Learning How to Dance with the Public Child Welfare System: Mexican Parents’ Efforts to Exercise Their Voice

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The purpose of this article is to understand how Mexican parents’ perceptions of their voices (their concerns, dissatisfaction, and opinions) as integrated in child welfare cases and what factors hinder or promote this process. The focus is on parents’ interactions with their child welfare worker during routine monthly home visits. Nineteen parents, with a history of immigration, participated in in-depth interviews for this qualitative study. Grounded theory methods were used to complete the content analysis. The findings indicate that there are three principal factors that affect parents’ decisions to exercise their voice: 1) parent’s perceptions of how workers received their voice; 2) case context, including immigration status and fear of losing children; and 3) the lack of parental knowledge and understanding of the child welfare case process and support/advocacy agents. Recommendations include utilizing empowerment models and culturally grounded practices that facilitate the integration of parents’ voices in the parent-worker interactions and case process, and continued support for peer support interventions and formal forms of advocacy.

KEYWORDS Mexican/Latino families, child welfare, parent engagement
[The child welfare workers] were saying there were fractures on the leg and I was 100% sure that I didn’t do it . . . it’s kind of hard you know when you are sure that you didn’t do it . . . there isn’t much you can say . . . If they would have believed us—that it wasn’t us—then they wouldn’t have taken the baby away from us. They didn’t believe us . . .

We went to court and [my husband] found out that [our daughter] was going to go for adoption and that’s when he said no we are leaving, they are taking her from us . . . I just started packing everything and we put everything in the car . . . We took our daughter . . . She was in foster care, we kidnapped our daughter and took her to Mexico. When we came back my husband got arrested . . . he went to jail and they started looking for me and my daughter. So I had to turn her in . . . [because] they were still going to take her away . . .

She was receiving special treatment and she went to different doctors . . . they found out that she had brittle bones. It’s called osteogenesis imperfecta . . . that made everything [better] for us, but everything that we had already been through was already there.

—Mrs. Gomez, a mother with an open child welfare case

Parent engagement and participation in involuntary child welfare cases is a growing area of interest to scholars and practitioners (Brown, 2006; Dumbrill, 2006). When families are dissatisfied with services, they do not have the option of exiting or discontinuing services (such is the case for child welfare cases); thus, exercising their voice is the only option they have to express their dissatisfaction, concerns, or thoughts (Hirschman, 1970). The families involved with the public child welfare system are highly stigmatized and isolated throughout the case process. Parents often feel powerless, controlled, and may lack the knowledge to navigate complex service systems, such as the child welfare system (Kemp, Marcenko, Hoagwook, & Venneski, 2009; Frame, Conley, & Berrick, 2006). Among Latino families less is known about how parents negotiate exercising their voice (i.e., voicing their opinions, concerns, and feelings about the case) and how parents’ perceive workers’ reactions to their voice. As for most families, entering the public child welfare system can be an overwhelming experience for Latino families, in particular for those with a recent history of immigration, because this may be their first interaction with a large and unfamiliar bureaucratic system.

Promoting families’ strengths and empowerment process is core to social work practice and should be a key component in child welfare interventions as the aim is to create a change that will protect and promote children’s well-being. When parents’ voices are excluded, they are not be-
ing actively engaged in the case process—an experience that can have significant implications in their families’ lives (e.g., ranging from children’s permanent removal to positive changes that promote family well-being such as recovery from substance abuse). Also, minimizing or discounting the voice of Latino families and their wisdom, values, needs, and experiences significantly hinders the utilization and provision of culturally competent services.

Engaging Latino parents in culturally responsive ways is vital as evidence highlights that Latino children and their families experience differential outcomes in the child welfare system. For example, compared with White children, Latino children tend to be younger at the referral and substantiation stage (Alzate & Rosenthal, 2009; Church, Gross, & Baldwin, 2005), are placed in out of home placements or enter state custody more quickly (Church et al., 2005), and spend a significantly longer period of time in foster care (Church, 2006). Even when White children in foster care report fewer symptoms of mental health problems, they are more likely than Latino children to receive needed and appropriate mental health services (Garland, Landsverk, & Lau, 2003). Neglecting to engage Latino children and families with respect or understanding of their histories, traditions, and value systems may contribute to these disparities.

The purpose of this article is to examine how Mexican parents who have an open case with the public child welfare system describe the extent to which their voices are incorporated in their case process and what factors contribute to or hinder such incorporation. This article focuses on Mexican families with a recent history of immigration (first and second generation) because there is much heterogeneity by Latino subgroups, specifically in regard to immigration generation. This article is guided by the following questions: What hinders parents from exercising their voice? When do parents exercise their voice? How do parents’ perceive their voice is received by their worker? The contribution of this article lies in its analysis of Latino immigrant parents’ experience in exercising their voice with their case worker because this is not a well studied population within child welfare research and rarely is their experience of the client–worker relationship examined.

