is also prevalent among parents with problematic parenting behaviors (e.g., Banyard et al., 2003; Jaffee et al., 2013; Kim, 2009; Libby et al., 2008; Pears & Capaldi, 2001; Savage et al., 2019; Thornberry et al., 2013). For example, in 2019, almost 40% of children placed in foster care in Oregon had parents with a history of abuse (Office of Reporting, Research, Analytics and Implementation, 2020). Substance use disorder is also a common concern for parents who come to the attention of child welfare (Lipari & Van Horn, 2017; Institute of Medicine, 2014; U.S. Department of Health & Human Services, 2021).

Domestic violence is also prevalent (Capacity Building Center for States, 2018). For example, Finkelhor et al. (2009) found that 40% of all child abuse victims reported violence in the home between their parents. Studies have suggested that domestic violence is present in 30% to 60% of child maltreatment cases (Hamby et al., 2011; McGuigan & Pratt, 2001; Taggart, 2011). Research has also found that mental illness, domestic violence, and substance use disorder frequently co-occur in families who experience child welfare involvement (Choi & Ryan, 2007; Kohl et al., 2005; Sedlak et al., 2010; Slack et al., 2007; Taylor et al., 2009).
Families that come to the attention of the child welfare system frequently have few supports; they are likely to be socially isolated from extended family, friends, and neighbors (Fong, 2017; Limber & Hashima, 2002) and to live in communities with weak social ties (Molnar et al., 2016). There is also some evidence that limited access to substance use disorder treatment and mental health services is associated with neglect (Maguire-Jack & Klein, 2015). Maltreatment is also associated with neighborhoods that have high levels of violence, crime, and social disorder (Freisthler & Maguire-Jack, 2015; Freisthler et al., 2007). Multiple studies also point to a relationship between maltreatment and neighborhood poverty (Freisthler et al., 2007; Maguire-Jack & Klein, 2015; Merritt, 2009) as well between unemployment and limited economic and educational opportunities (Ben-Arieh, 2010; Maguire-Jack & Font, 2017; Weissman et al., 2003).

Clearly, families that come into contact with child welfare agencies face a range of challenges related to providing adequate care to their children. Many of these same challenges likely make it difficult for them to navigate the bureaucratic processes such as eligibility criteria and wait lists that stand between them and needed services and other resources. They may also be distrustful of and have a history of difficult interactions with public agencies. In addition, as mentioned above, these families are likely to live in communities and be a part of social networks that are themselves under-resourced.
Failures of the Contemporary Child Welfare System

The institution of child welfare has an opportunity to provide high-quality, substantial, targeted assistance to a large number of families, many of whom are among the most marginalized. Many of the reports made to child abuse hotlines are made by teachers, therapists, coaches, and neighbors who lack the capacity to help the family or children, and who believe that a child welfare agency will connect struggling the family with needed supports (Fong, 2020). However, the system fails far too many of the children and parents it is meant to serve.

Research suggests the preferred outcome for children is to remain at home or, if removed, to return home safely and permanently (Hines et al., 2007). Federal policy prioritizes family reunification, e.g., the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272), the Indian Child Welfare Act of 1978 (25 U.S.C.A. 1901-1951), and the Adoption and Safe Families Act of 1997 (P.L. 1). However, only about half of children placed outside of their homes eventually return to their families of origin (Berrick, 2009). For example, among the 250,100 children who formally exited foster care during fiscal year (FY) 2018, only 55% were reunited with parent(s) or primary caretaker(s), while 35% left care via adoption or legal guardianship (including with kin), 7% aged out of care, and approximately 1% were transferred to the care of another agency (U.S. Department of Health & Human Services, Children’s Bureau, 2019). At the same time, a significant shortage of foster homes exists in many states, and the need for additional
homes is likely to increase because of new restrictions on placing children and youth in residential facilities or other forms of congregate care (Wiltz, 2019).

Relatively high proportions of youth who enter the system go on to spend significant time in out-of-home care. Among the 437,000 children who were in foster care on the last day of FY2018, the median length of stay was just over 13 months, and approximately 50% of the youth were in care for more than a year. In 2020, nearly half of foster children were placed with nonrelative foster families (45%), roughly 35% were placed with relative caregivers, and another 10% lived in a group home or institution (Annie E. Casey Foundation, 2020). Also troubling is the fact that in 2019 there were roughly 100,000 children whose parental rights had been terminated but for whom no adoptive family had been found (U.S. Department of Health & Human Services, Children’s Bureau, 2021). In recent years, increasing numbers of adolescents age out of the child welfare system with no family or adult support for their new status (Getman & Christian, 2011).

The impact on children of growing up in contexts of deprivation and mistreatment are well documented (Case & Paxson, 2002; Dillon et al., 2009; McCrory et al., 2010; Shonkoff, 2012; Wilson et al., 2011). The potential consequences for children of being removed from their families and placed in out-of-home care are increasingly recognized (Briggs-Gowan, 2019; Howard et al., 2011). While there is an ongoing debate about whether foster care is better than leaving children in a home with marginal parenting (Bald et al., 2022; Maclean et al., 2016; Warbuton et al., 2014),
research and accounts from individuals with lived experience suggest that foster care is itself a source of trauma and other types of harm for children and youth (Doyle, 2007). For example, scholarship suggests that removal and the loss of relationships and connection to their community associated with entry into care can be an additional source of trauma (Clement, 2008; Mitchell, 2018; Sankaran et al., 2018; Whiting & Lee III, 2003). Other studies have found that frequent moves between placements and poor treatment and abuse suffered while in substitute care also have lasting negative effects for youth (Dregan & Gulliford, 2012; Lang et al., 2016; Rubin et al. 2007).

Other outcomes for youth who spend time in foster care are also concerning. For example, these youth are more likely to engage in risky behavior related to substance use and sexual behaviors (Braciszewski & Stout, 2012; Winter et al., 2016), and they are at greater risk of problems like mental illness and addiction (Dworsky et al., 2013). They face higher rates of homelessness and have less housing stability than their peers who have not experienced foster care (Dworsky et al., 2013; Wade & Dixon, 2006), and they reside in poorer quality neighborhoods and are more likely to rely on public housing (Berzin et al., 2011). These youth have lower levels of education (Pecora et al., 2006; Villegas et al., 2014), and they are more likely to be unemployed or make less money when they are (Okpych & Courtney, 2014; Stewart et al., 2014). They are also more likely to enter the criminal justice system later in life (Juvenile Law Center, 2018).

Research also suggests that parents involved with child welfare—in particular, those subject to child protection investigations whose children are placed in foster
care—experience the system as neither empowering nor helpful. For example, studies indicate that parents are frequently afraid of the power that caseworkers have (Corby et al., 1996; Dumbrill, 2010), and they feel coerced into compliance for fear that the caseworker will remove their children (Cleaver & Freeman, 1995; Diorio, 1992; Dumbrill, 2006). If a parent disagrees with the caseworker or the direction of services, it is often difficult for the parent to voice their perspective (Bundy-Fazioli et al., 2008). Parents have reported being misunderstood by caseworkers and unable to correct these misunderstandings (Corby et al., 1996; Fisher et al., 1986). They also feel at a disadvantage due to caseworkers’ ability to better understand and manage the process, which further increases their power over the parents (Corby et al., 1996; Dumbrill, 2006). Research suggests that, in the main, child welfare-involved parents do not experience meaningful involvement in the decision making (Dumbrill, 2006; Haight et al., 2002; Kapp & Propp, 2002; Palmer et al., 2006; Schmid & Pollack, 2009).

For many parents, involvement with child protective services is traumatic and stressful (Buckley et al., 2011; Cleaver & Freeman, 1995). Parents whose children are in care experience grief and depression (Diorio, 1992; Haight et al., 2002; Kapp & Propp, 2002), and feelings of hopelessness, fear of, and rage toward the child welfare system are not uncommon (Alpert & Britner, 2005). Parents report conflictual relationships with caseworkers (Baistow & Heatherington, 1998), and they find caseworkers to be unresponsive, unreliable, and uncaring (Altman, 2008; Smith, 2008). Parents also frequently encounter a chaotic and unpredictable system (Cohen, 2000; Smith, 2008). In
addition, parents suffer from stigma, social blame, and marginalization (Sykes, 2011) and often fail to receive needed social support related to the trauma of child removal (Kenny & Barrington, 2018).

Perhaps not surprisingly, the child welfare field fails to meaningfully engage with the large numbers of parents of the children in its care (Alpert, 2005; Ferguson, 2009; Toros et al., 2018). Research suggests that many parents are poorly connected to key services, including court-mandated services (Butler et al., 1994; Jellinek et al., 1992; Kazdin, 2000; Mueller & Pekarik, 2000) substance abuse treatment (Gregoire & Shultz, 2001) and visits with their children (Perkins & Ansay, 1998). Particularly troubling is evidence that parents of color are less likely to use services and supports than white parents (Courtney et al., 1996; Hill, 2006; Libby et al., 2007; Rodenburg, 2004). For example, Dorch et al. (2010) and Osterling et al. (2012) found differences in access to and participation in services such as mental health and substance abuse treatment among parents of color.

The Importance of Casework

While making services and resources available to struggling families has been a child welfare priority as well as a legal requirement for decades (Sankaran et al., 2018), the literature cited above would seem to indicate “clear contradictions between the positive intent of child welfare policy and the negative impacts of its implementation” (Yee et al., 2013, p. 478). My project assumes that caseworkers and casework are key sites for exploring and understanding regarding this fissure. Caseworkers are at “the
core of the child welfare system” (U.S. General Accounting Office, 2003, p. 6). These frontline staff work to restore family functioning and promote child and family well-being (Briar-Lawson, 2019). The child welfare workforce is said to be “central to stability for families and permanency for children” (National Child Welfare Workforce Institute, 2021).

The U.S. General Accounting Office (2003, p. 1) states that a skilled workforce is necessary to provide effective child welfare services that meet federal goals. Caseworkers have a range of responsibilities including providing services, conducting assessments, communicating with a range of other professionals, and evaluating family progress (DePanfilis, 2003, 2018). Caseworkers are key to timely investigations, visits between children and parents, and helping families access needed supports—all of which can impact child and family safety, permanency, and well-being (Cheng, 2010; Cheng & Lo, 2016; National Child Welfare Workforce Institute, 2021; Yatchmenoff, 2005; Zlotnik et al., 2009). Indeed, the research literature suggests that the quality of casework and caseworkers’ characteristics impact a range of child welfare outcomes. For example, parents’ positive emotional responses to their caseworker—in particular, a caseworkers’ inclusive interaction style—were associated with parental service use (Hollinshead et al, 2017). In another study, the quality of the caseworker’s relationship with the family was found to be a significant predictor of successful intervention and treatment (van Zyl et al., 2014). This finding echoed DePanfilis (2000), who found that a caseworker’s ability to develop a collaborative relationship with the family was a key
determinant of the quality of their work. The central nature of the relationship between caseworkers and the families they work with was recognized early on by Ivanoff et al. (1994):

The relationship between the caseworker and client provides the foundation for all interactions and intervention. The more positive the relationship between the caseworker and the client, the more likely the client is to disclose and explore difficult and personal problems, as well as listen to and act on change efforts or advice offered by the caseworker. (p. 19; cited in DePanfilis, 2018)

Caseworkers themselves recognize their unique opportunity to impact the lives of families. Social workers within the child welfare system have made professional and personal commitments to protect children and preserve families and “play a critical role in child welfare systems nationwide” (National Association of Social Workers, 2015). Social workers protect the well-being of children and support families in need by “help(ing) individuals increase their capacities to solve problems and access resources, facilitat(ing) interactions, [and] mak(ing) organizations responsible to people” (National Association of Social workers, 2013, p.11).

The importance of casework is reflected in the calls by many contemporary child welfare scholars advocating changes in service delivery, and specifically, promoting parents’ engagement in their work with child welfare and with related services (Child Welfare Information Gateway, 2021; Corwin, 2012; Falconer, et al., 2012; Farrell, et al., 2012). There is also significant interest in encouraging caseworkers to share power with
parents and families through the implementation of collaborative and strength-based practices (Briar-Lawson et al., 2001; Bundy-Fazioli et al., 2008; Center for the Study of Social Policy, 2002; Child Welfare Information Gateway, n.d.; Crea & Berzin, 2009; Lohrback et al., 2005; Merkel-Holguin, 2004; Morris & Connolly, 2012; Pennell & Anderson, 2005).

In addition, efforts to increase the number of caseworkers with degrees in social work and related fields are ongoing (Zlotnik, 2018). Research suggests that social work is likely the best background for child welfare jobs (Ellett & Leighninger, 2006; Folaron & Hostetter, 2006; Ryan et al., 2006) due to the overlap between social work curricula and child welfare work duties. The federal government recognizes and legitimizes social work as the preferred degree for child welfare workers with financial support through Title IV-E. Currently, more than 40 states are using more than $50 million in federal funds to prepare workers for the challenges of child welfare service delivery through university-agency partnerships (U.S. General Accounting Office, 2003).

However, despite efforts to hire more people with a social work background and a proliferation of practice models and training modules, progress has been slow. Dissatisfaction with child welfare services continues and there are increasingly strident calls to abolish “the family regulation system” (e.g., Albert et al., 2021; Burton & Montauban, 2021; Friedman & Rohr, 2023; Roberts, 2022). In fact, my involvement in the evaluation of an ambitious, family-driven, trauma-informed, culturally competent practice model prompted this study. Despite conscientious staffing decisions and a
quality implementation plan, caseworkers struggled to provide families with the help they needed, parents felt disrespected and confused, and reunification rates remained stubbornly low (Furrer et al., 2019).

**An Institutional Ethnography of Child Protective Services Casework**

My project is concerned with casework as it happens at the front end of the child welfare system, the part of the process commonly referred to as Child Protective Services (CPS). As the statistics above make clear, millions of families every year come into contact with CPS, and as such, it represents a key avenue for helping struggling families in need of assistance. Early contacts between child welfare caseworkers and families comprise the family’s “introduction” to the system; these introductions can engender hope or fear and can significantly influence parents’ ability to partner with helping professionals. In addition, research suggests that when families are in crisis, which is often the case when a report is made to CPS, it can be a particularly opportune time to support parents to make changes (Linley & Joseph, 2004; Tedeschi & Calhoun, 2004).

Different types of research seek to inform efforts to improve child welfare practice. Large numbers of program evaluations are conducted every year with the goal of identifying “what works.” These program evaluations typically assess whether people who participate in a particular practice model or intervention (delivered with fidelity) achieve better outcomes than those otherwise similar people who did not (e.g., Federal Permanency Innovations Initiative). Other studies are designed to investigate the role of
caseworker characteristics, client characteristics, and other individual-level variables in regards to families’ experiences with child welfare and other more distal outcomes (e.g., James Bell Associates, 2021). A more recent line of research has focused on the institutional and organizational context of child welfare practice, asking “whether and how external demands and organizational adaptations affect managers, caseworkers, the frontline organization of services, and clients” (McBeath et al, 2014, p. 88).

This project employs a different approach. In what follows, I use Institutional Ethnography (IE) to explore how it is that casework happens as it does—more specifically, how caseworkers come to act in ways that both caseworkers and families experience as unhelpful, despite caseworkers’ stated commitment to partnership and empowerment. My assumption is that if we understand more about how casework happens, we can more effectively work towards a child welfare system that supports families in caring for their children.

Institutional Ethnography is a method of social inquiry that examines the lived experiences of individuals and uncovers the often unseen and underlying social and organizational structures that affect these experiences. Of particular interest are situations in which the everyday interactions of individuals are organized in ways that conflict with or subjugate their interests (Smith, 1987, 2005). Dorothy Smith, the creator of IE, was motivated by what she regarded as a need to identify systemic issues that shape the lives of individuals in order to pursue progressive change (Smith, 1987).
Indeed, “the achievement of Institutional Ethnography is to offer methods whereby oppression can be explored and understood” (Campbell & McGregor, 2002, p. 52).

Institutional ethnography goes behind the scenes to reveal how policies, discourses, and other institutional processes affect the day-to-day actualities of professionals and the people with whom they work (Campbell & Gregor, 2008; Devault, 2006; Pence, 2001). In the pages that follow, I investigate the ways in which casework activities such as interviews and record reviews are organized by a variety of texts, including court petitions and practice models, that are themselves coordinated by regulatory texts such as Oregon Revised Statutes and federal regulations. In this way, the local “everyday” of CPS casework with families struggling to care for their children is drawn into extra-local relations of ruling that organize that work in accordance with principles and interests that are in large measure antithetical to the development of collaborative and empowering relationships. Chapter 2 includes a fuller discussion of Institutional Ethnography and my approach, including data collection and analysis.

Child Welfare as an “Institution”

Rather than an agency or organization, institution in IE refers to the clusters of organizational processes and the relations of ruling organized around specific functions—such as health care or education—that take place across multiple sites (Devault & McCoy, 2006; McCoy, 2006). My project uses IE to investigate the organizing and orienting of caseworkers by the “multiple strands of coordinated discourse and state and professional apparatus” that constitutes the institution of child welfare (Ridzi,
This understanding of institution points to administrative and professional texts and other discursive resources activated by caseworkers as they go about their day-to-day and that ultimately align caseworkers’ activities with relevancies produced elsewhere (Devault, 2006).

Below, I provide an introduction to the contours and key elements of the institution of child welfare in the U.S. and in Oregon followed by a detailed description of the case process. I illustrate the child welfare “apparatus” by sketching the roles and responsibilities of the primary organizational entities and detailing the process by which a family moves through the components or steps in the process. The actual coordination and organization of casework is explored empirically in subsequent chapters and forms the foundation of my project. The purpose of this section is to make those chapters more intelligible by providing an overview of the institutional context, especially for readers who are less familiar with child welfare in the United States.

In the U.S., child welfare refers to the agencies and organizations (both public and private) designated to receive reports, conduct investigations and assessments, and provide intervention and treatment services to children and families where child maltreatment is reported to have occurred. Child protective services (CPS) is commonly used to refer to the front end of child welfare: responding to reports of abuse, conducting investigations, and undertaking initial protective actions; this work is handled by public agencies including Human Services and at times, law enforcement agencies. In most states supports beyond child protective services—such as intervention
and treatment, foster care, guardianship, and adoption— are managed and provided by a mix of public agencies and private (both not-for-profit and for-profit) organizations.

At the federal level, child welfare programs are administered by the Children’s Bureau within the U.S. Department of Health and Human Services (HHS). Federal child welfare policy has three primary goals: ensuring children’s safety, enabling permanency for children, and promoting the well-being of children and their families (U.S. Congressional Research Services, 2020). The role of the federal government at the state or county level includes the provision of technical support as well as funding. By providing funding, the federal government can compel states to meet a variety of program rules, such as timelines related to judicial hearings. Compliance with these requirements is monitored via federal plan approvals, audits, and reviews.

States have the primary responsibility for child welfare, and this work adheres to state laws and policies as well as to relevant federal requirements and regulations. Programs are often administered within the state human services department or another state-level child and family services agency, although some states have county-administered programs. Typically, states and counties administer (either directly or via contracts with private providers) child abuse hotlines, child protective services, and ongoing casework in support of children and families, along with foster care. They also provide a range of services related to guardianship and adoption, recruitment of and support for foster parents, and a variety of supports for youth in substitute care and for youth transitioning to independent living. Public child welfare agencies also work with
an array of private and public entities, including the courts and social services, health, mental health, education, and law enforcement agencies.

There are multiple paths families can travel when they become involved with the system, and outcomes depend on the interplay between the family, caseworkers, and the courts. A summary of the child welfare case process follows.

Families come to the attention of the child welfare agency through a call to the child abuse hotline; these allegations receive an initial screening. Cases that are screened in proceed to CPS, which assesses whether the child is safe and if maltreatment has occurred. In situations where the family requires assistance beyond what can be provided within the timeframe and resources of CPS, the case must be taken to court. When a family becomes court-involved, initial hearings take place as part of the work of CPS and then continue through the life of the case. These families are also assigned to on-going or permanency caseworkers. Many cases involve some form of substitute care—most often family foster care with relatives, kin, or strangers. Families exit child welfare when the child achieves some form of permanency—typically reunification with a parent or parents, guardianship, adoption, or emancipation—and/or their case is closed. Not all cases travel through all of the steps; many cases exit the system prior to becoming court-involved.

When the child welfare agency determines that the child cannot remain safely at home, caseworkers must work in tandem with the legal system. Parents have broad legal rights to care for their children as they choose, and courts have the responsibility
to ensure that the parents’ and children’s rights are protected. Interference by the state in the relationship between parents and children is only allowed under specific circumstances as outlined in law and authorized in civil proceedings that take place in what is typically known as juvenile dependency or family court. Judges’ responsibilities include making the findings required by statute for each hearing, ensuring that the court’s judgments are legally sufficient, and ensuring that the case proceeds in compliance with statutory timelines (Murphy & Hassen, n.d.). Early on in a child welfare case, for example, the court might decide if emergency custody is warranted, whether to allow a child to be placed in foster care, and whether the circumstances are such that jurisdiction is established and the child is a ward of the court. Parents are entitled to legal representation if they face a possible termination of parental rights, but only some states make counsel available for parents who cannot afford an attorney for other child welfare-related judicial proceedings.

This project explicates the front end of child welfare practice—Child Protective Services—and brings into particular focus its intersection with the dependency legal process. The project is also concerned specifically with casework conducted with families who have been accused of child neglect, as they make up the majority of cases both in terms of those reported to authorities as well as those that become involved with the dependency court system. Neglect is far and away the most common type of maltreatment. In 2019, 74.9 percent of victims were neglected, 17.5 percent experienced physical abuse, and 9.3 percent were sexually abused (U.S. Department of
Health & Human Services, 2021). In addition, while rates of physical and sexual abuse have declined over the past two decades, rates of neglect have fluctuated and remained the highest among the types of maltreatment. From 1990 to 2017, rates of substantiated physical abuse declined by 40 percent and sexual abuse rates by 62 percent; by contrast, rates of substantiated neglect fell only by eight percent over this period (Finkelhor, Saito, & Jones, 2018).

The federal Child Abuse Prevention and Treatment Act (CAPTA), (P.L. 100–294) defines child abuse and neglect as, at a minimum, any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse, or exploitation; or an act or failure to act, which presents an imminent risk of serious harm.

Most states recognize four major types of maltreatment: neglect, physical abuse, psychological maltreatment, and sexual abuse. States have their own definitions of child abuse and neglect based on standards set by federal law. Oregon’s definitions are as follows (ORS 419B.005):

(1) Neglect. Negligent treatment or maltreatment of a child, including but not limited to the failure to provide adequate food, clothing, shelter, or medical care that is likely to endanger the health or welfare of the child.

(2) Physical Abuse. Any assault, as defined in ORS chapter 163, of a child and any physical injury to a child which has been caused by other than accidental means,
including any injury which appears to be at variance with the explanation given of the injury.

Below is the expanded definition of neglect as it appears in Oregon’s *Child Welfare Procedure Manual*, the official repository of policy and practice guidance:

Neglect is the negligent treatment of a child, by the parent/caregiver, including but not limited to, the failure to provide adequate food, clothing, shelter, supervision, protection, nurturing or medical care that is likely to endanger the health or welfare of the child. Neglect can occur in a single circumstance, or over a period of time (circumstantial vs. chronic neglect). Circumstantial neglect can be an action or a passive inaction; an act or omission. Chronic neglect is a persistent pattern of family functioning in which the parent/caregiver does not sustain or meet the basic needs of a child, resulting in an accumulation of harm that can have long-term negative effects on the child.

This definition is followed by a list that includes (and explains) the following: Inadequate Food, Inadequate Clothing, Inadequate Shelter, Inadequate Supervision, Inadequate Protection, Inadequate Nurturing, and Inadequate Medical Care as well as “Unlawful Exposure to a Controlled Substance” (Oregon Department of Human Services, 2020, pp. 88-90)

Oregon uses a Safety Intervention Model (referred to colloquially as the safety model), and caseworkers receive extensive training on its various components as part of both their initial core training and various refreshers as well as during supervision. In
addition to the definitions of maltreatment described above, core pieces of the Safety Intervention Model are the safety threat levels and the comprehensive assessment that includes the domains of family functioning. Caseworkers assess child safety with reference to two levels of threats to safety, each of which require different action by the caseworker. The more serious is the Present Danger Safety Threat, defined in the *Child Welfare Procedure Manual* as follows:

An immediate, significant, and clearly observable family behavior, condition, or circumstance occurring in the present tense, already endangering or threatening to endanger a child or, when applicable, a young adult. The family behavior, condition, or circumstance is happening now, and it is currently in the process of actively placing a child or, when applicable, a young adult in peril. This threat is actively occurring or “in the process” of occurring. (Oregon Department of Human Services, 2020, p. 83).

The second category is the Impending Danger Safety Threat:

A family behavior, condition, or circumstance that meets all five safety threshold criteria of Observable, Vulnerable, Imminent, Out of Control, and Severe Harm. When it is occurring, the safety threshold is the point at which family functioning and associated caregiver performance becomes perilous enough to be perceived as a threat or produce a threat to child safety (Oregon Department of Human Services, 2020, p. 79).
The difference between the two is whether the “behavior, condition or circumstance” is currently endangering the safety of the child or instead is imminent but not yet endangering the child. The categories dictate the type of actions child welfare workers take as well as the speed at which they act. For example, Present Danger Safety Threats require child welfare agency employees to act to stop the activity or condition that is causing harm or otherwise protect the child (for example, by removing them from the home) and to do so quickly. In most instances, caseworkers will make an effort to see the child within 24 hours of receiving the assignment.

Policy also includes a list of specific potential safety threats.

