NORTHWESTERN UNIVERSITY

Documenting Lives:
The Material and Social Life of the Case File in the United States Foster Care System

A DISSERTATION

SUBMITTED TO THE GRADUATE SCHOOL
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS

for the degree

DOCTOR OF PHILOSOPHY

Field of Anthropology

By

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EVANSTON, ILLINOIS

December 2018

Abstract

In the United States there is little material culture that foster youth share in common while in state custody. Removed from alleged circumstances of abuse or neglect, these young people frequently relocate between residential care settings like group homes, institutional treatment centers, or single family foster homes. Due to perpetual circulation through the care system, these dependent youth may have no "things" to call their own, except for one continuous object that assumes the leading role in this child welfare context, that is "their" case file.

By design, this dossier pertains to a specific subject it follows and records. In this way, the case file serves as a documentary shadow while youth navigate through this system. For administrators, social workers, and case managers, this kind of file informs much of the daily rounds, in ways that are similar and different to other participants in this system like youth, families, and foster parents. This same assemblage of documents is used in a variety of settings, including many examined in this dissertation. From staffings, case reviews, and court hearings, this file serves as a mediatory device through which all case information is communicated. Whether due to youth movement within the care system, to discussions in case management meetings, or treatment in therapy sessions, the case file stands as the reference point within these social encounters, facilitating the intermingling of people and paper with one another.

Through my research on the material and social life of the case file I discovered this so-called 'case file' is often never actually one individual physical file, but rather a series of binders, folders, or boxes that collectively comprise the case record. Materially, any given case record may also exist in multiple locations, in various forms of media, accessible to a variety of social actors. And, unlike other organizational systems that use administrative technologies like recordkeeping and filing, in foster care systems nationwide, the case file remains for the most

part, materialized on hard copies of paper, despite our present digital era.

Over its bureaucratic life course, this case-related storage device will contain a multitude of smaller graphic artifacts like consent forms, treatment plans, educational and medical records, as well as the occasional photo or identification document like a birth certificate or Social Security Card. And, this child welfare case record cannot exist without a partnering legal case record or file, from the local dependency court system. The artifactual-ethnography that I conducted for my thesis research interrogates this documentary object – the case file – in order to expand understandings of the anthropology of social service administration and the sociomaterial lives and livelihoods that depend upon it in the context of American state foster care programs.

I argue that despite the commonly held perspective that the caseworker-client relationship focuses on the work of building and strengthening ties with foster youth and families, social work in child welfare practice privileges documentation practices above all else, to guarantee compliance and record accountability of officials and service organizations. While recordkeeping measures are certainly necessary for social service administration, the sheer volume of and disproportionate concentration on paperwork diverts attention away from the effectiveness of state interventions into private family life. As the outcomes of youth during and after periods of state custody remain grim and troubling, few resources are afforded to alleviate the social issues that brought them under the gaze of the child welfare system in the first place – usually poverty, domestic violence, and social marginalization.

Despite good intentions, these street-level bureaucrats are rule enforcers and paper pushers. I contend that paperwork and meetings in the foster care system are important forms of governmentality - a means through which the state comes into being. This project goes beyond critiquing the inefficiencies of officials and state fosterage practices and rather, interrogates what

happens when documents (paper, digital, or otherwise) become our informants. From taking notes by hand or computer, to checking a box, signing on the dotted line, or while sending an e-mail, fax, or letter, it quickly becomes apparent that paperwork – as a process and a product – is present at every turn in social work. Such recordkeeping tracks youth through the system as it documents their behavior, diagnoses, medication, and transgressions, but also traces the administrative movement of officials, information, money, and power.

This ethnography draws on five years of fieldwork among case managers, file clerks, administrators, therapists, and other care staff in one congregate care setting – a residential treatment center for youth in Illinois. This longitudinal fieldwork was supplemented by observations of hearings and waiting areas in two dependency court systems in California, where I interacted with judges, attorneys, and other legal personnel. I also interviewed foster parents and former foster youth about their experiences in these settings as well as their reactions to officials and paperwork surrounding case management activities. My project integrates archival studies on bureaucracies and recordkeeping to anthropological theories on the state, documents, and kinship. The methods of collecting data included participant observation, semi-structured and open-ended interviews, and archival research to examine how the case file is used to plan, implement, and measure programs and policies at various levels of state intervention.