ENGAGING FAMILIES IN THE PUBLIC CHILD WELFARE SYSTEM

Studies aiming to examine parent engagement in cases with the public child welfare system have primarily focused on the parent–worker relationship (deBoer & Coady, 2007; Lee & Ayón, 2004) and satisfaction with services rendered (Kapp & Vela, 2004; Lee & Ayón, 2004). These studies have generally found positive results related to worker competencies, the role of the relationship in the case, and/or parents’ satisfaction with services.
A closer look at the process and context of engagement reveals that parents are unaware of their rights when involved with the public child welfare system (Kapp & Propp, 2002). Also, families’ case contexts were often characterized by the presence of pervasive negative feelings (Yatchmenoff, 2005) due to parents’ mistrust of workers and the child welfare system. Parents’ perception of how the worker (mis)uses power significantly impacted how parents negotiate interactions with the public child welfare system (Dumbrill, 2006).

Dumbrill (2006) examined how parents experience and negotiate child protection intervention and found that parents described their worker as exercising their power over the family or to support the family. Depending on how the worker used the power, the parent would either fight by openly challenging the worker; “play the game” by cooperating; or genuinely collaborate with the worker. Similarly, Brown (2006) identified that families often reported learning how to play the game; that is, learning what to say and do in order to have positive interactions with the worker. More often than not, workers and administrators measure families’ engagement by the level of cooperation or compliance (Brown, 2006; Holland, 2000). As noted by Dawson and Berry (2002), “cooperative parents are less likely to face court proceedings or removal of their children,” while “uncooperative parents may not be offered the services” they need (p. 294). By solely relying on cooperation as a measure of successful engagement, researchers and workers fail to capture whether families’ needs are being met and parents’ involvement in the decision-making process is curtailed (Corby, Millar, & Young, 1996). Consequently, workers and the public child welfare system often remain unaware of the families’ potential contributions and assets to resolve issues at hand.

In light of child-centered policies such as the Adoption and Safe Families Act, many recent interventions have focused on family centered practices. Family centered practices aim to engage parents in service delivery leading to reunification (Alpert & Brinter, 2009). Such practices involve collaborative parent–worker relationships that are respectful, are strength based, and seek to break down power differentials (Petr & Entriken, 1995; Alpert & Brinter, 2009). One example is the Family Group Decision-Making (FGDM) model. FGDM was developed as a means of addressing the overrepresentation of Maori children in the New Zealand child welfare system and the institutional racism experienced by this community (American Humane Association, 2008). Family group decision-making brings together the family and extended family of the child in efforts to develop a plan for the care and protection in cases of confirmed child abuse or neglect (Crampton, 2006). FGDM meetings are initiated by child welfare agencies whenever a critical decision about a child is required (American Humane Association, 2008): “FGDM processes actively seek the collaboration and leadership of family groups in crafting and implementing plans that support the safety,
permanency and well-being of their children” (p. 1). Other interventions that aim to facilitate parents’ engagement include parent-to-parent role modeling (Cohen & Canan, 2006), foster parent-to-parent dyad relationships (Linares, Montalto, Li, & Oza, 2006), and mutual aid/support peer groups (Frame et al., 2006). These interventions have focused on developing informal sources of support, parent empowerment, and promoting parents learning from the experiences of other parents who have successfully negotiated the public child welfare system.

Although several efforts to engage parents in the case process are in place, disparate experiences continue among families serviced by the child welfare system. Many of the families who enter the public child welfare system tend to experience high levels of service needs and stressors related to poverty, substance abuse, and mental health (Dawson & Berry, 2002). Families’ involvement with the public child welfare system has the potential to assist families in accessing needed services to address their multifaceted needs. Thus, engaging families is fundamental not only for the successful implementation of child welfare service plan but to future interactions with systems of care as families’ experiences with the public child welfare system can potentially impact their help seeking behavior in the future (Diorio, 1992).

Barriers to Engaging Latino Families

In the past 10 years the number of Latino families entering the public child welfare system has nearly doubled (United States Department of Health and Human Services [US DHHS], 1997; 2007). Yet very little is known about their interactions with this institution. What is known is that Latino families and families of color are overrepresented in the child welfare system and disparate treatment of these ethnic minority families persist within this system (Hines, Lemon, Wyatt, & Merdinger, 2004). When Mexican families enter the public child welfare system, they are likely to encounter many barriers to feeling engaged by their worker because their parenting values may be questioned or misunderstood, they may have undocumented status, and their community may lack resources such as advocacy and financial support. Structural issues within the public child welfare system such as high case loads, limited time with workers, language barriers, and lack of cultural competency also compound the barriers faced by Mexican families. For example, whereas workers may be unaware of the special needs of this community (due to documentation status and lack of resources), families may also feel more vulnerable and afraid to challenge the worker’s perceived (and actual) power.

The interactions of the Mexican population (and Latino population in general) with systems of care such as mental health services and child welfare services are highly stigmatized and often are not congruent with the cultural norms of this community (Snowden & Yamada, 2005). Being involved with
the public child welfare system may be filled with shame for Mexican origin families as the well-being of the family unit is fundamental to their cultural values. When families become involved with the public child welfare system parents are informed that they do not “properly” care for their children. The public child welfare system identifies the reasons for families’ involvement by specifying a type of maltreatment to children (i.e., physical abuse, neglect). However, the family may be experiencing difficulties or extreme stressors related to poverty, or mental health needs (Hines et al., 2004). In addition, parenting practices may be misunderstood or misinterpreting by the worker due to cultural differences (Fontes, 2002). By labeling parents as unfit, the child welfare system challenges the core values of Mexican families and their parenting. This factor alone may impact how parents interact with their worker. However, at the same time because the family unit is fundamental to the Mexican community (Cauce & Domenech-Rodriguez, 2000) parents are likely to do everything in their power to ensure that their family is not fragmented.