I. The family situation is such that no adult in the home is routinely performing parenting duties and responsibilities that ensure a child’s safety.

II. One or both parents’ or caregivers’ behavior is violent, and/or they are acting (behaving) dangerously.

III. One or both parents’ or caregivers’ behavior is impulsive, or they will not/cannot control their behavior.

IV. Parents’ or caregivers’ perceptions of a child are extremely negative.

V. A family situation or behavior is such that the family does not have or use resources necessary to ensure a child’s safety.

VI. One or both parents’ or caregivers’ attitudes, emotions, and behavior are such that they are threatening to severely harm a child or are fearful they will abuse or neglect the child and/or request placement.
VII. One or both parents’ or caregivers’ attitudes or emotions are such that they intend(ed) to seriously hurt the child.

VIII. A situation, attitudes, and/or behavior is such that one or both parents or caregivers lack parenting knowledge, skills, and motivation necessary to ensure a child’s safety.

IX. Parents’ or caregivers’ attitudes and behavior result in overtly rejecting CPS intervention, refusing access to a child, and/or there is some indication caregivers will flee.

X. Parents’ or caregivers’ attitude, behavior or perception result in the refusal and/or failure to meet a child’s exceptional needs that affect their safety.

XI. The family situation is such that living arrangements seriously endanger the child’s physical health.

XII. The situation is such that a child has serious physical injuries or serious physical symptoms from abuse or neglect.

XIII. The situation is such that a child shows serious emotional symptoms and/or lacks behavioral control that result in provoking dangerous reactions in caregivers or caregivers.

XIV. The situation is such that a child is fearful of the home situation or people within the home.

XV. Because of perception, attitude, or emotion, parents or caregivers cannot, will not, or do not explain a child’s injuries or threatening family conditions.
XVI. One or both parents or caregivers has a child out of his/her care due to child abuse or neglect or has lost a child due to termination of parental rights. (Oregon Department of Human Services, 2020, p. 216-226)

In addition to assessing for immediate safety threats, caseworkers also conduct what is referred to as a comprehensive assessment in order to determine the existence of impending safety threats as well as whether child maltreatment has occurred. The comprehensive assessment encompasses a broad range of topics about the family, parents in particular. The six areas (referred to as domains) include extent of maltreatment, circumstances surrounding the maltreatment, child functioning, adult functioning, parenting practices, and disciplinary practices. These are explained in the Child Welfare Procedure Manual (Oregon Department of Human Services, 2020, p. 238-240) as follows:

- **Domain 1: Abuse**—What is the extent of the alleged abuse?
  
  Describe the frequency/severity/duration of abuse and/or familial concerns that impact child safety. This includes type of abuse consistent with ORS definitions, details to establish when and how the abuse/conditions of concern occurred, and the overall condition of the child at the time or times.

- **Domain 2: Circumstances**—What surrounding circumstances accompany the alleged abuse?
  
  Describe the overall family conditions that raise [sic] to the level of safety concerns, pervasiveness, how long they have occurred, what factors contribute,
and the level of self-awareness of the caregivers and what they may contribute to the concerns.

- **Domain 3: Child Functioning:** How does the child function on a daily basis?
  Information regarding child functioning is crucial for determining the vulnerability of a child. Knowing how a child behaves, feels, and thinks on a daily basis will help to inform if a child may be unsafe, regardless of their age.

- **Domain 4: Adult General Functioning:** How does the adult function in daily life?
  Information gathered for this domain is sufficient when it can describe, to the extent possible, what the daily life of each caregiver looks like and their ability to function and to carry out the tasks of daily living. Any behaviors and/or barriers that impair ability to function should also be described. Adult functioning information can reveal how a person is acting concurrent with the call (such as behaving bizarrely, or intoxicated) that could reveal present danger, and/or if a caregiver has chronic problems that are severe (such as serious depression) that could reveal impending danger.

- **Domain 5: Parenting General:** What are the general parenting practices?
  Describe the overall parenting practices, underlying beliefs and nature/quality of child/caregiver interactions and of the caregiving provided.

- **Domain 6: Parenting Discipline:** What are the disciplinary practices?
Describe the typical approaches toward behavior management, whether or not they are effective and developmentally appropriate, and in alignment with age appropriate expectations.

The assessment process is also an opportunity for caseworkers to build rapport with family members and to engage them in developing and implementing safety interventions, ultimately increasing child safety. A passage in the *Child Welfare Procedure Manual* explains, “Child safety is what we do; family engagement is how we do it” (Oregon Department of Human Services, 2020, p. 306). Engaging the family is a “professional helping process” that develops over time and rests on six core principles (Oregon Department of Human Services, 2020, p. 306):

I. Everyone desires respect.

II. Everyone needs to be heard and understood.

III. Everyone has strengths.

IV. Judgments can wait.

V. Partners share power.

VI. Partnership is a process.

The *Child Welfare Procedure Manual* also lists practice skills related to engagement: engaging, partnering, planning, setting goals, advocating, communicating, and demonstrating cultural diversity and competence (Oregon Department of Human Services, 2020, pp. 308-309).
When a caseworker determines that the parent(s) is unable to care for the child and there is a need for child placement and/or longer-term supports beyond what is available within the resources and timelines of CPS, the caseworker must take the case to the juvenile dependency court. (In most locales, CPS assessments are supposed to be completed within 60 days.) The dependency court process involves a series of hearings (as well as the potential for settlement conferences and trials), and CPS caseworkers have significant responsibilities related to this process: compiling evidence, generating reports and other documentation, and serving as the agency’s spokesperson in court. Training related to these activities is provided to caseworkers as part core training and as a separate, week-long offering titled, *How to prepare for success in court*.

Different hearings are held for each of the different types of decisions before the court. For example, the court holds a *shelter hearing* on weekdays within 24 judicial hours when a child has been removed from their parent’s care. At this hearing, the court decides if the child needs to be placed away from their parents temporarily to ensure safety until a disposition is made. A subsequent hearing, referred to as the *jurisdictional* or dependency hearing, is held to determine if the legal standard for dependency jurisdiction has been met (ORS 419B.100). There are two parts to this determination. The first asks whether the contested allegations have been proved by “a preponderance of competent evidence” in a non-ICWA (Indian Child Welfare Act) case, and by “clear and convincing evidence” in an ICWA case (ORS 419B.100). Second, the allegations must represent a current threat of serious loss or injury to the child; there has to be a nexus
between the allegedly risk-causing conduct and the harm to the child; and the risk has to be present at the time of the hearing (ORS 419B.100(1)(c)). Parents can choose to go to trial rather than participate in a jurisdictional hearing. What happens most of the time, however, is that parents avoid a trial and instead plead to at least one of the allegations against them as part of a settlement conference.

If a child is found to have been abused or neglected at a trial, or if the parent has pled as part of a settlement conference, there is a dispositional hearing where the court makes decisions about where the child will live, who will have legal custody, what contact will occur between the parent and child, and what services are needed to reduce the risk and to address the effects of maltreatment. Parents can be ordered to participate in services “to correct the circumstances that resulted in wardship” (Dept. of Human Services v. S.P., 249 Or App 76, 85; 2012).

Additional hearings are held if the court determines that the family needs ongoing supports from the agency. These are known as review hearings, and they are held every six months to ensure that progress is being made on the case plan. At each hearing, the court reviews the efforts of the parents to remedy problems and determines whether the agency has made reasonable efforts to assist the family. Permanency hearings are held within 12 months of a child's placement in out-of-home care; the purpose of these hearings is to identify a plan for the child's permanent placement upon exiting from out-of-home care. Finally, if a court determines that a child
cannot be safely reunited with the parent, a termination of parental rights (TPR) hearing may be held to free the child for adoption.

Collectively, these were key elements of Child Protective Services in Oregon when this study took place.

**Organization of the Dissertation**

Chapter Two presents a more in-depth discussion of Institutional Ethnography and my process of data collection. The next three chapters explore and explicate the coordination and organization of CPS casework. Chapter Three focuses on the start of a case and information gathering. Chapter Four covers documentation practices related to the electronic case record and the reports and materials submitted to the court. Chapter Five is concerned with caseworkers’ participation in court hearings. In Chapter Six, I discuss the analysis and the implications for the field of child welfare. Chapter Seven outlines the limitations of the study and potential next steps.
Overview of Institutional Ethnography

Dorothy Smith began developing what has come to be called institutional ethnography in the 1960s as a Marxist, feminist sociology. Initially referred to as sociology for women, Smith’s ideas sought to counter the male-centered character of sociology at the time, which relied on theories or conceptualizations that “command interpretive allegiance...that deploy the political effect of theory to master other voices” (Smith, 2006, p. 2). In contrast, Smith’s alternative sociology is grounded in people’s lived experience and seeks to explicate “society as it embeds, masters, organizes, shapes and determines those actualities” (p. 3). In short, institutional ethnography regards people as subjects rather than objects.

Most approaches to the sociology of knowledge seek to explain experience in terms of theory or abstractions, writing the social from a ruler’s perspective (Smith, 1987). For example, Berger and Luckmann (1966) theorized how subjective meanings become “objective facticities,” but the problematic they sought to explain was ultimately theoretical and could not be answered empirically (p.18). Smith (1987) called for an alternative social science that seeks to explain how lived experience—the actual everyday—happens the way it does for particular people. Smith’s conceptualization is an empirical problematic that produces knowledge which represents the social as it actually happens. But while the beginning point of institutional ethnography is anchored in people’s everyday lives, the aim is to trace how their local activities are managed and
ultimately subordinated to broader ideological constructions of reality (Campbell & Gregor, 2002). It is in making visible the social relations of knowledge that institutional ethnography can contribute to progressive social change (Smith, 1987).

Institutional ethnography grows out of Smith’s social ontology (1987, 2005, 2006). Human activity takes place in the presence of, and in interaction with, other humans. It is therefore socially organized. In Smith’s terms, the social is the ongoing coordination of people’s activities (Smith, 1987). Although knowledge is subjective, the social is shared; humans’ experience of social reality references “a world worked on and shared in common” (Smith, 1987, p. 77). In the course of daily life, people rely on (share) taken-for-granted, ordinary, and often mundane practices by which they make sense of and generate accounts of what happens (Smith, 2004, 2005). Smith’s alternative sociology is also a materialist understanding of social life. That is, she believed that how we conceive of the world arises from how we live in the world. Knowing arises in vivo; it is thus practical and situated (de Montigny, 2013).

Social relations are the actual activities through which people’s lives are socially organized. Social relations “activate the social world of things happening among people” (Rankin, 2017a, p. 3). At the same time, social relations are constituted by the activities and interactions of people; in other words, social relations are not done to people, nor do people only do them (Campbell & Gregor, 2002). Social relations that organize activity from afar are called ruling relations. They coordinate how work must proceed
and what people know about what’s happening across space and time and across multiple local settings (Rankin, 2017a).

Importantly, ruling relations represent interests that exist beyond the local setting. For example, people can participate in social relations when they act in accordance with professional ethics, practice models, or other organizational rules or norms (Campbell & Gregor, 2002). When a social worker interviews a parent as part of a CPS assessment, the worker consults a practice model that was generated somewhere else, by someone other than the worker or the parent. Competent and knowledgeable actions by professionals are therefore instances of ruling relations in that these activities are coordinated by various institutional practices of governance whose sources are located elsewhere.

Social relations exist across and connect multiple sites of professional and administrative activity. For example, caseworkers collect information relevant to a cadre of ancillary service providers such as addiction treatment professionals who work with parents and families. They also complete reports and other documentation including petitions and Declaration(s) of Protective Custody that enable the court system to enforce statutory obligations related to child abuse and neglect and to protect the due process rights of parents. Treatment providers generate and submit reports in accordance with judicial standards and court calendars. Similarly, the work of school personnel and various health professionals are linked to CPS via mandatory reporting requirements. In this way, a ruling apparatus composed of practice models, federal
laws, state statutes, information management systems, and professional norms and conventions comes to shape the actions of individual caseworkers as relations of ruling (Brown, 2006).

As mentioned, Dorothy Smith (2005) was interested in how things are put together for particular people, how it is that their everyday practices come to happen as they do. Accordingly, institutional ethnographies begin with people. For example, Diamond’s (2009) institutional ethnography started from the experiences of people who worked as nursing assistants in nursing homes, while de Montigny (1995) began from his experience conducting a Protective Services home visit. In this way, the IE researcher seeks to explicate the experiences of a particular group of people who experience a similar organization of their knowledgeable practices (Rankin, 2017a). These standpoints serve as the starting point for the investigation. Smith (2006) referred to these individuals as small heroes; institutional ethnography is grounded in what these people know about what goes on, from their particular standpoint within the institutional order. The experiences of these individuals are not the primary object of interest, however. They are an entry point for an analysis of the social relations that organize the experiences of differently situated individuals. Always, the focus is on how experiences come to happen in the way that they do.

Reflecting IE’s materialist basis, standpoint informants provide an empirical account of how things that are happening, happen (Rankin, 2017a). Their descriptions of their day-to-day experience form the basis of our understanding of how both formal and
informal activities are organized and coordinated at the local level. These accounts ground the research in “material, tangible, tacit evidence” of ruling relations (DeVault, 2006, p. 2).

As mentioned above, ruling relations represent interests that exist translocally; as such, they are often at odds with the interests and needs of the (local) small heroes. The underlying tensions or disjunctures that exist between people’s everyday experience and institutional processes form the research problematic. A problematic is something puzzling in the actualities being experienced, when the experiential knowledge of local participants doesn’t fit or seems in conflict with the understanding/conceptualization available within official institutional texts or discourse (Campbell & Gregor, 2002). This puzzle in the social world centers the analytic work in institutional ethnography (Rankin, 2017b).

Standpoint informants provide an empirical account of their everyday actualities, and research attends to “what happens and the tensions and contradictions that arise there for those people” (Rankin, 2017a, p. 2, italics in the original). Individuals involved in these situations may not describe them in this way; problematics are often possible questions that have not been posed or puzzles that do not exist in the form of puzzles; rather, they “are ‘latent’ in the actualities of the experienced world” (Smith, 1987, p. 91). These contradictions or tensions often surface as common experiences of powerlessness that occur without an obvious use of force and are therefore assumed to be “just the way things are.” An example might be an intake process whereby a family’s
circumstances are transformed into institutionally actionable categories that reflect the larger organizational context within which the services operate. These categories may relate only loosely to what the family itself thinks would be helpful.

Ultimately, IE seeks to apprehend how it is that the tensions evident in the day-to-day come about. As such, it requires a dual focus: thinking about experiences as locals do and understanding how experience is organized by translocal ruling relations (DeVault and McCoy, 2006). IE begins with actual actions being carried out by real people in real time that can be observed, but ruling relations occur across settings and often go beyond what can be observed locally. As a result, two sites are of interest: the everyday and the extra-local (Campbell and Gregor, 2002). Research proceeds inductively from particular experiences in the everyday to an analysis of the social relations that organize the local but are constituted externally.

The task for the researcher is to find the links connecting the local and the extra-local that constitute the relations of ruling. Institutional ethnography’s conception of work, along with a focus on texts are central to this process. Inquiry in IE is located in “the actualities of what people do on a day-to-day basis” (Smith, 1987, p. 166); accordingly, my project focuses on the work of CPS caseworkers. Work in institutional ethnography is broadly conceptualized as “what people do that requires some effort, that they mean to do, and that involves some acquired competence” (Smith, 1987, p. 165). Two features of this are important to keep in mind. First, this conceptualization signals the inclusion of less visible types of labor such as emotional, cognitive, and
communicative work-- as well as the activities that are more mundane and unlikely to appear on a formal job description. Second, understanding the activity that makes up the day-to-day as work guides the analyst’s attention to the activities of participants as well as the knowledge that informs their actions. It is also important to note the distinction between an analysis grounded in this notion of work and an investigation of, for example, casework that takes as a starting point the categories and concepts that populate practice models or the discourse(s) of child welfare policy and research. As a starting point for my project, casework is empirically empty (Mykhalovskiy & McCoy, 2002). My task is to document and describe casework as it is practiced and experienced by the caseworkers and parents, children, judges, and attorneys involved in this study, focusing on what actually happens rather than on those practices recognized as relevant to policy makers, clinicians, or social scientists. This orientation allows me to explore the institutional relations that shape the activities of caseworkers-- in other words, how their work takes shape within the practices and discourses of the broader (and trans-local) institution of child welfare (Mykhalovskiy & McCoy, 2002).

The emphasis on how people come to do the work they do highlights the institutional processes that connect local activities to the work of others located elsewhere and at different times. While local practitioners are assumed to be competent and knowledgeable about the organization of the local settings in which they are employed, a primary task for the researcher is to trace the connections between what is known locally and the organizing processes that are taking place there and
elsewhere. Texts can be especially useful to this endeavor. Smith (1999) argued that technologies of social control are increasingly and pervasively textual and discursive. For example, various technologies of intervention such as examination, assessments, surveys, systems for training, professional specializations, and their attendant vocabularies play a significant role in constructing how clients are known within institutions (Miller & Rose, 1990).

Smith (2005, 2006) argued that texts are principle instruments of ruling. Texts of all kinds are central to most institutional processes and textually mediated discourse is the norm in the contemporary western world. In their capacity to coordinate social action, texts connect the local to the trans-local. Manuals, forms, and computer fields are replicated and circulated, which allows them to organize and coordinate activity across multiple sites synchronously and asynchronously. They are an extremely effective means of standardizing and coordinating activities happening in multiple and disparate sites (Smith 2005; Smith, 1987). As such, they are central to our ability to explicate the social relations that organize life beyond the local setting (Smith & Turner, 2014).

Institutional processes of standardization “work up” the actuality of local settings as textual representations that articulate to given institutional courses of action. Boss texts organize the production of textual reality so that it “fits” within the particular institutional frame (Smith & Griffith, 2022). The use of particular words, language, and texts builds organizational versions of what people say, do, or know; they serve as the “textual architecture” of routine organizational action (Campbell & Gregor,
Importantly, texts operate as instruments of ruling when “actualities are selectively attended to” in the production of these representations and as a result, “local particularities... disappear” (Smith & Griffith, 2022, p. 93-94). This view of words and texts shifts the focus away from individuals and towards the social organization of power.

The focus on texts facilitates the explication of the materialized social relations that coordinate the day-to-day (Rankin, 1996b). In IE, it can be useful to think about texts as mediators of sequences of action. Texts are activated by local actors; therefore, texts are analyzed in interaction with people as people go about their actual work. This contrasts with textual analysis outside of or separate from that work. Of interest in IE is the way texts enter into and play their part in organizing sequences of action and coordinating these actions with happenings elsewhere and at different times (Smith & Turner, 2014). Turner (2019) developed a mapping process that involves identifying actual instances of texts, talk, and action and their connections from one setting to the next. The process involves a series of questions: “What is the action getting done? What are the key texts used in that work? Who produces the texts? How?” These help to identify the textual resources that serve to organize the work locally.

Mapping can also happen hierarchically when local and extra-local texts and discourses are linked and nested. The most famous of these maps is Smith’s (2006) little hero diagram. In this diagram, Smith’s standpoint informant, a mother embedded in the work organization of mothering and teaching, is portrayed as looking up into a hierarchy
of texts and discourses--including single mother discourse, the political and bureaucratic organization of education, and the state that organizes the work of mothering and teaching. These relations of ruling are often made visible at the intersection of local sequences of action with higher-order professional, administrative, and legal processes.

In my project, I followed the clues that exist in local texts, such as the Screening Report sent from the Hotline and the reports submitted by caseworkers to the court, to texts and discourses that exist extralocally, such as the Oregon Revised Statutes or federal regulations as illustrated by Figure 1. In this way, the textually mediated discourse and some of the higher-level institutional relations that organize the day-to-day were revealed.
Turner’s (2006) mapping is an example of an analytic tool or technique. Analytic work in IE is focused on “empirical discovery, description, and explication” of the ways the everyday experiences of the people whose standpoint is being taken by the researcher are organized by relations of ruling (Rankin, 2017b, p. 2). As opposed to the interpretive coding used in traditional ethnographic and other qualitative methods, interviews and observations are read for clues that identify institutional paths. Campbell and Gregor (2002) recommend thinking about the data is terms of, “What does it tell me about how this setting or event happens as it does?” (p. 85). Interviews hold clues about where to look to understand how local activity is organized, such as references to
specific discourses or texts, or descriptions of work-text-work sequences of action.

Instances of discourse or the activation of texts can also surface in observations; these might be taken for granted by the standpoint informants and not be mentioned during interviews.

Explication requires that analysis proceed beyond the local setting in order to identify translocal ruling practices. This often requires additional interviews or observations, as this second stage of data collection follows the traces of social relations made visible in initial interviews and observations (focused on the local setting) to organizational and professional sites located elsewhere. The intent is to build an empirical account of how these different settings are linked and coordinated so as to explicate the social organization of the problematic, “to investigate those processes in order to describe analytically how they operate as the grounds of the experience” (DeVault and McCoy, 2001, pp. 755).

An IE strives to “produce accurate and faithful representations of how things actually work; it must be truthful” (Smith, 2005, p. 42). Rigor in IE requires the generation of a “warrantable argument” (Rankin, 2017a, p.3) that reflects and remains true to the descriptions of the lived experience provided by the standpoint informants. In addition, the generalizability of the knowledge produced by an IE is not based on “a claim that local settings are similar, but from the capacity of the research to disclose features of ruling that operate across many settings” (DeVault and McCoy, 2006, p. 18).
Overview of My Approach

The goal of my project is to inform the development of a child welfare system wherein caseworkers support and empower struggling families to provide adequate care to their children. At present, only about half of the families whose children enter foster care are reunited; caseworkers and families alike express concern about caseworkers’ ability to work productively with parents. Accordingly, the purpose of my study is to explicate the ruling relations that organize casework in ways that are inconsistent with the goal of strengthening and preserving families.

My project takes as its standpoint the experience of caseworkers doing CPS work with families accused of neglecting their children; these caseworkers work within a public child welfare agency in Oregon. CPS workers, as they are often called, operate at the very beginning or front end of the child welfare process; they are often the first representative from the child welfare system, broadly conceived, to have contact with the families referred by the state’s child abuse hotline. Given their position as first responders and given the work they do to document the family situation, caseworkers play a crucial role in shaping families,’ and especially parents,’ experiences-- including whether or not they are reunited with their children. This critical and early role in families’ experience with child welfare is why I chose to focus on child protective services as opposed to, for example, on-going or permanency caseworkers who work with families at later stages in the child welfare process.
The material, tangible actuality of CPS casework grounds this project. In this dissertation, I examined what caseworkers say and do, while concurrently looking for clues that connect local instances of professional knowledge and practices to organizational processes and interests beyond the local setting. I set out to uncover the social organization of the caseworker experience— and to analyze tensions caseworkers experience in their day-to-day.

The tension experienced by CPS caseworkers, specifically, the degree to which they deem their efforts at odds with their professional and personal commitments, served as the project’s problematic and oriented the analytic work. Interviews with caseworkers and supervisors were peppered with mentions of friction, conflicts, and contradictions between what families wanted and needed and what caseworkers wanted for them. These instances of the everyday served to focus the analytic work amidst the breadth of institutional dynamics; this tension then became the puzzle I unraveled using the data I collected.

**Data Collection and Analysis**

Data collection in IE takes a somewhat different form than in many other qualitative approaches in that analytic work happens simultaneously, and the people and documents that serve as sources of information emerge. DeVault and McCoy (2002) describe the many ways intuitional ethnographic data collection and analysis may take place:
There is no “one way” to conduct an IE investigation, rather there is an analytic project that can be realized in diverse ways. IE investigations are rarely planned out fully in advance, identifying research sites, informants, texts to analyze, or even questions to pursue with informants. Instead, the process of inquiry is rather like grabbing a ball of string, finding a thread, and then pulling it out; that is why it is difficult to specify in advance exactly what the research will consist of. The researcher knows what she wants to explain, but only step by step does she know who she wants to interview, or what texts and discourses she needs to examine (p. 755).

While the process is rarely spelled out in detail prior to the start of the project, it is possible to speak about two levels of data collection within IE. The first level includes people’s everyday experiences as they play out in the local and particular settings that are the focus of the research activities. The second involves going beyond what is explicitly known by the people in the local setting by following clues and asking questions in order to identify the texts that accomplish the extra-local coordination of everyday practice. The goal of level one data collection is to document what actually occurred by preserving participants’ actual experiences and remaining close to the ground. A variety of methods can be used to access this information, including interviews, observations, and reviews of documents used by participants in their day-to-day work.
Based on my experience in earlier research efforts, I was familiar with the broad outlines of the assessment process as well as the steps and timeline associated with relevant court hearings. I had a sense of what caseworkers encountered in their day-to-day. I had accompanied CPS workers on a handful of home visits and conducted at least 20 interviews and focus groups, and I had numerous informal conversations about CPS work over the years. However, at the start of this project, I didn’t know enough about the day-to-day of CPS, and I knew little about caseworkers’ own reflections of their work. To that end, I undertook interviews and observations with caseworkers and supervisors, and I participated in a number of caseworker core trainings.

