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*In summarizing recent research, we try to give you new ideas for refining your practice. However, this publication is not intended to replace child welfare training, regular supervision, or peer consultation—only to enhance them.*

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## CHILD WELFARE PRACTICE IN RURAL NORTH CAROLINA

North Carolina is a progressive, prosperous state in a rich, future-oriented country. We have beautiful cities and world class universities. We have the Research Triangle Park, a source of innovation for the technology and pharmaceutical industries. Right now people from all over the U.S. are choosing to move to our state for a better life.

Some of them seek—and find—this better life in our state's many rural communities, which can be wonderful places to live, work, and raise a family.

But life in rural North Carolina is not easy for everyone. Many in the rural parts of our state struggle with the loss of jobs, poor educational attainment, lack of health care,

child poverty, lack of transportation, and a host of other challenges.

If you work in the field of child welfare you've probably seen this struggle up close. You know how hard it can be to help rural families overcome the difficulties they face.

Yet you also know rural communities can be incredibly resourceful places where people know and support each other. That they can be great places to practice social work.

This is certainly what we heard from those participating in UNC-CH's Rural Success Project (see box). This issue of *Practice Notes* reflects this message and presents some of what we have learned about successful child welfare practice in a rural context. ♦

### A SNAPSHOT OF UNC-CHAPEL HILL'S RURAL SUCCESS PROJECT



#### Community Solutions to Rural Child Welfare Challenges

In 2003 the U.S. Dept. of Health and Human Services awarded six 5-year grants (US ACYF 2003C.2) to universities to develop training to enhance the effectiveness of child welfare workers and supervisors serving rural communities.

The Family and Children's Resource Program, part of the Jordan Institute for Families at the UNC-Chapel Hill School of Social Work, received one of these grants and launched the *Rural Success Project*. The project team hopes the lessons it learns can be translated into policies at the county, state, and federal level to improve the overall safety and well-being of rural children and families.

#### 14 Intervention Counties

West: Cherokee, Clay, Graham, Haywood, Jackson, Macon, Swain and the Qualla Boundary

East: Bertie, Gates, Halifax, Hertford, Northampton, Pasquotank, Warren

#### Training Interventions

Available only to participating counties

- Assessments of training needs
- A special rural curriculum: *Cornerstone IV: Working with Outcomes by Building on Partnerships*
- Eleven online courses for child welfare professionals and their community partners

#### Community Interventions

- Engagement dialogues to galvanize communities around child safety, permanence, and well-being
- Policy summits to be held for the state (spring 2007) and the Southeast U.S. (spring 2008)

#### Other Contributions

- Media guide for rural child welfare agencies
- Literature Review on rural child welfare work

**To Learn More** go to <[www.ruralsuccess.org](http://www.ruralsuccess.org)>

## HOW RURAL IS NORTH CAROLINA?

How rural is North Carolina? Your answer to this question depends in large part on how you define "rural." Here we will use the U.S. Census Bureau's classification, which is based on total population and population density.

According to this definition, any place that is not urban is rural. Thus, you live in a rural place if it does not fit into any of the following categories:

- **Urban** generally means there is at least one block group or census block with a density of 1,000 people per square mile, with surrounding blocks of . . .
- **Urbanized areas**, densely settled territories that contain 50,000 or more people, and/or . . .
- **Urban clusters**, densely settled territories that have at least 2,500 people but fewer than 50,000.

Based on this, North Carolina is nearly twice as rural as the national average: 39.8% of our state's population can be classified as rural, compared to 21.0% of the U.S. population (US Census Bureau, 2003a).

Though this "either/or" definition has its uses, many researchers find it more helpful to think in terms of a **rural/urban continuum** with five categories:

1. 100% rural
2. More than 2/3 rural (66.7 to 99.9%)
3. More than 1/2 rural (50.1 to 66.6%)
4. More than 1/2 urban (33.3 to 50.0% rural)
5. More than 2/3 urban (0 to 33.3% rural)

The figure below illustrates the rural/urban continuum in North Carolina today. As you can see, most of our entirely rural counties are situated in the West (mountains) and

### NC'S RURAL ECONOMY

Contrary to popular belief, our rural communities are not driven solely by agriculture (Strong et al., 2005). Although farming is vital in all parts of the state, farm employment and the number of farms are declining. The number of NC farms dropped from 302,000 in 1938 to 54,000 in 2002. Even with fewer farms, we still rank sixth nationally in farm income (NCREDC, 2004). Today just 1.0% of NC's people live on farms, compared to 1.1% of the U.S. population (US Census Bureau, 2003b).



