The Safe Babies Court Teams Project

The Safe Babies Court Teams Approach: Championing Children, Encouraging Parents, Engaging Communities

The Safe Babies Court Team™ is a community engagement and systems-change initiative focused on improving how the courts, child welfare agencies, and related child-serving organizations work together, share information, and expedite services for young children in the child welfare system. The Safe Babies Court Teams help very young victims of maltreatment by:

- **Protecting babies** from further harm and addressing the damage already done; and
- **Exposing the structural issues** in the child welfare system that prevent families from succeeding.

The first Safe Babies Court Teams began in 2005 and have been replicated over the years in several sites across the country. Each Safe Babies Court Team is a public–private collaboration between ZERO TO THREE (ZTT), local courts, community leaders, child and family advocates, child welfare agencies, early care and education providers, government agencies, private philanthropies, nonprofit and private service providers, and attorneys committed to improving the community’s response to child abuse and neglect.

On the local level, each Safe Babies Court Team is convened by a judge with jurisdiction over foster care cases. The judge works closely with the ZTT community coordinator—a child development specialist—to build a community-wide collaborative Safe Babies Team. They invite other judges, child welfare staff, attorneys, service providers, and other community leaders to join the Team. People come to the first meetings because the judge asked them to attend but they stay because they see the difference the Safe Babies Team is making for families. At Team meetings and at regularly scheduled training events, stakeholders develop their knowledge of child development. Over time they use their knowledge to transform the experiences of young children in the child welfare system.

**Championing Children**

The Safe Babies Court Teams have worked with more than 800 infants and toddlers across 12 sites to date. More than 70% are children of color. African-American children represent 32% of the total. With each child we ensure they receive and benefit from:

- **Child-focused services.** Because maltreated children are so likely to experience developmental delays and medical problems, we find them a medical home with consistent primary caregiving by a pediatrician who comes to know the child and family. In addition, all children served by Safe Babies Court Teams receive a screening for developmental delays conducted by the local agency responsible for complying with Part C of the Individuals with Disabilities Education Act. The initial Part C screening is repeated if the pediatrician...
notices the onset of developmental problems, because it is often the case that delays are not apparent in the first months of life.

- **Concurrent planning.** Because young children see the world through the eyes of their closest caregivers, every change in placement is a difficult adjustment for the child. Changes in placement are minimized by reaching out to extended family members prior to removal from the parents’ care and by quickly identifying caregivers (kin and non-related foster parents) who would be willing to become the child’s permanent family if reunification becomes impossible.

- **Quality early learning experiences.** Each Safe Babies Team has developed partnerships with local Early Head Start programs and child care providers. In some communities there are high-quality options. In every community, early childhood educators are encouraged to attend training offered by the local Team.

- **Frequent family time.** Frequent and consistent contact is essential if young children are to develop and maintain strong, secure relationships with their parents. Research has shown that frequent visitation (e.g., multiple times each week) increases the likelihood of reunification, reduces the time in out-of-home care, and promotes healthy attachment. The Safe Babies Teams focus attention on increasing the time children and parents spend together by expanding the opportunities (e.g., doctor’s appointments, Part C screenings, other health services), locations (e.g., the foster home, the birth parents’ home), and quality of the experience through support from trained visit coaches.

**Encouraging Parents**

Safe Babies Court Teams place a high priority on supporting birth parents in what we hope is a healing journey toward reunification with their young children. To date we have worked with more than 1,000 parents across 14 sites. Sixty-three percent are men and women of color with African-Americans representing 34% of the total. For every one of them we:

- **Recognize the overwhelming odds confronting parents.** As committed and concerned individuals working with families who come to the attention of the child welfare system, Team members learn to look deeper than the allegations made about the parents’ failure to protect their children. The families we serve face an overwhelming number of risk factors in comparison to the general population as summarized in the chart below.²

![Risk Factors Chart](chart.png)