**Court Observations**

Because it was easily accessible, I started by observing the court. Dependency court proceedings are open to the public in my state, so before the pandemic, I attended both preliminary hearings and review hearings (three of each) in person, over two months. As a member of the public, I simply went to the court house when the hearing was taking place and sat in the back. On a couple of occasions, I was asked by the judge to identify myself, and I said I was a university researcher. Post-COVID, hearings took place remotely via conference call. I contacted the county court administrator, who provided me with the call-in numbers as well as the dates and times hearings were scheduled. I called in at the appointed time; if I was asked to identify myself I did so, but this happened only during about a quarter of the calls. I listened in on 18 preliminary hearings, reasonable efforts hearings, jurisdictional/dispositional
hearings, and review hearings over the course of seven months. Some of the hearings were one-offs; in other words, I had had no prior exposure to the case before I observed the hearing, and I did not attend any subsequent hearings. For others, I was able to observe a shelter or other sort of hearing and then at least one subsequent hearing. I followed one case through the shelter hearing and two pre-trial conferences, including a jurisdictional-dispositional hearing. For another, I heard the prelim as well as three pre-trial conferences and the jurisdictional-dispositional hearing. I took copious field notes during hearings—typing as fast as I could, noting what was said—verbatim when possible—and who had spoken. I also made notes about the types of documents or records referred to during the hearings. I requested and received permission for data collection including interviews and observations from the Institutional Review Board at Portland State University.

**Caseworker Court Training**

I was concerned that my lack of familiarity with the dependency court process would hinder my ability to communicate with and ask questions of the caseworkers. I also wanted to understand more about what was happening in the court hearings I was observing, so I took a week-long, 35-hour training, *How to prepare for success in court*. This training is required for most caseworkers by the state child welfare agency. As it happened, participating in the class also gave me access to comments and stories shared by the caseworkers and trainers about this part of the CPS process. I took notes
during these interludes, and they became part of my data. For the training, I completed most of the readings and assignments and participated in breakout discussions.

I also completed six on-line courses (typically 60 minutes) covering various aspects of CPS practice, including an overview of the state’s practice or safety model and caseworker training on the state’s electronic case record. The materials that accompanied these trainings became data for my study.

**Interviews**

I recruited caseworkers and supervisors to participate in interviews by first reaching out to two child welfare staff with whom I had worked on previous projects and with whom I had remained in contact. They worked in different counties within the large metropolitan area that is the site of the project and had access to colleagues in different local branch offices. I explained the project and asked them to help recruit their CPS colleagues to take part in an interview. I provided them with a document explaining the project along with an informed consent form that they could share (see Appendix A). Eight staff members expressed an interest in the study, and six participated in interviews. I also recruited permanency caseworkers in order to sharpen my understanding of how CPS work is carried over into the later stages of the child welfare process. These caseworkers were identified by a colleague with contacts in permanency units. Recruitment occurred as described above, and consent was obtained by reviewing the informed consent prior to the start of the interview.
Intervie\textcapslock{}ws were conducted with four CPS caseworkers (two of whom I spoke with twice) and two CPS supervisors; they worked at four of the seven child welfare branches in the metropolitan area. Interviews were conducted via Zoom at a time chosen by the participants, mostly during standard work hours, and lasted between 60 and 90 minutes. In all but one case, participants were at their home office during the interview (as was the norm during COVID). One caseworker sat in her car to do the interview because she felt that afforded her greater privacy. Interviews with four permanency caseworkers took place in person at the child welfare branch office where they worked and lasted between 60 and 90 minutes. All of the interviews were recorded with permission, and transcripts were produced to ensure accurate data collection and to allow me to focus on the conversation as it unfolded.

Interviews were very loosely structured so as to allow participants the leeway to talk about the aspects of the work that seemed pertinent to them. I explained to workers that I wanted to know what it was like to be a caseworker and asked them to walk me through a typical and a not-so-typical day. This provided a spring board for them to talk about different aspects of their work. I asked an array of follow-up questions mostly to fill in details, clarify my understanding, and connect different parts of the work. Prompts from the interview guide were introduced when they became appropriate in the course of the conversation (see Appendix C). The interviews were spread out over eight months, and I was able to talk with two of the CPS caseworkers a second time, which allowed me to follow up on issues or questions that
arose as I sat in on court hearings and worked my way through my notes and observations. I also sent a few follow-up questions via email.

I also conducted a series of four interviews with a peer parent mentor whom I had come to know while working on another project. She had been involved with child welfare as a parent approximately six years prior and had been working as a mentor to child welfare involved for approximately three years. As such, she had had extensive exposure to the front end of the CPS process. Interviews were semi-structured and over the course of the four conversations, we discussed the entirety of CPS (see Appendix D). During our interviews, she related her own experience and the experiences of many parents she had accompanied—without providing identifying information. These interviews took place over Zoom and lasted between 60 and 90 minutes. I requested informed consent prior to the start of the interview (see Appendix B). The interviews were recorded with permission, and transcripts were produced to ensure accurate data collection and to allow me to focus on the conversation as it unfolded.

Document Review

In addition to interviews, court observations, trainings, and courses, I also reviewed examples of reports and other written materials generated by caseworkers for court-involved cases. I began the project with significant exposure to the electronic case record information system used by the child welfare agency, and I also had at least a passing familiarity with the primary court documents such as petitions and assessment
summaries. For this project, while I was unable to access documents attached to actual cases (due to IRB concerns about confidentiality), I used example case files, petitions, and Declarations of Protective Custody generated for use in training and supervision. I was assured by the developers as well as other child welfare staff that these were substantially representative of what was produced by caseworkers in the field. The examples also looked very much like what I had read during earlier research projects.

As is true in many IE projects, much data collection and related information gathering occurred in response to questions that arose as I reviewed notes from early interviews or observations or initial accounts. For example, two of the interviews I conducted with CPS workers occurred after I had done significant writing that drew on the initial round of four CPS interviews. I realized that I needed more information about home visits. I also changed my approach to court observations so that I would be able to follow a case through a series of hearings so as to better understand how they were connected and the different decisions that occurred at different stages of the process.

I relied on different data collection methods to study the different aspects of CPS work. Interviews were my primary source of information about the first part of a case—planning for the initial contact with the family—and for information gathering that caseworkers do as part of the assessment process. COVID restrictions meant I could not accompany caseworkers on their home visits, and much casework that typically happens at their desks took place at caseworkers’ homes. Fortunately, I had previous experience with home visits and with the day-to-day of in-office work from earlier projects, and I
drew on this. Interviews were also the primary data source for my efforts to understand writing in case files and generating reports and other materials for court. Observations conducted during the \textit{How to prepare for success in court} training and materials made available to participants helped inform my understanding of this aspect of the CPS process.

Observations, both in person and via conference call, provided the bulk of information related to appearing in court, although a few interviews included relevant details. As mentioned above, I often went back and forth between interviews and court observations, between trainings and interviews. As questions arose during interviews or observations, I would incorporate that into a subsequent interview or seek out a particular type of hearing to observe. I also sought out additional information via interviews or emails when other questions arose in analysis.

The CPS child welfare staff who participated in interviews included three senior workers who had been with the agency 10 years or more and three who were newer to the work. At least three of the workers had a Master’s in Social Work; all of them had college degrees. The parent mentor had worked as a parent mentor for four years. The cases they described, and the hearings I observed, included a somewhat diverse array of families, although most of them faced the challenges common to those who come to be involved with the child welfare system such as poverty, unstable housing, and weak support networks. Some of the families were headed by single parents while others had both parents present. The families had white, Native American, African American, Asian,
and Latinx members. Some of the parents had physical and/or intellectual disabilities or other health issues.

An adequate sample in institutional ethnography requires a sufficiently diverse range of experiences and locations within the particular institution to illuminate the generalization of discourses and other ruling relations across different times and places (DeVault & McCoy, 2006). Large numbers of participants are not required, as individual experiences are a mode for exploring the ways in which that experience is organized across sites. The caseworkers and supervisors who participated in my interviews worked in two different counties in four different local (branch) offices. The court observations included hearings involving CPS workers from multiple branches within one of the two counties. The documents I reviewed were representative of CPS work across the metropolitan area. Thus, my sample illuminated the organization of CPS across the metropolitan region. The inclusion of six workers also helped ensure that the findings were not idiosyncratic. The caseworkers were able to share detailed narratives about their work with at least a small handful of cases within the past few months. The supervisors were able to speak about their own experiences carrying cases as well what they observed in working with the dozen or so caseworkers whom they supervised.

**Analysis**

Information from the interviews and observations was used to construct an initial write-up of CPS casework that detailed specific work activities: what they did, with whom, and with what resources. At the same time, I compiled the problems or tensions
identified by caseworkers: aspects of their experience that they found to be disturbing or at odds with what they understood as their professional commitments and responsibilities as social workers. As these threads emerged, I then re-examined interviews and field notes to more clearly specify where and how these issues were present in the day-to-day of casework. I also reviewed my data with an eye towards other instances of the problematic that had escaped my notice in earlier write-ups. As part of this process, I then re-organized and expanded prior write-ups to accommodate the emerging storyline as well as the additional information.

IE builds on ethnographic descriptions of the day-to-day with the goal of making visible the social relations inherent in those activities. Importantly, the how is often not visible to or remarked upon by the people doing the work. This requires the researcher to go beyond what people can know about the events of their everyday lives from simply being there (Campbell & Gregor, 2002). This level two data collection allows the researcher to identify the texts and other discursive resources that coordinate local activities by looking for texts and other clues within participant descriptions of the day-to-day. These texts and clues link caseworkers’ activities to extra local social relations.

To do this level two data collection, I did additional readings of the CPS write-ups, looking for clues about how it came to be that caseworkers did what they did. Some of the clues were easy to find—as some interviews contained references to textual resources such as the safety model or a statute or one of a small number of federal regulations. Many of the documentary tasks described by caseworkers consisted of
filling out report templates or highly structured screens in the electronic case record. Sometimes caseworkers explained their tasks as following a specific predetermined sequence, although they didn’t always state where it came from and I didn’t always remember to ask. I also reviewed my data, looking for texts that were activated by caseworkers but texts they did not describe as having any kind of organizing function.

I had an advantage in that I started the analytical work quite familiar with an initial collection of texts. Early on, and to acquaint myself with the basics of CPS work, I spent considerable time reading the *Child Welfare Procedure Manual*. Additionally, I had learned a lot about texts, such as court reports, during the *How to prepare for success in court* and other trainings. This allowed me to recognize references to a range of textual resources in both interviews and field notes. However, as I worked my way through my CPS write-up, I found it necessary to locate a number of additional resources, mostly having to do with the court process. For example, a few statutes surfaced as important, as did legal concepts such as the standard of proof.

I did numerous write-ups of my data, telling the story of what caseworkers do and the problems that arise in the doing of this work. I linked the various pieces of the CPS process to particular textual resources, moving through the various activities caseworkers had described and trying to account for those that seemed most central to the problematic. I created multiple maps over the course of the project; each iteration contained greater specificity and precision and brought into focus the various aspects of the problematic. My understanding evolved and progressed as I became better able to
glean clues from my data and as I became more schooled in the content of the various resources. Eventually, I built a corrígible picture, grounded in the empirical of the everyday, that connected casework, lower-level texts, and higher-order regulatory texts and discourses.
Chapter 3: CPS Part 1--- Starting a Case, Talking with Parents, And Other Information Gathering

My project uses institutional ethnography to understand how it happens that many of the parents that become involved with child welfare system fail to get the support they need to care for their children. As I described in Chapter One, caseworkers play a key role in families’ experiences with child welfare, and research suggests a relationship between casework and a host of outcomes including length of stay in foster care and reunification (Antle et al., 2012; National Association of Social Workers, 2015; Ryan et al., 2006; Staudt et al., 2015). In what follows, I demonstrate that caseworkers and families are embedded in the broader institution of child welfare in ways that creates significant disjunctures between what CPS caseworkers are organized to do and the needs of families struggling to care for their children.

This Chapter, together with Chapters Four and Five, describes the everyday of casework as it happens and is experienced by caseworkers. The chapters comprise a rough chronology of child protective services-- as caseworkers make their way through the various steps in a CPS assessment starting with receipt of the referral from the child abuse hotline and ending with their participation in a series of hearings in what is called juvenile dependency court. Drawing on data from interviews and field notes, I describe caseworkers’ day-to-day activities, including interactions with parents, relatives, supervisors, service providers and court personnel along with other tasks such as record reviews, assessment write-ups, generating court documents, and testifying at hearings.
As is true for many social services, child welfare is a text-heavy environment and a variety of records and reports, practice models and document templates appeared in caseworkers’ descriptions as well as in my field notes. In the descriptions of casework below, I demonstrate empirically the process by which caseworkers take up and are organized by these texts. Much of what caseworkers do involves activating different texts-- either by reading or writing them; other texts, such as the Safety Model, constitute some of what caseworkers know about how to do their work.

Institutional ethnography also makes visible the tensions between what the work requires and what parents might experience as helpful and supportive, and my analysis orients to this problematic as the process of explication unfolds. I explore how work practices are connected to texts and to other practices both locally and in other settings. Information about child welfare in Oregon, such as was included in Chapter One, makes it possible to go beyond the local setting to identify the texts operating translocally and to trace their roots in higher order social relations and relations of ruling.

The analysis below makes illustrates how caseworkers’ activities are organized by various texts in ways that give rise to the tensions mentioned above. In particular, the analysis makes visible the power of maltreatment and other concepts and categories associated with the juvenile dependency legal process, what I refer to as the dependency legal regime. Caseworkers orient to concepts (e.g. allegations) and categories (e.g. types of abuse), standards (e.g. reasonable cause) and methods for
building textual representations of actualities (e.g. case records and court reports) that constitute the known-in-common social context of child protective services (Smith & Griffith, 2022). As caseworkers’ practices and subjectivities are organized by the dependency legal regime, they see parents’ struggles as ‘maltreatment’ (rather than the result of marginalization and disadvantage) and understand their job as ‘proving the case’ (rather than collaborating with parents and providing support).

**Starting a Case**

CPS caseworkers are the first responders of the child welfare system. The first phase of the work consists of the assessment, defined as follows in the *Child Welfare Procedure Manual*:

> CPS assessment means an investigation into a report of abuse pursuant to ORS 419B.020 or ORS 418.258 that includes activities and interventions to identify and analyze safety threats, determine if there is reasonable cause to believe abuse occurred, and assure safety through protective action plans, initial safety plans, or ongoing safety planning (Oregon Department of Human Services, 2020, p. 79).

Caseworker N summed up the work this way: “We go out with a [child abuse hotline screening] report and we try and determine: Are the allegations in this report true? Are the kids safe?” Unless the child is removed from their parents right away due to concerns for their safety—which happens very rarely when parents have been accused of neglect— caseworkers often spend a few days, if not weeks, talking with the
family and collecting information from other sources. During this time, caseworkers can also help parents and children access an array of services.

Caseworkers’ first encounter with parents is textual work, when they review the screening report sent by the child abuse hotline. Caseworker B began her explanation of how it is that she comes to be working with a family by saying, “When someone is worried about abuse, they call the hotline.” She was referring to the state’s child abuse hotline where people can call to report abuse of any child or adult to the Oregon Department of Human Services. Staff at the hotline, called screeners, collect information from callers to determine whether an assessment by CPS is warranted. To do so, they gather as much thorough and detailed information as possible about what happened to the child. Reports received by the hotline are classified into five categories: information only, referral to other services, not a situation of child abuse, family support services needed, or possible child abuse. Screeners classify cases based on the following assumption: If the information gathered about the family were true, it would be an allegation of abuse or neglect based on the definitions of maltreatment in statute and policy (Oregon Department of Human Services, 2020, p. 87). If the screener decides there is reason to believe a child is at risk of harm per those standards, they send a document called the screening report to the CPS office in the appropriate community where the abuse is alleged to have taken place.

Below I describe the process by which families are discursively constituted as child maltreatment cases. The hotline screener compiles the screening report, which is
forwarded to and activated by the CPS caseworker. Figure 2 is a sample report used for training purposes so the information included is representative and fictional. In the discussion that follows, I highlight the features of the report that constitute and organize the knowledgeable work processes that the form directs.

Figure 2

Screening Report: Pages one and two

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<tr>
<td>Report Type: CPS</td>
</tr>
<tr>
<td>Date/Time Report Received: 4/28/2021 9:20 AM</td>
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<tr>
<td>Screening Decision: Assign</td>
</tr>
<tr>
<td>Response Time: Within 24 hours</td>
</tr>
<tr>
<td>Screening Decision Narrative: 24 Hour, Sandy Preston, #798654 -or- 24 Hour, Sandy Preston, DOB 10/10/92. Allegations of Neglect to Carla Preston and Brad Smith, by their mother Sandy Preston. The children were reportedly left home alone for an extended time period of time recently and this is an ongoing situation. The children are afraid for their safety when this occurs and Carla is put in a circumstance above her level of maturity</td>
</tr>
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<td>Case Address: 555 Liberty St SE SALEM OR 97301</td>
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<tr>
<td>CO: Country: United States of America</td>
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<tr>
<td>Phone: 503-555-1212</td>
</tr>
<tr>
<td>Primary Language: English</td>
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<tr>
<td>Possible Refugee: ☐</td>
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</tr>
<tr>
<td>Incident Location Same as Case Address: ☐</td>
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</tbody>
</table>
The screening report is highly structured and bureaucratic. It typically includes a narrative section on the latter pages summarizing the information about the family gathered by the screener. The rest of the form contains boxes that allow for brief and often fixed responses. For example, the fields include Name and Contact Information;
others reference institution-specific categories and responses such as Report Type, Screening Decision Narrative and Response Time. There are also a number of boxes that are completed via reference to a list of options, the definitions of which are included on the form.

The concepts and categories that appear in the report write-up the family as a case of child maltreatment. For example, the construction of the family as a case begins with the Case Name and Case Address that appear near the top of the report. The case also makes an appearance in the Key that appears on page 2 (Figure 2 above).

The family as a case of maltreatment, although not explicit, is implicit in the Screening Report. For example, the Key categorizes people in reference to the alleged maltreatment (in this example case, neglect) (e.g., alleged perpetrator) as well as their relationship within the household (e.g., identified child). As a result, in the example above, the mother of the children is identified as the AP (alleged perpetrator) as well as the PR (parent or parental role) and an HR (household member) in the list of Screening Report Participants. In addition, an Allegations table appears beneath the Key that constructs the family as a list of alleged maltreatment victim(s) and perpetrator(s) and it includes the type(s) of maltreatment.

The process of writing up the family as a case of maltreatment is also apparent in the narrative text generated by the hotline staff. For example, near the top of the form there is a box for the screener to record a “Screening Decision Narrative where what
happened is rendered in bureaucratic language. A form of legalese that includes “reportedly,” “left home alone,” “extended period of time,” “ongoing situation,” “safety,” and “above her level of maturity” is employed to generate a seemingly objective description of the family. It is also a selected view of the family circumstances that is coordinated by a particular focus on an incident that, at this stage in the process, is being isolated from other contextual features of the family’s functioning, such as the reasons Sandy Preston leaves the home and the children alone.

Many of the words and phrases including “left alone,” “afraid for their safety,” and “ongoing” match language in the child welfare agency’s Safety Threat definitions (e.g., a child is fearful of the home situation) that determine the actions required by hotline and CPS staff. These lexical choices are recursive; they also appear in the Report Narrative/Report Summary (see below) in a subsection titled “Extent of the abuse,” where the children are described as “unsupervised” and “fearful for their own safety and the safety of their mother.” In the same vein, in the Circumstances subsection, it is stated that the children are left alone “repeatedly,” “for prolonged periods,” and without plans for their “immediate or longer-term care and supervision.” In addition, the subtitles and the content of the narrative co-construct each other when, for example, “children who are alone and afraid” describe and elaborate the “extent” and “circumstances” of “the abuse.”
The Report Summary/Report Narrative also constitutes the mother as to blame for the maltreatment: For example, according to the reporter, the mother “fails to understand the seriousness of leaving the children alone.” The mother is also reported as having a “significant substance abuse problem” based on her “regularly using” alcohol and crack cocaine to incapacitation and poor decision making related to the care and safety of her children.” This claim is buttressed by the inclusion of a notation of eCourt records that show two convictions for Possession and a DUII. The narrative records other maternal “failings” such as “frequently relies on others to get her needs met” (including rent and food), “does not work at this time,” and “history of poor relationships with men.” It is also important to note that while the mother’s actions are included, there is no mention of her version of the events. She is a resource but not an agent in the construction of accounts of her behavior (Smith, 1990). An excerpt from the report is included below:

**EXTENT OF ALLEGED ABUSE:** Carla and Brad were reportedly unsupervised over the past weekend while their mother, Sandy, didn't make a supervision plan for them. The children awoke around midnight and when they couldn't find their mother, they left and went to a neighbor's home who contacted a relative of the child. The children were fearful for their own safety and the safety of their mother, and did not have contact information for her, or anyone else.

**CIRCUMSTANCES SURROUNDING THE ALLEGED ABUSE:** According to the reporter, the mother has repeatedly left the children alone for prolonged
periods and without plans for their immediate or longer-term care and supervision. This past weekend, a family member stayed with them until the mother returned at about 3-4 a.m. on Sunday morning. Reporter states the mother had left the children by themselves so that she could "go out on the town" and did not make plans for their care or supervision.

The mother is believed to have a significant substance abuse problem. (She allegedly uses alcohol and crack cocaine approximately 4-5 times per week while the children are present and otherwise.) The mother's substance use appears to be affecting the mother's ability to adequately supervise the children. The reporter does not believe the mother realizes the seriousness of leaving the children alone. Reporter referenced this mother's previous involvement with CPS due to similar issues in the past. Reporter believes this will continue to happen until Mom quits using substances. Carla is reported to be bright and is very articulate for her age. She worries about her mom and her brother. Child reportedly has told others that she fears being left alone, is afraid of the neighborhood. She sometimes misses school to take care of her brother and her Mom. According to the caller, Brad relies on his sister Carla more than his Mom. He is not in school. Both children seem to be well fed with good personal hygiene.

Mother Sandy has a significant substance abuse problem (e.g., regularly uses alcohol and crack cocaine to incapacitation and poor decision making related to
the care and safety of her children). Per eCourt review, on 11/8/17, Ms. Preston was convicted of Possession of Marijuana <1 ounce. On 2/23/12, Ms. Preston was convicted of DUII and Possession of a Controlled Substance Schedule IV. Per reporter, Sandy has a history of poor relationships with men. Also, she appears to frequently rely on others to get her needs met (e.g., her live-in boyfriend Rafe, her daughter Carla, her mother). Mother Sandy does not work at this time, and she relies on Rafe and family members for basic needs, rent, food, etc. Live in boyfriend Rafe appears to be "okay." It is unknown and unclear if he sells drugs, but no one has noticed any signs of drug use with him or when interacting with him. It is unknown if he is aware of the extent of Sandy's drug use. Sandy is somewhat distant at this point as a parent, which is a new thing according to reporter.

The textual analysis I am highlighting here shows the forms as organizers of the work processes. My analytic interest is not to dispute whether, in this case, there were children at risk, but rather, how caseworkers reading and referencing the texts are pulled into a particular (institutionalized) relationship with the family. For example, details of the current report and earlier interactions between the family and CPS are used heuristically to describe and inscribe a case of maltreatment. Included in the narrative is the reporter’s mention that the mother had “previous involvement with CPS due to similar issues in the past” and the Prior Involvement table lists the allegations, screening decision, and disposition associated with four previous calls to the Child
Abuse Hotline about the family. Interestingly, three of the four reports listed were closed at screening; that is, the hotline worker making the decision determined they did not meet the criteria to warrant a CPS assessment. However, the list of four reports over five years of alleged maltreatment (Threat of Harm and Neglect) suggests a pattern of “official” concern.

Together, these lexical and organizational features of the Screening Report begin to constitute the family as a verified case of possible child maltreatment. Such a work-up supports the hotline worker’s Screening Decision to forward the case to CPS. The report organizes the subsequent “textual dialogue” that CPS caseworkers have with the text as they read the “facts” about who is involved and what is alleged to have happened. They bring their training with the texts, the policies, and statute into that text-reader conversation (Smith, 2014); this is a central feature of how caseworkers know what they must do.

As described above, staff at the hotline collect information from callers; if they decide there is reason to believe a child is at risk of harm, they send the Screening Report to the CPS office in the community. Caseworker D note that when reports are received by CPS, they are distributed or “assigned” to the caseworkers “on assessment” that day. A caseworker then reviews the report as part of planning their activities.

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11 These standards are detailed in the Child Welfare Procedure Manual and the process was discussed briefly in Chapter 1. This part of the child welfare case process is outside the scope of this project.
Reading the screening report is the caseworker’s first encounter with the family. As they read, they are coordinated to see parents as alleged perpetrators and children as alleged victims, to be concerned with the particular problematic parental behaviors highlighted in the report (recognizable to caseworkers as safety threat and abuse indicators), and to understand what’s happening with the family as the specific abuse type indicated in the table. The terms alleged, perpetrator, allegations and incident signal the dependency legal processes that the caseworker (and the family) are being pulled into. In reviewing the report, the caseworker comes to “know” the family as a legal case of maltreatment.

According to the caseworkers I interviewed, the other important features of the report are the Response Time and Reason (Figure 3). When caseworkers are assigned cases that are categorized as present danger, for example, their initial visit with the family has to happen very quickly. As Caseworker T explained, “We're mandated to have face to face within 24 hours if you get an IR.” IR is caseworker shorthand for immediate response.
There is also a field on the Screening Report that reflects the hotline worker’s assessment of the risk to the worker who will be entering the home (Figure 4). All of these fields orient caseworkers to the possibility of danger to children and themselves.

The parents’ capacity for dangerous behavior also “shows up” as caseworkers review the records associated with prior CPS assessments. Caseworker B said that she consults the case record to “see if there's been any other history of any other work or going out to this family's home” before she visits with a family. Another caseworker explained her reason for reviewing the records: “I have to have consideration for the sake of safety concerns for any of the kids, if I need to bring law enforcement out with
me, or if there's anything I should know about the family when entering the home because it's a little bit, it can be unsafe sometimes.” This caseworker knows to read the records “for the sake of safety concerns” because families can be “unsafe.” The caseworker uses the records to help her develop plans for visiting the family that account for the possibility of danger, including the option to have personnel from law enforcement accompany her.