Photo: Ellen Oslert Hayes

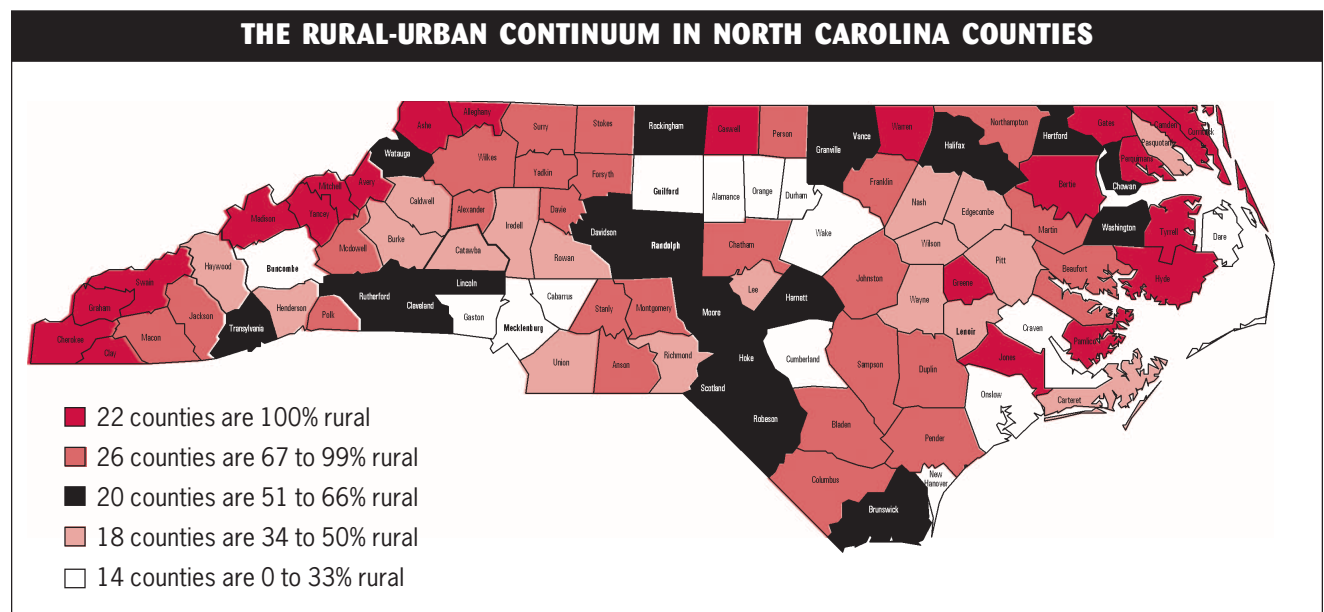
**Cotton fields in Eastern NC**

**Manufacturing Down, Services Up.** As many companies moved overseas, goods-producing employment in rural NC fell from 40% in 1990 to 30% in 2002. In contrast, the service sector grew from 60% to 70% of total employment in rural areas (NCREDC, 2004).

East (coastal plain). We also have 26 counties that are more than two-thirds rural scattered across the state.

Using the rural/urban continuum, the Rural Success Project has reached some interesting conclusions about the performance of North Carolina's county child welfare agencies. For more on this, see page 4.