- **Honor the parents’ personal journey.** Parents who find their families the subject of an allegation of abuse and neglect are often times themselves victims of early childhood trauma. As we strive to interrupt the intergenerational transmission of child abuse we are giving voice to the stressors that influence parents’ ability to be appropriate caregivers for their children. At the same time, we are demonstrating our respect for
the parents and acknowledging that there is beauty and strength in even the most harrowing personal stories. With a better understanding of their individual family histories, and the historical trauma influencing their community, we are able to craft interventions that support parents in their efforts to be reunited with their children, or, at the very least, that will permit them to have an ongoing relationship with their children even if they are not able to be the day-to-day caregivers.

- **Confront racial inequity.** If we are to reach racial equity we have to speak about painful topics. Members of groups who have weathered discrimination for generations live with the reality that the dominant U.S. culture does not view alternate world views as equally valid. Related to the traumatic baggage the parents carry are the ways in which their normative cultural framework differs from the expectations of the dominant culture. The freestanding nuclear family has traditionally been the cultural norm for white middle class society. Extended family and important—but not blood-related—friends play critical nurturing roles in ethnic minority families. When professionals see freestanding nuclear families as the desired outcome of their interventions, they fail to appreciate and use culturally specific alternatives. In order to equip Safe Babies Court Team communities to understand and address the issues confronting families in the child welfare system, we have undertaken a multi-year training initiative that focuses on historical trauma as experienced by African-American, Native American, and Native Hawaiian families. In addition to providing resources such as *The New Jim Crow: Mass Incarceration in the Age of Colorblindness* to Safe Babies Teams, we are conducting training focused on increasing awareness of the history of racism, current structural racism, and how disparate treatment of people of color affects their experience of the child welfare system.

- **Provide services that target the specific individual needs of that parent and family.** Parents who are maltreating their children need some level of intervention to help them overcome the reasons for their neglectful or abusive behavior. We strive to make the intensity of the intervention equivalent in intensity to the specific characteristics of the parent and child.

**Engaging Communities**
Safe Babies Teams are only as effective as the engagement level of the community leaders involved. When the right community leaders are at the table and are fully committed to addressing the needs of these young children, amazing things can happen. Examples of the power of community engagement include:

- **Creating R House, a Home-Like Visitation Center:** Thanks to the efforts of a Team member who was active in his church’s outreach, the church donated a single family home to the Des Moines, Iowa Safe Babies Team where children in foster care and their parents can spend time together in a home-like environment. There are cubicles where homeless parents can store personal items and a room with donated children’s clothing and supplies. The house includes a playroom, infant bedroom, working kitchen, and a family-style bathroom with a large bathtub where parents can engage with their children in tasks of daily living. In addition to providing a warm and inviting setting for family contact, it is used for community meetings and training events. Prior to R House, visits often took place in child welfare agency offices that are not child-friendly spaces and are reminders to parents of their previous failures in trying to support their children.

- **Monthly Parent Activity.** In Hawaii, capitalizing on the deliberate scheduling of all Safe Babies cases on one afternoon per month, Team members saw an opportunity to provide additional assistance and information to the participating families. A short presentation is now offered while families and foster parents eat lunch. Between 10 and 20 parents participated in the first six Lunch-and-Learn sessions. Topics ranged from developing their children’s love of reading, to developmental milestones and school readiness, to dental care. The activity is supported by the Court Improvement Project, University of Hawaii Richardson School of Law, Law Fellows, and the Safe Babies Court Teams Project. Providers’ time and supplies are donated and a small gift card is provided for each parent by the Court Improvement Project.

- **Dedicated Early Head Start Slots.** The Early Head Start provider in Des Moines, Iowa, is seeking approval for a proposal that will allow her program to save eight slots for Safe Babies Court Teams families. The Safe Babies Court Teams families in these slots would be able to stay in the program even after the court involvement ended. Young children who have been abused or neglected need additional supports to...
promote their healthy growth and development and to overcome adverse outcomes. High-quality early childhood education programs promote small groups, continuity of caregivers, and individualized care. These elements of high-quality care can help young children who have been abused and neglected develop nurturing early relationships that compensate for the trauma they have experienced.

