Impending Danger and the Cultural Context

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eth-no-cen-tric-i-ty \ noun: \ Characterized by or based on the attitude that one’s own group is superior

Introduction

An article posted by National CASA correctly concludes “...that child abuse and neglect is not easily identified with respect to cultural boundaries. As one begins to explore the considerable variation in child rearing beliefs and behaviors cross-culturally, it becomes clear that there is not a universal standard for child rearing or for child abuse and neglect. This presents a dilemma. If we fail to allow for a cultural perspective in defining child abuse and neglect, we find ourselves in the position in which our own set of cultural beliefs and practices are presumed to be preferable, and in fact superior, to another. At the same time, we cannot take the stance of accepting inhumane treatment of children in the name of cultural sensitivity.”i

We agree with CASA’s conclusion about cultural boundaries and child rearing practices and child abuse and neglect. But the same is not true of impending danger. Cultural boundaries do not reduce identification of impending danger when safety models are used correctly. In this article we hope to shed some light on important aspects of safety intervention and cultural competency.

As a reminder, here are definitions important to this article.

Cultural competence is the ability to transform knowledge and cultural awareness into health and/or psychosocial interventions that support and sustain healthy client-system functioning within the cultural context.ii
Parenting is the work or skill of a parent or primary caregiver in raising a child with respect to development and well-being and socializing a child to adapt and conform to the social-cultural group.

Child abuse and neglect is when parenting behavior is harmful and destructive to a child’s cognitive, social, emotional and/or physical development and well-being and those with parenting responsibility are unwilling or unable to behave differently.

Impending danger is a state of danger in which family behaviors, attitudes, motives, emotions and/or situations pose a specific threat to a child’s safety and can be anticipated to have severe effects on a child at any time.

Danger threshold criteria are the measures considered when judging whether a family situation, behavior, emotion, perception, intention, or attitude is an impending danger. The criteria are out of the family’s control, likely to have severe effects, a vulnerable child, observable and specific, imminent.

Culturally Competent Practice

Those who write about culture competency and cultural competent practice describe a process that begins with the gaining of knowledge and personal awareness about other cultures. That process of learning is described as continual. It includes gaining greater appreciation of the intricacies of other cultures and more clarity about differences with your own culture. As knowledge and awareness increase they begin to affect how one interacts with clients as a matter of personal and professional growth and development. Cultural
competency enables staff to effectively respond to the unique needs of populations whose cultures are different from the dominant culture, or mainstream America. iii

Culturally competent practice occurs as a result of this understanding and behaving process and translates into how a CPS worker introduces himself and his purposes into the intervention; interacts; seeks to involve family members to increase his understanding of the family and culture; is sensitive to differences he experiences in contrast to his culture or mainstream America; and tries to comprehend the meaning of cultural references, symbols, values and mores. In particular, the CPS worker focuses on unique or characteristic parenting practices that occur within a cultural context.

An important feature of culturally competent practice is considering a family within their community. The family’s community may contain primarily mostly families from the same culture; it may be a highly diverse community consisting of many different cultures; or it may be a community in which the family’s culture is unusual and different from others. CPS workers need to know what influences over time have shaped the community in which a family lives iv and what institutions and services exist within the community that are accessible and valuable to the family.

An examination of the learning programs’ knowledge, values, skills and competencies required to produce culturally competent practice demonstrates that emphasis is given to heightening awareness, focusing on sensitivity to differences, using family members as key informants and cultural guides, communication and interaction, and identifying service responses that are culturally relevant and accessible. For example the Public Child Welfare Training Academy (PCWTA), San Diego State University, has posted an outline of a child welfare training program called Child Welfare Practice in a Multicultural Environment.v Under knowledge objectives, you will find expectations related to distinguishing between terminology such as race, ethnicity, and culture.
Practitioners learn about the defining and guiding influences of culture. Focus is given to disproportionality in placement and ethnographic interviewing concepts. Skill centers primarily on communication. Value clarification or enhancement is directed at sensitivity to differences, respect, and the effects of personal behavior on those in other cultures. The outline provides more detail about anticipated competencies: sensitivity to differences, ability to conduct culturally sensitive assessments, importance of dealing within primary language, appropriate use of power and authority within the context of cultural differences, self-awareness, and ability to critically evaluate the relevance of intervention models to be applied with diverse ethnic and cultural populations.

