In October of 2006, Philadelphia’s Department of Human Services (DHS) came under scrutiny regarding children killed as the result of abuse who had been previously known to child welfare services. The number of child deaths in families known to DHS increased from three in 2003 to ten in 2005. Mayor John F. Street announced the formation of a child welfare review panel shortly after the news in order to review DHS operations. The child welfare review panel is comprised of nine appointees by Mayor Street, who are either nationally recognized for their expertise or represent stakeholder interests in regard to child welfare.

The nine-member panel includes:

- Carol Wilson Spigner, Co-chair, Professor at the University of Pennsylvania School of Social Policy & Practice; Field Center Faculty Director
- Bill Mills, Co-chair, PNC Bank president
- Frank Cervone, Executive Director of the Support Center for Child Advocates
- Marc Cherna, Director of the Allegheny County Department of Human Services
- Cindy Christian, pediatrician at the Children’s Hospital of Philadelphia; Field Center Faculty Director
- David Sanders, Executive Vice President of Systems Improvement at Casey Family Services and former head of the Los Angeles County agency equivalent to DHS
- Linda Spears, Vice President of the Child Welfare League of America
- Carol Tracy, Executive Director of the Women’s Law Project
- Fred Wulczyn, Research Fellow at Chapin Hall Center for Children

The duties of the Child Welfare Review Panel are to audit child safety assessments, review all child deaths since 2002, and recommend reforms. The panel is also expected to focus on DHS’ use of private contractor agencies to deliver services to clients. A comprehensive report is due by May 1, 2007.

Both Dr. Christian and Dr. Spigner are Faculty Directors of the Field Center and provide perspectives from different disciplines as leading child abuse experts. Dr. David Sanders will be the Closing Keynote Speaker at the Field Center’s biennial conference, One Child, Many Hands: A Multidisciplinary Conference on Child Welfare, on June 1, 2007.
THE FIELD CENTER FOR CHILDREN’S POLICY, PRACTICE & RESEARCH
Guided by the Schools of Social Policy & Practice, Law, and Medicine and the Children’s Hospital of Philadelphia, the Field Center for Children’s Policy, Practice & Research brings together the resources of the University of Pennsylvania to enhance and assure the well-being of abused and neglected children and those at risk of maltreatment. By moving beyond traditional approaches, the Field Center utilizes an interdisciplinary model to integrate clinical care, research and education, inform local and national policy, and prepare the nation’s future leaders, for the benefit of children and their families.

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Field Center Advisory Board Member Dennis O’Brien (R-Philadelphia) has been elected Speaker of the Pennsylvania House of Representatives. He has pledged to be an independent consensus builder within a politically divided environment. “It has always been an honor to serve my district in the Pennsylvania House of Representatives, and I am humbled to have been chosen to serve the entire Commonwealth as Speaker. This is an unprecedented opportunity to unify members of both parties and the administration to bring about solid reforms that the people of Pennsylvania so clearly need and deserve. The best way to deliver results is to eliminate party lines and to become one governing body rather than a majority and a minority.”

He stressed his commitment to Pennsylvania’s vulnerable children and families. “My first priority has always been to take care of my family. As Speaker, my goal is to make it easier for all citizens to care for and provide for their families. I look forward to working together to create a stronger, safer Pennsylvania.”

Speaker O’Brien has served his Philadelphia district for almost 30 years and has been a longtime advocate for the cause of autism and has pledged to use his new role in the House to draw support for programs dealing with autism. His commitment encompasses broader child welfare issues as well. Speaker O’Brien states that, “I see my election as Speaker as an opportunity to improve the lives of thousands of children with disabilities by highlighting the need for adequate and innovative treatment, research and intervention.” The Field Center congratulates him on his appointment and look forward to working with Speaker O’Brien to advance the well-being of Pennsylvania’s children.

