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# HOME for Good

**Home for Good** is a community-organizing initiative to inform systems change beginning in Philadelphia, PA and Minneapolis, MN, spearheaded by Rita S. Fierro, Ph.D, Katie Boone, Dave Ellis, Quanita Robertson, and Myron Lowe.

Instead of supporting healing, systems continue intergenerational trauma, especially of people of color. These systems are expensive, exponentially growing, and unsustainable, as children in foster care grow up to have their own children placed in foster care.

Disproportionality is the common symptom of the dysfunctional recipe that all systems share. It is critical we stop feeding the illusion that if we change one slice at a time, we will end up with a different pie. We must face the truth: the whole recipe requires changing.

## What Home for Good is doing about it

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We are proposing to engage parents (with children in care), young adults (who were in care), service providers, funders, parent lawyers, advocates, agency administrators, community members, and key political leaders in dialogues to generate a trauma-informed cross-system transformation that breaks the cycle of family trauma so that families can heal and exit crisis mode and children, wherever possible, can come [Home For Good](#).

Our work is grounded in community organizing practices, trauma-informed care, and in-depth research on parents, survivors of sexual violence, who lost their children to foster care. We are conducting in-depth research to estimate the systems costs in the lives of six survivors of sexual assault from childhood to adulthood.

## What are our limiting beliefs around this topic?

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### How can we help them surface?

The biases that people come with affect the solutions that are offered. We use processes that help surface those biases and assumptions in support of greater possibilities. What is the bigger vision of what we can do together? How we deal with the frailty of humanity? What is the dis-ease about having this dialogue among different parties?

## The need:

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### Intersystemic change to break the cycle of intergenerational trauma

Based on the latest research, trauma is passed down from parent to child creating an intergenerational cycle. It does not matter whether the trauma is due to sexual/domestic violence, child abuse/neglect, and/or the loss of one's own mother or other factors. Multiple systems, including child welfare, legal, education, physical and mental health, or juvenile and criminal justice, intertwine in the supposed care of Children in Need of Protective Services (CHIPS) in America but ignore this well-documented and researched cycle. From psychology we know that trauma becomes generational when not healed and yet, our systems do not support healing. They support the continuation of trauma. Foster care policy is driven by abuse media scandals and adoption discourse, but these are not the majority of children in care: 89% of children do not get adopted, 73% of those maltreated were not abused.

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## Research shows how:

- ✓ Intergenerational cycles of child abuse, loss of mother in childhood, sexual violence, and trauma exist;
- ✓ Different systems interact to assist for various traumas but in fact are obstacles to each other and do not work together for the benefit of the participant;
- ✓ All systems show similar effects of institutional racism via a common symptom: disproportionality;
- ✓ Outstanding gaps in expansive, system-wide and intersystemic data prohibit an accurate analysis of the national breadth of trauma perpetuation.

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## Local studies are not enough. We need national data.

Local studies point to a trauma epidemic, but we need national data on intersystemic impact.

Some estimate there is a 30% overlap<sup>1</sup> of children in both the child welfare and juvenile justice systems.

An Illinois study found that 80% of incarcerated adults were in foster care as children.<sup>2</sup>

A Baltimore study found the rate of sexual abuse while in foster care was four times higher than the general population.<sup>3</sup>

There is a 30-60 percent overlap between domestic violence and child maltreatment, but we don't know how many children in foster care nationally have witnessed domestic violence.<sup>4</sup>

A third of children in foster care are estimated to have disabilities, but we don't know how many children in special needs education are in foster care.<sup>5</sup>

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## To support, partner, or volunteer, contact:



**Rita S. Fierro, Ph.D**

Fierro Consulting, LLC

Tel. 215 893 0579

info@homeforgoodtoday.com

[www.homeforgoodtoday.com](http://www.homeforgoodtoday.com)

<sup>1</sup> Smith, C.; Thornberry, T. P. (1995) The relationship between childhood maltreatment and adolescent involvement in delinquency in *Criminology* (33: 4, 451-481), Blackwell Publishing Ltd.

<sup>2</sup> Beth Azar. "Foster Care Has Bleak History," *APA Monitor*, (November, 1995).

<sup>3</sup> Mary I. Benedict and Susan Zuravin, Factors Associated With Child Maltreatment by Family Foster Care Providers (Baltimore: Johns Hopkins University School of Hygiene and Public Health, June 30, 1992) charts, pp.28,30.

<sup>4</sup> Hamby, S., Finkelhor, D., Turner, H.A., and Ormrod, R. (2010). The overlap of witnessing partner violence with child maltreatment and other victimizations in a nationally representative survey of youth. In *Child Abuse and Neglect* 34(10):734-41.

<sup>5</sup> Forgotten children: A Case for Action for Children and Youth with Disabilities in Foster Care A Project of United Cerebral Palsy and Children's Rights, 2006, [http://www.childrensrights.org/wp-content/uploads/2008/06/forgotten\\_children\\_children\\_with\\_disabilities\\_in\\_foster\\_care\\_2006.pdf](http://www.childrensrights.org/wp-content/uploads/2008/06/forgotten_children_children_with_disabilities_in_foster_care_2006.pdf)

For basic facts on Education and Foster care see: [http://www.fostercareandeducation.org/DesktopModules/Bring2mind/DMX/Download.aspx?EntryId=1279&Command=Core\\_Download&method=inline&PortalId=0&TabId=124](http://www.fostercareandeducation.org/DesktopModules/Bring2mind/DMX/Download.aspx?EntryId=1279&Command=Core_Download&method=inline&PortalId=0&TabId=124) victimizations in a nationally representative survey of youth. In *Child Abuse and Neglect* 34(10):734-41.