How to make these sorts of decisions is part of a caseworker’s formal training and their ongoing professional orientation to what is known about best practice. This knowledge is evident in the interview excerpt below where Caseworker D talked about having police accompany them to the family’s home if the child was likely to be removed and taken into care.

(W)e have to call law enforcement. This, it's just good, best practice, because you know, the one thing that people think they're good at is parenting. And the one thing that they think is their prized possession is their kids, and now I'm questioning their parenting and taking their kids. Well, you'd need cops to remove my kids too, yeah, so I get it. So it's just best practice.

Caseworker D understands that partnering with police to remove a child from parents who struggle to meet their child’s needs is a best practice. Concerns about danger as well as the difficulties that can arise when they take away parents’ “prized
possession” are understood as reasons to involve law enforcement. In fact, deciding whether to involve the police is a routine part of their planning process.

The Screening Report also includes a field titled “Date/time initial contact required by,” and the caseworkers with whom I spoke frequently referred to the work during their initial visits with families as the contact. For example, Caseworker N reported that “our first contact is usually going to try to see the child.” According to these caseworkers, seeing the child in person is key to their ability to determine what level of intervention is required, in particular, whether the situation meets the state’s criteria for removing the child from the home. In doing the work of planning for these initial visits, caseworkers also know that some parents will try to prevent their children from telling the caseworker about bad things that are happening. As Caseworker B described, “We’re going to get in houses where kids’ perpetrators are potentially in the room next door.” As a result, she had to arrange her contact so that the children would “be able to disclose all the information that they want to.” As an example, the caseworkers reported that they often talked with school age children at school, although, according to Caseworker N, COVID restrictions meant that they had to be “a little more creative.” In other words, caseworkers’ initial conversations with children are often organized in part by a concern that the parent(s) will try to interfere.

The data explicated here begin to show that as caseworkers prepare for their initial visit with the family, they are organized by the Screening Report to see parents as
perpetrators of child abuse. The forms and processes that organize the conduct of caseworkers are expected to prevent harm to the child as well as mitigate potential danger to themselves that can result from the anger and violence that may be triggered in the implicated adults. Thus, the work of proving child maltreatment and the processes that underpin child removals are inscribed with adversarial practices. The accusatorial course of a legal process that may require the caseworker to go to court to “make the case” to a judge is fixed into language and into the fields of textual processes at the outset of screening and assessment.

Caseworker D commented that this was in contrast with how she worked with families prior to coming to work for CPS, explaining that in her other position, she “would never look at history [case records]” before talking with a family because it was important that she “meet a family right where they were at, who they were that day.” As a CPS caseworker, she now must read and construct her practice within the linked documentary processes that mandate her responses. Her relationship with the family is constituted within a legal/textual framework that focuses her on allegations and the professional/legal accountabilities those recorded allegations carry. The purpose of her work (her professional intention) is coordinated by the CPS processes she is pulled into; meeting the family “right where they’re at” is not possible.

**Talking with Parents**

Whether or not they talk with the children beforehand, caseworkers make an effort to talk with parents as soon as they can after receiving the referral from the
hotline. The caseworkers with whom I spoke explained that, during their initial meeting, in addition to introducing themselves, one of the first things they do is tell parents about the specific allegations that appear on the Screening Report. Caseworkers understand that the job at hand is to clearly communicate the allegations. They also talked about their efforts to mediate (to “soften”) the inherently adversarial relations by drawing on their professional training and their honed communication skills.

Caseworker N explained that she begins meetings with parents that way “because otherwise, why are we involved? And I try to be transparent about it.” She understands the allegations of maltreatment against the parents as the reason she is talking with them, and she believes it is important to be forthright and clear about that.

Supervisor T explained that she tells parents about the allegations in large part because she believes they are anxious to know about the report that prompted the visit from CPS: “We tell them that there was a concern. And we usually end up starting with the concern because that's what people want. They want to know why you're there. ‘Why are you knocking on my door? What's going on?’”

Caseworker D’s first contact with the parent includes explicit mention of the fact that someone had made a report to the Child Abuse Hotline about the family: “Usually I'll knock on the door and just say, ‘Hey, we got a call. Someone called in, and said they have concerns that there's neglect going on for A, B and C. I wanted to chat with your kids. I want to chit chat with you.’” Other caseworkers bring the Screening Report document into the meeting and reference it when talking with the parents as described
by Caseworker N: “I'll look at the 307 [Screening Report] and I'll say, ‘It was reported that Johnny was found walking down the street, and there was no adult around with him’ and that it took 45 minutes for the police to be notified, that he was with a neighbor, or whatever the report is.” She added that she provides a “condensed version” rather than reading the report “word for word.” With minor variations, all of these experienced workers recognized that the allegations included in the Screening Report had to be clearly communicated to the parent near the outset of the conversation. In addition, both caseworkers and family members understand that the “abusive behavior” by the parents is the impetus for the caseworkers’ contact with the family.

The accusations against the parent organize the caseworkers’ interactions with them. Another goal of the initial contact is to encourage the parents to respond to the allegations. The caseworkers I spoke with described being conversational in their approach. For example, Caseworker N describes the allegations and then, “I kind of ask ‘What's up with that?’” Caseworker X tells parents there has been a report and provides a brief description, and then asks “What do you know about this?”

Even though the tone is often informal, caseworkers are both notifying parents that they have been accused of maltreating their children and inviting them to defend themselves against the accusation. Again, the caseworkers use their communication skills to position themselves as allies. They make efforts to mediate the professional authority they are carrying (as that is organized through the texts they must complete).
Caseworker N explains to parents, “I want to hear your side of the story, because not everything written down on paper is true, and you are the one living your life and you know the narrative better. And maybe you can give some explanation to this and we can get it cleared up.” According to Caseworker N, establishing the truth about what was written down in the Screening Report is the goal and she invites parents to respond. In fact, her actions oblige parents to defend themselves against the allegations by offering their side of the story.

In the same vein, when caseworkers encounter resistance in their efforts to obtain information, they have strategies they use to get at the truth. For example, Caseworker B explained, “If I feel like [the parent] is not being honest, then I’ll pull out some of those examples that were in the report.” She then asks a series of questions that reflect specific details. But no matter how the conversation proceeds, all of the caseworkers understood that the purpose of talking with parents was to discern whether the alleged maltreatment took place.

Caseworkers also tell parents that they will be contacting other people who might have information relevant to the case; they ask the parents to provide names and contact information. For example, Supervisor T describes the allegations to the parents and then tells them, “I’m going to follow up with X, Y, and Z about the concern,’ whatever, depending on what it was.” Notable here is how the subsequent information gathering by the caseworker must address the original framing of the “concern”—the allegations of maltreatment included on the Screening Report.
Talking with parents about the allegations serves as a starting point for what Caseworker D and others referred to as a comprehensive assessment. This work involves caseworkers having often extensive conversations with parents about a wide range of topics related to family life. The state’s Safety Intervention Model serves as a basis for the comprehensive assessment and CPS caseworkers receive extensive training on the model and the assessment process. Core to the safety model is a list of six domains of family functioning: Extent of Maltreatment, Circumstances of the Maltreatment, Adult Functioning, Child Functioning, Parenting Strategies and Disciplinary Strategies. In the Child Welfare Procedure Manual (Oregon Department of Human Services, 2020) and other training materials, each of these domains contains a list of related prompts and questions. For example, Extent of Maltreatment is defined as “maltreating behavior and the immediate physical and psychological effects” and includes the type and severity, history of maltreatment, description of specific events, and emotional and physical symptoms. Adult Functioning is defined as “how the adults/caregivers in the family feel, think and act on a daily basis.” This is followed by a long list of prompts that includes communication and social skills, coping and stress management, self-control, problem solving, judgment and decision making, home and financial management, employment, domestic violence, rationality, self-care and self-preservation, substance use, mental health, and physical health and capacity. The caseworkers I interviewed had integrated the details of the model including each of the six categories and the specific prompts into their knowledge about
what their conversations with parents were supposed to entail. For example, information about “the Extent,” as it was referred to by Caseworker N, was gathered during conversations about the allegations when parents were invited to talk about the incident or the allegations of what happened.

Supervisor T offered the following description of what doing the assessment looks like when she is talking with parents: “Now I'm going to ask a bunch of other questions because I need to do an assessment with that to give people an idea of you and your family and how you function.” In her introduction, she notes the purpose of the questioning is an assessment and indicates that the information about how [the family] function(s) will be shared with people. She understands what the parents say will be assessed by unnamed people in order to determine whether the family is functioning adequately according to authorized, formal standards. She continued,

Then I launch into it, like, “Did you always live in Oregon? Did you graduate high school, get a GED, go to college? Do you have any medical concerns?” I usually say “any medical issues that impact your ability to parent.” And then “Do you have a history of domestic violence. Have you had any relationships like that? You use any substances?”

Caseworker D asks a similar list of questions. “(Y)ou want to know about their education, their history, substance use, mental health, how they make their money, how they interact with their children. And for the children you want to know about
school and medical and, I mean, literally everything.” Caseworker N’s list includes the following: “If they work, about their history. If they're together or they have a partner in the home. If they have physical health issues or mental health issues that could be impacting [parenting].” She added, “We ask all parents, caregivers, adults in the home about drug and alcohol use and what that looks like. And not just the parts that are illegal, but like what, how often are you drinking? What does that look like?”

Given their expressed focus is on figuring out if the allegations are true and whether the children are safe, caseworkers understand that the purpose of these conversations is to identify problems with the parents’ caregiving. Supervisor T clarifies for parents that she is interested in “any medical issues that impact your ability to parent,” and Caseworker N’s description included similar mentions. The focus is on things that are going wrong. Indeed, domestic violence, substance use, low educational attainment, and unemployment are all considered potential indicators of maltreatment; they are components of a family’s history that have been constructed as risk factors within the child welfare field. In addition, the six domains organize the caseworkers to cast a broad net in their search for parental failures. The probe of parental substance use includes any use, “not just the parts that are illegal” as Caseworker N noted above. The Safety Model instructs caseworkers to examine how parents “feel, think and act on a daily basis” (Department of Human Services, 2020, p.341). As Caseworker D put it, caseworkers ask about “literally everything.” In their questioning of parents struggling
to provide for their children, caseworkers are organized to compile a compendium of the ways in which parents fall short of established standards.

The Safety Threshold framework is another feature of the Safety Intervention model, and caseworkers are well versed on the list of safety threats that appears in the *Child Welfare Procedure Manual* and other training materials. They understand that the purpose of the framework is to assist caseworkers to identify the threat to the child *posed by the parent* and to respond appropriately. In the *Child Welfare Procedure Manual*, the safety threats described comprise a variety of parent/caregiver attitudes, emotions and behaviors that result in immediate or impending harm to the child. For example, safety threat VIII states that parents “lack parenting knowledge, skills, necessary to ensure a child’s safety.... [The parent] “does not know what basic care is or how to provide it” (Oregon Department of Human Services, 2020, p. 222).

As with the *six domains of family functioning* prompts described above, professional knowledge about what constitutes a safety threat shows up in caseworkers’ interactions with parents. Echoing safety threat VIII, Caseworker B described a conversation with a father during which she was able to bring to the surface a number of “things that he [the father] did not know” such as how to safely use a rock-n-play or arrange the baby’s crib. She explained that the parent might be “open to learning about parenting skills, but does not have the skills, right now, today.” As described by Caseworker B, conversations with parents are an opportunity “to get a
little bit more information of ‘oh, I didn't know that’” and to figure out “So what else do they not know?”

Safety threats show up in other caseworkers’ descriptions of their interactions with parents. Caseworker N explained that she listens to how parents talk for signs of a misconception or a belief or mental health issue. “And sometimes it’s direct like a mental health issue and sometimes it’s not. Sometimes parents will say something that makes me wonder, Is there some delusional thinking? And I might kind of go down that rabbit hole with them to try to get that.” Caseworker N’s description of how she listens for misconceptions or other so-called problematic thinking patterns mirrors two safety threats that are formulated in the procedure manual. One reads, “Parent or caregiver has a physical disability, mental disability, or incapacitation that renders them unable and unavailable to provide basic care for the children.” Another states, “Parent or caregiver is delusional or experiencing hallucinations.” Both of the caseworkers quoted above described listening that is organized by criteria that categorize parents as safe or unsafe.

Caseworkers understand the importance of forming productive relationships with parents, and most caseworkers receive significant training related to promoting engagement and working collaboratively with families. Despite this training, the ruling relations that organize their work result in practices that families experience as accusatory and intrusive. This arose as a dilemma for some caseworkers, and they
talked about their efforts to soften the experience. Caseworker N, for example, makes a point to ask parents about the sorts of activities they like to do as a family. Caseworker D commented, “You don't have to ask questions like...very textbook. Some people struggle with that. They'll just jump from question to question, instead of the engagement of, ‘Well, tell me more about that.’”

Despite caseworkers’ efforts, however, the underlying constitution of the parent as perpetrator remains intact. Caseworker N said she tells parents, “I can't help you unless I know what's really happening, I need you to tell me what's going on,” adding that parents “want to talk and they want to tell you what they do wrong because they want to apologize and they want to do better.”

**Other Information Gathering Activities**

In addition to talking with parents and children, caseworkers also look around the families’ living quarters as part of their home visits. Caseworkers understand that the purpose is to look for safety threats and other indicators of maltreatment as they walk through the home. For example, Caseworker B explained, “We have to make sure kids are sleeping safe.” In fact, caseworkers are supposed to complete the “Safe Sleeping Checklist” developed by the child welfare agency as part of their assessment. The checklist contains a list of unsafe sleeping environment indicators including highly specific and also highly ambiguous references to “loose bedding,” “bumper pads,” “stuffed animals,” and “sleep surface is soft.” Caseworkers are also directed to record
whether children have their own sleep area or if they sleep with others as well as the
temperature of the sleeping area.

Attention to these concerns is visible in the activities caseworkers described
related to home visits. Caseworker T shared about a visit to young parents of triplets
who were living in two separate homes. She commented on what she was assessing
about where the children were sleeping:

So if I’m remembering correctly, the twins were there, and, so only two of the
triplets are there and they’re in this bedroom with a mattress on the floor. The
mom...I met with her and those two babies and I had to, you know, find out
where the next baby was. And he was actually at the father’s parents’ house. So I
went and met the third triplet and that home was set up a lot better and they
actually had a crib for the baby for that, a couple of cribs, if I’m remembering
right.

She went on to explain that the cribs at the father’s parents’ house were “a lot better”
than the mattress on the floor at the mother’s because when the triplets got just a little
bit older, (as her training informed her thinking) she understood that they could crawl
off the mattress and be in danger. Caseworker B made similar observations during a visit
to a father’s house. There was a crib, but in order for it to meet the Safe Sleep
standards, the father needed to “take out all these clothes and all these stuffed animals
and all these toys and have it completely cleared and make sure there’s no bumpers.”
Caseworkers’ narratives of walking around a family’s home include mention of a host of other safety threats. Caseworker B offered the following description of a home that she visited: “I walked in and there was nowhere to walk, and the smell that I had was like, ‘Oh, my goodness, what is dying in here?’ And there's no food in the fridge, and if there is, it's rotting. There’s dishes on the counter... you have no clear pathway to bed, they’re piled with clothing and toys and garbage.” Her accounts mention a variety of concerns about conditions in the home including rotten food and a significant amount of clutter and garbage. Descriptions offered by other caseworkers contained similar mentions of disarray, disrepair, and a lack of cleanliness. These mirror another safety threat from the procedure manual: living arrangements that are “unsanitary,” “filthy,” “infested,” or “a health hazard.” These descriptions of visits make visible how the seeing they do as part of their home visits is organized by their knowledge of the safety threats.

Caseworkers also ask parents to provide the names of other individuals who can speak to what’s happening with the family-- such as friends of the parents and children, relatives, and service providers-- so that caseworkers can contact them for information. Caseworkers also search a variety of electronic data bases including child welfare and TANF (welfare benefits) to locate potential informants. These people are referred to as collateral sources in the Child Welfare Procedure Manual (Oregon Department of Human Services, 2020, p.191), and staff frequently use the same terminology.

Caseworker B described the type of individuals she’s likely to contact:
Schools and doctors are pretty common collaterals for us to reach out to. For the investigation purposes of child safety, we don't need a parent's consent or release for those contacts as long as what we're getting is really about determining child safety. Sometimes there's therapists...Sometimes it's grandparents or aunts or uncles.

This caseworker understands the purpose of these conversations as determining child safety. As she mentioned, caseworkers are legally allowed to talk with therapists and others about the family’s private information without the parents’ permission.

Caseworkers noted that it is routine to tell people they are being contacted because there is an open child welfare assessment of the family. During the conversations, caseworkers try to find out whether collaterals’ characterization of the family supports the allegations of maltreatment and related safety concerns; questions often extend to more general aspects of what can be deemed adequate parenting. For example, a caseworker reported that she had contacted school staff to follow up on allegations of sexual abuse and concerns that the child had been sexually acting out. She asked about the child’s behavior while at school as well as whether school personnel had made any referrals for the family.

Caseworker B tailors her questions based on the particular relationship the person has with the family, for example, if they are a neighbor or a teacher or a doctor. When she talks with school personnel, her conversations include questions about “parents’ interactions that have ever been concerning...Who brings them (the children)
in? Is it a parent? Is it the grandmother?” She also asks about attendance and medical
issues as well as “other concerns they have about the child.”

Caseworker N shared the following example of a conversation she might have
with a neighbor of the family:

If I was worried about neglect I might say, “Hey, do you know these kids? Have
you seen them outside? Are there times of day that they're not outside or that
they're more likely to be outside? What do you notice about their appearance?”
Or “Are there adults that go to that home other than the parent who lives
there?” Or you know, “What are the parents’ hours? Do you know if they work?
When are they usually gone?”

In the conversation above, the caseworker is asking the neighbors about what could
constitute inadequate supervision or exposure to dangerous adults. And in the prior
quote, the caseworker asks the teacher who brings the child to school and about the
child’s attendance or medical issues. These lines of questioning are organized by the
worker’s training to identify safety threats and/or indicators of neglect and other types
of abuse.

It is also notable that both caseworkers invite these informants to talk about
other aspects of family life that could be construed as problematic, as when Caseworker
B prompts school staff by asking about “other concerns they have about the child.” In
the same vein, Caseworker N shared, “A lot of times I'll start with a general ‘Do you have
any concerns?’ and see and then kind of go where they lead that.”
As caseworkers walk around families’ homes, they are organized to see safety threats and other indicators of maltreatment. In the same vein, their communications with “collaterals” are oriented to the allegations; indeed, the existence of the referral from the hotline is what makes it legal for them to have these privileged conversations with therapists and doctors. Caseworkers understand this work as corroborating the specific maltreatment allegations against the parent and adding to the list of allegations and parental failings more generally. Notably, caseworkers’ descriptions of their conversations did not include trying to identify resources for the family or to mobilize supports. Nor was there an effort to understand what the family might need, particularly from the family’s perspective.

**Conclusion**

The *Child Welfare Procedure Manual* states, “The CPS assessment is more than simply fact-finding. It is a way to establish rapport with family members and engage them in the safety intervention process” (Oregon Department of Human Services, 2020, p. 182). Caseworkers understand the importance of building productive relationships with parents and families, and they use a variety of strategies to do so. For example, Caseworker N tries to ensure parents see her as not just someone “who wants to come take away their child” and offered the following description of her approach: “We do want to know about the incident that happened or the allegations of what happened... But we also want to know the whole picture. And I always tell families, ‘There's more to you than kind of the worst day that got reported to us, and we want to know that.’” She
acknowledges the maltreatment allegations, but she tells parents that she is also interested in “the whole picture” including the parts of family life that aren’t about the “worst day.” Caseworker N believes that talking with parents this way “helps to build engagement.” She explained, “I think it’s important that no matter what a parent's done, that they hear that we care about more than that, that we, we recognize there's more than that.” At the same time, caseworkers often spoke to the challenges of the work: “When you're building your case, so to speak, but you're also trying to preserve the family and preserve the kids in the home. And you're building a relationship with the parents and having to be real honest about what your concerns are, yeah, all at the same time.”

In fact, this discussion identifies multiple tensions that arise for caseworkers as they go about their day-to-day activities. Their work is organized so that they are suspicious and fearful of the parent, accuse the parent of maltreatment, focus on finding fault with the parent, and blame the parent for what’s happening with the family, all of which work against their efforts to see the parents as more than the allegations. Broadly speaking, the maltreatment framework substructs caseworkers’ subjectivity and practice as they “work up” families’ struggles to provide adequate care as “the parent abusing the child” and the family as a “case of maltreatment.” It also complicates any efforts caseworkers might make to engage families in discussions about what they understand to be their needs or hopes or desires.
The detailed description of casework as it happens in the everyday also helps make visible the institutional processes and social relations that organize the work to happen as it does. For example, caseworkers are primed by the Screening Report to see parents as potentially dangerous and abusive. Caseworkers are trained to understand partnering with the police in certain circumstances as “just best practice.” The child welfare agency’s safety model, in particular, the Safety Threats and Domains of Family Functioning, organizes caseworkers’ interactions with parents as primarily problem finding. Caseworkers are organized to see these problems, in turn, as parental failings rather than structural artifacts of inequality.

Statutes are also present. For example, the abuse types (e.g., sexual abuse, physical abuse, neglect) that make up the specific categories of allegations are defined in statute (ORS 419B.005 Definitions) and elaborated on in the Child Welfare Procedure Manual (Oregon Department of Human Services, 2020). And foundational to the safety model is the threshold for removing a child from the care of a parent as it is defined in statute (ORS 109.807).

Other relevancies of the legal dependency regime for casework also start to come into view, for example, in the work that caseworkers do related to the allegations. Caseworkers are mandated by statute to inform parents about the specific allegations against them (OAR 413-015-0422). Their responsibilities are detailed in the Child Welfare Procedure Manual:
A. Show your ID to the family at the start of the interview. Give your business card or other document with your name and work telephone number to the parents and caregivers. B. Clearly state the reason for the interview. Provide statutory authority to assess reports of abuse. Also, explain the alleged abuse. C. Allow the parent or caregiver to respond to each allegation. D. Obtain names of persons from the parents and caregivers who can provide more information to determining child safety and completing the CPS assessment E. Ask the parents and caregivers to sign an authorization to release information to enable Child Welfare to obtain confidential information (Oregon Department of Human Services, 2022, pp. 201-202).

Caseworkers are also required to notify parents that they have the corollary right to refuse entry to caseworkers who show up on their door step without a court order. Furthermore, parents do not have to give the caseworker any information (ORS 409.185). These statutory requirements intend and reflect the dependency legal process (examined in detail in Chapters Four and Five) and highlight the legal framework that undergirds these interactions. Finally, words and concepts including allegations, collaterals, perpetrator, and victim hook casework into legal processes and discourse that implicate prosecution and punishment. These institutional processes are further examined in the chapters that follow.
Chapter 4: CPS Part 2-- Writing the Electronic Case Record and Documents Related to Court

As explained in Chapter One, child welfare in Oregon operates within a safety threshold framework that mandates the child welfare agency seek legal protection for children when safety threshold criteria are met. CPS caseworkers can offer assistance to parents to address safety concerns; however, when families’ needs for assistance exceed those that can be provided within CPS’s time and resource limitations, caseworkers must take the case to juvenile dependency court and request protective custody.

Requesting protective custody has a significant effect on the activities of caseworkers; their work is oriented to the strictures and practices that obtain in the dependency court context, as illustrated in the representation of day-to-day child protective services work provided below. Indeed, caseworkers referred to their task in court-involved cases as “proving the case.” Echoing some of the dynamics that occur during information gathering activities as described in the previous chapter, tensions arise between what caseworkers do and their ability to build alliances with and provide support to parents.

In this chapter, I pick up where the last chapter left off. I detail efforts by caseworkers to enter the information they gather into the electronic case record (ECR). I also describe the process by which caseworkers determine and document whether or not allegations of maltreatment against the parent are true. This is referred to as the
disposition. Closely related to this is the process by which caseworkers, together with representatives from the Office of the Attorney General, determine whether evidence is sufficient to proceed to court. In the presence of sufficient evidence, child welfare workers collaborate to write the specific allegations or charges against the parent. If the decision is made to take the case to court, caseworkers generate Petitions and Declarations of Protective Custody and compile other court-related materials. These activities build on the work-up of the family as a case of maltreatment—accomplished by the information-gathering activities described earlier—in which caseworkers produce an authorized account of the family that orients more explicitly to the dependency legal context.

The dataset for this chapter derives from interviews with CPS caseworkers and supervisors and from case file and court report reviews—some from actual cases and some from caseworker or court personnel trainings.

**Writing the Assessment in the Electronic Case Record**

Caseworkers compile information gathered via interviews, home visits, and record reviews and enter it into the family’s case file in the agency’s ECR. This process of compiling information requires that caseworkers enter information about the family into an electronic data management system. The individual screens have a number of pre-defined fields, some with drop-down categories and others that require short answers or tick boxes that respond to the cues in the form that this chapter elaborates. This paperwork takes significant time and effort and is not a self-evident process.
Caseworkers receive professional education related to child protection work, and as mentioned in Chapter One, they receive specific training and coaching on working with the ECR and generating the assessment documentation. In interviews, they spoke in some detail about their activities.