The Field Center for Children’s Policy, Practice & Research presents
ONE CHILD, MANY HANDS
A Multidisciplinary Conference on Child Welfare
May 30 - June 1, 2007
Philadelphia, PA
Sponsored by the Children’s Hospital of Philadelphia

"An Opportunity to Heal"

Healing of Children
Opening Keynote Address
Dr. Marilyn Benoit
Past President of the American Academy of Child and Adolescent Psychiatry

Healing of Professionals
Conference Plenary Panel
Secondary Trauma of First Responders to Violence Against Children
Moderated by Dr. Charles Figley
Director, Florida State University Traumatology Institute

Healing of the System
Closing Keynote Address
Dr. David Sanders
Executive Vice President of Systems Improvement, Casey Family Programs

Special Guest Speaker
Amy Berg
Academy Award-nominated filmmaker of “Deliver Us From Evil”

“Deliver Us From Evil,” a critically-acclaimed documentary which features the disclosure of a Catholic priest’s three-decade history of sexual abuse of children, has been the recipient of numerous awards for Best Documentary, including the LA Film Festival, Boston Film Festival and NY Film Critics awards, and was nominated for the Academy Award for Best Documentary of 2006.

www.sp2.upenn.edu/onechild
For children in foster care, living in a stable home has a beneficial effect, independently of their behavior problems when they start foster care.

Children who enter foster care with many behavior problems are less likely to have problems only 18 months later, if they are placed in a stable home. Conversely, among children who begin foster care with fewer apparent behavior problems, those who are moved more frequently are more likely to have subsequent problems than children in more stable placements.

These are findings of a study published in the February issue of Pediatrics.

“It seems to be common sense, and in fact has been borne out in previous research, that frequent placement changes have a negative influence on healthy outcomes for foster children,” said study team leader and pediatrician David M. Rubin, M.D., Director of Research and Policy for Safe Place: Center for Child Protection and Health at The Children’s Hospital of Philadelphia. “However, we did not previously know how much of the effect was from unstable placements and how much was from a child’s pre-existing behavior problems.”

“Half of the children entering foster care already have serious behavioral and mental health problems,” added Dr. Rubin, “and many people in the child welfare field have argued that these pre-existing problems caused children to experience frequent moves and unstable foster care placements. We designed our study to separate the effect of a child’s baseline problems from their subsequent placement stability and health outcomes.”

“We found that, even after considering the multitude of problems children may have when entering foster care, a stable home contributes greatly to improving their behavioral outcomes,” said Dr. Rubin. “Our results confirm that one of the best interventions we can make for children in foster care is to find them stable homes as quickly as possible and help them to make healthy, secure attachments.”

The researchers analyzed data from the National Survey of Child and Adolescent Well-Being, a nationally representative study of children who were referred to child welfare agencies for maltreatment in 1999 and 2000. From a sample of 729 children who entered continuous foster care, the study team compared the child’s behavioral well-being at baseline with outcomes after 18 months of out-of-home care. The children ranged in age from infancy to 15 years old.

Using a combination of temperament scores (for children under age two), a child behavior checklist, birth parent characteristics and each child’s maltreatment history, the researchers estimated whether each child was at low, medium or high risk for subsequent unstable placements. These predictions were based on baseline information when the child entered foster care.

After 18 months in foster care, half of the children studied were “early stabilizers,” experiencing a long-lasting home placement within 45 days of entering the foster care system. Another 19 percent of the children received a long-lasting placement later than 45 days, while 28 percent did not achieve a long-lasting placement.

In the group predicted to be at low risk of instability, early stabilizers had a 22 percent risk of behavioral problems, compared to a 36 percent risk of behavioral problems among children in unstable placements. The different rates, said the study team, revealed that unstable placement increased the risk of behavior problems by 63 percent, even in children with fewer problems to begin with.

Among children in the high-risk group, where behavioral problems after 18 months were higher for everyone, instability still had a large effect. High-risk children with early stability had a 47 percent risk of behavior problems, compared to a 64 percent risk in high-risk children with unstable placements—amounting to a 36 percent increase in the risk of behavior problems due to instability.