Agreeably one who would be thusly prepared surely would experience a difference in their capacity to perform more effectively and in a more culturally sensitive manner. And, what is also needed is similar consideration of how cultural competency operates within safety intervention and decision making. So let’s turn our attention to those areas.

**Safety Intervention and Culturally Competent Practice**

Safety intervention is basically comprised of three areas of endeavor:

1. Information collection the purpose of which is to gain a full picture of how the family is operating
2. Assessment of what is known about a family in order to determine whether impending danger exists
3. Development and implementation of safety plans designed to manage impending danger as represented by specific threats to a child’s safety

*Information Collection and Cultural Competence*

During safety intervention, how we understand a family is paramount. How we understand a family based on their culture is crucial. We begin that
understanding during information collection which occurs primarily during the investigation or initial assessment of the family. In most places, this happens during the first 30 to 60 days following the report of child maltreatment. If you’ve followed our monthly articles, you know that we’ve identified 6 assessment questions or areas of family functioning that are intended to provide a picture of how a family is operating and as the data base for assessing impending danger:

1. What is the extent of maltreatment?
2. What are the circumstances that surround maltreatment?
3. How do the children function?
4. How do the adults function in general?
5. What are the parenting practices?
6. What are the disciplinary practices?

These are open, neutral areas of inquiry. For instance, consider the question, what is the extent of maltreatment? In many instances, it may be answered simply by the conclusion “there is no maltreatment.” Each of these questions has a culturally impartial quality that begs for attentiveness to cultural, racial, spiritual, or ethnic variation.

Culturally competent practice during safety intervention will begin with the early encounters with a family. As the investigation/initial assessment continues, you explore how the family is operating. These efforts ought to employ the kind of knowledge, skill, values, and competencies identified earlier consistent with what we summarized from the PCWTA outline mentioned above. From a practice model perspective, the information collection that supports safety intervention and safety decision making can make use of ethnographic interviewing. Alfred A. Young has a nice way of defining ethnographic interviewing by describing what he does. vi

In the most simple terms, I interview people about their life experiences, their visions of self, and their visions of particular

features of the social world in order to gain some purchase on their “common-sense” understandings about these matters.

In *Asking the Right Questions the Right Way: Strategies for Ethnographic Interviewing*, the authors point out:

*In a traditional interview, the interviewer operates from the perspective that "I know what I want to find out, so I’m setting the agenda for this interview" and "I know what is best for the person I’m interviewing. Let me see if I can get her to accept my ideas." In contrast, in an ethnographic interview, the client, spouse, or parent has the opportunity to select the important information to share. The professional operating from an ethnographic perspective thinks, "I don’t know much about the parents’ point of view, so I need to encourage them to set the agenda" or "I don’t know what the parents want for their child. Let’s see if I can thoroughly understand their ideas about their child."

These points of view about how you collect information and discover meaning about a family contributes to information collection which supports culturally-oriented safety decision making and safety intervention.

*Safety Decision Making and Cultural Competence*

*We’ve pointed out that, with few exceptions, information and guidance about cultural competence in child welfare practice does not focus on safety intervention. Mostly cultural competence is discussed in relation to knowledge of other cultures, sensitivity to cultures different than one’s own, communication and interaction, and relevant services. But now do you see how information collection as part of safety intervention is far better when cultural context is*
foundational? But what bearing does culture have on safety assessment – identification of impending danger - and safety decision making?