- **Making Child–Parent Psychotherapy (CPP) Available to Families Served by the Safe Babies Teams.** In the Cherokee, North Carolina Safe Babies community, mental health clinicians at the Eastern Band of Cherokee Indians’ mental health program participated in CPP training coordinated by ZTT. Although they were ready to see their first clients, there was no funding to purchase toys for the therapy room. The community coordinator put together a flyer asking for donations of age-appropriate toys. Team members responded with the toys needed. CPP is clearly making a big difference in the lives of the families it touches. One parent commented, *The biggest thing is learning to bond with my kids. How you treat your kids and tell them things and congratulate them when they do good, and now that I know it I do it even more. I’ve learned more about me. I’ve learned that a lot of my behavior came from my drinking and being in a dysfunctional family. Now I have a good relationship with my daughter, and there are still things that I am working on.*

  **Identifying developmental delays and disabilities as quickly as possible.** Every child entering foster care in Arkansas regardless of age receives a complete physical and developmental evaluation, referred to as a PACE after the Project for Adolescent and Child Evaluations that provides it. Referrals for early intervention services are made by the Department of Human Services on the basis of recommendations from PACE. The Arkansas Pilot Safe Babies Court Team has formed relationships with the First Connections program and the Department of Human Services Division of Developmental Disabilities Services to fast-track referrals and the implementation of services for infants and toddlers served by the Court Team. This collaboration ensures there is no lag time between the identification of a delay and the start of early interventions, as well as assistance for the families with forms and paperwork. The Safe Babies Court Team also collaborates with the Arkansas Fetal Alcohol Spectrum Disorders (FASD) Program to initiate screenings for suspected FASD in children in the project, as well as referrals for interventions based on results. Without this partnership, assessment for this disorder would be most likely overlooked and timely interventions and services not provided.

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*The court team model has revolutionized the way we do business in this courthouse. And I can’t imagine ever doing it any other way. It is so valuable in helping me make the best decisions I possibly can and to know that the work that we’re doing is backed up by the science of what’s best for children. It’s very comforting for someone who puts her name on the line and decides where a child will spend the night because that can be a life and death decision.*

—The Honorable Constance Cohen, Associate Juvenile Judge, Iowa Courts (ret.)

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**Becoming an Evidence-Based Practice**

To date, three evaluations have been conducted about the *Safe Babies Court Team* approach:

1. Independent evaluation undertaken by James Bell Associates (JBA) with funding from the U.S. Department of Justice. Their exploratory evaluation examined the implementation of the Court Team model in four sites and indicated that the teams have made significant gains on key child welfare indicators monitored by the federal government.  

2. Doctoral dissertation on the effect of the *Safe Babies Court Team* approach on time to permanency. When compared with a matched sample of children included in the National Survey of Child and Adolescent Well-Being (*n* = 511), the children served by the Safe Babies Court Teams in the same four sites as JBA’s evaluation (*n* = 298) reached permanency 2 to 3 times faster. *Children served by the Safe Babies Court Teams exited the foster care system approximately 1 year earlier than children in the comparison group.* Not only are children served by the Court Teams reaching permanency on average a year faster than children in the control group, but the children are more likely to reach permanency with a member of their
biological family. Reunification was the most common type of exit for Court Team children (38%), while adoption was the most typical for the comparison group (41%). If kinship families are included, 62.4% of the Court Teams children ended up with family members while only 37.7% of the comparison group did.\(^8\)