The most important implication of the study, said Dr. Rubin, is the impact of intervening early in the foster care process to encourage stable placements for children. “Better integration of efforts by child welfare systems, healthcare practitioners and government agencies can improve placement stability for these vulnerable children, and early intervention may have important longer-term benefits.”

Dr. Rubin’s co-authors were Amanda O’Reilly, M.P.H., and Xianqun Luan, M.S., of Children’s Hospital, and A. Russell Localio, J.D., M.S., of the University of Pennsylvania School of Medicine.

Most pediatricians stop at diagnosis and treatment, but Dave Rubin attempts to impact outcomes on a broader scale. As Dr. Rubin says, he does not want his data to “just die in a journal,” but instead, marries it to public policy. Currently, Dr. Rubin is the Director of Research and Policy for Safe Place: The Center for Child Protection and Health at Children’s Hospital of Philadelphia (CHOP). There, he engages in varied research to place the issues of children in foster care into perspective. Dr. Rubin’s latest research deals with the link between stable foster placements and child behavior problems (see related article).

Dr. Rubin feels that his partnership with the Field Center is indispensable, because the advice of its members inform his studies. What happens in Washington directly affects his practice, as in the case of recent service cuts for children in foster care. Dr. Rubin mentions that the Field Center’s Richard Gelles helped to give him a sense the system’s imperfections, and that Carol Spigner taught him to think about the policy makers throughout his research. Because of the Center, Dr. Rubin knew that he had to “make [his work] important” to lawmakers.

Throughout his career, Dr. Rubin has always enjoyed digging beyond the surface and working with the highest-risk children. And even amidst hectic deadlines, he is engagingly warm and helpful. The Field Center congratulates him on his most recent study.
The United States Constitution makes no mention of children, nor of parent-child relations, nor child-parent-state relationships. However, the Constitution does say, in both in the Fifth and Fourteenth Amendments, that no person shall “be deprived of life, liberty or property without due process of law.” And in a number of cases, the Supreme Court has held that parents have a Constitutionally protected “liberty interest” in the right to raise their children as they see fit, free from unnecessary interference from the state, “that derives from blood relationship, state law sanction, and basic human rights.” However, as early as 1843, Justice Joseph Story observed that although the law presumed that a parent would properly care for his children, “whenever... a father... acts in a manner injurious to the morals or interests of his children, the Court... will interfere.” That doctrine, known as parens patriae, was effectively incorporated into Constitutional jurisprudence in 1878 in Reynolds v. Utah, a case involving the Mormon Church and polygamy. In 1944 the Supreme Court, in Prince v. Massachusetts, reiterated the viability of the fundamental liberty interest protected by the Fourteenth Amendment.

Traditionally, however, issues of what is generally referred to as “Family Law,” including matters of intra-family relationships, and the State’s relationship to parents and children, were matters primarily left to the individual states to regulate. Indeed, all of these cases arose under state laws and began in state courts before finding their way to the United States Supreme Court, and being finally decided under the due process clause of the United States Constitution. Thus, by its very nature our federal system creates an opportunity for a plethora of legal standards and structures created by the states to govern how we, as a society, balance the sometimes competing claims of parents, children and the state in individual cases.

Beginning in 1974 with the passage of the Child Abuse Prevention and Treatment Act (CAPTA), Congress began to become more actively involved in addressing questions of child welfare. CAPTA provided, among other things, for federal grants to states for improvement of child welfare services, and community-based prevention and family support services. It was followed by other Federal legislative efforts in this area, notably the 1980 Adoption Assistance and Child Welfare Act (AACWA), and its successor, the Adoption and Safe Families Act of 1997 (ASFA). Through ASFA, Congress sought, among other things, to clarify the circumstances under which a child may be removed from parental custody, and to speed up the process under which a state court can conduct permanency placement hearings.