I demonstrate how procedural ethnography can be used to inform the design or evaluation of recordkeeping activity. I draw on my observations of and participation with this paperwork, including examinations of certain case management documents, and collected narrative reflections from social actors who interact with these organizational artifacts – officials, families, and former foster youth. I report on several processes that staff adapted to manage paperwork expectations, and describe reactions from these interlocutors to these augmentations of procedure

and documents. These findings demonstrate the power of such recording objects and

technologies to mediate existing regulatory ambiguities as well as open or close spaces for

negotiation, even deviation. I conclude with implications of these findings and suggestions for

moving forward to assuage the challenges that face foster youth and the adults that care for them.

Acknowledgments

This project was completed with the help and support of many institutions and individuals. Particular thanks are due to the Wenner-Gren Foundation, the National Science Foundation, the Central States Anthropological Association, the Tate Family Foundation, the LeCron Foster and Friends of Anthropology, and Northwestern University, each of which provided funding for various parts of the research on which this dissertation is based.

I am indebted to my committee for unwavering encouragement and advice through this process. I am grateful to my chair Helen Schwartzman for sharing an intellectual curiosity in the taken for granted of the everyday, especially professional settings and encounters like meetings, and the bureaucratic artifacts surrounding these events like memos, e-mails, agendas, and minutes. She has been a tremendous resource given her ethnographic background on childhood play and research experience on institutions and organizations. I am beholden to her unique combination of research experience concerning custodial youth and mental health care settings.

Caroline Bledsoe offered important expertise on family reproduction and youth fosterage in non-western cultures and afforded me an exploratory fieldwork opportunity to consider the ethnography of a bureaucracy such as a university payroll office. In addition to research methodology, she also shaped my writing by reminding me early on that despite having an intimate history with the research topic, I do not in fact know everything about the foster care system. She challenged these assumptions of mine that I remained unaware of for far too long and probed me while I remained resistant to change. She also brings experience from serving on the Northwestern University Institutional Review Board Advisory Committee, which enabled her to publish a close examination of censorship in the research ethics review process, of which I argue relates to state oversight of research on child welfare in the United States. Tim Earle

introduced me to the crucial concept of materiality and facilitated my awakening to the significance of objects in social life – redirecting my attention towards paperwork and documents and the mediation they perform through social services. Rebecca Seligman provided a framework in medical anthropology, emphasizing the interdependence of biological and psychological processes regarding the self, identity, and personhood, and the significance of cultural influences on mental health. She also led me to the contributions of clinical ethnography in exploring these understandings.

Summerson Carr and Bill Murphy continue to guide me through semiotic theory and its conceptual capacity to apply in very tangible and material ways through daily life. This support analytically equips me to approach the communicative activities of social service administration and organizational artifacts in professional settings described in this dissertation. Matthew Hull, Paul Brodwin, Michael Oldani, Tina Lee, and Jill Duerr Berrick graciously consulted with me in the early stages of research, offering valuable suggestions. Soyini Madison encouraged me to consider critical performance ethnography as an approach to understanding the displays, rituals, and embodied practice of the bureaucratic culture. Also influential were Karen Tranberg Hansen, Bill Leonard, Robert Launay, Axel Mueller, and Charles Mills. As a wee undergraduate, Melissa Caldwell gave me her undivided attention and without her encouragement, this project would not have even begun. Loki Pandey, Carolyn Martin Shaw, Virginie Magnat, James Todd, and Heath Cabot also set this anthropological foundation. I also posthumously thank Fred Lieberman.

The faculty and graduate student regulars at the University of Chicago's Workshop on U.S. Locations reviewed and encouraged early drafts of this dissertation. I also presented findings from my research for a number of years as part of the Michicagoan Annual Graduate Student Conference in Linguistic Anthropology. To every grant reviewer, and conference panel