Although NC is much more rural than the national average, even in our most rural counties we find population densities greater than in many Western U.S. states. This means that often rural child welfare practice in NC is really about working with families and children in small towns. (For more on this see the box on the next page.) ♦



## ETHICS AND DUAL ROLES IN RURAL CHILD WELFARE PRACTICE

**“I grew up here in Bertie County . . . . Know the area, know the people here, which has been a plus and a minus, because some people will look to you to do certain things that you can’t do—you have to follow regulations—because they know you. And then it’s been a plus in that when things go on, I know exactly where they’re talking about or who they’re talking about.”**

— Morris Rascoe, Director of Bertie County DSS



Morris Rascoe

This is a familiar scenario for social workers serving rural communities. Relationships among small populations can be a strength, offering supportive safety nets and empathy. Yet they can also compromise confidentiality and deter people from seeking services due to the stigma associated with needing help. Rural social workers may also face challenges when the lines between professional and personal relationships blur.

How can we achieve a balance between the need to relate to individuals and families in a manner consistent with rural culture while simultaneously upholding the boundaries and standards that define our profession?

The book *Rural Social Work Practice* (2005), offers the following suggestions for dealing with dual relationships in rural communities:

- Face facts: dual relationships are inevitable in rural communities. Be prepared to deal with them.
- Be sensitive to community expectations.
- Compartmentalize your roles, not your relationships. Educate your clients on the different roles you play in the community and in the client’s life. Teach the client how to operate within these established roles.
- Know thyself.
- Know others. Identify other social workers in the region or state with whom you can consult.
- Nurture networks and resources.
- Make referrals. When a dual relationship exists, explore the possibility of referring the client to another practitioner.
- Be aware of confidentiality.
- Keep thorough documentation to demonstrate your effort to provide reasonable treatment for the client.
- Remain current on professional issues. ♦

(Barnett & Yutrzenka, 2002 as cited in Lohmann & Lohmann, 2005)

### FACTS ABOUT NORTH CAROLINA’S SMALL TOWNS

- Ours is a state of small towns. There are 478 towns in North Carolina with fewer than 10,000 people. In fact, 437 towns have fewer than 5,000 people.
- Thousands of North Carolinians choose to live in small towns. More than 900,000 live in towns with fewer than 10,000 people.
- Most small towns are located in rural counties. Nearly half are in the East. The eastern third of the state has 253 municipalities, most of which have fewer than 5,000 people.
- Small town residents are likely to be native-born. More than 65% of the population in small towns is native to North Carolina.
- Small town residents tend to be older and to have limited education. Forty percent are over 45 years of age. One in five small town residents has less than a high school education.
- Most small town residents travel to other places for work. More than 70% commute to work within their county, to another NC county, or to another state. Most commute for less than 30 minutes.
- Twenty-one percent of small town residents work in the manufacturing industry—a sector that’s seen considerable losses.
- Many small towns are losing population. More than 140 towns (28%), lost population between 1990 and 2000. All but three of these had populations of less than 5,000.
- Small towns have the highest poverty rates. There are 73 towns with a poverty rate over 25%. Of these, 63 have populations of less than 5,000. More than 50 of these small, high-poverty towns are located in the East.



Photo: Ellen Ozier Hayes

**Swain County’s Bryson City (pop. 1,411) is one of NC’s many small towns.**

- Towns of fewer than 1,000 have more problems. More than 60% of towns with a population of less than 1,000 have tax rates lower than the state median, producing less revenue for services. Forty percent of these towns spend at least half of all revenues on general government and public safety.

Excerpted from the North Carolina Rural Economic Development Center’s *Small Towns Fact Book* (2005, Nov.)  
< [www.ncruralcenter.org/pubs/SmallTownsFactBook.pdf](http://www.ncruralcenter.org/pubs/SmallTownsFactBook.pdf) >

## HOW DO NC'S RURAL AND URBAN CHILD WELFARE AGENCIES COMPARE?

Rural areas face challenges that urban areas do not. These include greater poverty, a narrower range of employment opportunities, and scarcity when it comes to transportation, child care, and practitioners in specialized health and human services (Templeman & Mitchell, 2002; Macro International, 1999). These are real, empirically verified problems that rural human services providers—including child welfare professionals—must overcome every day.