Caseworkers know that the documentation they produce related to the family has to take a particular form, a form that is part of a nested set of practices related to building the case against the parent. Related to this is the vocabulary caseworkers use. Supervisor T commented that caseworkers “have to use the safety threat language” in “the writing that we have to do in the assessment about the allegations.” She then listed the components of the safety threat framework: “Is that observable, is it severe? Is it vulnerable, imminent?” Observable, severe, vulnerable, and imminent are the criteria caseworkers use to determine what is happening within the family. Their decision mandates a particular course of action such as instituting an in-home safety plan or removing a child from their home. According to Supervisor T, caseworkers employ the safety threat framework in the documentation they produce related to the allegations. This documentation then serves to justify the actions taken by the caseworker.

The design of the ECR also supports the work of building the case against the parent. Supervisor M explained that generating the assessment write-up consists of “popping all this information into the screen, it's like various bubbles; it's not a
narrative, it's all these different sections.” Many of these sections replicate key features of the safety model employed by the state. She explained, “The assessment is all OSM [the Oregon Safety Model].” The model includes the six domains including Extent of maltreatment and Circumstances surrounding the maltreatment, along with four other domains that workers understand are expected to capture a somewhat more expansive picture of family life, including Parent functioning, Child functioning, Parenting practices, and Discipline practices. References to the six domains pepper the caseworkers’ talk about information gathering and documentation. For example, Caseworker N provided a detailed description of her write-ups that referenced the individual domains. “There's a piece that's about the Extent [of maltreatment]... And then there's a piece about each parent called Functioning that's about them. And some of Circumstances [of maltreatment] ‘cause a lot of our history goes into circumstances.”

As caseworkers go about their routine form-filling practices, their write-ups of Extent and Circumstances organize the family’s struggles as maltreatment. Supervisor T described how the maltreatment framework organizes casework when caseworkers are writing about the family in response to the other domains. She explained, “They've designed it for you to summarize this information and in a very clinical way. It's not like a running narrative of like ‘this happened,’ ‘this happened,’ ‘this happened,’ ‘this happened’... Now it’s ‘describe the child's functioning’ and allude in that ‘functioning’ to what the ‘impact’ is of whatever happened.” According to Supervisor T, rather than detailing a chronology of events—this happened, this happened—caseworkers must
know how to craft a write-up that connects what they know about what happened to a [negative] impact on the child’s functioning. This structure of the documentary work reflects the safety model described above that constructs child functioning as the result of parental functioning, discipline, and parenting.

Caseworkers’ knowledge about how to build a case of maltreatment also governs what information gets included and what gets left out. The caseworkers with whom I spoke described how information related to Extent of Maltreatment and other documentation of parental failures become emphasized in cases that go to court. Caseworker N said, “Once I know court may be involved, the Extent is the biggest piece.” For these cases, her assessment write-ups were concerned with “mostly Extent...The functionings [parent and child functioning] for any of the people really aren’t as much. And honestly, for me, at least when I have a case that’s getting court-involved...those sections remain pretty thin.” In other words, information that speaks to aspects of the family’s life that is not directly useful to building the case (e.g., adult functioning) is often not included by caseworkers in the documentation produced for families that are taken to court.

Caseworkers described other practices of omission organized by a concern with building the case. They may have data from several visits, and the actual assessment work is seldom unambiguous. On one visit, the family may appear to be functioning well within the threshold for safety and on another visit, concerns may arise. However,
documenting this sort of ambiguity is not part of the caseworker’s responsibility.

Focused on what is needed by the court, Caseworker D described how she works with the information generated by her assessment activities:

So you might go out and initially you're like, I'm not seeing any concern. Kid's great, kid's super happy, like the developmental milestones on track. And then two days later, another call comes in and maybe things start going south...And now you need to rewrite everything to reflect why we’re removing. So now what you had written in positively, you need to take out, because it doesn't make sense—if you're writing these positive things—that you ended up filing [taking the case to court].

This caseworker understands that only information that supports the idea that the parent is guilty of maltreatment should be included in her write-up. While she might have collected information about things that were going well for the family (e.g., the children were on track developmentally) and included that in early write-ups in the ECR, once the decision has been made to take the case to court, that positive information about the family becomes irrelevant and possibly harmful to the maltreatment case. The information is therefore removed or substantially rewritten to build unambiguous evidence that the child is in need of the court’s protection.

When caseworkers write about the family in the ECR, they draw on a great deal of knowledge, including about the Safety Threat frame and the family functioning
domains, about what should be included in the assessment write up and what should not. This knowledgeable activity by caseworkers is not designed to produce a more accurate or factual account, however. Rather, caseworkers are organized to tell a particular story about the family, one in which what’s happening with the family is that the parent is maltreating the child. As Caseworker D explained above, the documentation only makes sense if it supports the argument being presented to the court.

Another key component of the ECR documentation is the Allegations tab that is completed by caseworkers at the conclusion of their assessment. Figure 6 is a replica of the form filled out by caseworkers (developed for training purposes). The form is highly structured and bureaucratic; all information included is fixed-choice rather than narrative. In the figure, the first heading is Assessment. This is where the case name is auto-populated with the name Lila Leoni, and the Assessment Status is Pending, indicating that the assessment is not yet complete. Taking up the bulk of the screen is the Allegations tab, which consists of a list of the allegations against the parents (e.g., physical abuse with bruises, cuts, and lacerations). The information in these fields is largely copied over from the information in the Screening Report that preceded the caseworker’s involvement with the family. Additional allegations that emerge during the assessment process are added to this list by the caseworker. The terms alleged perpetrator and alleged victim appear as repeated (recursive) words that organize a “textual dialogue” with the caseworker. This categorical identification of the people
being named in the report is likely taken for granted by the caseworker, who will be activating their professional knowledge as they read and construct this component of the ECR. In the same vein, what’s happening in the family shows up in the tab as a type of abuse- the A/N code, where A/N refers to abuse/neglect, together with the Description that repeats the code and adds some minimal detail such as “bruises/cuts/lacerations” via another drop-down menu. The fields in this form constitute the work of writing up the family as a case of child abuse, extending the work processes that were started in the Screening Report. In this case, Terry Leoni, the stepfather, is the alleged perpetrator who, under the Description tab, is categorized as having “physically abused” Ryan Worth, the alleged victim.

Figure 5

ECR: Allegations tab
The Allegations tab also includes a place for the caseworker to record the disposition of the allegation(s), that is, the particular type of abuse or neglect that constitutes the allegation. Caseworkers are responsible to “determine if there is reasonable cause to believe abuse (and/or neglect) occurred” as part of the assessment process (Oregon Department of Human Services, 2020, p. 79). This is referred to as the disposition. Dispositions are determined based on state laws, administrative rule, and the information gathered and documented by caseworkers. According to statute (ORS, Section 419B.026), an allegation is founded when there is reasonable cause to believe that the parent/caregiver committed child abuse or neglect as defined in statute, unfounded when the evidence suggests the parent/caregiver is not guilty, and unable to determine when maltreatment can’t be ruled out but the evidence does not meet the legal standard for a founded disposition.

Caseworkers “determine” the disposition of the allegation by reviewing the information compiled in the ECR. They view this “evidence” in relation to the type of abuse or neglect the parent is accused of as it appears in statute ORS 419B.005 (Definitions)-- as well as the reasonable cause standard of evidence as described above. If the caseworker decides the evidence is sufficient, once the caseworker records the disposition on the Allegations tab, families who are struggling to care for their children become constituted as founded cases of maltreatment.
The evidence, however, represents a selective account of what’s actually happening with the family. As described above, caseworkers understand their responsibility to craft documentation that makes sense; they know what language to use and what details to include and to leave out. In other words, caseworkers are organized to produce documentation that supports the disposition that is determined based on that documentation. The point is not that caseworkers fabricate information about the family, but rather, that the documentation produced by caseworkers that comes to represent the truth about the family is oriented to the maltreatment framework—in particular, to the statutory definitions of abuse/neglect and the legal standard of evidence.

In founding a disposition, caseworkers hook into a course of action that has significant consequences for the parents. When caseworkers determine that one or more of the allegations is founded, parents who are identified as perpetrators in the ECR are subject to the state’s Child Abuse Central Background Registry and Background Check (ORS 329A.030) and to administrative rules associated with the statute. The registry links to the disposition in the ECR as a form of legal surveillance that limits where people found to have committed child maltreatment are allowed to work and/or volunteer.

Two of the caseworkers with whom I spoke explained this work as part of their efforts to protect children from harm. As Caseworker N commented, “The idea behind a
founded [disposition] is not just safety for that child, but safety for other children. So if (child welfare agency staff) ‘found’ this adult and then (the parents) try to work in a daycare, they would be turned down, and then we’re saving those children.”

Caseworker N is referring to the fact that parents who are documented by the child welfare agency as founded perpetrators of child maltreatment can be excluded from different sorts of employment, in particular, positions that work directly with children. In founding an allegation, caseworkers activate a process by which parents become known to employers, school, community organizations, and others as a threat—not just to their children, but to all children.

While caseworkers often conclude during assessments that allegations are unfounded (or they are unable to determine and the case is closed), Caseworker D explained that for cases that are court involved, “It's always going to be a founded disposition.” In other words, only cases that with sufficient evidence of maltreatment according to the reasonable cause standard will be filed with the court. (This process is explained further below). With rare exceptions, cases with information or evidence that implicates parents to that degree will have a founded disposition.

In determining the disposition of the different allegations against the parent, caseworkers are organized to generate an authorized account of the family that intends the policing and punishment of the parent as a perpetrator of maltreatment; as a result, parents who face some of the most significant challenges to caring for their children are
very likely to be subject to the Child Abuse Central Background Registry. In addition, caseworkers draw on select details about what’s happening with the family, informed by their knowledge of what is required by the relevant legal standard and policy related to documentation. In other words, the evidence of maltreatment that appears in the ECR is an abstraction of what the caseworker knows about the family, and almost certainly is not the representation of the family’s day-to-day life that would be offered by the family itself.

Finally, while prompts and drop downs are visible as some of the more local institutional processes that organize caseworkers’ documentary activities, others exist outside the day-to-day of casework. For example, as described above, caseworkers understand that dispositions must be determined for every allegation listed in the ECR. In fact, this is required by statute: ORS 419B.026. An administrative rule accompanies the statute: OAR 413-015-1005, *The CPS Assessment Dispositions*. Part 4 of that rule reads as follows: “Documentation. The *CPS worker* must document that determination and explain the basis for the determination in the disposition narrative section of the Child Welfare electronic information system prior to completing the *CPS assessment*.”

As described above, caseworkers’ narratives are replete with words and phrases from the definitions of abuse that appear in statute, and more generally, parents are constituted as to blame for the harm experienced by their children. At the same time, none of the caseworkers with whom I spoke referenced either the statute or the
administrative rule when talking about their work. In other words, caseworkers know to generate documentation that accomplishes the requirement that they explain the basis of a founded disposition— even if they have no knowledge of the actual administrative rule. The legal and regulatory standards and concepts that undergird dispositions and the workings of the Child Abuse Central Background Registry organize caseworkers’ activities as part of their taken-for-granted knowledge about how to do the work.

**Court Documents**

Cases that are court-involved require that caseworkers generate a distinct set of documents that are specific to the court. In generating the court paperwork, caseworkers build on and carry forward the work-up of the family accomplished by their information gathering activities as well by documentation they generated in the ECR. In addition, the extent to which the maltreatment framework and associated legal standards vested in statute come to orient their work becomes increasingly explicit. This happens through their activation of the Declaration of Protective Custody and the Petition, which are a textual culmination of the assessments and decisions that precede this work process.

**Declaration of Protective Custody**

When a caseworker determines that the situation in the family meets the “imminent danger” threshold as outlined in the safety model, they have the authority to place the child in substitute/foster care; however, they must seek permission from the
court either prior to or within 24 judicial hours of the child’s removal from their parents. The Declaration of Protective Custody (DPC) is the key document submitted to the court by the caseworker in support of the agency’s request. Completing this document is a necessary step for caseworkers to establish their legal right to remove children from the custody of the parents. Completing the DPC is required before the case can proceed to court.

Caseworkers incorporate into the DPC form a range of information that supports the idea that the child is unsafe in the care of their parents. In response to the prompt, “List prior DHS contacts with family or child” (Figure 6), caseworkers reiterate the alleged unsafe behavior or circumstances reported by callers to the hotline. Included in this list are situations where the agency failed to make contact with the family. Implicit in these failed contacts is the idea that even though the information shared by the hotline caller has not been verified by CPS (as a part of contact with the family), the fact that a call was made to the state’s Child Abuse Hotline authorizes a level of credible concern.
In addition, as they do when they write about the family in the ECR, caseworkers compile a list of parental failures that repeat the language of the safety threats and abuse definitions in their descriptions of incidents and events. The texts work recursively. Institutional ethnographer George Smith (1995) used Hofstadter’s (1979) example of Russian dolls inside Russian dolls to express the empirical work that texts can do. In the sample, the mother is described as “passed out,” taking methamphetamines, and hitting her child with an open hand. These types of phrases and categories also repeat within the document, showing up in the caseworker’s response to another prompt which reads, “Describe why protective custody is in the best interest of the child” (see Figure 7). In the sample, the caseworker describes the

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2 Smith (1995, p. 33) noted: Hofstadter (1979:127) in his discussion of recursive processes gives examples that are useful here. He describes recursion as nesting and variations on nesting. The concept is very general (stories inside stories, movies inside moves, paintings inside paintings, Russian dolls inside Russian dolls). A story inside a story is part of a larger story and therefore has something of the same form.
child as “unable to protect himself” and notes that he has been exposed to “unsafe individuals;” there are references to the mother’s “substance use” and “chaotic lifestyle;” there is said to be “no homelike setting” and the home is “unsanitary” and is “not calm.”

Figure 7

Declaration of Protective Custody: Best Interests

<table>
<thead>
<tr>
<th>Best Interests</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>10. Describe why protective custody is in the best interest of the child:</strong></td>
</tr>
<tr>
<td>Wayne Neil is a child who is unable to protect himself from harm related to his mother’s substance use, exposure to unsafe individuals, unsanitary house, and chaotic lifestyle. Though Ms. Neil has expressed a willingness to work with ODHS, she has not been able to be reached for several days, and our cooperative Protective Action Plan is expiring shortly.</td>
</tr>
<tr>
<td>There is no homelike setting where the family resides. The current kith resource parent has stated they are not willing to have Ms. Neil in their home, and Ms. Neil was evicted from her residence. The home is not calm. This includes Ms. Neil allowing three unsafe individuals in her home, with access to Wayne. These individuals have been violent toward Ms. Neil in the presence of Wayne. Ms. Neil has expressed her friends are not a danger to her child. There also does not appear to be necessary safety service providers available to implement an in-home plan. Ms. Neil has been unwilling to provide names of family members to ODHS, and the current resource parent is unwilling to be part of an in-home safety plan.</td>
</tr>
</tbody>
</table>

The dominant field on the report (taking up four pages) is the caseworkers’ response to the prompt, “List the facts and circumstances describing why taking protective custody of the child is necessary and least restrictive means to ensure child safety” (Figure 8). Caseworker N referred to this portion of the report as “just a general ‘what’s going on’ kind of box...this is why we’re here, these are all the reasons why we think a child’s unsafe.” In saying, “This is why we’re here,””--where here refers to dependency court-- Caseworker N makes visible the connection between the account of the family included in the DCP report and the work being undertaken to go to court.
Rather than “a general ‘what’s going on,’” it is the caseworker’s job to – among all possible narratives—construct the narrative of maltreatment of the child by the parent. These become the “facts” of the case that justify the request for protective custody.

Figure 8

Declaration of Protective Custody: excerpt from Facts and Circumstances

<table>
<thead>
<tr>
<th>Protective Custody</th>
</tr>
</thead>
<tbody>
<tr>
<td>On 4/3/2021 at 1:34am, the ODHS after hours caseworker was notified there was a safety concern with Ms. Martha Neill, mother of Wayne Neil. It was stated the family home was “not clean enough to allow pets to live in” and Ms. Neil was “extremely high”. The reporter said the family is being evicted, but is refusing to leave. It was reported Ms. Neil had a friend, Oswald (last name unknown), who was at the home and became violent to her in Wayne’s presence. Wayne was instructed to run to the neighbor’s apartment to call the police. The after hours caseworker spoke to Officer Ramathorne of the Gotham Police Department, who had arrived at the scene. Officer Ramathorne reported Ms. Neil appeared to be under the influence of a controlled substance, as her speech was pressured and she spoke too quickly to be understood. Officer Ramathorne contacted a relative, who agreed to take Wayne for the night. Ms. Neil agreed to this plan. On 4/3/2021 at 9:30am, this worker interviewed Wayne. Wayne described the evening prior, one of his mom’s friends, Oswald, was in the home yelling and screaming, and would not allow Wayne and his mom to leave the home. Oswald was also physically pushing Ms. Neil around the house and Wayne described seeing this before Ms. Neil directed Wayne to run to the neighbor’s house and call the police. Wayne also mentioned another incident in which Oswald &quot;kicked the back door in&quot; hoping to find food in the kitchen and ended up shoving Ms. Neil into the kitchen wall trying to access the refrigerator. Wayne expressed concern Oswald may hurt him or his mother and stated Oswald had not left any food for them to eat for the week. Wayne was also able to provide the first names of several men who have lived with them over the past several months, including Ed and Victor. He reports people who visit the home steal their stuff and sometimes get into fights. Wayne stated one of the scariest things which had happened in the home was when Ed was accused of stealing Victor’s truck from in front of their apartment and they got into a fist fight in the living room; Victor had been in jail for breaking into someone’s house and had apparently come back to the Neil home in order to steal from them. Wayne said he and his mother had told Victor “you can’t have our stuff,” but he turned the electricity off to the house using the breaker and pushed his way in through the front door in order to steal their belongings. Wayne said sometimes these men will babysit him when his mom is gone. Wayne described being stressed out and worried about his mom’s health and if they have enough money. Wayne described his mom sometimes will stay up late to clean the house, and sometimes will be really sick and stay in bed for days at a time. This worker then interviewed Ms. Clarke, Wayne’s care provider, who said she’s not a relative, but has known Ms. Neil and Wayne for a couple months. She and her husband saw them standing on the side of the road holding a sign asking for food and transportation. Ms. Clarke and her husband wanted to help them, and tried to help provide for the family’s needs. Ms. Clarke was not aware of any alleged substance use by Ms. Neil. At 11:15am this worker attempted to contact Ms. Neil at her residence. Initially, no one answered the door. The outside of the home was observed to have a significant amount of what appeared to be discarded household items, empty food containers, alcohol bottles and cans, and personal belongings in the yard. The door of the apartment was observed to have scrapes, dents, and what appeared to be a shoe imprint near the door knob.</td>
</tr>
</tbody>
</table>
Caseworker N’s phrase “all the reasons” also makes visible the caseworker’s orientation to the dependency legal context. Caseworkers explained that the Facts and Circumstances sections of the DPC tend to run to multiple pages. This occurs because caseworkers know that the more reasons they compile in the DPC, the more likely it is they will meet the legal standard of evidence. Caseworker D echoed this idea when she said caseworkers have to “articulate everything they know about that allegation” when writing documents for court. Writing everything is the work they do to persuade the judge that the standard of evidence has been met. She went on to provide an example: “Sister-in-law said that she observed mom using meth in front of her while caring for the child. They [caseworkers] get to write all of that.” As noted by Caseworker D, caseworkers know to provide details that can be connected to the specific allegations against the parent; in her example, “mom using meth” supports an allegation that the mother “exposed the child to illegal substances.” The allegation links to the sub-category of the legal definition of neglect that reads, “By law, a parent/caregiver cannot allow access to controlled substances” (Oregon Department of Human Services, 2020, p. 243). Caseworkers also understand that the evidence needs to be seen as credible to the court; so, for example, Caseworker D includes details that she understands constitute corroborating evidence – that the sister-in-law reported that she witnessed the mother using drugs.

Finally, the DPC is peppered with an array of terms such as protective custody, best interest, and least restrictive that are specific to the legalities that frame the status
of dependency and that coordinate the constitution of the authorized account of the family. For example, there is a prompt in the DPC form where caseworkers must attest to their recommendation that removing a child from their parents due to the alleged maltreatment is in the best interest of the child. Similarly, by checking another box on the form, caseworkers certify that protective custody “is necessary and the least restrictive means available to... protect the child from abuse.” Caseworkers know that their work on the DPC must provide evidentiary details, which, combined with other documents and verbal testimony, will convince a judge that the removal of a child from the care of their parents is not only necessary, but in the child’s best interest.

**Writing the Petition and Crafting Allegations**

In addition to the Declaration of Protective Custody, caseworkers also generate a Petition, a legal document that represents the formal request of the court; anyone requesting any form of judicial action must *petition* the court. For child protection caseworkers, this is the point in the CPS process where the case being developed (that, as I have been showing has been oriented to statute and the dependency legal context since the hotline call) is most explicitly rendered into legalese.

Petition templates are highly structured and contain no narrative sections. The documents are not long; the sample excerpted below and developed for training purposes was four pages, but nearly half of the document (pages 3 and 4) is made up of signatures from the child welfare agency and from the deputy district attorney or assistant attorney general. Much of a petition is boilerplate; that is, for each unique
case, caseworkers make only minor revisions because, as petitioner, the caseworker is simply filing a legal request against a respondent in a case.

The majority of the document is concerned with establishing that the case accords with the legal criteria for bringing the request before the court. For example, “The act or behavior under ORS 419B.100(1)(c) took place in Gotham County,” and, “The parents are within the jurisdiction of the court pursuant to ORS 419B 385387” (Figure 9). Thus, in completing the Petition, caseworkers are organized to verify their compliance with a range of statutory and regulatory requirements. These are activities that caseworkers know to do prior to going to court because of their training and supervision, and their professional ideas about what they must do. In turn, their knowledge about how to do their jobs is reinforced by the requirements and strictures of the dependency legal regime as they occur as items on the Petition.

Figure 9

Petition: Prompts 9 and 10

9. The parents are within the jurisdiction of the court pursuant to ORS 419B 385-387.

10. The child, Wayne Neil, is a resident of Gotham County. The act or behavior under CRS 419B.100(1)(c) took place in Gotham County.

3 The phrase pursuant to is used in legal drafting to link a provision to another provision or to some factual matter. To do an act pursuant to the law is to conform to the requirements of a statute (https://legaldictionary.thefreedictionary.com/Pursuant. Although it is used in legal writing and in the legal community, it is not used in ordinary speech or writing.
The substantive basis for the Petition shows up in response to the prompt, “The child is within jurisdiction of the court by reason of the following facts and pursuant to ORS 419B.100(1)(c),” followed by a list of the particular allegations of maltreatment against the parent. In the sample (Figure 10), these include the mother’s “use of illegal or controlled substances (that) interferes with her ability to safely parent,” leaving the child “unsupervised with persons who have a history of criminal conduct,⁴ resulting in a risk of harm,” and the mother’s inability “to maintain a safe home environment.”

Figure 10

Petition: Prompt 2

2. The child is within the jurisdiction of the Court by reason of the following facts and pursuant to ORS 419B.100(1)(c):

a. Ms. Neil’s use of illegal or controlled substances interferes with her ability to safely parent Wayne.

b. Ms. Neil has exposed Wayne to and allowed him to remain unsupervised with persons who have a history of criminal conduct, resulting in a risk of harm to Wayne.

c. Ms. Neil was unable to maintain a safe home environment for Wayne, in that the home was unsafe and unsanitary.

d. The identity and whereabouts of the child’s father are unknown.

Caseworkers and their supervisors work with assistant attorney generals (AAGs) to craft the allegations against the parent that are included on the Petition. These allegations are related to, but different from, those listed in the Allegation tab of the

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⁴ The nature and timing of the criminal conduct is not elaborated.
ECR and that are the focus of the disposition process described above. Again, the Allegation tab includes a list of the type(s) of abuse/neglect that the parent has been accused of, along with a brief description chosen from a drop-down menu. The allegations that appear on the Petition usually reference the same set of circumstances or events as those in the ECR and are constitutive of the same abuse/neglect type, but they take a different form because they are worked up based on the relevancies of the particular statutory and legal context in which they are activated— as explained below.

In Oregon, the child welfare agency is represented in court by counsel from the attorney general’s office, typically an assistant attorney general (AAG). In addition to appearing in court with the caseworkers, AAGs screen cases to determine whether they are likely to meet relevant legal standards. These standards include the threshold regarding the danger allegedly facing the child and the level of evidence necessary for establishing that abuse has occurred.

At the time of this study, working with the AAGs was relatively new. Supervisor T explained, “It used to be we just picked out allegations ourselves and we went to court and represented ourselves (against the parents).” Of the new practice she said, “I think the hope was that [the AAGs] would help us have more solid cases in the beginning and really have good allegations.” Solid cases are those in which the allegations are likely to be viewed by the judge as supported by a preponderance of evidence; this is the legal
standard that must be met in order to take custody of the child. Good allegations are those backed by evidence sufficient to the standard.

Caseworkers meet with AAGs and review the information gathered by the caseworkers to assess whether there is enough to convince the judge that the child is at risk and that maltreatment has occurred; in other words, is the evidence sufficient to prevail in court? Caseworkers and their supervisors understand that preparing for court is labor-intensive and not worth doing if the judge is likely to rule against the child welfare agency. In addition, removing children or taking families to court and requesting removal only to have the judge disagree is traumatic for families. Supervisor M explained, “You’re causing more trauma if you place them in foster care for the night and now they have to go back.”