Abbreviations

ACR	Administrative Case Review
AFCARS	Adoption and Foster Care Analysis and Reporting System
APA	American Psychological Association
CHSS	California Health and Human Services Agency
CTI	Centralized Training Institute (Chicago Metropolitan Battered Women's Network)
CAPTA	*Child Abuse Prevention and Treatment Act* of 1974
CACI	Child Abuse Central Index
CDCF	Connecticut Department of Children and Families
CDSS	California Department of Social Services
CPS	Child protective services
C.F.R.	Code of Federal Regulations
CITI	Collaborative Institutional Training Initiative Program (Northwestern University Institutional Review Board)
CASA	Court Appointed Social Advocate program
COA	Council on Accreditation
CSW	Children's Social Worker
DHHS	U.S. Department of Health and Human Services
HEW	U.S. Department of Health, Education and Welfare
DA	District Attorney
Department	Department of Children and Family Services (Illinois, Los Angeles County and San Mateo County, California)
DR	Drug rehabilitation
DV	Domestic violence
EBT	Electronic Benefits Transmission
ERB	Ethical review board
ECR	Ethics committee review
FDA	Federal Drug Administration
GAL	Guardian ad Litem or public guardian
HIPAA	*Health Insurance Portability and Accountability Act* of 1996
ID	Identification document
IDCFS	Illinois Department of Children and Family Services
IDHFS	Illinois Department of Healthcare and Family Services
IDHS	Illinois Department of Human Services
ICG	Independent Care Grant
IEC	Independent ethics committee
IBCMP	Individual Behavior and Crisis Management Plan
IDCMS	Illinois Department of Central Management Services
ILCS	Illinois Compiled Statutes
Ill. Admin.	Illinois Administrative Code
ITP	Individual Treatment Plan
IT	Information technology
IRB	Institutional review board

QUARTERLY	Individual Treatment Plan Quarterly Review
LADCFS	Los Angeles Department of Children and Family Services
LASD	Los Angeles County Sheriff's Department
LADPSS	Los Angeles Department of Public Social Services
LPHA	Licensed Practitioner of the Healing Arts
MDiv	Masters degree in Divinity
MSW	Masters degree in Social Work
MHA	Mental Health Assessment
MAC	Midwest Adoption Center
NIH	National Institute of Health
NICU	Neonatal Intensive Care Unit
NYOCAFS	New York State Office of Children and Family Services
NUB	Notice of Unsubstantiated Billings
OCSS	Orange County Social Services
OHRP	U.S. Office for Human Research Protections
PAT	Parenting Assessment Team Evaluation
PCA	Parenting Capacities Assessment
PIP	Performance Improvement Plan
PTSD	Post-Traumatic Stress Disorder
QMHP	Qualified Mental Health Professional
REB	Research ethics board
Reviewer	Administrative Case Reviewer
RTC	residential treatment center
RTOS	Residential Treatment Outcomes System
Rule 132	Illinois Administrative Code, Title 59, Medicaid Community Mental Health Services Program
SMCHSA	San Mateo County Human Services Agency
SACHRP	U.S. Secretary's Advisory Committee on Human Research Protections
SED	Serious Emotional Disturbance
SIL	Supervised Independent Living program
SNAP	Supplemental Nutrition Assistance Program
TANF	Temporary Assistance for Needy Families Program
UAC	Unaccompanied Alien Children
WIC	Women, Infants, and Children

In memory of Dorrie Whitlock, Michael Young, Suzanne Nicholas, and Conor Redig

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Chapter One

Introduction

> "When parents and children get involved with this governmental maze, they must be prepared for the endless bureaucratic process and the emotional ups and downs. Foster parents must educate themselves about this system so they can make the welfare of the foster child a priority because the system is only concerned with the bureaucratic rules, regulations, and court proceedings that make up the process" (Propst 1994).

Over the past half-century, the organization of child protective services in the United States (U.S.) has grown into a network of agencies that while mostly independent from one another, have as their collective goal the prevention of child abuse and neglect, as well as the promotion of family wellbeing. While still no formal, tangible, national foster care "system" exists, local states and counties have developed similar methods to administer and monitor child welfare services to families, youth, and program providers. This dissertation focuses on the primary medium by which everyday operations are executed and supervised across these local systems of care – copious paperwork. As I attempt to demonstrate in this analysis, through the creation and circulation of specific documents and records (like case files, e-mails, or faxes) and the dependency on certain documenting practices (such as writing case notes, e-mailing, faxing, and auditing case records), paperwork assumes the leading role in this bureaucratic social arena.

In the follow chapters, I explore how this paperwork facilitates exchanges of youth, money, knowledge, and power while also mediating interactions between social workers, families, the state, and youth. Most importantly I argue that this paperwork constructs real and imagined subjects, as well as facilitates the possibility for multiple pasts, presents, and futures to be recorded and certified. Ultimately I ask, how this kind of paperwork performs these actions and what are the consequences of this administrative behavior?