Families with a recent history of immigration are likely to be fearful of their interactions with public systems, such as the child welfare system, as their documentation status may be questioned (Loue, Faust, & Bunce, 2000) and deportation take place. Concomitantly, families who have limited English language skills or who are monolingual Spanish speakers may also experience barriers if proficient bilingual and bicultural service providers are not available (Suleiman Gonzalez, 2004). If parents are unable to communicate with service providers or engage in relationships that are grounded in their value base they may be unable to trust their worker to share their needs and information and the worker is less able to be responsive to the family.

THEORETICAL FRAMEWORK

This study is informed by the strengths and empowerment perspectives. Mexican families have multiple strengths grounded in their cultural values. Although Mexican families encounter considerable barriers and injustices they are a resilient community. For example, their familial relations and extended kinship networks are a source of support when confronted with social injustices and their adaptation process to the United States (Baca Zinn, 1994). Empowerment models aim to bring about the voices (e.g., needs, opinions) of communities and enhance the ability of families to develop the power to act on their behalf in society (Gutiérrez, Parson, & Cox, 2003). The empowerment perspective characterizes the client-worker relationship as one of shared power, families and workers are viewed as resources, and dialogue and critical analysis is a core aspect of the relationship (Gutiérrez et al., 2003).
METHODS

Sampling Procedures

Purposive sampling was used to obtain a convenience sample of 19 parents with open child welfare cases. Following human subjects approval, parents were recruited in the waiting room of a child welfare agency in Southern California (referred to as “the department” in this article). Parents were approached by the researcher and informed about the study. Parents who were of Mexican origin, first or second generation in the United States, and who were involved with the department due to neglect and/or physical abuse were eligible (and invited) to participate. Recruitment was limited to those individuals who came to the department to see their child(ren), sign paper work, or pick up information/resources. As many services are home-based many parents were excluded from participating in the study. If parents elected to participate in an interview, an appointment was made to complete the interview.

Participants

Sixteen mothers and three fathers, representing 16 families, participated in in-depth semi-structured interviews. The number of children in each family ranged from one to six, and 21% \( (n = 4) \) of parents reported that they had twins. In terms of birthplace, 52% \( (n = 10) \) of parents were immigrants from Mexico and the remaining parents were born in the United States and children of Mexican immigrants. Parents’ educational level ranged from sixth grade to some college or trade.

The 19 parents had current open cases with the public child welfare system as a result of alleged maltreatment to their child(ren). At the time of the interviews, parents had their case open between 2 months and 2 years. Of the 16 families, nine (or 56%) reported that their children had been in an out-of-home placement; 25% \( (n = 4) \) reported a child in foster care, 12.5% \( (n = 2) \) reported a child placed with relatives, and 12.5% \( (n = 2) \) reported children in both relative and foster placement. In 19% of the cases \( (n = 3) \), children had been returned to their families.

The reasons for being involved with the department were described as actual situations (i.e., drug abuse, domestic violence, dispute with children) whereas the department would categorize the case as physical abuse or neglect. This lack of concordance is an important distinction and can fundamentally influence the dynamics of communication and interaction between the family and worker. The services mandated by the department may be child centered while the parent views the issues as a parent or family issue. Furthermore, parents define their needs in a more contextual manner than is currently done by the child welfare system (Lee & Ayón, 2007).
Interviews

In-depth semi-structured interviews were used to obtain parents’ perceptions on their experiences in exercising their voice with the public child welfare system. The interview guide was designed by the author for this research. Sample questions include:

1) Did you have an opportunity to share your feelings about your case with your worker?
2) Did your worker ask you for your opinion on decisions that were made in your case?
3a) Were there times when you did not agree with something in your case?
3b) Did you have the opportunity to disagree with the caseworker?
3c) How did your case worker respond?

All questions were followed with the question, “Can you give me an example?” and other probing questions. The interview guide also included questions about the demographic information on the family, worker, and case, and the family’s immigration history. The interviews were audiotaped with consent and completed in Spanish or English. Interviews ranged from 60 to 90 minutes in length. Interviews were conducted in the parents’ home or at a local park, based on the participant’s preference.

Content Analysis

This study utilized the procedures for content analysis outlined by Straus and Corbin (1990). This method was used as the aim of the study is to examine part of the case process (i.e., how parents’ exercise voice). The content analysis was completed in two stages: open and axial coding. Throughout the analysis a constant comparative approach was used to compare incident to incident within and between interviews (Strauss & Corbin, 1990; Charmaz, 2006). Open coding involves four procedures: a) identifying and labeling each distinct incident or idea; b) categorizing the data by grouping concepts that represent similar phenomena; c) labeling or naming the categories; and d) developing properties and dimensions of the identified categories. The interviews were (re)read, labeled, and categorized.

