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How to Save Children

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Prompted by the death of 6-year-old Elisa Izquierdo, Mayor Rudolph Giuliani is revamping the New York City agency that handles child abuse. At the same time, legislation to lift the veil of secrecy from child abuse cases—by authorizing the release of confidential agency information—is on a fast track in Albany. Both changes should make the workings of the child welfare system more visible and thus help the public understand why so many Elisas are left in dangerous homes.

The real villain is neither slothful caseworkers nor budget cuts, although they have hurt. It is society's unwillingness to deal with the simple fact that crack addicts make terrible parents. That failure is why Elisa, sexually abused and tortured, was found beaten to death in November and her mother is charged with murder.

In 1994, addiction was a factor in almost three-quarters of New York City's child abuse fatalities. (It is not clear why crack, more than alcohol, precipitates such vicious abuse.)

Ten years into the crack epidemic, New York, like most states, has not yet adopted laws and programs that realistically reflect how crack devastates parents and that recognize our limited ability to cure addiction.

If addicts' children are to have a fair chance in life, the child welfare system needs to be governed by tougher laws and an entirely different set of assumptions, and practices that would involve not so much new expenditures as wiser use of existing ones.

Laws must recognize that parental drug addiction is widespread and will continue to endanger children. Mayor Giuliani has taken a key first step in asserting that the presence of drugs in a newborn baby is evidence of abuse.

Assume that crack addiction cannot be cured. Despite some success in treating heroin addiction and alcoholism, even the best treatment programs report that in most cases they can stop crack use only temporarily because of the drug's addictiveness and the social conditions that encourage its abuse.

Provide long-term home supervision. Many children of addicts remain at home. Child-protection agencies provide only short-term services to families, wrongly assuming that a referral to a drug

treatment program will cure the parents. But crack addiction, even in those cases when treatment works, is usually a chronic affliction, with frequent relapses. Agencies should assume that the family is likely to require years of home visits by caseworkers who monitor whether the child is being abused.

Formalize the care of children by other relatives. As of August, about 40 percent of New York City's 42,000 foster children lived with extended-family members. In too many cases, these relatives are also troubled and cannot provide a proper home. Minimum standards should be set for licensing, monitoring and supporting these living arrangements.

Make it easier to adopt neglected or abused children, especially abandoned infants. Child welfare agencies do a poor job of identifying the children who should be freed for adoption. Laws and procedures should be liberalized to encourage adoption when the parents demonstrate an inability to care for a child and an unwillingness or failure to respond to drug treatment.

Create stable alternate living arrangements. Children who are not candidates for adoption because of age or behavioral problems, and cannot be placed with relatives, often bounce around from foster home to foster home for years. They need one nurturing home where they can stay until young adulthood, whether in family foster homes, group homes or larger campus-like residences—what we used to call orphanages.

Finally, offer family planning, automatically. Most addicted women would be better off if they had greater control over their fertility, but they do not use contraceptives effectively.

Adopting these reforms would not guarantee that deaths like Elisa Izquierdo's would cease. Yet without them no amount of bureaucratic reorganization or additional financing will solve the child welfare system's problems.