I use the term "paperwork" here and throughout both figuratively and literally to describe objects in paper or digital form that not only contain the labor used to produce them, but also perform an important amount of work themselves. In other words, the meaning of paperwork is twofold as it simultaneously refers to a kind of material culture or series of 'things', but also signifies the very act of processing the paperwork itself. As I illustrate, paperwork – that is the objects like reports and files - can also perform social actions, denoting the practice of working with paper or recordkeeping activities. My aim is in part to decipher this "curious continuity of paper as an artifact of office life" (Harper 1998, 22), and to problematize its role in the public-private hybrid of organizations that constitute the current administration and delivery of U.S. foster care services.

Foster youth are defined as minor wards of the court or state, under the legal age of consent[1] and living within the authority of the government while not in the custody of their parents or other legal guardian. The term "foster youth" may refer to an individual or larger social category of persons, whereas I use "former foster youth" to identify adult research participants in this study who at one point spent part or all of their childhood in one or more local foster care system. This is an important distinction since I did not have research clearance to collect ethnographic data directly from current foster youth or minors who may have previously been in foster care. It is not uncommon for youth to move within and out of the care system, only to be taken back into state custody for child protection reasons again. I therefore rely heavily on the testimonies of my former foster youth interlocutors who previously were in care, as well as drawing from my own personal tenure growing up in several different local child welfare systems. Depending on the local vernacular, foster youth may be known as "foster kid",

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[1] This is defined as 18 years of age, with the exception to Alabama and Nebraska, where it is age 19.

"fosters", "youth in care", and "wards", and I do my best to employ these terms as they are used by specific social actors or certain service agencies.

I also use somewhat interchangeably the terms "child welfare" and "foster care" as they may be used in their regional context or used colloquially nationwide. All foster care programs operate under the umbrella of a local child welfare state agency, but in some jurisdictions these are one in the same. For example, the Illinois Department of Children and Family Services (IDCFS) is part of the Executive Branch of the departments of the state government. This department is based in two centralized offices in Chicago and Springfield. Both locations oversee all child protective services statewide, which includes responding to reports of child abuse and neglect, but also the administration of providing foster care or facilitating adoption proceedings for youth legally taken into state custody as wards of the court. As part of its duties, the IDCFS licenses and monitors all child welfare agencies and more than 14,000 day care centers and agencies, as well as group homes. By comparison, the California Department of Social Services (CDSS) delegates child protection oversight to each of its 58 counties, which may further determine how child welfare activities are administered locally like the Los Angeles Department of Public Social Services (LADPSS), which oversees the county's own Department of Children and Family Services (LADCFS).

Regardless of the arrangement or organizational hierarchy, all child welfare and foster care agencies are unanimously known in the U.S. as "the system." Initially, this emphasis on state-mediated child welfare as a unified system suggests first and foremost that there is a national foster care system, which historically has never existed. More importantly, a system like a state government infers a guiding set of principles or procedures according to which something is done, such as through an organized scheme or method. "The system" in this way can also refer

to the prevailing political or social order synonymous with "the establishment," "the administration," "the authorities," or "the powers that be." Idioms like "the system is rigged" or "fuck the system" may be used to describe situations where suspected unfair advantages are given to one side of a conflict or situation, signifying something untrustworthy or unjust. Conversely, expressions like "beating the system," "gaming the system," or "abusing the system" pertain to using the rules and procedures meant to protect a system in order, instead, to manipulate the system for a desired outcome. In is within these range of assumptions regarding such a notion as "the system" that this dissertation interrogates, as state mediated child protection is often far from systematic, orderly, efficient, and consistent. As my research shows, this conglomerate of state and private agencies, whether for or not for profit, are all highly bureaucratized yet frequently disjointed and disorganized, often mirroring the family dynamics or residential environments that they are intended to alleviate (Glenn-Levin Rodriguez 2017; Schwartzman and Kneifel 1985).

According to Richard Harper, "paper-based documents allow and support a certain form of embodied interaction" (1998, 22). Indeed the state fosterage processes described and analyzed here are governed by these primarily "paper based documents," which demand, materially and theoretically, various levels of bureaucratic literacy from social workers and clients alike. As Jared Del Rosso has argued that "textual realities offer diverse vantages" (2011, 183), so do these variations in perspective and lens offer different optics through which to examine case records – and the social activity of recordkeeping. Unlike existing scholarship on the American foster care system, *this project interrogates what happens when documents (paper, digital, or otherwise) become our informants.* My effort here explores what we can learn about this kind of

state program by focusing on the construction and circulation of the major material artifacts that it produces and privileges like the case file and case record it contains.