3. The effect of the expedited permanency outcome on the cost of Safe Babies Court Team implementation. Economics for the Public Good first calculated an average direct cost of $10,000 per child. These costs are similar to or substantially lower than those found in other early childhood interventions. Short-term savings generated by the earlier exits from foster care by Court Team children are estimated at an average of $7,300 per child. In other words, the Court Teams’ reduced costs of foster care placements alone cover two thirds of the average costs per child. Quoting the evaluators,

> These savings...are only a proxy for the real benefits of the program—improved life outcomes. In the end, the goal of the program is not to reduce child welfare costs alone. If that were the case, one could reduce system costs simply by leaving children in dangerous or neglectful situations. If the program improves these longer term outcomes, then the return on the program could be quite large. For example, if [Court Teams] increase the chance of high-school graduation by roughly 3 percentage points, the resulting savings more than cover the costs of this program.

This study also showed that children involved with Safe Babies Court Teams access more services than the comparison group. In particular, Court Teams children were significantly more likely to receive a developmental screening (92% v. 25%), health care visit (94% v. 76%), and dental visit (29% v. 18%). The study also demonstrated Safe Babies Court Teams’ ability to leverage substantial in-kind resources: for every grant dollar, the Court Teams were able to generate another dollar of in-kind support.\(^9\)

In 2014 the Safe Babies Court Teams Project was added to the California Evidence-Based Clearinghouse for Child Welfare with a scientific rating of 3 which signifies promising research evidence, high child welfare system relevance, and a child welfare outcome of permanency (http://www.cebc4cw.org/program/safe-babies-court-teams-project/). We are currently exploring the next phase of this research which will look at the effect the Court Team approach has on the well-being of the children and their parents. We also hope to evaluate the lasting impact of the Safe Babies Court Teams to determine if the children are protected from further harm and are thriving over the long term.

### Leveraging Lessons Learned: State and Federal Policy

The process of moving bureaucracies away from business-as-usual is extremely challenging and requires changes in practice, policy, and sometimes state laws. Although the federal Adoption and Safe Families Act (ASFA) became the law in 1997, 17 years later no state has been able to achieve more than two of the seven required outcomes documenting children’s safety, permanency, and well-being. The Safe Babies Court Teams are achieving these outcomes at the local level as the communities come together to create a new road forward.

The Court Teams have served as community laboratories where hard-won experience at the local level has been used to inform local, state, and federal policymakers. Using the knowledge gained from the implementation of the Court Teams, ZTT will continue to engage the federal and state governments in improving child welfare practice by advancing strategies that inspire a direct focus on the developmental needs of infants and toddlers. ZTT has built a coalition of national organizations committed to improving the lives of infants and toddlers who have been abused and neglected. The goal of this coalition is to ensure that child welfare practice is informed by the science of early childhood. So far the coalition includes influential organizations such as: the Center for the Study of Social Policy, Children’s Defense Fund, National Black Child Development Institute, National Council of La Raza, Voices for America’s Children, Child Welfare League of America, and Child Trends.

The coalition has published two important documents drafted by ZTT. The first, *A Call to Action on Behalf of Maltreated Infants and Toddlers*\(^{10}\), led to new provisions in the federal Child and Family Services Improvement and Innovation Act\(^{11}\). The Act now includes an explicit focus on young children. States must describe how they will approach the developmental needs of children less than 5 years old in their child welfare plans, including...
how they promote permanency for young children without a permanent home. More significantly, the Act now allows states to seek waivers from Title IV-E of the Social Security Act to use federal foster care funds to implement strategies that reduce children’s time in foster care; the use of Safe Babies Court Teams among them (see more in “Sustainability” below.)

The coalition also published *A Developmental Approach to Child Welfare Services for Infants, Toddlers, and Their Families: A Self-Assessment Tool for States and Counties Administering Child Welfare Services*[^12] to assist states in developing their required state plan for young children. ZTT has distributed the tool to state child welfare administrators as well as state child care, Early Head Start, and Part C administrators. The tool has proven useful to several states, leading advocates and state/county officials to request additional resources from ZTT. These states include Arizona, California, Colorado, Kansas, Mississippi, New Jersey, North Carolina, Oregon, and Washington. Some states are taking action using the tool. For example, the Connecticut Department of Children and Families is using the tool to assess the extent to which they apply developmentally appropriate policies, practices, and programs as part of their “First 1000 Days” initiative.