In axial coding, connections between the categories and subcategories are made. Axial coding contextualizes the properties of the phenomenon by identifying the casual conditions by which the phenomenon is manifested and examining the consequences of the phenomena. In this study the axial coding focused on factors that hindered and promoted parents from exercising their voice, reasons parents exercised their voice, and the reception by the worker from the perspective of the parent. Moreover, axial coding involved constructing the model, linking the categories and subcategories, and describing the whole process (see Figure 1).
The lead author primarily completed the content analysis. All authors reviewed the model and interpretations. In case of a disagreement, the authors reviewed the transcripts. In the results section, parents’ quotes are used extensively to support the model, thus addressing the validity and credibility of the model (Charmaz, 2005). For parents who elected to complete the interviews in Spanish, quotes are included with an English translation.
RESULTS AND DISCUSSION

Parents’ Efforts to Exercise Their Voice

Figure 1 is a model that represents parents’ effort to exercise their voice in ongoing child protection services cases. The model was developed based on the interview content and focuses on parents’ interactions with their child welfare worker during monthly home visits. The typical child welfare trajectory requires families to interact with multiple service providers and child welfare workers. Thus, in this study, by the time parents are interacting with the worker, they had earlier interactions with an emergency response worker; in addition, if children were removed from the family, the parents also had interactions with a dependency investigator. Parents revealed several factors that influence the context of their case, including fear, worker’s power, unfulfilled expectations of worker’s role, and mixed messages from service providers. Also, they indicated that these factors also affect their decision to exercise their voice. Parents elected to exercise their voice to express service needs, to advocate for their family, and to ask questions or ask for information about their case, or when workers ask families for their opinions. Once parents exercised their voice, they felt they were either validated or ignored/silenced by their worker. In some cases, parents reported that their voice was used against them, the parents described being disciplined into compliance by the worker, or parents resisted by taking further action. Parents shared positive and supportive interactions with their worker; however, when parents expressed a complaint or need that the worker was unable to fulfill, the interaction tended to be characterized more negatively. As indicated by the circular arrows in the background, parents’ effort to exercise their voice is an ongoing process and dynamic. The path experienced varies by the issue and parent.

What Hinders Parents From Exercising Their Voice or Speaking Out?

The context in which parents’ cases are situated plays a significant role in their decision to exercise their voice. Note that the four factors (fear, worker’s power, unfulfilled expectations of worker’s role, and mixed messages from service providers) that influence the parent case context were not present from the very beginning (except for fear). Gradually parents learn about the worker’s power, their expectations go unfulfilled, and from their interactions with other service providers they learn about the consequences to voicing their opinions. Moreover, families are not necessarily silent or compliant from the beginning.
Fear: Removal of Children and Immigration Status

Fear is at the core of parents’ experiences and interactions with the child welfare system. Parents become vulnerable as they fear that their children can be removed or not returned. As noted by Diorio (1992) parents struggle to cope with overwhelming feelings of fear when faced with the possibility of losing their children. Mexican parents’ connection to their children and family is fundamental to their well-being. A core value of the Mexican community, *familismo*, refers to the importance of family closeness/unity and getting along with and contributing to the well-being of the family (Cauce & Domenech-Rodriguez, 2000). The risk of the fragmentation of their family is likely to place the family members in a state of hyper-stress or as described by one mother “desde que empezó el caso yo estoy en un estado de nerviosismo que no se me ha quitado” [“since my case started I have been in a state of nervousness and it hasn’t gone away”].

In addition, parents who were immigrants fear that their documentation status will play a role in their case or that being involved with the system will impact their chances of obtaining residency in the United States.

*Uno de Hispano tiene mas miedo, mas temor, y mas uno de inmigrante, tiene mas miedo decir algo. Tengo 20 años yo de estar aquí sería una mentira decir que no ha aprendido muchas cosas … de la vida Americana. Pero en realidad siento que es muy traumatisante pasar por esto. Yo no se lo deseo a nadie … [No se] si me vaya afectar en mi record como que sea un cargo criminal. Como yo todavía no tengo mis papeles y estoy pensando en un futuro poder resolver mi situación legal en este país.*

As a Hispanic one is more afraid, more frightened, even more if one is an immigrant, you are more afraid to say something. I’ve been here 20 years and it would be a lie if I said that I haven’t learned a lot about the American life. But the truth is that I feel this is a very traumatic experience. I wouldn’t wish this upon anyone. I don’t know if this will affect my record like will this be a criminal crime. I still don’t have my papers and in the future I would like to resolve my documentation situation in this country.