When assessing and determining the existence of impending danger, culture is not a criterion. This sounds like heresy but wait...let’s think about it. Impending danger is a phenomenon not subject to cultural interpretation. That is to say that there is no family or caregiving practice that results in danger to a child that is understood, explained, justified, rationalized, or excused based on culture. Remember, we are talking about safety assessment as it is suppose to be performed – as unbiased and focused as possible. So where does such definition and control in judging come from?

State statutes identify severe harm and threat of severe harm which are standards consistent with impending danger. Laws determine what is not allowable as parenting practices, in particular, as related to severe harm and threat of severe harm. The laws govern the mainstream and do not make exceptions for cultural practices that vary from these standards. In other words, the law does not make an exception for a cultural practice that results in serious non accidental physical injury to a child. Here we emphasize severity and by doing so we reduce the amount of discretion used in worker or law enforcement decision making which, as we like CASA have acknowledged, occurs when judging child abuse and neglect and general parenting practices with respect to cultural boundaries.

Most importantly is the application of the danger threshold criteria. The danger threshold criteria measure whether a family situation, behavior, perception, intent, emotion, or attitude represents an impending danger threat:

- Out of control – what is happening is not subject to being controlled by anything or anybody in the family
Could have severe effects – remember this is serious physical non-accidental injury, impairment, terror, grievous pain and suffering, even death

Vulnerable child – any child who is unable to protect himself or herself; who is dependent on others for protection

Observable and specific – evidence, facts about the nature and characteristics of the threat

Imminent – logical conclusion about the certainty of occurrence of the threat and possible severe effects

These criteria cut across cultures. It is hard to think of a family situation or parenting practice which meets these criteria as being acceptable based upon culture, ethnicity, race, or religion. What we are talking about here is a family condition that is very specific and can be testified to if necessary. In other words, the standard is evidence of facts, not values or opinions.

Let’s consider a case scenario. A father abuses alcohol daily and is usually drunk which is well known by everyone in his family. He regularly drives with his twin toddlers (i.e., vulnerable children) in the car while drinking or when drunk (i.e., family condition as an impending danger threat). He frequently does not make sure the children are in safety seats (i.e., family condition as an impending danger threat). No one in the family network can stop him from this behavior (i.e., out of control). He minimizes what he’s doing and therefore refuses to behave differently (i.e., out of control and imminent). He could cause or be in an accident which could injure or kill the children (i.e., severity). This behavior has been happening weekly for several months (i.e., imminent). These children are in impending danger and that is so regardless of culture, race, ethnicity, or religion. You can imagine a father from any culture behaving this way, yet you wouldn’t
conclude that the culture that influences him alter these facts which together confirm impending danger.

There are stumbling blocks that exist in safety decision making that ought to be mentioned.

✖ Confusing life style or poverty with impending danger

This is a huge issue. Among all safety models across the country, you will find two safety threats using language similar to this: (1) caregivers do not provide for a child’s basic needs (such that it affects the child’s safety); this is usually concerned with food, clothing, and shelter; (2) the home living environment threatens the safety of the child, usually having to do with structure and health. These two threats are probably the most likely to be misjudged based on values or sensibilities rather than the danger threshold criteria. Workers may apply their own values related to unpleasant living conditions or undesirable parenting practices, both of which may have nothing to do with impending danger. Workers may judge these conditions based on poverty. The lack of basic necessities or an unsuitable living arrangement due to poverty is about the lack of resources, not impending danger.

We should mention the definition for unsafe for emphasis about wrongly concluding kids are “unsafe” because of poverty. A child is unsafe when there are threats of impending danger and caregiver protective capacities are insufficient to provide protection. The lack of resources due to poverty is not an example of insufficient caregiver protective capacity.