In collaboration with Child Trends, ZTT published *Changing the Course for Infants and Toddlers: A Survey of State Child Welfare Policies and Initiatives* which documents the policies of 46 state child welfare agencies. ZTT knows that it is critical to provide states and local child welfare administrators as much guidance and information as possible in user-friendly ways so they will understand what is meant by “a developmental approach for young children.” This is why ZTT will hold a State Policy Action Team meeting on Child Welfare that will gather cross-disciplinary representatives from several states to help get them started in the process of creating a developmental approach for infants and toddlers in their child welfare systems. ZTT has convened similar meetings in the past on a number of topics, providing a mechanism for convening several states to join together in a peer-to-peer technical assistance (TA) and planning on a selected system implementation topic. These meetings are a critical way to build momentum for state change. In order to be effective, follow-up TA will be provided to states after the State Policy Action Team meeting. This TA is needed in order to help states move forward with implementing their action plans. Ultimately, ZTT plans to use all of this accumulated knowledge to become a catalyst for systemic change that will help many infants and toddlers across the nation reach their full potential.

### Conclusion

Safe Babies Court Teams bring together all the elements of the system at a community level to implement research-based approaches to improving results for young children and their families. ZTT shares what it learns with other communities, and uses that knowledge to influence important changes in child welfare policy at the state and federal levels. Through a comprehensive and integrated approach, Safe Babies Court Teams are strengthening the social, emotional, cognitive, physical, and cultural development of young children in foster care. We are ensuring that the most vulnerable children in the U.S. receive the love and nurturing they need during their earliest years so that they will be better poised to lead happy healthy lives and meet their full potential—in school and beyond.
## References


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<th>Risk Factor</th>
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<th>SBCT Data Source</th>
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<td>Income below federal poverty line</td>
<td>91%</td>
<td>15%</td>
<td>ZERO TO THREE Safe Babies Court Teams Database, Report: Child Background, # of children under age 3 who have experienced key indicators, meets federal definition of poverty</td>
<td>Source U.S. Census Bureau: State and County QuickFacts. Data derived from Community Survey, Census of Population and Housing, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits</td>
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<td>Substance Abuse</td>
<td></td>
<td></td>
<td>ZERO TO THREE Safe Babies Court Teams Database, Report: Key Indicators of Adults in Court Teams Project as of November 30, 2014 (total n = 1,057)</td>
<td>SOURCE: Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use &amp; Health. Available from: <a href="http://www.samhsa.gov/data/NSDUH.asp">http://www.samhsa.gov/data/NSDUH.asp</a>. Picked binge drinking as statistic to report since it was the highest. Marijuana topped all other drugs and alcohol at 7.3%.</td>
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<td>Unemployed</td>
<td>68%</td>
<td>23%</td>
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<td><a href="http://www.google.com/publicdata/explore?ds=z1ebjpgk2654c1_&amp;met_y=unemployment_rate&amp;idim=country:US&amp;fdim_y=seasonality:S&amp;hl=en&amp;dl=en">http://www.google.com/publicdata/explore?ds=z1ebjpgk2654c1_&amp;met_y=unemployment_rate&amp;idim=country:US&amp;fdim_y=seasonality:S&amp;hl=en&amp;dl=en</a></td>
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<td>Housing insecurity</td>
<td>54%</td>
<td>40%</td>
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<td>Criminal justice system history</td>
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<td>3%</td>
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### Involved in child welfare as child

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**Total:** 1,057

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**Total:** 1,057

### Childbearing before 18

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**Total:** 1,057

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