Given these handicaps it might seem reasonable to assume that rural areas would also lag when it comes to **outcomes** for families and children. Yet evidence of such a difference between urban and rural is conspicuously absent from the research literature. This is somewhat understandable. Studies of this type are more difficult due to statistical problems created by the small numbers of consumers of child welfare services in counties with small populations, and because of possible cultural pressures in rural communities to avoid involvement with the public services system.

Yet the question of whether there is a difference in the outcomes achieved by rural and urban child welfare agencies is not an academic one. Differences of this kind may have implications for funding, policy, training, and practice decisions that can have a very real impact on children, families, and practitioners.

Accordingly, UNC-Chapel Hill's Rural Success Project decided to look into the matter by examining similarities and differences in child maltreatment and placement outcomes for rural and urban counties in North Carolina. Its analysis involved a search for rural patterns in different geographic regions of the state and used data from each of our state's 100 county DSS agencies. What follows is a brief description of some preliminary findings.

### EXPERIENCES OF KIDS IN CARE

Rural Success Project researchers began by looking at the experiences of children in foster care. Thanks to the pioneering work of Dr. Charles "Lynn" Usher at the UNC-CH School of Social work, the NC Division of Social Services maintains a longitudinal data base that tracks the experience of cohorts (or groups) of children as they enter placement authority for the first time. These "experiences data" are posted to the web <<http://sww.unc.edu/cw>> so agencies can use them for planning and analysis.

Because most rural counties have the smallest populations and sometimes very small numbers of children in

**Rural child welfare agencies, on average, are doing as well or better than urban agencies in both outcome and process measures.**

care, project staff used a 3-year cohort (as opposed to a 1-year cohort) so that it would have more meaningful numbers for analysis.

For this phase of its rural/urban comparison the project looked at four child outcomes. In two of these—"percent of children ever placed in non-family (group) care" and "average number of placement spells (re-entry)"—it found no difference in the experiences of children from urban and rural counties. For the other two, however, there was a difference.

**Fewer Placement Moves in Rural Counties.** We learned that during the period under study, the more rural the county, the fewer times children were moved from one placement to another during their first spell of placement. The project's analytical model predicted an average of 2.2 placements in the first placement spell for children in completely rural counties and 2.6 placements for children in 100% urban counties. Overall the difference was fairly small, but for a child the difference between 2 placements and 3 placements can feel very large.

**Shorter Stays in Care in Rural Counties.** In addition to having more stability in their placements, children in rural counties leave the system earlier, either to be reunited with parents or to adoptive or other permanent homes. The difference is most stark between the most urban counties and all others. After about 2 years, children in 100% rural counties are clearly less likely to remain in care than those in more urban counties. Figure 1 summarizes this finding by comparing the median number of days of placement.

### NORTH CAROLINA'S CFSRS

In the next phase of the comparison, project staff conducted a secondary analysis on data from reviews the NC Division of Social Services conducts on each county DSS. These reviews, formerly called the biennial reviews but now called Child and Family Services Reviews *cont. p. 5*

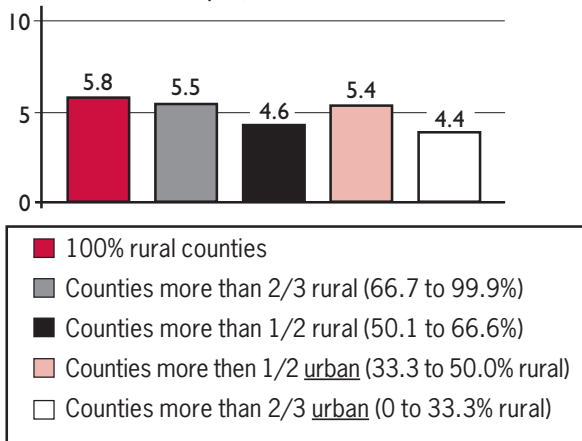
	Median # Days
0 to 33% rural counties (Most Urban)	497
33 to 50% rural counties	343
50 to 66% rural counties	353
66 to 99% rural counties	325
100% rural (Most Rural)	332