Caseworkers, supervisors, and AAGs also work together to craft good allegations. Caseworker N offered the following description. “I’m telling them all the things I’ve learned. We talk about our concerns and help to write the allegations.” She went on to provide a specific example: “The parent’s substance use impacts the parent’s ability to appropriately care for their child and they need the help of the agency to address it” adding, “so we help kind of word those.” As explained above, allegations have to be written in a way that fits the information gathered about the family; there must be a congruence between a specific allegation and “everything [caseworkers] know about that allegation” as it is documented by the caseworker in the ECR and the DPC. The
language of the allegations also has to mirror the definitions of maltreatment as they
appear in statute and policy; that is the reason for the precise wording that reappears
across diverse petitions such as “substance use impacts parenting” and “need agency
help.” Caseworker N knows that this wording constitutes legally rigorous allegations. In
sum, when crafting allegations, with the help of legal professionals, caseworkers work
up what’s happening with the family, as represented by the evidence that appears in the
ECR and the DPC, as maltreatment as defined in statute and regulation.

According to Supervisor T, many caseworkers know what is required for a
successful court case and don’t need the meeting with the AAGs. As she put it, “[The]
reality is that it’s just one more step.” She explained, “I’ve never been in a meeting with
an AAG where they didn’t, where they said ‘You don’t have enough (evidence).’ Ever.
Because we know this work.” In other words, caseworkers know they must ensure that
their cases contain enough information to substantiate the threat to child safety as
manifested by the allegations and that they must back this up in court.

According to Supervisor T, caseworkers know what it takes to prevail in court so
the screening by the AAGs in unnecessary. For this to be the case, caseworkers’
orientation to the legal standards and definitions cannot begin with the meeting with
the AAG. Rather, at a minimum, caseworkers apply this knowledge when they decide
whether to take the case to court; they are already reading information as evidence and
forming at least tentative allegations to match. And according to Supervisor T, many of
the caseworkers are quite good at doing so.

**Compiling Evidence**

In addition to the Declaration of Protective Custody and Petition, caseworkers
provide a host of other documents to the court that serve as evidence in support of
their case. Based on conversations with caseworkers and the hearings I observed, some
of the most common are case files from previous involvement with child welfare,
including when parents were themselves entangled in CPS as minor children. In fact,
caseworkers are required to include documentation related to prior contact with child
welfare agency—including any contact that occurred in a different state. Just as the
family’s DHS history is included in the Declaration of Protective Custody, prior Child
Abuse Hotline calls or CPS assessments are represented as evidence of current
problems, even in situations where there has been no founded disposition.

Caseworkers also frequently introduce as exhibits reports from service providers
such as parenting coaches or counselors who currently or recently worked with parents.
For example, psychiatric hospitalizations, history of substance abuse treatment, and
records relating to criminal activity such as DUls or outstanding warrants were variously
mentioned in the hearings I observed. On occasion, letters or other written statements
from collateral sources such as relatives or neighbors who were interviewed as part of
the caseworker’s investigation were introduced as evidence. It is also important to note
that the amount of documentation submitted by the caseworker can be extensive; one judge referred to the “more than 300 pages” she had received.

These efforts by caseworkers produce an authorized account of what’s happening with the family that is increasingly abstracted from the family’s everyday experience. Information gathered during caseworkers’ conversations with families and home visits becomes evidence in support of the child’s removal from their parents, that itself is constituted as being in the child’s best interest. And allegations of maltreatment that are organized by and that reflect the statutory definitions of abuse become the facts about the family listed on the Petition.

Conclusion

In generating the paperwork described here, caseworkers are organized to re-inscribe and amplify the account of the family as a case of maltreatment. “All the reasons the child is unsafe,” the different pieces of information documented in the ECR, are constituted as the facts of the case included in the DPC. These facts serve as evidence for and are complemented by the facts constituted by the Petition—the specific and explicitly legal allegations against the parent. Caseworkers understand that their job is to win the case against parents, ostensibly for the good of the child. Caseworkers are organized to be explicitly blaming of the parents.

It is perhaps not surprising that caseworkers experience their work as “chafing.” They are committed to their mandate to support families, and they know that the
documents they compile sometimes undermine their efforts to provide assistance to the parents. It is taken for granted among most caseworkers and service providers who work closely with parents that parents should not read the documentation provided to the court (and made available to parents via their attorneys) without having a support person present because of how painful it is to be confronted with pages and pages of mostly critical material.

Caseworkers expressed other concerns about their activities in this regard. Reflecting on the Domains of Family Functioning, Caseworker N commented, “Sometimes I wonder if maybe we document more than we need to about people, to be honest with you.” Supervisor T had a related concern:

As we go into homes over and over again, and the calls come out on people of color and people in poverty, those are the ones that we get called out on over and over and over again. And over time, it’s exactly what you said, “concerning thing,” “concerning things,” “concerning things.” We are stacking history on them. We do history and look back [at existing records] and it says “concern” after “concern” after “concern,” and that’s documented until, over time, people look terrible on paper.

Her comment notes how caseworkers “stack history” on families as they respond to and document repeated calls to the hotline. She also notes that caseworkers use these records when they “do history” as part of their information gathering. This history is
then incorporated into the written account generated by the caseworker of what’s happening with the family.

The description of caseworkers’ documentary activities above also illustrates that the narrative and other information they generate in ECR and court documents is a select and highly curated account of what’s happening with families. For example, caseworkers know to write about the family using language from the Safety Threats and statutory definitions of child abuse. They are organized by prompts and drop downs to record the allegations of maltreatment against the parents as the “facts” of the case. They choose to include particular information about the family based on the logic of the court process. In this way, the authorized account taken up within the CPS process becomes decidedly negative as well as removed from families’ everyday experience.

As caseworkers engage in the text-work-text processes associated with the ECR and the documents required by the court process, their orientation to the legal context is increasingly visible. For example, Supervisor T commented that involving AAGs in screening cases for legal sufficiency prior to court is unnecessary because caseworkers know to read the information they gathered about the family as evidence, specifically evidence in support of particular allegations of maltreatment against the parents. Check boxes organize caseworkers to attest to their compliance with applicable statutory and regulatory requirements. The relevance of the legal context is also visible in caseworkers’ description of their work, as when one of the caseworkers summarized the narrative she wrote for the DPC, “This is why we’re here [in court].” Caseworkers’
understanding of the need for enough evidence also encourages the compilation of long lists of parental failings and hundreds of pages of exhibits.

From the outset of their reading of the report from the Child Abuse Hotline, CPS caseworkers are organized within the textual ruling relations to engage in processes of both writing and reading that inexorably reflects and intends the dependency legal context. More to the point, caseworkers are organized to generate an authorized written account of the family that intends the policing and punishment of parents facing significant challenges to caring for their children. The next chapter explores the ways in which casework is organized during court proceedings.
Chapter 5: CPS Part 3--- Appearing in court

Caseworkers know that the services and other resources available from Child Protective Services are limited. When these have been exhausted and parents are still unable to provide adequate care for their child, a decision is made to remove the children from their parents. This decision draws caseworkers and families into a series of hearings that constitute the early part of the formal stages of the dependency legal process.

CPS caseworkers understand that they play a pivotal role in the dependency legal process and that going to court is an important facet of their job. As mentioned in Chapter 1, caseworkers complete a week-long training, How to prepare for success in court, that covers a range of topics including how to present cases effectively in court, preparation strategies and skills, the purpose and findings made for each type of juvenile dependency hearing, and understanding the caseworker’s role within the larger system of government. A significant portion of the training is devoted to improving caseworkers’ ability to deliver effective testimony.

High-quality testimony relies on casework that happens well before the decision is made to take the case to court. As described above, caseworkers compile the materials that are submitted to the court on behalf of the child welfare agency, including the Declaration of Protective Custody and the Petition. In generating these documents, caseworkers pull from the ECR (for example, the assessment write-up) that
draws on information gathered as part of caseworkers’ interactions with the family, school teachers, health professionals, and other service providers. These work processes culminate in caseworkers’ testimony—caseworkers provide the vast majority of the testimony that is offered during these hearings. What caseworkers do when they appear in court builds on the work-up of the family as a case of maltreatment accomplished by casework that began with the receipt of the Screening Report. The testimony and evidence provided by caseworkers are the focus of this chapter.

As described in Chapter Two, my field work included observations—both in person and via conference call—of a variety of dependency court hearings. The information below is based on notes and transcripts from those hearings as well as interviews about court with caseworkers, supervisors and a peer parent advocate.

Shelter Hearings

When a caseworker determines that the situation in the family meets the “imminent danger” threshold as outlined in the safety model, they have the authority to place the child in substitute/foster care; however, they must seek permission from the court either prior to or within 24 (judicial) hours of the child’s removal from their parents. This is called a Shelter Hearing, and it happens in a courtroom in front of a judge. In addition to the judge and the clerk, the AAG, the district attorney, attorneys
for the parents and children, the parents are also present. Parents who cannot afford to hire a private attorney are assigned counsel (a public defender) at the beginning of the hearing, and they sit next to them during the proceedings. It is important to note that typically this is the parents’ first contact with their attorney; as a result, their sole support sitting near them in the courtroom is a stranger to them.

Caseworker B explained the purpose of the hearings: “Our initial trip to court comes, really, one of two ways. Either we think a child is unsafe and we're going to the court to get permission to take them into custody, right, or we've already taken them into custody because we needed to, and we’re explaining why and getting that justified.” In other words, taking custody of a child requires permission from the judge, and as part of requesting it, the caseworker must explain to the judge why they think the child is unsafe. At this hearing, the judge must decide whether the child can be safe at home while awaiting the subsequent hearing and whether the evidence warrants the subsequent hearing in which a judgement about maltreatment is rendered. As Judge H. explained at the start of a hearing I observed, “I do not make findings today as to whether the allegations as listed [on the Petition] are true or not, but whether there’s enough evidence to believe that an on-going investigation should continue and whether a juvenile court jurisdiction is probable at a later date.” Put differently, the judge makes a prediction about how likely it is that the parents will be found guilty of the

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5 The hearings can go ahead even if the parent(s) are not in attendance. However, caseworkers are required to notify parents about the hearings, and parents participated in all but one of the hearings I observed.
allegation(s) at a jurisdictional hearing or trial, which then justifies the decision to allow
the investigation to proceed. Therefore, as the representative of the child welfare
agency that is bringing the case against the parent, caseworkers are responsible for
convincing the judge that the child cannot safely remain at home and that the parents
are likely to be found guilty of maltreatment when the investigation concludes.

During the hearing, different participants take turns speaking, and there are
occasional references to the written evidence. Chapter 4 details the extensive
documentary practices caseworkers undertake that are foundational to the materials
submitted prior to the shelter hearing. These materials are also read by the judge prior
to the hearing, and together with the oral testimony, represent the evidence on which
the judicial decision is based. Typically, the caseworker who conducted the assessment
and who generated the documentation participates in the court process as the
representative of the child welfare agency. Caseworkers speak relatively early on during
the hearing; what they say often occupies a large portion of the time.

Some of the social relations that organize caseworkers’ activity are easy to see.
For example, the way in which hearings are conducted means that almost all of what
caseworkers say is in response to questions or other prompts from the judge or AAG. All
of these prompts are oriented to the dependency legal process, in particular, the
specific legal issue being decided, and they are often laden with legal concepts and
categories. For example, in one of the hearings I observed, after the judge started the
hearing by announcing the case and formally accepting the written materials as
evidence, she addressed the caseworker saying, “I am in receipt of the preliminary hearing report that was generated by the caseworker as well as the attachments. If you could please provide a summary kind of focusing in on what supports probable cause, what you’re asking for and why.” In this example, the judge directed the caseworker to focus on information that supported the allegations against the parent (the allegations on the Petition are the object of probable cause) and made an explicit reference to the probable cause standard of evidence.

The caseworker responded to the judge by stating the following:

Baby tested positive for cocaine and oxy at birth. Parents have been uncooperative— not working with the staff at the hospital when they provide instruction or coaching regarding feeding and care for the child. [Caseworker then told a story about how the father continued to try and get the baby to take the pacifier even after the nurse told him to stop.] The parents are also reported to be falling asleep and missing opportunities to meet with the nurses and staff. Other evidence of their being uncooperative included the parents’ failure to provide [child welfare agency] with names of relatives or collaterals that could serve as SSPs [safety services providers]. DHS is also concerned about what this sort of behavior means for the older children; they haven’t been in school for

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66 This quoted testimony and others that follow are based on notes typed during the hearings as I listened remotely during COVID restrictions. Immediately following the hearings, I reconstructed transcripts verbatim.
over a year and their absence pre-dates COVID. There is also concern about power and control. Dad was seen to interrupt and answer for mom even after she expressed a willingness to engage or answer. There is concern that the family is very isolated and what this might mean for the children. Unfortunately, the parents have not been cooperative, so temporary custody is requested.

Using a variety of strategies, this caseworker responded to the judge’s prompt to provide evidence in support of the allegations against the parent. She starts off by saying that the child tested positive at birth for drugs, which establishes both that the child has been harmed and that the mother used substances during her pregnancy. This caseworker also knows to use the word *uncooperative* to characterize the parents’ behavior, including not responding “appropriately” to coaching from hospital staff and refusing to provide the names of people who might work with the child welfare agency as SSPs for the family. SSPs monitor parents’ interactions with their children at the behest of the agency as a way to ensure child safety. The caseworker also lists a number of other concerns such as the older children’s lack of school attendance, the father’s use of “power and control” with the mother, and the family’s isolation. She uses a professional lexicon in her statement, referencing *collaterals, SSPs and power and control.* In addition, the statement includes no mention of anything positive about the parents. This caseworker relies on her professional expertise to select details and make purposeful lexical choices in her summary in support of probable cause in her effort to persuade the judge.
The request from the judge is not the only institutional process coordinating the testimony, however. In her statement, the caseworker repeats the write-up of the family she generated in the DPC and other materials submitted to the court. What she says is organized by those written documents as she reads from them in her response to the judge. Similarly, Caseworker T noted during her interview that she is careful to write out the key points from the court documents, in large font, that she plans to share as part of her testimony. In this way, the caseworker’s testimony reflects and carries forward the constitution of the family as a *case of maltreatment* accomplished by the caseworker’s documentary practices.

The same institutional process was visible at other hearings I observed. A different caseworker began a very long response to the judge by reading mostly verbatim from documentation about calls to the Child Abuse Hotline. She started with, “There was a report that the child had gotten out and was at construction site alone and was returned to apartment, and mother wasn’t there.” She explained that the agency had received four subsequent reports, “all with concerns about supervision in the home.” Next, she read that “the child was seen at the bus stop for two hours in the community. Child says she didn’t know when her mother was supposed to be there; mother showed up two hours later.” The caseworker continued, “The next report, allegations of neglect. The child was at the park and had to cross two lanes of traffic to get there. Also stole candy from CVS.” Then she said, “Next, paternal uncle had taken nap and kids were found in the lobby.” The caseworker continued reading the notes
from two additional reports that described the children leaving the home or being left at home without their mother or another appropriate adult. In her statement, this caseworker is organized both by the prompt from the judge and the documentation related to calls to the Child Abuse Hotline (likely as part of the history done by the caseworker who wrote the court report) to constitute what’s happening with the family as repeated and significant parental failure.

The caseworker next stated that the agency “did interview the mother” adding that the agency has information that “conflicts” with the family’s version of events. She continued to read from the court report and described various efforts to provide assistance, for example, “gave money for locks but that didn’t work out.” She then detailed the increasing levels of support provided to the family: “New service referral to [name of agency]... Switched ISRS referral to after school 2 days a week and another service the other 3 days...,” noting that the agency “had to put protective action plan in place with 24/7 supervision.” She explained that the most recent effort had failed, saying, “Mother called with complaints and workers expressed concerns [including] needle caps in the home, rubber medical grade band, sanitation in her bedroom, general supervision—mother in her room, and sanitation in the home—spoiled food and broken toilet.”

As with the earlier example, this caseworker was reading, often verbatim, from the documents submitted to the court. However, another institutional process helps us to understand how she knew to list the supports offered to the family. Caseworker N
explained that as part of their testimony, caseworkers have to demonstrate that they have fulfilled their responsibility to help the child remain in the home. In her telling, caseworkers know to “depict the social services you’ve offered and things you’ve done in a way to show that we’re meeting our standards.” Those standards, outlined in statute and regulation, require caseworkers to make reasonable efforts to preserve and reunify families, and judges are responsible to monitor and rule on their compliance as part of the dependency legal process. In this way, caseworkers are organized to chronicle the various offers of assistance that were ineffective or that the parent, for whatever reason, declined. These failures also help build the case that the problems facing the family have exceeded the agency’s ability to ensure child safety without additional intervention.

The AAG then asked the caseworker about the mother’s mental health. The caseworker replied by continuing to read from her notes saying, “Mother is very open with DHS about mental health, has sought help on her own and had to cancel an appointment due to court. There is a referral for service to [service provider] and a psych eval. Mother is open about PTSD and anxiety and need for support.” In her reply, the caseworker again draws on written records of actions by the agency as well as the mother. This part of the statement is also notable because the caseworker includes a rare mention of something said by the mother: the mother appears as a key witness regarding her mental health issues and need for help.
Both caseworkers above knew to use reports submitted to the court as scripts for their testimony. Caseworkers are thus organized to provide an account of the family that repeats the lexical choices and litany of parental failures that characterizes the documents submitted to the court. These features of documentation produced by caseworkers are used to buttress the child welfare agency’s case against the parent. This also points to the idea that caseworkers do not simply respond to the prompts or questions. They also bring to bear their understanding of what makes sense based on their training (referenced above) and experience; this knowledge is activated by the prompts from the judge and others. In other words, caseworkers are organized to testify as they do by the back and forth of the hearing as well as their knowledge about what it takes to prevail in court.

Following their initial statements, caseworkers participate in hearings almost exclusively in response to prompts and questions from the judge, the AAG, and occasionally, the attorney representing the parents and the child. These questions and prompts are oriented to the judicial decision-making that is the purpose of the hearing—that is, whether the evidence submitted to the court via the written documents and oral testimony supports the idea that the parent is guilty of maltreatment and that the child is unsafe in their care. Accordingly, the AAG (and, at times, the DA) prompts the caseworker to speak about the family in a way that supports the allegations of maltreatment, while the parent’s attorney (with less frequency given
that they are typically unfamiliar with the case) asks questions designed to solicit information that weakens the argument against the parent.

In the shelter hearings I observed, the remainder of the time was spent developing a plan for the child’s placement as well as visitation for the parents. Judges sometimes ask for clarification about something in the documentation the caseworker submits to the court. It is also common for judges to ask for up-to-date information about the child-- including how they are doing in their current foster home (if they’ve been removed from their parents). Once or twice, caseworkers responded to questions from the DA or the parents’ or children’s attorney, but, in the main, the judge’s decision was based on the information provided by the caseworker during their initial statement as well as the judge’s review of reports and other documents submitted by the caseworker. In all but one of the hearings I observed, the judge granted protective custody; in other words, the caseworker prevailed and won the case.

**Establishing Jurisdiction**

Caseworkers also play a key role in the next step in the legal process-- after the shelter hearing--when the judge determines whether the parent is guilty of maltreatment and then issues orders regarding child placement and various activities required of the parent. This is referred to in court parlance as *establishing jurisdiction*. While parents are legally entitled to take their case to trial, what typically happens is that parents agree to plead guilty to one or more of the allegations in *pre-trial* and
settlement conferences. While conferences are seen as preferable to a trial for most parents (for reasons that are beyond the scope of this dissertation), during both trials and conferences, judges can make the child a ward of the court. This can happen if at least one of the allegations against the parent is proven by a preponderance of evidence or the parent pleads to the allegation(s) (ORS 419B.100).

In the courtroom, these conferences look similar to the shelter hearings. The judge sits above everyone else while attorneys, the DA, the caseworker, and the parents all sit at tables below, and the proceedings are marked by the use of legalese and a highly structured and formal process. AAGs frequently ask the caseworkers a series of questions prior to inviting them to provide information about the family. These initial questions include, “Where do you work? What is your role? How are you associated with the case?” Caseworkers answer these questions with reference to their status as caseworkers employed by the child welfare agency who are responsible for conducting assessments in response to allegations of maltreatment. This invited introduction works to establish their authority to speak knowledgeably and to provide credible evidence about the family. Other questions concern the caseworkers’ relationship to the documentation they submitted to the court—such as the Petition and other reports. For example, AAGs ask, “Are you familiar with the materials submitted to the court and (the

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7 In the vast majority of cases, a settlement is reached, and the case does not proceed to trial. This happens, in part, because the involvement of the AAGs in screening cases to be brought before the court (the legal sufficiency staffing described above) increases the likelihood that only cases the caseworker and the agency are likely to win are presented. Parents’ attorneys often advise parents that they are unlikely to prevail at a trial if the child welfare agency has garnered sufficient evidence against them and as a result, most parents decide to plead guilty.
family’s) past history with the (child welfare) agency?” “Are you familiar with the petition?” “Is the information accurate to the best of your knowledge and beliefs?” During the hearings I observed, caseworkers answered these questions in a perfunctory manner with “Yes.” In addition, caseworkers do so under oath. In this back and forth between AAGs and the caseworkers, caseworkers are established as qualified, and so constituted, they attest to the accuracy of the evidence they generated against the parent.

Next, the AAG prompts the caseworker to speak about the family. During one of the hearings I observed, the AAG read the allegations as they appeared on the Petition and then asked the caseworker, “What is the underlying factual basis of that information [the allegations]?” This phrasing echoes the wording of the Petition in its references to fact as well as its orientation to the allegations. The prompt organizes caseworkers to speak directly to and in support of the allegations; it also a priori constitutes the replies offered by caseworkers as factual. As in the shelter hearing, caseworkers are explicitly oriented to the judicial decision that is before the court: whether the parent is guilty of maltreatment.

In turn, caseworkers’ responses repeat selections from the more narrative sections of their documentation. One caseworker began by stating that the mother had a “long, extensive, well-documented history of SUD (substance use disorder)” that included “lots of unsafe decisions,” adding that “substance use is a priority over her children.” The caseworker then said she had encouraged the mother to enter inpatient
treatment but the mother refused. The caseworker added that the mother “minimizes her substance abuse.” She continued that the mother “admits to leaving the children alone in the apartment, flooding the apartment while they were there, and getting a DUI with the children in the car.” She then stated that the mother “has mental health issues that impact her parenting but mom denies this,” adding that she “has multiple diagnoses—PTSD, anxiety, anti-social, paranoid, narcissistic.” Thus, caseworkers repeat the safety threat and maltreatment lexicon that appears in the documentation, reinscribing the family as a case of maltreatment before the court. In addition, caseworkers’ use of phrasing such as “well-documented” and “admits” helps to accomplish the credibility of the information within the legal context. Caseworkers know to present the evidence included in the documentation in a way that will be persuasive to the judge.

During the hearings I observed, the opening statements by caseworkers also tended to be quite long. As cited earlier, Caseworker D commented that caseworkers are supposed to include “all the information” about an allegation; caseworkers know to do the same thing during these hearings. For example, in a case regarding a child born prematurely, the caseworker began her response to the judge by saying that the mother “disclosed that she had been using methamphetamine, cocaine, and alcohol during pregnancy; both tested positive for methamphetamine and marijuana at the baby's birth; and the baby's meconium also came back positive because of those substances.”
Only then did she pause before adding, “The father of the child who was on the birth certificate acknowledged current methamphetamine use as well.”

The caseworker then explained that the parents “are currently houseless and live in a tent in a homeless camp” and that “the agency has offered housing referrals to both parents, which were declined.” She went on to say that a recovery-related agency had called to offer services but the father “was heard hitting the mother” and later “she was seen with an injury to her face.” Child welfare agency staff had attempted to “connect mom with a domestic violence advocate yesterday, but that failed.” She added that while the mother “has been going to the hospital regularly [to visit the child], medical staff have had to prompt and assist her with cues for the care of the baby and she has had to have a lot of information and instruction repeated over again.” The caseworker continued, “This is (the mother’s) sixth child. Her other children are removed from her care due to her limited cognitive functioning that impacted her ability to effectively parent as well as for being subjected to ongoing domestic violence in her past relationships. And in the prior child welfare case, [the mother] was unable to maintain a safe home environment or to mitigate these concerns.” The caseworker went on to reference results from a psychological evaluation of the mother conducted five years earlier as part of her involvement with the agency and read out loud from the report:

Of pressing concern are her intellectual disabilities that confuse and impair her relationships and judgment. Her intellectual deficits will not likely improve with time and increase the risk that she will exhibit impaired judgment and not
sufficiently appreciate and respond to her children's emotional, physical and
safety needs. And her substance use further amplifies her deficits and increases
her confusion, impaired judgment and negligent parenting.

Similar to those offered by caseworkers during the shelter hearings, the statement
above repeats many of the documentary practices described in the previous chapter
including lexical choices, the broad scope of parental failings, and the use of the family’s
history with the child welfare system as evidence against the parent, as the caseworker
uses the documentation to prepare their testimony. Moreover, oriented to the
allegations against the parent and the standard of evidence, the caseworker is organized
to present a very long list of concerns as the relevant facts about the family. Caseworker
B described what she did during the hearing by saying that caseworkers “pull out all the
information to prove that what we did was the right thing to do... Professionally... I just,
I have to pull all those facts in.” This caseworker understands that she is obligated as a
professional to prove that removing children was the right thing by presenting “all the
information,” “all those facts.”

Following the initial statement, caseworkers often engage in a back and forth
with the AAG that elicits additional evidence of maltreatment. For example, in the quote
below, the AAG specifically asked the caseworker to provide additional information
related to the allegations. “Okay, just talk briefly about a little bit more information for
the allegations that you mentioned. In addition to the baby and mother testing positive
at the time of birth, was mother’s behavior also concerning? And did she ever appear to
be under the influence?” The caseworker replied, “Yes, she appeared under the influence at birth.” The AAG continued, “And then, it was mentioned in your report about a canceled UA (urinalysis drug test). Can you talk a little bit about that?” The caseworker replied:

Yeah, she was sent, asked to participate in, a UA by this agency, or it might've been Project Nurture. I apologize, it was us. And, on the day that she was supposed to have the UA, she had called indicating that she couldn't make it because she had had an infection from her C-section. And then she had accidentally, what appeared to be accidentally, called [name of residential treatment facility] and was overheard in the background stating that she had “got out of that UA.”