✖ Judging unusual or different parenting practices as impending danger

Regarding safety intervention, the concern is not about different or unusual parenting practices in general which may or may not support
growth, development, and socialization. The concern is about specific behavior that poses a danger to a child. Our experience is this concern can be applied fairly across the overwhelming percentage of families referred to CPS regardless of culture. Of course, the question of the quality of the worker who applies this standard is a crucial variable in terms of equitable and effective application. An angle on this issue is rigorously qualifying unusual or different parenting practices as meeting the danger threshold.

It is important to recognize that safety intervention models are developed for application with the majority of families referred to CPS. So, there will be exceptions in terms of unique family or culture behaviors that require special consideration and attention. While they may be the exception, there are cultures residing in this country that do have unusual and different parenting practices which raise concern about endangerment. These practices test the limits of the law. For instance, causing physical injuries in order to scar a male child’s face as a rite of passage; female genital mutilation; depriving children of critical, even life saving medical care; or providing drugs to children or handling poisonous snakes as part of religious ceremonies. These kinds of family situations are challenging with respect to safety assessment. However, the number of these family situations reported to CPS is miniscule in comparison to the total number of reports assessed by CPS. In addition to CPS safety assessment, such unusual cases likely should and usually do receive additional critical scrutiny through a legal process that also safeguards the family’s civil rights.

- Community standards

Culturally-based parenting practices differ geographically and across community situations. How children are viewed, what is expected of them, and how independent they are can be significantly different from one community compared to another. In farming cultures, children often are
allowed or even expected to accept responsibilities that in a city environment would be viewed as dangerous (e.g., driving farm equipment). In rural areas where there are few child caring resources, children may take on supervisory responsibility for their younger siblings at an age that is below, say, a city ordinance. In small towns where there is higher familiarity among residents, supervision of children may be more relaxed. In areas where geological or geographic dangers exist, it may be part of the family culture for children to be allowed to grow up around those dangers as they learn to deal with the nature they abide in. The point is safety assessment cannot ignore community standards. (Note: We see the issue of community standards as needing programmatic solutions which guide worker decision making.)

Community standards change too. And that really means that what is considered dangerous changes. Consider seatbelts and smoking in closed rooms as examples of areas involving parenting practices that years ago were not considered as having to do with child safety and danger. We recognize that even the mainstream culture adjusts its values and practice and then CPS adjusts.

Safety Plans and Culturally Competent Practice

A safety plan can include any strategy that will keep a child safe. There is absolutely a terrific reason that a safety plan ought to recognize a family’s culture. A family’s culture can be explored to figure out the culture’s approach to (1) solving problems and (2) keeping children and family members safe. Talk about “family centered.” Let’s enlarge that to include “culture centered” as we consider options for safety plans. Why can’t the caregivers and other family members – including whatever relatives may be around – be key informants about the meaning of children not being safe and how (from a cultural perspective) the family believes protection can best be achieved. This allows CPS to open up the options to cultural caretaking that may be associated with cultural entities like a
tribe or clan or kinfolk or non related community connections. Let the family say what and how their culture responds to “the need for intervention.” And respect what “intervention” means within the family’s culture.

A safety plan works because of surveillance. Really, that’s it. Safety plans are effective because there are eyes on the situation and firsthand knowledge when things are going south. That’s what works and that’s what keeps kids safe. Fundamental to that fact is the suitability of those who participate in the safety plan. This is when applying a culturally-competent approach to this area of practice is important. Seeking out those who understand the family, the caregivers, and their culture should be a primary criterion for judging suitability.

The safety plan is the answer to the CPS question of how to keep a child safe while help to the caregivers and family continues. Family-centered practice and cultural competence provide the direction for finding the answer to that question from within the family when possible.

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1 Posted on the National CASA website.
3 Traum, M. and Hurley, A. Fostering cultural competence in service provision to diverse populations. Protecting Children. Volume 20 Number 1. AHA. 2005
6 Young, Alfred A. Coming out from under the ethnographic interview. Department of Sociology and Center for Afroamerican and African Studies. University of Michigan. A Draft – no citation.