Parents’ Perception of Workers’ Power

Parents recognize the power that child welfare workers have to remove their children and to return their children. As workers have the power to make these crucial decisions (or influence the decision through their reports) parents often stated that it was very important to be liked by their worker. As one parent stated, “Yo creo que sí importa que le caiga bien a la trabajadora … Es como la policía cuando abusa de la gente porque no le cae bien …”
o es racista. Y puede pasar lo mismo con los trabajadores sociales” [“I think that it matters if the worker likes you. It's like when a police man abuses people because he doesn't like them or because he is racist. The same could happen with the social workers”]. This quote also suggests that other factors are operative in the case. Parents' experience of racism as an ethnic minority and immigrant, in addition to their experiences with other systems, may also affect and inform their interactions with their worker. In the previous quote, it is noteworthy that the mother makes an association with police—those who wield power. Parents also stated that if the workers “did not like you”, they are less likely to provide the support, guidance, or assistance needed to reunify families.

When social workers don't like you it’s harder. It's harder for you to do everything... if you don't have [your kids] it matters a lot because it is up to the social worker for you to get more visitations, it is up to the social worker if she wants to help you get your kids back too. If I'm doing my part and the social worker is still saying no I don't think the kids should go back with her, then that... means that [the social worker] doesn't like me.

Parents’ feared that if they were not liked by their worker they would be deemed uncooperative. Previous studies have confirmed that workers often assess families’ progress based on their level of cooperation (Brown, 2006).

Unfulfilled Expectations of Workers’ Role

Parents often described being confused about their worker’s role. Parents revealed that workers present their role as someone who will provide assistance or “help” them get their children back. Parents expect the worker to be supportive and provide help in accessing information and/or advocating for them. For example, the following parent speaks to the power that the worker has and is upset that the worker does not use her position to advocate on the parent’s behalf. This parent wants to increase the number of days that she sees her kids.

I feel like [the worker] is using her authority when she wants... she has power to make decisions. When we went to my mother in law’s house to have that meeting she was pretty much asking my mother in law—is it ok if we increase the visits [from two times] to three times a week. Why does she need to ask her if she has the authority, she should be telling her, not asking her, and... she told my mother-in-law over and over again that the purpose of the visits was to reunify the mother with the children. My mother in law had already missed visitations three times. The social worker is seeing how my mother in law is and you would think that she would be a little bit more firm as we go along because of
[my mother in laws] lack of cooperation, but she hasn’t. So I feel that she isn’t using her authority or being firm enough like she should. Maybe she only uses it when she wants.

This mother expected the worker to advocate and support her. The worker did set up a meeting with the caretaker; however, she did not advocate for the mother as the mother had hoped and expected.

Parents often reported that their worker was not entirely candid in the way they presented their role and purpose for being involved with the parent. Most parents stated that the social workers indicate that they are there to help; however, as stated by one parent, “Yo me siento mas vigilada que ayudada” [“I feel more watched over than helped”]. For many of the parents in this study it was their first interaction with the public child welfare system and they rely on what the worker said and trust their words. In an attempt to build rapport with families the workers may describe their role in a positive light; however, by not disclosing the major functions of their role with the family (protecting children as guided by current child welfare policy), child welfare workers do not properly inform parents of what they should expect from the worker and services.

La primera trabajadora me dijo que todo estaba bien. Que mi caso no era riesgoso porque mi hija con la que tuve el problema es una adolescente ya tiene 15 años y en este caso pues los niños ya hablan y que veía todo bien, pero que si me gustaría participar en un programa—ella nomás me dijo un programa … Si me dijo que era voluntario, pero nunca le explica a uno que programa es, no sabe uno a que programa va a ir, y nadie se los explica. Yo le dije que estaba bien … Nomás me dijo que si gustaba participar y que iba a mandar otra trabajadora. Yo lo hice para que vieran que no tengo nada que esconderles, que todo está bien … Pero ahora lo toman como un caso.

The first worker told me that everything was ok. That my case was not an at risk case because the daughter that I had a problem with was 15 years old and in this case all the kids [are older] and can speak and she said that everything was good. But she asked me if I would like to participate in a program—she only said a program … She said that it was voluntary, but she never explained what program it was, we didn’t know what program we were going to, and no one explains it. I said that it was ok … She just said that if I would like to participate and that she was going to send another worker. I said yes so that they could see that I have nothing to hide, that everything is ok … but now it’s seen as a case.

The parent in this example was unaware that by agreeing to be part of this “program” she would have an open case with the public child welfare system. She was not informed that her involvement in this program would translate into monthly visits by a worker and weekly visits by an in-home
counselor. Consequently, as parents have these negative experiences with the worker it is likely to impact their future interactions with systems of care. Families may elect to not seek help in a time of need or crisis in the future (Kerkorian, McKay, & Bannon, 2006).

Messages from Service Providers about Exercising Voice

Parents’ interactions with other service providers validated their feelings about the power that workers hold in their cases. Parents often interact with several service providers when they have an open case with the public child welfare system (i.e., in addition to the worker, an in-home counselor through the Family Preservation program, therapist/counselor, and group facilitators). When parents shared their concerns with service providers they received mixed messages about what they should do if they are unsatisfied with the services they are receiving and about how they should interact with their worker. For example, one parent described how her in-home counselor (Family Preservation services) recommended that she contact the worker’s supervisor, but she told her, “Don’t focus on the worker, focus on the issue.” The mother said that she felt that the in-home counselor had advised her to focus on the issue rather than the worker because if the worker saw it as a complaint then the worker would work against her. The mother said, “Yo lo tome como una advertencia que si me quejaba de la trabajadora me iba a perjudicar” [“I took as a warning that if I complained about the worker it was going to harm me”]. Another parent shared the feedback that was provided by a group facilitator.