## RURAL/URBAN COUNTY PERFORMANCE ON NC'S CFSR (BIENNIAL REVIEW) SFY 2003-04 and SFY 2004-05

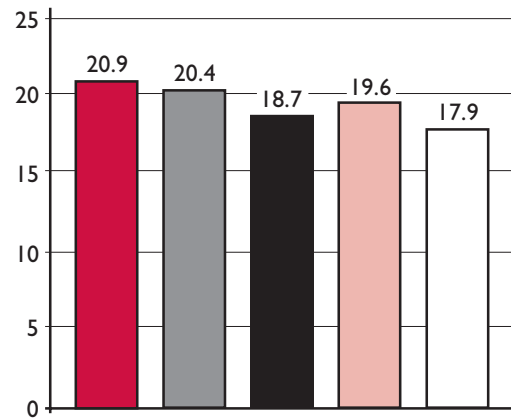
**Figure 2**

### "Outcomes" in Compliance *A perfect score is 7*



**Figure 3**

### Indicators "Not Needing Improvement" *A perfect score is 23*



*For more on the rural/urban continuum used by Rural Success Project, see the article on p. 2.*

(CFSRs), assess county agencies according to seven outcomes: 2 around safety, 2 around permanence, and 3 around child well-being. These outcomes are scored either "in essential compliance" or "not in essential compliance." Nested under these seven outcomes are 23 process indicators that are scored as "needing improvement" or left blank.

An analysis of review data from state fiscal year (SFY) 2003-04 and 2004-05 found that rural counties were more likely to be "in essential compliance" with outcomes and less likely to "need improvement" in the 23 indicators. Figures 2 and 3 illustrate how counties at different places on the rural/urban continuum performed on the CFSRs during these years.

It is important to note that on most indicators, rural and urban counties had similar successes. However, rural counties outperformed urban counties on the following process indicators:

- Item 1. Timely responses to maltreatment reports
- Item 2. Low level of repeat maltreatment
- Item 17. Needs met/services for child, parents, foster parents
- Item 18. Child and family involvement in case planning
- Item 19. Worker visits with child
- Item 20. Worker visits with parents
- Item 22. Physical health needs of the child [met]
- Item 23. Mental health needs of the child [met]

## CONCLUSION

The conclusion reached by UNC-CH's Rural Success Project is that, on average, North Carolina's rural child welfare agencies are doing as well or better than urban agencies in terms of outcome and process measures. Although more research in this area is needed, this conclusion suggests that at the very least, urban communities could learn from the strategies and successes of rural communities. ♦

## SUCCESS IS ABOUT MORE THAN NUMBERS

Though they add an essential dimension to our thinking about success, numbers don't tell the whole story. To get a better sense of what success means in a rural context, members of the Rural Success Project team spoke with many human service providers in rural NC.



What we learned was that success isn't a one-size-fits all concept. Some, like Sue Lynn Ledford, Health Coordinator for Cherokee County Schools, saw success as preventing as many problems as possible and having resources to deal with the problems that do arise. Others said they feel successful when clients follow through with their goals. Margaret Wallace of Jackson County DSS said, "They call you up and . . . they are just so proud" and the door is opened to take the next step.

Whether they are big or small, it is important to celebrate successes when they happen. When we do that, we know we're making a difference, which in turn gives us the fortitude to continue doing the good work that we've been given to do.

## A RURAL SUCCESS STORY

*Though essential, data analyses alone cannot give us a full appreciation for the achievements of rural child welfare agencies. For this we need stories as well as facts. Therefore we present the following example of successful child welfare practice in a rural context. This story was collected by UNC-Chapel Hill's Rural Success Project team. To protect confidentiality, the family's names have been changed.*

Swain County Department of Social Services Program Manager T.L. Jones remembers the day last spring when he and one of the agency's CPS social workers responded to a child maltreatment report. At the home, they found what he later described as a seemingly hopeless, dark dungeon.

Inside were Cassie and Billy, a young couple, and their two children, both under age two. The report had been about children sorting through garbage for something to eat, but it quickly became evident Cassie and Billy were battling a severe addiction to methamphetamine. They had no jobs and faced possible eviction.

Billy, relatively sober, was "watching" the children. Cassie was in a stupor on the couch, drooling. Her hands were swollen from sticking needles between her fingers, shooting up.