In each of these legislative efforts, rather than mandate specific doctrinal rules or practices affecting child welfare, as a matter of national law, Congress used its power to spend, i.e., to provide money to states for specified purposes, subject to specified conditions, to induce states to create, and from time to time modify, various aspects of their own child welfare laws and systems. The standards provided by Congress, however, were intended to leave to the states great flexibility in creating their own laws, providing only a very minimal definition of abuse and neglect, so that as long as a state meets the minimum definition set forth under CAPTA, it will continue to be eligible for federal funds. That model still leaves each state with broad discretion to decide how to strike the balance between the interests of children and their parents.

Perhaps the most critical intersection of those interests occurs when the State seeks to remove a child from the parents’ custody and place her or him in the care of a party selected by the State, and to an even greater degree, when the State seeks to terminate parental rights. How is the balance to be drawn? What are the factors that must be considered in deciding in a specific situation whether a parent’s rights should be terminated and the child placed for adoption, whether other, less drastic, interventions should be tried in order to preserve the parents’ rights while protecting the child, or whether the parents should be left alone to continue raising their child without the interference of the State?

One thing that the courts have agreed on is that in order to terminate parental rights without the consent of the parent, the State must prove that there have been both parental failures - termed by the Supreme Court in Santosky v. Kramer, “unfitness” - and that it must be in the child’s best interest to terminate his or her parent’s rights. Thus, it is in the devolution from the Constitutional “liberty interest” of parents to raise their children free of unwanted State interference, and the rights of children to be safe and appropriately supported, that courts and legislatures have developed the standard that the “best interests of the child” must be considered.

These cases reflect the foundational, and on-going tension between and among the rights of parents to make decisions concerning the care and up-bringing of their children free from unreasonable interference by the State, the needs of children to adequate care and nurture in order that they may not suffer unreasonably, and have a reasonable chance to grow up to become healthy and self sustaining adults, and the right of the State to intervene into the family to protect a child from a parent’s failure to provide that appropriate care.

And that is no mere academic debate.

Consider these figures: In 2004, the most recent year for which national statistics are available, of the 73 million children living in the United States, more than 500,000 were in state mandated foster care. Of the 2.6 million reports of child abuse and neglect that were deemed worthy of investigation, 38%, or 990,000 were substantiated,
and approximately 22% of the substantiations, or 200,000 cases resulted in removal of the children from their parents’ homes. At the same time, virtually no responsible social science researcher denies that the majority of cases do not involve serious physical or sexual abuse, rather they are cases of neglect caused by parental poverty, and many, if not most of those children who have been removed from their homes could just as well have been cared for at home, with some assistance from the state – at a tremendous cost saving to the government and taxpayers. Indeed, there is widespread agreement that one of the most significant reasons for removal of children from their parents is simply the parents’ inability to find adequate housing that they can afford, a fact that reflects the well known lack of affordable housing in communities throughout the country.

At the same time, the risks that children face from the long term affects of neglect as well as abuse are real and significant. A report published in 1998 of a study of almost 10,000 persons within the Southern California Permanente Medical Group, demonstrated clearly that childhood abuse and neglect, as well as childhood exposure to domestic violence, living with family members who were substance abusers, mentally ill or suicidal, or ever imprisoned, showed a direct and statistically significant relationship to adult alcoholism, drug abuse, poor health, sexually transmitted diseases, and other negative adult outcomes, including premature death.14

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CHILDREN’S RIGHTS AND PARENTS’ RIGHTS
(continued from page four)

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FIELD CENTER BREAKFAST SYMPOSIUM SETS RECORD ATTENDANCE

The Field Center for Children’s Policy, Practice & Research hosted a standing room only audience for its most recent Breakfast Symposium, Parents’ Rights vs. Children’s Rights. Over 200 professionals filled the Levy Conference Center at Penn’s Law School on January 31st to hear Richard Gelles and Martin Guggenheim in a thoughtful and at times controversial discussion of the issues, moderated by Penn Law Professor Alan Lerner.