[The group facilitator] ... said you need to be cordial with your social worker because they hold some authority in returning your kids ... in the end it’s up to the judge, but if the [worker] presents a good case against you then it’s going to affect the decision that the judge makes.

Not only are parents aware of the power that their worker holds but it is confirmed by the comments or advise that the other services providers share. Thus, adding to the fear that parents experience and inhibiting them from speaking out if they are unsatisfied with aspects of their case. Moreover, parents learn from their interactions with their worker or with other service providers that they need to be cautious about what they say, how they say it, and to whom they say it. A climate of fear, intimidation, and silencing is fostered and sustained.

Exercising Voice: When is Voice Exercised? How Do Parents’ Perceive Their Voice is Received by Workers?

As seen in the previous section, there are several factors that may inhibit parents from exercising their voice. However, parents do exercise their voice
though they may be cautious about how and when it is done. Parents described many situations where they felt supported and understood by their worker, primarily when discussing their feelings about the problems the family was experiencing (e.g., substance abuse, domestic disputes).

**Workers ask for parents’ opinions**

An example of exercising voice occurs when workers ask for parents’ opinions:

> When I relapsed, all those thoughts that were in my mind, I told her what I was feeling and... how guilty I was and how ashamed I was and you know I believe that’s why she gave me a second chance [with my kids].

This mother stated that her worker often inquired about her opinions and feelings about the case. She felt that her feelings were validated and she was heard by her worker. In a different case, the mother described that her worker had been very patient in listening to her concerns about her housing issues and how the worker took action and spoke to the landlord. The mother was very grateful for the worker’s efforts to help her with her housing problem.

In contrast, some parents stated that workers rarely inquired about their opinions or feelings about the case: “No [my worker never asked about my opinions]. Yeah, I took the meeting or whatever kind of contact that we had as an opportunity to share my voice but I’ve never felt like she actually came to me to see how I’m doing or if I have any concerns or any needs or whatever.” When parents expressed dissatisfaction with services, unmet service needs, or inquired about their case status, the worker’s response was often characterized more negatively.

**Parents inquire about their case**

Some parents stated that they are ignored. “Cuando trato de hablar del tema se olvida la trabajadora del tema o se hace como que no me escucha o no me vuelve a contestar lo de mi pregunta” [“When I try to talk about the subject she forgets about it or she pretends not to hear me or she ignores my question again”]. Parents also revealed that in their attempts to obtain help the information that they disclose is used against them. In the next case, the parent shares what happened when she disclosed to her worker that she was HIV positive.

> ... last year I came out positive on HIV and I thought that the right thing was for me to... tell my [worker] you know, I [wanted them] to test my girl because she was three months old. And instead of her reaction being it’s ok you’re not going to die or something... she freaked out, she said oh my god you should leave your kids where they are. And from that
point on its been more like you have to educate yourself, are you under medication, are you doing this, don’t touch the girls like that, your aunt gets mad when you kiss the kids too much, you can’t feed your daughter from the same spoon. And things like that ... I feel like she attacks me more.

The mother disclosed her situation with the worker because she thought it was in the best interest of her child. However, revealing that she was HIV positive worked against her.

Parents disciplined into silence

When parents’ voices are ignored or used against them they tended to be silenced, that is, they tended not to voice their needs again as their efforts go without leading to a change. As a result some families went without getting their service needs met.

I really got real depressed. I lost weight ... when they took my daughter away from me ... I was real depressed, but I didn’t want to admit it ... but when you are by your self in the room and you just start crying and crying that’s different ... I think the depression goes away, but it’s always there. Just waiting for something ... I was never on medication ... I was scared to get treatment because ... I used to think that the [workers] were going to find out that I was on medication and that was going to make my case worse. I ... kept everything to my self. I couldn’t tell the social worker ... I couldn’t even tell my individual counselor because I didn’t want them to report that. She did report that once, and, after that, I said “I’m never going to say nothing again” ... I saw the report in court and that was one more problem ... you know what I mean, you don’t want any more problems ... if you have to fake it then that’s what you have to do.

This mother went without appropriate mental health treatment because she knew that disclosing that information would keep her case open or hurt her case. Brown (2006) describes that many parents engage in emotional management to conceal their anger. In this case, the mother was concealing or “faking” that she was well and not experiencing any depression symptoms.

Self-advocacy and parental action

As seen in the case of Mrs. Gomez (noted in the opening quote of this article), parents do resist and take action. In the case of Mrs. Gomez, she and her husband had repeatedly stated that they had not physically abused their child. When their daughter was going to be adopted they decided to intervene and they kidnapped their daughter from the foster care parents. Although it was ultimately discovered that their daughter had a “brittle bone
disease,” as stated by Mrs. Gomez, “... everything that we had already been through was already there.” Mrs. Gomez will never forget her experience with the public child welfare system and her struggle to be heard. Similarly, other parents attempt to resist being silenced by speaking to a supervisor. However, in most of the cases where parents shared that they sought out help from a supervisor the outcome did not lead to a positive change or action. One mother shared that on multiple occasions she attempted to call a supervisor, but she was simply unable to get through [“Hable al departamento para hablar con la supervisora pero nunca me la quisieron pasar”].