My project draws on important recent contributions to the study of bureaucratic settings by anthropologists recognizing that there is a long, although often unacknowledged, tradition of research on formal organizations and institutions by anthropologists that began in the 1920s and 1930s in American settings (Schwartzman 1993). In Chapter Two I present an overview of this research focusing specifically on the work that is most relevant to my study of organizational artifacts like case files and other administrative paperwork in bureaucratic and government contexts. Most recently, anthropologists have returned to the analytic and ethnographic examination of the state *vis-à-vis* bureaucracy, identifying the ways in which such an approach demonstrates how pervasive these kinds of settings are in social life. Yet even with the advent of digital and new information technologies – state agencies and their governing processes are still characterized by archetypical bureaucratic logics, namely cultures of documentation that serve to record and communicate organizational decision-making.

In their edited volume *The Anthropology of the State: A Reader* (2006), Aradhana Sharma and Akhil Gupta call for anthropologists to reconsider existing theories of the state in the present context of globalization. As institutions, spaces, ideas, practices, and representations constitute the "state," they argue that it is ever more necessary to approach the state as a cultural artifact that must be understood as emblematic of our neoliberalizing and transnational worlds. According to David Harvey (2007), since 1970 neoliberalism has become a dominant market-based ideology throughout the world that champions economic liberalization dependent upon a reconstitution of state powers through privatization, austerity, deregulation, and free trade. Not only are state interventions into the economy minimized through this doctrine, but "the

obligations of the state to provide for the welfare of its citizens are also diminished" (Harvey 2007).

As discussed in Chapter Three, the current child protection efforts of child welfare and foster care systems in the U.S. emerged during this same period, and have had to adapt to this larger political economy, with increased outsourcing of social services through state contracts with private for and not-for-profit organizations. Such an ideological environment where the government ultimately assumes protection of the economy, emphasizes individual responsibility, and promotes the premise that all participants in an economy start from an equal place, and that deregulation will solve social problems. It is also due to neoliberal policies that recipients of state support such as through welfare programs like foster care have shifted from services users – that is, recipients of these programs - to giving "rise [to] cultures of litigation and compensation, and the transformation of patients into 'consumers'" (Rose 2007, 16), alongside increasing privatization of public social services, resulting in a public-private hybridization of these state bureaucracies.

In the *PoLAR: Political and Legal Anthropology Review* special issue *Symposium on Bureaucracy: Ethnography of the State in Everyday Life*, Anya Bernstein and Elizabeth Mertz (2001) argue that despite its pervasiveness in modern life, "the state itself remains an elusive object to study, difficult to approach both practically and conceptually," as anthropologists frequently locate state policies in analyses of cultural scenes but remain, "slow to treat state bureaucracy as a site for ethnography, and bureaucrats as participants in a complex social arena" (6). Just as in Franz Kafka's *The Castle* (1926), where the protagonist simply named "K." arrives in a new village and struggles to gain access to the mysterious local authorities who govern from

a distant castle, "the state" much like "the system" as an entity is often understood to represent alienation, unresponsive bureaucracy, and seemingly arbitrary systems of control.

It is in large part due to these all too familiar associations of frustration relating to trying to conduct state business often without transparency, "in the fluorescent-lit rooms of drab office buildings where thousands of bureaucrats type streams of information into outdated computers or file handwritten notes in inaccessible archives," that Bernstein and Mertz attribute ethnographic avoidance of such settings for research purposes (2011, 6). However, as they and others discussed in Chapter Two contend, bureaucracies are sites of sociomaterial coordination and everyday accomplishments involving, "Actual bureaucrats…just like people in all sorts of other settings, [who] constantly make decisions, interact with others, exceed their own control," and that only through closer examination into these lived social worlds, will anthropologists more fully understand how such administrative settings are not as boring and lifeless as they may appear from the outside looking in (Bernstein and Mertz 2011, 7).