The discussants are two of the nation’s most notable figures in child welfare: Martin Guggenheim is the author of What’s Wrong With Children’s Rights and Fiorello Laguardia Professor of Clinical Law at NYU Law School, while Richard Gelles is a noted author and child abuse expert, Dean of Penn’s School of Social Policy & Practice, and holds the Joanne and Raymond Welsh Chair of Child Welfare and Family Violence at the University of Pennsylvania. The audience, comprised of judges, social workers, child welfare executives, attorneys, child advocates, physicians, nurses, graduate students, and policy-makers, enthusiastically responded to this critical look at one of the most significant issues in child welfare. Attendees described the session as “informative” and “very thought provoking,” commenting positively on the debate format and knowledge of the presenters.

The Field Center’s Spring Breakfast Symposium, featuring David J. Kolko, PhD, is scheduled for April 11, 2007. Dr. Kolko, Professor of Psychiatry, Psychology, and Pediatrics at the University of Pittsburgh School of Medicine and Director of Science and Practice for Effective Children’s Services at Western Psychiatric Institute and Clinic, will be speaking on Studying and Changing Treatment Practices in Child Welfare: Trials and Tribulations. Registration opens March 15, 2007.

The Field Center would like to thank the following recent donors for their generous gifts to the Field Center for Children’s Policy, Practice & Research:

The Children’s Hospital of Philadelphia
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Lynn Hubschman
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Mark Ostroff
Robert Sadoff, MD
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Donations to the Field Center enable us to continue our critical work. Thanks to a challenge grant from the Joseph and Marie Field Foundation, gifts are matched on a dollar for dollar basis. For more information, please contact Director of Development Nadina Deigh at (215) 898-5518 or deighn@sp2.upenn.edu.
FOCUS ON THE FIELD CENTER

Elizabeth Fiebach has been a member of the Field Center’s Advisory Board since its outset. Ms. Fiebach began work as a paralegal, but changed course after mentoring a girl through the Big Brothers Big Sisters Program for twelve years. Says Ms. Fiebach: “I got so much from her and it really set me on the course for wanting to go into social work.” After earning her MSW at Penn in 1996, Ms. Fiebach managed a Healthy Start program located in an apartment within a low-income housing district of Southwest Philadelphia. The program successfully reduced infant/child morbidity rates by helping families with child development, immunizations, and regular pediatric care. The Healthy Start program was multidisciplinary, in partnership for two years with the Children’s Hospital of Philadelphia Adolescent Clinic, showing “the power of many different groups in the community working together to help families.” Ms. Fiebach is now a clinical social worker working as a Child/Adolescent/Family Therapist in Center City Philadelphia following clinical training at Pennsylvania Hospital, and serves with great enthusiasm as a member of the Field Center Advisory Board. She supports the Field Center because of its role in educating and supporting those who are “on the front line of social work” in child protection. She also sees an important aspect of the Field Center’s work in the political/advocacy process, and sees great potential in enhancing the medical community’s sensitivity to child protection and strengthening families. Ms. Fiebach was very impressed by the Center’s 2005 biennial conference and serves on this year’s Conference Advisory Board.

Ms. Fiebach has worked with the Advisory Board Marketing Group to create the new Field Center brochure. She is now looking forward to supporting the Field Center’s interdisciplinary evaluation clinic. She feels that it is important for the Field Center to retain sight of the micro component to child welfare, and sees this learning lab as an excellent opportunity both to strengthen families on an individual basis and to provide resource material for research. Also, Ms. Fiebach believes strongly that mental/behavioral health is inextricably involved in cases within the welfare system, yet that it is often separated within the field. Ms. Fiebach wants to do more to reduce the stigma of mental illness and would love to “down the road…somehow tie that into working with the Field Center.”

Aside from her interests in health and welfare, Ms. Fiebach is raising her puppy, Rusty, with her Penn-Alumni husband of 22 years, Bob. Her daughter, Emma, is a junior at Drexel and son, Mike is a junior at San Francisco State University. Every day, Ms. Fiebach continues to be “consistently inspired” by her clients.