The next example was shared by the mother who is HIV positive. She shared her interactions with the supervisor and the outcome is that she is silenced.

I had a [worker], the one that was racist and I felt discriminated because of my illness and I told her supervisor and then he was yelling. And I told him “Don’t yell at me,” and he said, “If you don’t like it then we can end this conversation,” and I said, “I just want to make my point across, I want you to hear me out.” And he was yelling and he just hanged up on me. So then I thought I guess I’m going to have to talk to his supervisor. But I felt ... like the [worker] didn’t hear me, the supervisor didn’t, what makes you think the other supervisor is going to hear me out ... so I didn’t do it.

One of the couples shared that they had seen a supervisor to address a concern and the supervisor had recommended to them that they write a detailed letter and submit it to the department. The parents exercised their voice by speaking to a supervisor and although the supervisor recommended that they make the complaint more formal. Both parents had limited English skills and they did not feel competent to write the type of letter that the supervisor had suggested.

In the next case the mother found that she was heard and she was able to regain her children and get a new worker assigned to her. The difference was that she had a network that was there to support her and advocate for her.

Yo hable con la supervisora, fue mi trabajadora la del [programa de violencia domestica] ese día. Ella siempre a ido con migo ... [Ella va con migo] para sentirme mas segura. Porque como la supervisora no hablaba español, si pusieron una traductora [pero] las cosas que no se decían bien la [trabajador del programa de violencia domestica me las] explicaba bien. Porque muchas veces cuando nomás hablan ingles y no español confunden las palabras. Lo que pasa fue que casi ya iban a ser 3 meses de cuando me iban a regresar los niños. Y a mí eso fue lo que me dijeron cuando yo firme ... Yo le dije que me habían recomendado...
I talked to the supervisor, my worker from the domestic violence program went with me that day. She always goes with me. [She goes with me] so that I feel more confident. Because since the supervisor does not speak English, they did have a translator but the things that are not translated well the worker from the DV program would explain them to me. Because many times when they only speak English and not Spanish they confuse the words. What happened was that it was going to be three months since they were going to return my kids. That’s what they told me when I signed the paperwork … I told them that it had been suggested to me that I speak to the case supervisor because I also had about one month that I hadn’t seen my kids because the dad wouldn’t bring them. I talked about everything that I didn’t like. And they listened to me. In a week they had changed my worker.

Having support from someone who is well informed about how systems work helped this mother to be heard and the interaction with the supervisor resulted in an actual change. Similarly, Marcenko and Striepe (1997) found that substance abuse treatment facilities provide women with much needed support network. In addition, this mother speaks to the barrier that language plays in being heard and about the incompetence of people who translate for such families. Unfortunately, not many parents had the type of support that this mother had.

In the following example, the interview was completed with both parents. The father speaks to the need for guidance and support from someone who knows the system.

Pues [yo le recomendaría] a los otros padres que … si sus trabajadores no les están ayudando que los cambien. Pero desde el principio no cuando ya se va acabar el caso como el de nosotros. Nosotros no sabíamos … nunca nos orientaron con nada de esto. Si a nosotros nos hubieran dicho que si tu trabajador no te esta ayudando cámbialo o [nos] hubiera explicado [el proceso] poquito, créame que desde el principio hubiéramos hecho algo. Si porque uno va con los ojos cerrados, vendados … uno va a las cortes va haciendo lo que los trabajadores te dicen que hagas. Te dicen da un paso y ya uno lo tiene que dar con los ojos cerrados. Y que da para la derecha, da para la izquierda, y uno lo tiene que hacer. Pero sí alguien nos orienta desde antes … desde que empieza el caso, no mira va a pasar así … Ósea, si tu miras como que el [trabajador] no te esta ayudando que el esta haciendo mal tu babla y dile. Y si sientes que de veras no te ayuda … apela para que lo cambien … ¿Me entiendes? ¿Pero si uno no dice nada pues donde va a quedar uno?
No te van ayudar. Va a pasar lo que [los trabajadores] quieren que pase ... ¿Porque? porque uno [no sabe que hacer].

Well [I would recommend] to other parents that ... if their workers are not helping them they should change them. But from the beginning, not when the case is going to end like ours. We didn't know ... no one ever oriented us about the any of this. If someone would have told us that, if our worker wasn't helping us, we should change him or if someone would have explained [the process] a little bit, believe me that from the beginning we would have done something. Because it's like we are doing everything with your eyes closed, blind folded ... we go to the courts and we do what the workers tell us do to. They tell you take a step and you have to do it with your eyes closed. And go to the right, go to the left, and you just have to do it. But if someone had oriented us before ... when the case started, no, look, it's going to be like this ... If you see that your [worker] is not helping you, that he is doing his job wrong, you speak out and tell him. And if you feel that he is not helping you ... make an appeal, so that they will change him ... Do you understand? But if you don't say anything, what's going to happen? They are not going to help you. What [the workers] want will happen ... Why? Because we [don't know what to do].