Cassie and Billy were in trouble. They cared deeply about their children, but they did not know how to stop using drugs or how to start putting their life back together. Thinking back, Cassie says, "Life was there, but it wasn't there. It's like waking up in the morning, you see your family and things go right one day. And then the next day things would just drop."

Cassie and Billy also remember the first encounter with DSS and how angry they were when the boys were removed from their home and placed with Cassie's extended family. Cassie says after she got over being mad she started blaming everybody else, not wanting to look at herself.

**"I am not naïve enough to believe that we can make every case turn out like this, but it gives you that little glimmer of hope."**

Social worker Lisa Enloe, who was assigned to work with them, says that at first they were a family "that would run and hide from us." Yet eventually they started coming to DSS every day asking, "What

can we do now?"

Billy attributes their eventual success not only to his and Cassie's relentless drive to get their kids back, but also to Enloe, who held them accountable while simultaneously respecting and listening to them.

Billy says Enloe "told us what we had to do—sat down and listened to our side—I mean just being a friend to us. She showed us what we need to do to get our kids back and been there for us and kind of guided us down that path."

Enloe adds that Cassie and Billy were creative, too. When Cassie could find no in-patient treatment options in the Swain County area she attended a program in Knoxville, Tennessee.



Swain County DSS child welfare staff.

She later joined an outpatient program on the Qualla Boundary. Billy attended an intensive outpatient program two counties away from the couple's home. They eventually stopped using and have been clean for months.

Billy has a steady job as a cook. Cassie's made peace with her mother, from whom she was estranged. The children returned home in time for the holidays—less than a year after they were taken into DSS custody.

"It feels wonderful," Billy says.

Swain County DSS is happy, too. This family's story, Jones says, "Reminds me that not every case is hopeless that looks like it's hopeless. I am not naïve enough to believe that we can make every case turn out like this, but it gives you that little glimmer of hope that maybe we can take what seems to be a hopeless case and turn it around." ♦

### PRACTICE IMPLICATIONS

UNC-Chapel Hill's Rural Success Project has collected dozens of stories that, like the one on this page, help explain how rural child welfare practitioners achieve success with fewer formal resources. The project's preliminary conclusion is that the "secret" of success in a rural context is no secret at all, but due to the application of fundamental social work concepts, including those listed below.

- **Show respect** for families. Use the principles of family-centered partnership in all you do.
- **Build on the sense of community.** Whenever appropriate, address pressing issues by building ties between diverse interests.
- **Focus on strengths.** Every family, no matter how severe its crisis, has strengths to draw on.
- **Link formal and informal support systems** to help families succeed.
- **Listen.** This is key to helping people feel included and respected.
- **Actively disseminate information** about programs and services.

Sources: Mack & Boehm, 2001; Friedman, 2003; Warner et al., 2004

## BARRIERS AND BENEFITS TO WORKING IN RURAL AREAS

In a rural community, everybody knows your business. That can be an unwanted nuisance at times. It can also be a benefit because there is a sense that neighbors, family members, and friends are looking out for one another.

### BARRIERS

The stigma of being involved with DSS is often a barrier in rural areas. One DSS recently moved into a brand new building that looks and feels much less institutional. What the agency didn't anticipate is that its client families are sometimes hesitant to enter through the front door because it faces the main road and can be seen by their fellow community members.

A core belief for many rural families is that you don't ask for help for anything. Families should be able to work and provide with their own hands, they believe. That's their responsibility, their duty, and community agencies don't factor in to the equation.

One DSS social worker we spoke with said that families will sometimes wait until they are at a point of desperation with no food on the table for their children, and even then there is resistance to requesting assistance. Agencies sometimes have to work through a third party, most often a relative, to help the family reach a point where they are able to receive help.

### BENEFITS

Rural settings can also be great places to work, especially since social work in these areas is much more relationship-driven between the agency providers and families as well as between agencies.