The AAG then referenced the psychological evaluation mentioned by the caseworker during her initial testimony and asked her, “And just to be clear, are the concerns that were noted in that psychological evaluation still concerning to the agency today?” The caseworker replied, “Yes, very much so. I don't believe that any of the concerns that were listed have been mitigated as of this date, and that in all prior DHS cases they weren’t mitigated either, which led to the termination of parental rights on that case.” In her answer, the caseworker went beyond the question actually asked by the AAG and stated that the mother’s parental rights had been terminated as part of an earlier child welfare case. The caseworker then shared that other people had also made mention of violence on the part of the father and provided some details. She concluded
her statement by saying, “DHS has previously offered services both in this case and in earlier cases” and listed a number of examples.

This caseworker and others I observed understood that the prompts from the AAGs offered them the opportunity to reiterate and add detail to the facts about the family they had provided in the initial statement. By adding to the list of parental failings and sharing details that strengthen the credibility of the account, they knowingly constructed an account that would help prove that the parent is guilty of maltreatment. As I suggested in the discussion of the shelter hearing above, caseworkers do not simply respond to the prompts from the AAG. Rather, the prompts activate their knowledge about what constitutes a strong case against the parent.

Furthermore, a review of caseworkers’ oral statements makes visible their understanding of the types of information necessary for a strong case. For example, one caseworker began her testimony with a reference to a mother’s drug use. A different caseworker referred to a mother’s history of psychiatric hospitalization in her opening statement. As part of yet another hearing, the caseworker made mention of the mother’s “unresolved mental health.” Finally, another caseworker reported that a mother had been suffering from untreated post-partum depression and that there were concerns about substance abuse by the parents. In fact, mention of the latter is very common at shelter hearings. In all examples above, caseworkers understand that suggesting parents are struggling with mental health or behavioral health issues helps prove probable cause. In other words, caseworkers present information related to
chronic health conditions, which are common among families involved with child welfare, as evidence against the parent.

Also of interest are caseworkers’ frequent mentions of parents’ failure to comply with requirements. For example, when asked by the judge to explain why the agency was requesting protective custody, a caseworker stated that the mother had been pinned to the side of the house by a car driven by the child’s father, adding that neighbors reported the father was living at the house, which had been forbidden by the child welfare agency. The mother denied that this was true. The caseworker also said that the mother had relapsed and thus far had not engaged sufficiently in treatment. At a different hearing, a caseworker described the mother’s leaving a treatment facility without obtaining permission. In another, the caseworker recounted how a mother stayed out from her housing program with her children past curfew and allowed their grandfather to transport them without the agency’s permission. Another caseworker noted that the parents had refused to talk with her during her visit to the home. It bears mention that institutional processes of surveillance and permission are used to constitute resistance and non-compliance by parents. More to the point, these caseworkers know to present the fact of non-compliance or failure to cooperate as evidence against the parent, aside from any actual harm that results for either children or parents. Indeed, no harm was reported by these caseworkers.

Sometimes, rather than describe an actual event, caseworkers accused the parent of a particular (negative) type of behavior. For example, as part of her opening
statement, one caseworker said that the mother “hasn’t been transparent” and needed to “stop lying to the agency.” She added that the mother was “unable to put the best interests of the children over her own needs.” Other caseworkers also characterized mothers\(^8\) as choosing substance use over their children. Only rarely did the caseworkers I observed during shelter hearings include positive mentions about the parents in their initial statements. In one hearing, the caseworker said that the mother had “sought help on her own” for her mental health issues. As she concluded, another caseworker noted that immediately prior to the hearing, the mother had told her that she was willing to do treatment. A few caseworkers reported that the parents had said that they want to parent their children.

Caseworker D summarized the work caseworkers do related to the jurisdictional process by saying, “We have to prove the parent is unsafe or unfit for whatever reasons related to the allegations.” As with the discussion about documentation above, caseworkers understand that the allegations serve as the focal point of their account of what’s happening with the family. They also understand what it takes to prove their case. As one caseworker commented, “They don’t ever ask us to testify about [positive information about the family] in court.” Caseworker D explained, the only story it makes sense for caseworkers to tell about families struggling to care for their children is that the parents are unfit or unsafe.

\(^8\) I never heard this statement made about a father.
Conclusion

Caseworkers are organized to detail a litany of parental failures as they participate in the court hearings that make up the early stages of the formal dependency legal process. The lists they speak out loud as they give their testimony include children left alone and missing school; children exposed to dangerous drugs and potentially violent people; mothers who used substances during pregnancy or who suffer from a variety of mental illnesses; mothers with partners who are violent or who use power and control; homes that are unsanitary; parents who fail to abide by or fulfill a variety of program rules and expectations; and families experiencing homelessness.

Caseworkers expressed concern about the impact on parents of being present and listening to these accounts of their family life. One caseworker said simply, “The system is scary.” Another shared her understanding of what it was like for parents: “I think parents’ experience is often of being attacked. They feel disempowered. They feel like, ‘All you ever do is talk about all the mistakes I’ve made.’” Another commented that parents find the process “painful, because it is; it just is. There’s no way for it not to be.” Another caseworker expressed concern about the impact on her ability to form a productive partnership and stated that she can “feel a difference in our relationship (after the hearing)” and that parents are “hurt by what was said.”

A number of caseworkers tried to mitigate the potential fallout from the court experience by talking with parents prior to the hearings. Caseworker B said that she tells parents, “I'm sorry. You're going to hear these things come out of my mouth and it
sucks. It flat out sucks for me to say it; it doesn't feel good for me to talk about the bad things. It doesn't feel good to hear about them, but just know that I still very much recognize the good things that you're doing.” Caseworker N tells parents, “Things are going to get horrific. I just want you to know that doesn't reflect on how I feel about you personally, but professionally that's what I have to do. And it doesn't mean that you're a bad person and it doesn't mean that I dislike you.” Caseworker D offered a somewhat similar caveat to parents:

I always tell them “I have to talk about all the bad things or the things that are not going well. I'd love to tell the judge about all the things you are doing well. For example, this this and this. Those are great things I'm very happy that you're doing. I'm proud of you for doing that. However, we're not there yet. There's still a lot of things that we need to work on.”

All of these caseworkers understand that professionally, they have to provide a decidedly negative account of the parents in the courtroom, even though they are aware of the good things and are proud of the parents. As a result, they try to warn parents that court will likely feel horrific and assure them that it doesn’t mean that the parents are bad people.

One caseworker commented that preparing parents made the experience better for her: “When you have to sit there and say these things, it's awful, it sucks. But if you tell (parents) you're going to say it, it doesn't feel so gross.” However, they also
acknowledged that warning parents had a limited effect. Another caseworker explained, “No matter how much prep work I do going into that, there is still, it, it hurts.”

Some caseworkers with whom I spoke pointed out that hearings were civil rather than criminal proceedings. Caseworker T commented, “It's not criminal; this doesn't go on a criminal record. This is just for jurisdiction purposes and services.” Others conceded, however, that for many parents, this distinction was small comfort. Caseworker B said that while she explains to parents that civil and criminal proceedings are separate, “…especially if they've had that history before, it feels like the same process.” Another caseworker commented, “It's the language, the fact that we're going to court with allegations against them, that feels almost like criminal charges,” and for this reason it feels like “parents versus the agency.” Caseworker T worried that the legal process was “so cold” and “professional” and that it represented an unfamiliar “world” that “parents are not ever exposed to.” She explained, “This expectation that (parents) are just going to come and understand what's going on” is a mistake.

Caseworker T also described another dynamic that could be problematic for building a supportive relationship with the parents when she described what it’s like to speak to the judge:

You're under the gun. Your work performance is under the gun. And so maybe, just even in that moment, rather than focusing on the family, the worker is more focusing on themselves, which totally detracts from the family's needs. Because
the worker is focused on “Your honor, I did this, and this, and this” because you're not wanting to [be publicly criticized by the judge].

Caseworkers were right to be concerned about what it felt like for parents during the hearings. A peer parent mentor I interviewed explained what the experience was like for her when she was a child welfare-involved parent and for many of the parents she worked with: “[You’re] not there for anything positive the parent has done. There’s nothing good said about parents almost at all.” She also pointed out how “language in the court room is so dehumanizing on a regular basis, especially when parents don’t know all the legal jargon.” She added, “To have all of your dirty laundry laid out like that, to be completely dehumanized and then have your child removed is absolutely devastating.”

In the descriptions above, the organization of casework by the dependency legal regime becomes apparent. The institutional processes that organize casework to happen as it does during the hearings include the prompts and questions from the judges and the AAGs. In addition, as noted above, caseworkers also draw on their training and other professional knowledge about how to be successful in court when they respond to the judge by citing a long list of parental failures. Caseworkers understand the particular purpose of the shelter hearing, for example, and that they are responsible for convincing the judge that the child cannot safely remain at home and that the parents are likely to be found guilty of the allegations of maltreatment when the investigation concludes.
There is more to be said about the social relations of the courtroom, however.

As described above, caseworkers often read from the reports and other written materials submitted to the court when delivering their testimony. The work-up of the family as a case of maltreatment is a part of caseworkers’ documentary practices related to the ECR, the Petition, and the DPC. It serves as a “script” for the caseworkers’ presentation of what’s happening with the family in court. This suggests that caseworkers’ documentary efforts are a rehearsal for their testimony, whereby they must present a compelling account of maltreatment by the parent as part of the oral proceedings. They must present testimony elicited by standard judge’s prompts that activates the judicial decision to be made. A successful testimony orients to the dependency legal process, and caseworkers are organized to prove parents are unfit. The result is casework that intends and accomplishes the policing and prosecution of parents from well before the case is actually presented before the court.
Chapter 6: Discussion and Conclusion

In 2017-2018, while conducting an evaluation of an intervention designed to increase engagement among parents and help keep parents and children together, I spoke with Katie, a single mother. She was experiencing homelessness, and her seven-year-old child, Crystal, had missed a significant amount of school. Child welfare had placed Crystal in foster care, and Katie remained homeless for over a year. Katie was reliant on a walker and had a mental disorder for which she received disability payments. She had accumulated a significant level of property debt, which added to the challenge of securing housing. Katie and Crystal were deeply bonded, and their separation was painful for both of them. Katie was also very bright and had a biting sense of humor.

The family’s challenges were framed by professionals as the mother’s neglect of her child, and much of the discussion during case planning meetings focused on the allegations against the mother related to the child’s absence from school and her exposure to unstable housing and other “dangerous” or “concerning” circumstances. As the case progressed, caseworkers and other professionals continued to highlight Katie’s failure to secure housing, which was frequently framed as a lack of cooperation and on occasion, resistance. Katie’s therapist was also openly critical of the mother, chastising her for being late and missing appointments. Meetings typically involved some measure of hostility between Katie and some of the professionals, even as the facilitator worked to calm tensions and focus on progress and other positive events. At the time, I was
both bothered and puzzled by the decidedly negative, reproachful construction of Katie’s struggles—especially in light of the animosity and tension this seemed to engender between the mother, the caseworker, and other providers.

Many of the dynamics that I found troubling about Katie’s case are present in the descriptions of casework that make up Chapters Three, Four and Five. Caseworkers are suspicious and fearful of the parent, accuse the parent of maltreatment, focus on finding fault with the parent, blame the parent for what’s happening with the family, gather information against the parent, and prove that the parent is guilty by documenting their failures and testifying against them. Especially when working with families who are facing some of the most significant challenges, caseworkers are organized to generate and present an account of family life that that intends and (often) accomplishes the policing, prosecution, and punishment of parents.

The routinized policing, prosecution, and punishment of parents has received renewed attention in the last ten years. Prominent critic of child welfare, Dorothy Roberts (Bridges et al., 2019) asserts that the institution of child welfare “relies on terrorizing families” (p.457). Roberts (2022) argues that assessments done by Child Protective Services are significantly more intrusive than being stopped by the police, noting that caseworkers:

…make multiple unannounced home visits at any time of day or night, interrogate all household members, force children to disrobe, do criminal
background checks, and request personal information from teachers, hospitals, therapists, and other service providers (p. 3).

During COVID-19 quarantine, fewer home visits were conducted. Hurley (2020) described parents’ experiences during the pandemic as a “collective sigh of relief.” One parent was quoted as saying, “They’re not opening my refrigerator. They’re not opening my dresser drawers. They’re not strip-searching my children.” Parents living in neighborhoods that saw a dramatic decrease in reports described an experience of “the pollution lifting” and further reported that COVID provided “a much-needed respite from the intense and relentless surveillance of low-income moms, and especially those who are black and Latinx.”

A recent report by Rise (B et al., 2021), a New York City-based advocacy organization, highlighted families’ harmful interactions with child welfare. One parent said the child welfare agency, “…didn’t help me heal. They actively disregarded me.” Another said child welfare “…doesn’t help parents who are struggling. If anything, they add to the struggle” (p.13). In general, parents interviewed by Rise found interactions with caseworkers stressful and even traumatic. One participant was quoted as saying, “I felt like I was being judged instead of being understood based on the situation” (p.19). Another participant commented that the caseworker’s focus “on the allegation” lead her to feel like, “My voice didn’t matter. Nothing that was pertaining to me mattered to the system” (p.20). As a result, families failed to get the assistance they needed. A participant explained, “I asked for so much, and none of it was heard. They didn’t care
about what I needed, what my kids needed” (p.20). Another participant agreed that the current system made it difficult for parents to get help: “Don’t make it like you have to be charged as this monster person just to get some assistance, don’t make it like that” (p.21).

As I argued in Chapter One, child welfare comprises a critical component of the public aid available to families struggling to care for their children. Dynamics such as I observed in Katie’s case, and those described by the parents quoted above, impact the extent to which caseworkers are able to provide meaningful supports. These dynamics also make it less likely that parents are able and willing to seek assistance and engage in services. As noted earlier, the families facing the most significant challenges are also those subject to the whole of the dependency legal process. These are families whose caseworkers most strongly reflect the strictures and concerns of the dependency legal regime. In other words, families experiencing multiple disadvantages and more serious adversities are most likely to be prosecuted, policed, and punished.

However, even families whose problems are less severe are subject to many of the same troubling practices. CPS caseworkers come into contact with millions of families every year across the U.S. (U.S. Department of Human Services, 2020). In Oregon, as in other states, the vast majority of these cases are closed at assessment; that is, the caseworker decides that the family does not require additional services or intervention (Office of Reporting, Research, Analytics and Implementation, 2020; US Department of Human Services, 2020). In 2019, slightly fewer than 22% of assessments
received a founded disposition (Office of Reporting, Research, Analytics and Implementation, 2020, p. 4). Even among those children found to be victims of abuse, for more than two thirds of these children, the child welfare agency in Oregon determined that it was not necessary to open a case to keep them safe (Office of Reporting, Research, Analytics and Implementation, 2020, p. 5). In other words, while many Oregon families could likely benefit from additional resources and supports, the children are not facing a significant risk of harm. Nonetheless, the Screening Report identified what was happening as a type of abuse; the description of the event was written to reflect the safety threats and definitions of maltreatment; and perpetrator(s) and victim(s) were identified. In addition, caseworkers detailed these concerns during their initial contact with the parent, and specifics shaped caseworkers’ conversations with collateral reporters that were contacted during the information gathering process. Finally, information about the family was documented by the caseworker in the ECR and thereby became part of the family’s history in perpetuity—a nontrivial record that will affect any future contact the family has with child welfare and other systems including employment, education, and criminal justice.

**Explicating the Casework Problematic**

My project explored how it is that within an institution whose purpose is to protect children and strengthen families, so many parents feel disempowered and disrespected (Dumbrill, 2010; Schmid & Pollack, 2009) and fail to receive the supports they need to care for their children themselves (Gregoire & Shultz, 2001; Kazdin, 2000;
Mueller & Pekarik, 2000). I used Institutional Ethnography to make visible the institutional processes that organize casework to happen as it does. In the case of Katie, the mother with disabilities experiencing homelessness described at the beginning of this chapter, it is easy to imagine the initial framing of what was happening as neglect that appeared in the Screening Report together with a description of events constituted by a list of parental failings (e.g., homelessness). I can also conjure the court documents in which the mother’s history of housing troubles and other on-going challenges, including her disabilities, were constituted as evidence of maltreatment—all of which would have been presented in court by a caseworker arguing that the mother was an unfit parent.

**Texts**

Texts organize caseworkers’ interactions with parents and other work practices from the very beginning of the CPS process; in activating these texts—and the categories they carry—caseworkers are oriented to the dependency legal regime. Caseworkers first come to know about the family when they review the screening report. Within this report, allegations constitute and are constituted by the list of alleged perpetrators (parents) and victims (children) and their corresponding types of abuse. The allegations from the screening report show up in caseworkers’ early conversations with families when they notify parents about the specific allegations and invite them to respond. Allegations also organize caseworkers’ interactions with neighbors, school teachers, and therapists as they gather information about the family.
The allegations are repeated in the allegations tab, where they organize the caseworkers’ ECR assessment write-ups in support of the dispositions—dispositions that are based on caseworkers’ reading of the information they gathered about the family. This documentation is taken up again by caseworkers when, in a similarly reflexive vein, the writing of the Petition allegations is organized by the caseworkers’ reading of the ECR, reading that is itself oriented to the allegations. As caseworkers go about their day-to-day, they activate different texts, texts that orient them to the allegations of maltreatment against the parent.

The concepts and categories associated with the dependency legal regime are present from the outset of the case, and in turn, shape caseworkers’ interactions with parents. Much of what caseworkers do as part of Child Protective Services reflects and inscribes the idea that that families’ difficulties providing adequate care represent maltreatment by the parent. Within Institutional Ethnography it is possible to talk about a key concept—a primary idea that subscripts the discursive structure of the institution. I argue that the key concept orienting CPS casework is an understanding of the family as a case of maltreatment. It is this particular construction of what’s happening with the family—as opposed to families facing adversity (Fong, 2020)—that orders the terms upon which interactions, inquiry, documentation, and other work practices are conducted. The concept of the family as a case of maltreatment contains two facets:
• The family as a case or instance of *maltreatment*— the struggles facing the family are constituted as ‘the parent abusing the child’

• The family as *a case* of maltreatment— the parent is subject to the dependency legal regime as manifest in statute, administrative rules, regulations, and case law

When the struggles facing the family are constituted as child maltreatment, and the parent is subject to legal requirements and processes, it follows that a primary responsibility of the caseworker is to build the case against the parent in order to prevail in court. Both facets of *case of maltreatment* show up repeatedly in the descriptions of casework in Chapters Three, Four and Five. When caseworkers are organized to understand parents’ struggles to provide adequate care as *cases of maltreatment*, their interactions with and on behalf of parents oftentimes result in adversarial relationships and mutual mistrust between caseworkers and parents. Their actions also conflict with and undermine more supportive practices that caseworkers might otherwise engage in.

**Relations of ruling**

Institutional ethnography is interested in how what people know and what they do is coordinated across multiple settings (Rankin, 2017a). The texts taken up by caseworkers include the Screening Report, the assessment write-up and the Allegations tab in the ECR, the Petition, and the Declaration of Protective Custody. Caseworkers also activate policy and procedure, including the Safety Intervention Model and administrative rules and statutes such as those that have to do with Dispositions. Child
welfare in Oregon is administered at the state level so these texts organize CPS casework across the state, as caseworkers in different communities go about their day-to-day. In this way, the texts coordinate the activities of people who work in a variety of dispersed and diverse local settings—that is to say, texts coordinate the activities of caseworkers trans-locally. The texts also serve to coordinate the activities of caseworkers with those of judges, AAGs, and attorneys. When caseworkers’ documentation practices gear into the policies and processes of the dependency legal regime, their assessment write-ups constitute the family as a case of maltreatment.

The goals of child welfare in the U.S. include protecting children and strengthening families (Child Welfare Information Gateway, 2019; Congressional Research Services, 2022). The mission of the child welfare agency in Oregon is to, “Improve family capacity to be self-sustaining while creating a safe and permanent living environment for children” (Oregon Department of Human Services, 2020, p. 38). However, Chapters Three, Four and Five illustrate the degree to which casework intends the prosecution, policing, and punishment of “guilty” parents rather than the provision of support and collaboration—so that ultimately children can be raised by their parents and stay connected to their families and communities.

Relations of ruling represent extra-local interests, interests that originate outside of the local context and that are often in conflict with or subjugate the needs and interests of the people who occupy the local setting. The dependency legal regime is foundational to the institution of child welfare in the U.S. It seeks to balance the rights
of parents to raise their children with the duty of the state to provide care and protection for children who cannot take care of themselves (Jones, 2006). The underlying legal framework also facilitates the civil prosecution and punishment of parents who have been found by the court to have maltreated their children. The protection of both parents’ and children’s rights is of tantamount importance. However, my analysis suggests that the intersection of the dependency legal regime with Oregon child welfare's current response to struggling families significantly undermines efforts to support these parents, oftentimes depriving them of their rights and contradicting the best interests of the children.

**Boss texts**

In IE terms, the laws and regulations that comprise the dependency legal regime- - in particular, those concerned with protective custody and jurisdiction-- serve as a *boss text* for CPS caseworkers as they go about their day-to-day work with families (Smith and Griffith, 2022). The concepts and categories of the boss text organize caseworkers to construct a textual representation that “fits”, “that can be ‘read’ within the same frame that governed its making in the first place “(Smith and Griffith, 2022, p. 95). This is illustrated by the training provided to caseworkers titled *How to prepare for success in court*. One training competency reads, “Understand how case plan documents are used in legal and court processes, and their importance in supporting the agency's legal position.” This statement underscores the connection between the documentation generated by CPS caseworkers as a result of their information gathering about the
family and the evidence and testimony presented to the court. More specifically, the statement identifies the documents as important sources of support for the agency’s legal position. This underlines the need for congruence between the write-up about the family in the ECR and the argument being made to the court by the agency—that the parent is guilty of maltreatment and that the child is unsafe in their care. My point is not that caseworkers are organized to falsify the account of what’s happening with the family, but rather, building a narrative that constitutes a legally prosecutable case against the parent is a key component of caseworkers’ professional knowledge. In other words, caseworkers are organized by the categories and concepts of the dependency legal regime bosstext to generate textual representations of the family—cases of maltreatment— that are actionable within the dependency legal context.

**Individualizing and Pathologizing**

I offer an additional concern about CPS casework as it is socially organized in Oregon. Above, I detail the fault-finding and parent blaming that occurs and note the impact this can have on caseworker-parent relationships and on parents’ willingness to engage more generally. However, the move to hold parents individually responsible causes additional problems for parents and others who are concerned about the plight of struggling families. Caseworkers are organized to see the negative effects of unemployment or ill health as evidence of child maltreatment by the parent rather than as the result of a complex interaction between larger structural issues (e.g., inadequate unemployment benefits, lack of access to health care), family structures (e.g., single
parent households), and individual parents’ capabilities and choices (e.g., mental illness, behavioral health, disabilities). Harm to children that is relevant to the court is that which can be shown to have been caused by the parent; therefore, the caseworker has to convince the court that the parent represents a threat to the safety of the child. The underlying logic of the dependency legal regime requires that the court—and the caseworker—construct the situation as the responsibility of the individual parent. Importantly, neither caseworkers nor the court consider “whether society has provided comprehensive supports for families and children that might eliminate or ameliorate the need for court intervention at all” (Spinak, 2010, p. 119).

There is significant evidence that society has failed in this regard. For example, Oregon is ranked 48th in terms of adult mental health care, and the country as a whole has much less capacity than is needed (Mental Health America, 2023). The state also has the third highest unmet need for substance use disorder treatment (Fitzgerald & Schmidt, 2019), and the broader U.S. also lacks treatment for substance use disorder or effective interventions for domestic violence (Teti et al., 2017). A report by the Society for Research on Child Development stated that, “Parents at risk in the United States are among the most poorly supported in the industrialized world” (Teti et al., 2017, p. 21). As noted in Chapter One, many parents who become involved with the child welfare system fail to access the services and supports they need despite being mandated by the courts to participate in order to be reunited with their children (e.g., Kazdin, 2000; Mueller & Pekarik, 2000; Osterling et al., 2012).
My concern goes beyond the availability of treatment services, however. While it is true that many of the parents who become involved with child welfare are struggling with mental health issues and/or substance use disorder, Barbara Nelson (1984) critiques the medical model in which social problems are understood as “individually rooted, described as an illness, and solvable by occasional doses of therapeutic conversation” (p.2). Allegations that constitute the parent as to blame for the inadequate care provided to the child due to the mother’s untreated depression—a fairly representative example—renders invisible structural issues including inadequate health care and treatment services, but also lack of affordable housing, educational opportunities that accommodate learners with a variety of special needs, and cash assistance and other supports for people with a range of disabilities, for example. The allegation is also blind to the effects of trauma including historical trauma (e.g., Håkansson et al., 2018; Olhaberry et al., 2022) and the impact of community violence on parenting behaviors (e.g., Chen & Lee, 2017; Zhang & Anderson, 2010). Scholars have argued that to a significant degree, parents’ behavioral health issues and their attendant failure to provide adequate care for children are rooted in structural issues such as neighborhood-based inequality, social network disadvantage, systemic racism, and accumulated trauma (Coulton et al. 2007; Lee 2016; Reich 2005). Thus, although parents’ alleged actions present risks to children’s well-being (Gilbert et al. 2009), these actions often stem from “structural vulnerabilities rather than individual apathy or cruelty” (Fong, 2020, p. 615).
Moreover, holding individual parents responsible for failing to provide adequate care for their children in this way further marginalizes families already struggling to meet the needs of both children and parents. Schenwar & Law (2020) refer to a “punitive model for social services:”

The way that requirements are heaped onto parents is consistent with the current punitive model for social services, in which everything comes down to personal responsibility. Instead of addressing parents’ lack of resources, for example, it’s assumed that the problem lies with some ‘pathology’ of the parent. Parents who are sucked into the child welfare system are almost always mandated to attend classes, even when the problem that led to their involvement was entirely driven by poverty. It is useful to consider how this relates to both psychiatric diagnoses – which can lead to punitively mandated treatment – and criminal charges, which can lead to incarceration. Instead of providing actual support, each of these systems enacts new forms of control and calls them support (cited in Williams, 2022, p.2).