FIELD CENTER STUDENT PROFILE: EMILY GOLDMAN

Emily Goldman is in her final year earning her Bachelor’s degree in English at the University of Pennsylvania. She became interested in child welfare issues after witnessing disparities in how people interact with children. After high school, she interned at the Children’s Hospital of Cincinnati. It was there that she went on rounds and worked with hospitalized children with asthma. These children were repeatedly hospitalized for asthma and Emily questioned why this was happening and what was going on with their families at home.

When Emily came to Penn, she majored in premed for one semester. She has always been interested in child health and child welfare issues. She switched her major to English but is still very much interested in pursuing a career involving social justice issues.

Emily was in Washington, DC this past summer and was mentored by a former student intern with the Field Center. It was through this contact that Emily is now an intern here. Emily was born in Illinois, grew up in Ohio, and now is a resident of Pennsylvania. She hopes to work in Washington after graduating from Penn for a couple of years and then go back to school to pursue a Master’s degree in Public Health.

IN OUR OPINION

Child abuse and/or neglect cases are everywhere. We see it on the news, hear it on the radio, and read it in the newspapers. Although it seems to surface everywhere, children are still falling through the cracks within the child welfare system. In situations where child abuse/neglect cases involve more than one state, there is no policy that ensures the interstate acceptance of a report or the referral, assessment, or completion of an investigation. There are children who are not adequately protected by the existing agencies because the child abuse report is not accepted in any jurisdiction for investigation. I am not sure why this is, but it is a problem that should be solvable.

Breaking down jurisdictional barriers is not impossible. In fact, the Adoption and Safe Families Act (AFSA) has rules for preventing both intrastate and interstate barriers for placing children in permanent adoption placements. AFSA has mandated that states develop plans to ensure the use of cross-jurisdictional resources so that a child is not denied a permanent placement. What this tells me is that overcoming state barriers is possible for children, just not abused children. However, the optimistic, advocating side of me believes this to be untrue.

There is no policy for accepting and investigating interstate reports of child abuse and neglect; those in which the child and perpetrator are not living in the same state. In a country where we spend billions of dollars on our military, chat and email on Blackberries, and have even cloned animals, I continue to wonder how so many children are abused everyday and their protection is so inadequate. We need to come together to combat child abuse and not ignore a single abused child just because it happened in the wrong state at the wrong time.

Lisa Lee
University of Pennsylvania MSW candidate
Children’s Rights and Parents’ Rights (continued from page five)

Footnotes


3. 98 U.S. 145 (1878) (holding that it was proper for a court to instruct jury to consider the consequences of polygamy on innocent victims.)

4. 321 U.S. 158 (1944) (affirming a conviction for violation of state child labor law by having the child participate in distribution of religious literature along the public highway).

5. Santosky v. Kramer, supra, n.1 at 753. In the case of Pennsylvania’s statute governing involuntary termination of parental rights, 23 Pa. Con. Stat. § 2511 (a), the legislature has provided eight (8) separate and discreet actions or courses of conduct by a parent which can satisfy the parental “unfitness” requirement.


11. Id.


13. See, e.g., In re Adoption of E.M., 533 Pa. 115 (1993) (holding that although there was evidence that the mother had been unable to provide proper care for her children, her parental rights could not be involuntarily terminated without consideration of the emotional bond she had with her children); 23 Pa. Con. Stat. § 2511(b) (requiring a finding that it is the child’s “best interest” to do so, as a condition to involuntary terminating parental rights).

Field Center Faculty Directors appointed to Mayor’s Child Welfare Review Panel

Field Center Community Affiliate publishes significant study on foster children in Pediatrics

Field Center Advisory Board member elected Speaker of the Pennsylvania House

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**NEWS FROM THE FIELD**

**Winter 2007**

**For Children’s Policy, Practice & Research**

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