"I know the health department director really well so if I have a medical issue or concern I can call her and rest assured I'm going to get an answer," says Alice Brunson, Children Services Supervisor for Northampton County DSS, serving a county with just over 22,000 in population. "I also know the sheriff really well so if I need backup really quickly I know I don't have a problem."

There is a kind of inherent trust that is built between rural agency providers and families that comes with time and experience. In Gates County, families come to programs delivered by people they trust, says Reba Green-Holley, Director of the Gates County Cooperative Extension Service, which offers a range of educational programs geared to farmers, families, and youth.

"They buy into the face that is attached to the program," says Green-Holley. "It doesn't matter how great your program looks on paper, if they can't trust you or feel like you have their best interest at heart, they will not participate in the program. This is rural North Carolina,

PROS AND CONS	
Pros	Cons
In 2005 <i>Practice Notes</i> asked about 20 people attending a national child welfare conference what they thought were the pros and cons of living and working in rural areas. Here's what they had to say.	
Communal intimacy can lead to better behavior	Everyone knows when you mess up and it takes a long time to recover credibility (if ever)
Fewer people; more space	Isolation; no transportation
Self-reliance	Unwillingness to seek help/help-seeking stigmatized
Sense of history	Resistance to change
Many natives and long-time residents; community stability	Clannishness; conflict with newcomers/demographic shifts
Fewer urban stressors	Rural stressors: Fewer jobs, educational opportunities, and formal services and resources; insufficient law enforcement resources; more poverty
People know and look out for each other	Little or no confidentiality; helping professionals face role/boundary issues
Protocols for systems are less formal, people often collaborate well	Turf wars and agency feuds
Presence of extended family	Can lead to low expectations of certain families, make it harder to change and dream
Sense of place, natural beauty, presence of animals	

and the culture is relationships. You have to really show that you care about them as a person."

Agency providers in rural areas have shown tremendous creativity and a can-do spirit. "We have very few resources and few programs and when a program doesn't exist, we kind of create it," says Gloria Braddy, Social Work Supervisor for Bertie County DSS.

Rural agencies are driven by traditional core values such as helping your neighbor, treating others as you want to be treated, and lifting up the community in times of need.

"All people are special and unique," says Valerie Knight, Director of Action Community Empowerment, a tiny agency with a huge vision in rural Enfield, North Carolina. "I value most of all the comfort that comes when someone has been helped in some way in their area of need or reached a goal. Whatever the issues are, come and let's work together and see if we can overcome that barrier in our lives and move forth." ♦

## WHAT MAKES COLLABORATION WORK IN A RURAL CONTEXT?

Wesley Price, CPS Services Supervisor at Macon County DSS, says collaboration in his small community is both frequent and successful. Why?

Price believes the strong relationships that are the cornerstone of many rural areas is the primary reason. “We go out to eat lunch together, we see each other frequently, we go to churches together. The Sheriff’s Department, Mental Health and the Health Departments, the school systems—we all know each other.”

Macon County Sheriff Robert Holland agrees. “We’re not going to solve all the problems by ourself—law enforcement. Social services is not going to solve all the problems by themselves. You have to work together.”

According to a recent study of inter-agency collaboration in seven NC

counties (Thompson et al., 2002), other elements that contribute to successful collaboration include:

- Strong leadership and shared vision
- Heterogeneous mix of partners
- Establishment of trust
- A positive attitude
- Role delineation
- Open communication

The same study found that major barriers to achieving integrated service delivery systems include lack of guidance about how to communicate, competition between programs, categorical funding, restrictive confidentiality policies that limit cross-agency access to information, and lack of time and energy. ♦



Wesley Price

### KEY POINTS FROM THIS ISSUE

- North Carolina is nearly twice as rural as the national average. It has many small towns.
- Many rural communities struggle with high rates of child poverty, lack of transportation, economic trouble, poor educational attainment, lack of health care, and other challenges.
- Though they have fewer resources, on average NC’s rural child welfare agencies do as well or better than urban agencies in terms of outcomes and process measures.
- Successful child welfare practice in a rural context is created in part to the common sense application of basic social work concepts.

## IN THIS ISSUE: CHILD WELFARE PRACTICE IN RURAL NORTH CAROLINA

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