Fong (2020) argues that families reported to the child abuse hotline encounter a child welfare system focused on parental inadequacies and at the same time unable to make available needed resources; as a result, “families experience surveillance without material support, reinforcing and punishing their marginality” (p. 630).

If struggling parents are to blame for their inability to provide adequate care for their children, there is no need to do anything about the myriad social, economic and
political forces driving inequality and marginalization, and the system can continue unchallenged. In an example of the contemporary discourse about child welfare, an article published in *Mother Jones*, Molly Schwartz (2020) stated that the current approach to child welfare “buttresses an unequal social structure by diverting attention away from the harms these structures cause.” As I have shown throughout this dissertation, the dependency legal regime holds parents—especially those struggling with mental health issues, domestic violence and community violence, substance use disorder, unstable housing, low income and other forms of precarity—responsible for their failure to meet their children’s needs. It thereby reflects the meta-discourse of personal responsibility that undergirds the broader neo-liberal project.

Within the Institutional Ethnography literature, DeVault (2006) noted how boss texts and the interests they represent are connected to and/or are constituted by broad social, political and economic forces related to race, class and gender. Child welfare casework takes place within a dependency legal regime constituted by allegations, perpetrators and victims, types of abuse and neglect, as well as evidence, standards of proof, jurisdiction and protective custody. Copeland and Pendleton (2022) write, “Rather than associating deteriorating material conditions with a dire need for structural and systemic change, the family policing system chooses to judge those who live within these conditions – leaving the foundational structural problems unresolved” (p.7). In turn, this discourse can be seen to be tied into a broader meta-discourse focused on coercing compliance as opposed to changing material realities.
DeVault (2006) observed that IE can make visible the degree to which “the conceptual currencies at play in any historical moment are picked up across institutional complexes and woven together in mutually reinforcing ways” (p.296). Abolitionist critiques of child welfare point to parallels and connections between the criminal justice system and child welfare in their surveillance and policing of marginalized individuals, families, and communities, especially individuals, families, and communities of color. The analysis above underscores the degree to which struggling parents are treated as “perpetrators” and whose interactions with a range of professional helpers come to feel very much like those of a suspected of criminal. Many of these parents are challenged by mental illness or substance abuse disorder or other disabling physical or psychological conditions, and by the trappings of poverty such as substandard housing or low income. These dynamics are also of particular concern for parents and families of color and immigrants and refugees likely to have a history of troubling interactions with public and other social service agencies. In this way, my project augments work by other scholars and advocates-- for example, the Rise Collective (B et al., 2022): “The system shames, silences, dehumanizes and labels Black and Indigenous mothers as child abusers” (p. 8). Viewed from this perspective, the social organization of CPS both reflects and re-inscribes the marginalization of struggling families accomplished by broader structural forces of inequality and oppression.
Implications for Policy and Practice

Part of the promise of IE is to help those working to change institutions “to see what they are up against and where they might want to apply pressure” (DeVault, 2006, p.295). Child protection today is the domain of social work, assisted by law enforcement, mental health, medicine, nursing, law, and education (Myers, 2008; Shireman, 2015). Social work is the profession most closely identified with child welfare (Popple & Vecchiolla, 2007; Zlotnik, 2003), and child welfare is regarded as a specialized field of social work (Kadushin & Martin, 1988). The National Association of Social Workers (2004), the profession’s national body, articulated the profession’s approach to working with these families as follows: “Social workers recognize that, in order to truly help protect children by preventing child maltreatment, families must also be helped by identifying and addressing the individual, familial, and community-wide challenges they encounter” (p.4). Struggling families need casework that is relationally oriented, empowerment focused, and grounded in a concern for social justice. Many caseworkers are trained in this sort of approach and, as noted in Chapter One, the federal government has recognized social work as the preferred background for the child welfare workforce.

Institutional Ethnography explores how individuals’ ways of knowing and doing are shaped within bureaucratic systems of organization and administration (Wilson & Pence, 2006). Individuals are coordinated to think about and act within the relevancies and frameworks of the institution of which they are a part. This Institutional
Ethnography brings into focus the extent to which CPS caseworkers are organized by the dependency legal regime to accuse, investigate, build a case against and secure the prosecution of parents struggling to provide for the needs of their children. As such, my analysis suggests the limits of initiatives designed to equip caseworkers with skills that promote engagement or increase collaboration and mutuality between parents and caseworkers. Tensions between providing services and supports, and more coercive efforts directed at parenting and child safety, have been noted by many other scholars (e.g., Dumbrill, 2006; Fong, 2019; Gordon 1989; Thorpe, 2007; Weinberg, 2006). My project adds to this literature by helping understand how exactly these tensions come about. I suggest that as long as caseworkers’ early interactions with parents happen as part of a broader institutional context wherein child welfare casework intersects the dependency legal regime, caseworkers’ activities will intend the prosecution, policing, and punishment of parents and their efforts to build trust with and empower parents will be undermined.

While this project focused on the day-to-day activities of CPS caseworkers, similar institutional processes come into play for a range of other professionals working with the same families. The implications for the activities of on-going or permanency caseworkers are perhaps the most obvious. One of the on-going caseworkers with whom I spoke commented, “In the end, it’s all about TPR (termination of parental rights).” TPR refers to the process by which a child’s relationship with their parent is legally severed which enables the child to be adopted by someone else. This caseworker
was not saying that TPR is or should be pursued in every case; rather, she believes that casework is significantly oriented to the potential of pursuing a TPR against the parent. She made her comment while explaining that it was important to make and to document repeated (failed) efforts to connect parents with services because this is the sort of evidence she would be required to provide at a TPR hearing. What this caseworker has come to know about how the TPR process functions organizes her activities with and on behalf of parents long before there is any firm indication that the case might go to TPR.

I observed similar tensions for other professionals over the years of doing research in child welfare settings. Court appointed special advocates (CASAs) and guardian ad litem (GALs),9 service providers such as housing navigators, treatment counselors, parenting coaches, and even mental health therapists and Peer Parent Mentors can all be hooked into and organized by the dependency legal process. Other scholars have also noted the role of these sorts of “third parties” in poverty governance and social control (Garland 2001; Herring 2019). While they are differently situated vis-a-vis various institutional processes and therefore have different opportunities to resist or counter the impact on their work with parents, it is important to be cognizant of

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9 Court-appointed special advocate (CASA) and guardian ad litem (GAL) volunteers advocate for the best-interests of children who have experienced abuse or neglect by investigating and monitoring cases involving children in foster care.
these dynamics as part of efforts to improve families’ experiences with the child welfare system.

Parents’ negative experiences of the dependency legal process, most notably, their participation in court hearings, also merit consideration as part of any attempt to reform or otherwise “fix” child welfare. As noted above, caseworkers were keenly aware of how painful it was for parents to hear the case against them, and the Parent Mentor with whom I spoke described the process as dehumanizing and devastating. Parents became very upset on multiple occasions during the hearings I observed. Moreover, while it was not part of the formal data collection for this project, I have been told by parents how traumatizing it feels to come to the justice facility, go through security, and pass through the metal detector while being watched by an armed officer. They also described how sitting with their lawyers at the front of the courtroom below the judge reinforces the sense for parents of being “on trial.” I do not mean to diminish the importance of vigorously safeguarding parents’ constitutional rights and the need for due process; however, it is important to understand that this protection comes at significant cost, particularly for members of marginalized communities, many of whom have endured other indignities at the hands of the “justice system.”

Beyond child welfare, my analysis also suggests that we should approach with caution calls to replace police officers with caseworkers. As part of the response to police violence, particularly against communities of color, some advocates have argued that employing individuals with different professional backgrounds—such as social
workers or clinically trained professionals—would better ensure the safety of potential suspects as well as the broader community. However, the analysis above suggests that while social workers might bring a different set of skills than someone with a law enforcement background, to the degree that they are situated within a similar institutional complex and activate similar texts and other discursive resources in the course of their work, their interactions are likely to continue to be problematic. As de Montigny noted (1995, p. xvi), “Social workers cannot easily reshape their practice into an ideal or progressive political form.... [Instead they] must articulate extra-local forms of authority and discursively organized power.” In other words, real change is likely to be more complex than the recommendation to “give every job done by a police officer to a caseworker” would suggest.

**Implications for Future Research**

My project is responsive to the call for research that explores the constraints that “compromise CW caseworkers’ ability to act in the best interests of the families they serve” (He, Lizano & Stahlschmidt, 2021, p.1). Future research should extend this analysis of child welfare to encompass the activities of on-going caseworkers, attorneys, Peer Parent Mentors and other providers who interact with and work on behalf of families. As I mentioned briefly above, my work on this project surfaced information that points to the coordination of on-going casework by the dependency legal regime and challenges that arise for both caseworkers and families.
While a single IE only illuminates a relatively small slice of the broader institutional complex, it is possible to combine projects to enhance our understanding of the larger processes at work (DeVault, 2006). To that end, it would be fruitful to read across the handful of extant IE projects focused on child welfare “charting different regions of the same terrain” (DeVault, 2006, p.296) for what they contribute collectively to an understanding of the social organization of this institution on behalf of struggling families. For example, de Montigny (1995) wrote about how professional knowledge and various institutional processes organized the textual documentation of a Protective Services investigation. Brown’s (2006) research concerned the risk-reduction work done by mothers involved with child protection, and Ingstrup (2014) explored the experiences of an indigenous mother in Canada as she came into contact with a variety of social services including child welfare.

Along these lines, my project also suggests the potential for Institutional Ethnography to illuminate and help to address myriad practice challenges that arise for social workers in a variety of settings (e.g., de Montigny, 2020; McCoy, 2014; Nichols, 2016; Ridzi, 2004; Weigt, 2006). Finally, Dorothy Smith’s social ontology is an important addition to social work and other scholars interested in how power is manifest as part of service provision and other efforts to be of assistance to people who occupy marginalized positions in society (c.f., de Montigny, 2020; Kuronen, 2020; Newcomb, 2020; Townsend et al., 2003). In sum, Institutional Ethnography has great potential to
help us move beyond merely identifying social inequalities—by explicating the mechanisms by which they come about (Smith 1987, 1999).

Conclusion

The past two decades have seen increasing attention to the often negative experiences of parents involved with child welfare (Buckley et al., 2011; Dumbrill, 2006; Kapp & Propp, 2002; Palmer et al., 2006), along with efforts to engage parents as partners in case planning and services more generally (Falconer, et al., 2012; Farrell, et al., 2012). More recently, research and policy has focused on trauma and forms of disability among the families child welfare purports to serve (Bunting et al., 2019), as well as the racism and other types of injustice that contribute to the over representation of Black and Native American children and families (Dettlaff & Boyd, 2020; Merritt, 2021). In addition, activists have highlighted the poor outcomes experienced by so many of the children, parents, families and communities that come into contact with the institution. For example, Inguanta & Sciolla (2021) argue

(T)hough the family regulation system purports and falsely claims to be about protecting children, when observing the experiences and realities of folks ensnared in the family regulation system and looking at data, we have concluded that the family regulation system is the largest perpetrator of violence, abuse, and neglect to children and families (pp. 116).
In short, the time is right for a fundamental reevaluation of our approach to ensuring the welfare of children and families.

Caseworkers’ “capacities to act derive from the organizations and social relations that they both produce and are produced by” (Smith, 2005, p. 18). In this project, I used Institutional Ethnography to understand how CPS casework comes to happen as it does. I started with detailed descriptions of the day-to-day activities of CPS caseworkers and used interviews and observations to explore how caseworkers came to know what to do and how to do it. I then worked from the materiality of local settings to find links to texts and that existed elsewhere. I showed ethnographically how various texts and other discursive resources including the Screening Report, the Child Welfare Procedure Manual, the Safety Model, the Electronic Case Record, the Petition, and the Declaration of Protective Custody organize the everyday of casework. I also traced how higher order texts, notably statutes related to child abuse and dependency/jurisdiction, are implicated in the organization of casework. I hope that this project encourages and informs efforts to reimagine how casework can play a meaningful role in helping struggling parents, so many of whom are challenged by poverty, disability, mental illness, and trauma, to provide adequate care for their children.
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https://doi.org/10.5014/ajot.57.1.17


Appendices

Appendix A: Caseworker Informed Consent
Consent to Participate in Research

Project Title: Improving Services for Parents Involved with Child Welfare
Researcher: Anna Rockhill, School of Social Work
Portland State University
Researcher Contact: 503-593-9206 (cell/text), 503-725-8007 (office)
Rockhill@pdx.edu (e-mail)

Introduction You are being asked to take part in a research study. This form includes important information for you to consider when making a decision whether or not to join in the study. Please look over this information carefully and ask questions about any of the information you do not understand before you agree to take part.

Key Information for You to Consider

- **Voluntary Consent.** You are being asked to volunteer for a research study. It is up to you whether you choose to take part or not. There is no penalty if you choose not to join in or decide to stop your involvement.
- **Why is the study being done?** The purpose of the study is to generate information that will help child welfare services do a better job of meeting the needs of families.
- **How long will it take?** Interviews typically last between 60 and 90 minutes. You will be asked to participate in one interview.
- **What will I be expected to do?** You will be asked questions about your experiences as a child welfare caseworker. We want to know what sorts of activities you do as part of your case management responsibilities. We are also interested in your ideas about ways to improve services more generally. We will also ask permission to audio-tape the interview.
- **Risks.** Some of the possible risks or discomforts of taking part in this study include stress, inconvenience and possible loss of privacy and confidentiality associated with participating in a research study.
- **Benefits.** Although there are no direct benefits to you for participating, you can feel good about helping improve the child welfare system. The information you provide will help us teach others about how to best serve children, families, and others involved in the child welfare system.
- **Options.** Participation is voluntary and the only alternative is to not participate.

**Why is this research being done?**

The purpose of the study is to generate information that will help child welfare services do a better job of meeting the needs of families. You are being invited to participate in this study because you are a child welfare caseworker. Approximately 10 parents, peer parent mentors and caseworkers will participate in interviews.
What happens to the information collected?

Information collected for this research will be included in a report that will be shared with the child welfare agency in Oregon as well as nationally. The study leaders will also write articles and give presentations based on the information. No identifiable information will be included in any of the written materials or presentations produced as a result of this study.

How will my privacy and data be protected?

We will do the following to protect your privacy:

- The information you share with us will not have your name on it and we will not use your name to keep track of your information. Instead, you will be assigned a study ID that will be used for tracking.
- All of your information will be kept in a locked file cabinet or in a locked file on the computer so that no one (except for Anna and her faculty advisor) will be able to access it. This form (which has your name on it) will also be kept in a locked file cabinet, separate from any other data we receive from you.
- All study IDs and written materials (including this form) will be destroyed within 3 years of project completion (December 31st, 2023). Unidentifiable data will be stored on a locked computer file for no less than three years from project completion.
- Your name and any information about you will be kept private to the extent allowed by the law. By “kept private” we mean that the names of people in the study will not be given to anyone else. It also means that we will only report the information you share in a way that no one could ever guess or know it was about you.

The Portland State University Institutional Review Board (IRB) that oversees human subject research may be permitted to access your records, and there may be times when we are required by law to share your information. For example, it is the investigator’s legal obligation to report child abuse, child neglect, elder abuse, harm to self or others or any life-threatening situation to the appropriate authorities. In this case, confidentiality will not be maintained.

Despite taking steps to protect your privacy, we can never fully guarantee that your privacy will be protected.

What are the risks if I decide to join in?

The risks or discomforts of being in this research include stress, inconvenience and possible loss of privacy and confidentiality associated with participating in a research study. Talking about casework may cause some stress. However, you can stop the interviews at any time. You do not have to answer any questions you don’t want to.

What if I want to stop my part in this research?

Your part in this study is voluntary. You do not have to take part in this study, but if you do, you may stop at any time. You have the right to choose not to take part in any study activity or completely stop at any point without penalty or loss of benefits to which you are otherwise entitled. Your decision whether or not to join in will not affect your relationship with the researchers or Portland State University.
Will I be paid for being in this research?
No, you will not be paid for your participation.

Who can answer my questions about this research?
If you have questions, concerns, or have experienced a research related injury, contact the research team at:

Anna Rockhill, 503-593-9206 (cell/text) Rockhill@pdx.edu (email)
Stephanie Bryson, 503-725-5004 (desk)

Who can I speak to about my rights as a part of research?
The Portland State University Institutional Review Board (“IRB”) is overseeing this research. The IRB is a group of people who independently review research studies to ensure the rights and welfare of participants are protected. The Office of Research Integrity is the office at Portland State University that supports the IRB. If you have questions about your rights, or wish to speak with someone other than the research team, you may contact:

Office of Research Integrity
PO Box 751
Portland, OR 97207-0751
Phone: (503) 725-5484
Toll Free: 1 (877) 480-4400
Email: psuirb@pdx.edu

Consent Statement
I have had the opportunity to read and consider the information in this form. I have asked any questions necessary to make a decision about my taking part in the study. I understand that I can ask more questions at any time.

By signing below, I understand that I am volunteering to take part in this research. I understand that I am not waiving any legal rights. I have been provided with a copy of this consent form. I understand that if my ability to consent for myself changes, either I or my legal representative may be asked to provide consent before I continue in the study.

I consent to join in this study.
__________________________________________
Name of Adult Participant
Reseacher Signature (to be completed at time of informed consent)

I have explained the research to the participant and answered all of his/her questions. I believe that he/she understands the information described in this consent form and freely consents to participate.

__________________________
Name of Research Team Member

__________________________
Signature of Research Team Member                     Date

Audio Taping

In order to ensure that we accurately document your responses to the interview questions, we are asking for your permission to audio tape your interviews. These recordings will be kept private and stored in a locked file on a computer. You have the right to stop the recording at any time during the interview without penalty. You also have the right to agree to participate in the study without having your interview audio taped.

I consent to have my interview audio-taped.

__________________________
Name of Adult Participant

__________________________
Signature of Adult Participant                     Date
Appendix B: Parent Mentor Informed Consent
Consent to Participate in Research

**Project Title:** Improving Services for Parents Involved with Child Welfare

**Researcher:** Anna Rockhill, School of Social Work
Portland State University

**Researcher Contact:** 503-593-9206 (cell/text), 503-725-8007 (office)
Rockhill@pdx.edu (e-mail)

**Introduction** You are being asked to take part in a research study. This form includes important information for you to consider when making a decision whether or not to join in the study. Please look over this information carefully and ask questions about any of the information you do not understand before you agree to take part.

**Key Information for You to Consider**

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<td><strong>Voluntary Consent.</strong> You are being asked to volunteer for a research study. It is up to you whether you choose to take part or not. There is no penalty if you choose not to join in or decide to stop your involvement.</td>
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<td><strong>Why is the study being done?</strong> The purpose of the study is to generate information that will help child welfare services do a better job of meeting the needs of families.</td>
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<td><strong>How long will it take?</strong> Interviews typically last between 60 and 90 minutes. You will be asked to participate in one interview.</td>
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<td><strong>What will I be expected to do?</strong> You will be asked questions about your experiences as a peer parent mentor. We want to know what sorts of activities you do with parents and your observations about parents’ efforts to make progress on their case plans. We are also interested in your ideas about ways to improve services more generally. We will also ask permission to audio-tape the interview.</td>
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<td><strong>Risks.</strong> Some of the possible risks or discomforts of taking part in this study include stress, inconvenience and possible loss of privacy and confidentiality associated with participating in a research study.</td>
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<td><strong>Benefits.</strong> Although there are no direct benefits to you for participating, you can feel good about helping improve the child welfare system. The information you provide will help us teach others about how to best serve children, families, and others involved in the child welfare system.</td>
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<td><strong>Options.</strong> Participation is voluntary and the only alternative is to not participate.</td>
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**Why is this research being done?**

The purpose of the study is to generate information that will help child welfare services do a better job of meeting the needs of families. You are being invited to participate in this study because you are a peer mentor for parents involved with child welfare. Approximately 10 parents, mentors and caseworkers will participate in these interviews.
What happens to the information collected?

Information collected for this research will be included in a report that will be shared with the child welfare agency in Oregon as well as nationally. The study leaders will also write articles and give presentations based on the information. No identifiable information will be included in any of the written materials or presentations produced as a result of this study.

How will my privacy and data be protected?

We will do the following to protect your privacy:

- The information you share with us will not have your name on it and we will not use your name to keep track of your information. Instead, you will be assigned a study ID that will be used for tracking.
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- All study IDs and written materials (including this form) will be destroyed within 3 years of project completion (December 31st, 2023). Unidentifiable data will be stored on a locked computer file for no less than three years from project completion.
- Your name and any information about you will be kept private to the extent allowed by the law. By “kept private” we mean that the names of people in the study will not be given to anyone else. It also means that we will only report the information you share in a way that no one could ever guess or know it was about you.

The Portland State University Institutional Review Board (IRB) that oversees human subject research may be permitted to access your records, and there may be times when we are required by law to share your information. For example, it is the investigator’s legal obligation to report child abuse, child neglect, elder abuse, harm to self or others or any life-threatening situation to the appropriate authorities. In this case, confidentiality will not be maintained.

Despite taking steps to protect your privacy, we can never fully guarantee that your privacy will be protected.

What are the risks if I decide to join in?

The risks or discomforts of being in this research include stress, inconvenience and possible loss of privacy and confidentiality associated with participating in a research study. Talking about peer mentoring may cause some stress. However, you can stop the interviews at any time. You do not have to answer any questions you don’t want to.

What if I want to stop my part in this research?

Your part in this study is voluntary. You do not have to take part in this study, but if you do, you may stop at any time. You have the right to choose not to take part in any study activity or completely stop at any point without penalty or loss of benefits to which you are otherwise entitled. Your decision whether or not to join in will not affect your relationship with the researchers or Portland State University.
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No, you will not be paid for your participation.

Who can answer my questions about this research?

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Anna Rockhill, 503-593-9206 (cell/text) Rockhill@pdx.edu (email)

Stephanie Bryson, 503-725-5004 (desk)

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Office of Research Integrity
PO Box 751
Portland, OR 97207-0751
Phone: (503) 725-5484
Toll Free: 1 (877) 480-4400
Email: psuirb@pdx.edu

Consent Statement

I have had the opportunity to read and consider the information in this form. I have asked any questions necessary to make a decision about my taking part in the study. I understand that I can ask more questions at any time.

By signing below, I understand that I am volunteering to take part in this research. I understand that I am not waiving any legal rights. I have been provided with a copy of this consent form. I understand that if my ability to consent for myself changes, either I or my legal representative may be asked to provide consent before I continue in the study.

I consent to join in this study.

________________________________________
Name of Adult Participant

________________________________________________________
Signature of Adult Participant                        Date

\textbf{Researcher Signature} (to be completed at time of informed consent)

I have explained the research to the participant and answered all of his/her questions. I believe that he/she understands the information described in this consent form and freely consents to participate.

__________________________________________________________________________

\textbf{Name of Research Team Member}

__________________________________________________________________________

Signature of Research Team Member                        Date

\textbf{Audio Taping}

In order to ensure that we accurately document your responses to the interview questions, we are asking for your permission to audio tape your interviews. These recordings will be kept private and stored in a locked file on a computer. You have the right to stop the recording at any time during the interview without penalty. You also have the right to agree to participate in the study without having your interview audio taped.

I consent to have my interview audio-taped.

__________________________________________________________________________

\textbf{Name of Adult Participant}

__________________________________________________________________________

Signature of Adult Participant                        Date
Appendix C: Caseworker Interview Guide

Introductions

Overview of the project

Questions?

Informed Consent

Prompts and questions:

- Briefly describe your work history in child welfare and related fields
- How long have you been working with Oregon CPS?
- Walk me through a typical day
  - What are the specific activities? Where do they take place? How do you know what to do? What are your options? What happens next?
- Walk me through an atypical day
- Describe what you write down about the families
  - How do you know what to do? What are your options? What happens next?
- Walk me through the court process
- What do you find most satisfying about your work?
- What are some of your least favorite things about your work?
- What are you most frustrated about - would most like to change?
- What else do you think it is important that I understand about doing CPS casework?

Thank you so much for taking the time to talk with me.
Appendix D: Peer Parent Mentor Interview Guide

Introductions

Overview of the project

Questions?

Informed Consent

Prompts and questions:

- How long have you been working as a Peer Parent Mentor?
- Please provide an outline of CPS as parents experience it.
  - What are the specific activities? Where do they take place? What happens next?
- Walk me through the front end of the court process
  - What are the specific activities? Where do they take place? What happens next?
- What can you say about parents’ experiences of court? What is it like for parents to participate in the different hearings?
  - What do they find useful? What is not helpful?
- What else do you think it is important that I understand about parents’ experiences of CPS casework?

Thank you so much for taking the time to talk with me.