These parents have been supportive to one another throughout the process. However, as described by the father, they did not know what to expect and he felt like he was blind folded through most of the process. He believes that if there had been someone to “orient” them their experience would have been different.

Many of the parents in this study often felt powerless and voiceless. However, the well-being of their family is important to them; therefore, parents frequently inquired about the status of their case or advocated for their family if they were unsatisfied with the services or worker. The reception that parents experienced when they exercised their voice played a significant role in whether they continued to exercise their voice. When parents were continuously ignored or when they realized that the information they disclosed was used against them, parents often discontinued voicing their needs, expectations, and dissatisfaction with services. At times parents’ concerns were validated; however, in such instances it rarely resulted in change. Some parents who were unsatisfied with the worker's response would attempt to contact a supervisor, but too often their efforts did not lead to change except in the case where the parent brought in a support agent. This finding is significant because it is not enough to have a spouse or family member who is there advocating with the parent. Having someone who knows the system is crucial to facilitating positive change. In other words, it is not enough to have a dancing partner. The parent needs to have a dance instructor, or someone that knows the system, by the parent’s side, teaching them the steps to advocate within the public child welfare system.
LIMITATIONS

This study has limitations related to the sampling. The study is based on a convenient sample and parents were only recruited in one child welfare office in Southern California; therefore, generalizability is limited. Only parents’ experiences are included in this article. Because cases were ongoing parent–worker dyads were not interviewed, in order to protect parents. Interviewing parent–worker dyads in ongoing cases may prevent parents and workers from freely sharing information. Future studies should include multiple perspectives. It is important to note that this study examines, from the parent’s perspectives, the experiences of Mexican families with a history of immigration, a population that has not been well studied within child welfare research.

IMPLICATIONS FOR SOCIAL WORK PRACTICE AND POLICY

Policy changes and practice models that promote the provision of family-centered and culturally and linguistically relevant services are needed and should be supported within the public child welfare system. This study finds that parents’ frequently voiced their needs during monthly social worker visits. However, Mexican parents’ interactions and experiences with their worker coupled with their fear of losing their children and immigration consequences tended to silence them thus preventing effective parent engagement. To address this issue and to promote effective service delivery and outcomes, day-to-day parent-worker interactions need to be grounded in the principles of family center practices.

It is imperative that social workers are trained to provide culturally responsive services and utilize empowerment models effectively to facilitate the active participation of parents in the case process. When families are involved with the public child welfare system the aim is to create a change that will promote children’s (and families’) well-being. If families are actively engaged in this process they may be able to acquire skills and knowledge that they can use in the future when they encounter additional needs. Parents’ interactions with child welfare workers can significantly influence their future help seeking behavior (Diorio, 1992) and how they perceive their ability to change their circumstances.

Given the lack of success that the child welfare system has demonstrated in reducing the overrepresentation of ethnic minority families in foster care and persistent disparities in care (Hill, 2003; Wulczyn & Lery, 2007), it is crucial that the provision of culturally responsive services tailored to culturally diverse families be core to child welfare workers’ training rather than a peripheral issue. Grounding practices in families’ cultural practices along with
understanding other contextual factors such as their immigration history is fundamental to engaging families in responsive ways. For example, workers’ interactions with Mexican/Latino families need to be responsive to the value of personalismo. Personalismo involves more intimate interactions between the service provider as a means to building trust and rapport (Committee for Hispanic Children and Families, 2004); that is, workers may need to disclose personal information (more than they regularly would) or share stories with the parent in order to establish a good relationship. In this study the lack of cultural relevance in services is illustrated in parents’ description of the lack of clarity about their worker’s role and unmet expectations. The parent–worker relationship has to be a trustworthy partnership where the worker and parent know each other well—from this space both parties can work toward addressing the needs of the family. Similarly, linguistically appropriate services are also needed. Study participants shared the lack of proficient translators.

As Latino immigrant families may not be familiar with systems of care in the United States informal and formal sources of support are needed to guide parents and inform parents of their rights. Interventions that provide informal support and advocacy to parents (such as parent-to-parent role modeling, foster parent-to-parent dyad relationships, and mutual-aid/support peer groups) should continue to be supported. Such programs can help parents feel more informed and connected to their case process. In addition, to providing informal support and information, families should also have access to formal advocates as this study finds that having support from someone who knows the system is important to being heard and addressing families’ needs.

Structural factors such as large case loads, extreme needs of families served, and paperwork can restrict workers’ engagement with families. Study findings suggest that the integration of parents’ voice (their opinions and point of view) is necessary to effectively meet the needs of families served by this institution. Therefore, it is crucial that the public child welfare agencies adopt a mission and implement policies that will systematically promote and facilitate workers authentic and collaborative interactions with families. Parents’ feedback should be encouraged and solicited to inform the development of child welfare interventions and to evaluate existing interventions. Families and workers must effectively engage in the creation of an environment compatible with human needs in order to promote social justice (Gutiérrez et al., 2003) and minimize the disparities Latino children and families experience while maximizing the effectiveness of the service plan.

REFERENCES


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