In *Remaking the Public Good: A New Anthropology of Bureaucracy* (2015) Laura Bear and Nayanika Mathur adopt a more explicit focus by questioning 'the public good' that many state bureaucracies are attributed with advancing in their introduction to the *Cambridge Journal of Anthropology* special issue on bureaucracies. Despite similar techniques of management within most bureaucracies like proceduralism and recordkeeping, state versions of these kind of organizations, "attempt to materialize this contract between citizens and institutions," as they, "are made up of 'public things' such as offices, documents, technocratic procedures and infrastructures that seek to provide the foundation for social relationships with the state," and are thus "also accountable to a public" (2015, 18-19).

One of the important features of this recent return of anthropological studies to bureaucratic settings is attention to the role of documents and recordkeeping practices. This is illustrated most notably in the work of Matthew Hull and his influential investigation into the "social life of the file" within city planning in *Government of Paper: The Materiality of Bureaucracy in Urban Pakistan* (2012a). I discuss this work in more detail in the following chapter but it is significant to mention here that Hull conceptualizes governance in this context as an embodied materialization between, "bureaucrats, politicians, property owners, villagers, imams (prayer leaders), businessmen, and builders," as well as a kind of semiotic practice as seen through the privileged role of inscription on handwritten artifacts like files, petitions, and maps producing, "a distinctive political economy of paper that shapes how the city [of Islamabad] is constructed, regulated, and inhabited" (2012a, 9).

In his review of research on bureaucracy and documents, Hull (2012b) suggests that there are several reasons why organizational artifacts such as documents and other paperwork have largely been ignored by anthropologists. First, anthropologists originally focused their studies on small scale non-western societies where it was mistakenly assumed that social life in these settings functioned without much formal organization (Schwartzman 1993). Secondly, when such organizational institutions have been the focus of ethnographic study, documents and paperwork often remain overlooked even though they are the primary technology, emblematic of bureaucratic formality, structure, and information sharing. Citing Annelise Riles's edited volume *Documents: Artifacts of Modern Knowledge* (2006), Hull suggests that a third explanation for why researchers have mostly avoided the examination of paperwork and other artifacts in bureaucracies is that anthropologists themselves are constantly producing documents in ways all too similar to most interlocutors in such settings. This familiarity thus blurs the distinction

between these organizational objects as research tools versus documents and similar material culture serving as the subjects of research in and of themselves.

Lastly, Hull argues that documents have been taken for granted in these ways because they are typically approached as objects that "give immediate access to what they document," frequently ignoring the mediation that they provide because they are misunderstood to be entirely, "neutral purveyors of discourse" (2012b, 253). As he and other ethnographers have clearly shown, these bureaucratic artifacts are far from impartial in their ability to influence the information they carry, but also shape the social settings in which they are employed. Therefore, taking the position that documents do indeed act and perform in this manner, this dissertation identifies the effect of this mediation on the course and outcome of case files as they percolate within the foster care system, offering interpretations of the ability of the state to use reviews and assessments of these files to monitor and evaluate its own practices and effectiveness.

Following Hull's lead, I contend that although the case file is an important and crucial document in foster care and social service systems in general, its significance has been overlooked and undertheorized due to the tendency for providers and researchers alike to disregard the importance of files as objects of interest in and of themselves (Hull 2012; Latour 2005). In order to examine this object and its various forms in my project, in Chapter Two I review research on documents and records to trace the pervasive historical significance of this kind of material culture in the modern era (Habot 2014; Hetherington 2011; Li 2009; Jacob and Riles 2007; Levy 2003; O'Reilly 2011; Reed 2006; Riles 2006; West 2003). It is noteworthy that most of the anthropological literature on things like paperwork and various recordkeeping methods focus on the state. Part of this historicity also requires a survey of ethnographic investigations on bureaucracies and institutions, and the extent to which these organizational

structures have evolved alongside shifts in information and communication technologies like print, analog, and digital media (Douglas 1986; Garfinkel 1967; Gupta 2012; Lipsky 1980; Schwartzman 1980; Zimmerman 1969). Despite changes in these material forms, we still see artifacts like documents such a reports or case files occupy a great amount of bureaucratic space – organizationally and materially.

Overtime, bureaucracies as a sociomaterial phenomenon developed their own internal routinization (Heimer 2001) and audit cultures (Strathern 2000). This is relevant to my study on the case file as a nonhuman actant, a relational term defined by Bruno Latour as any entity or thing that "modif[ies] other actors through a series of..." actions (2004, 75). As a material object with its own social life, the case file is often anthropomorphized in how it is understood such as referencing a "case history" but also used to represent the fostered life it records. Thus, I engage with research on such contexts of proceduralism to draw attention to the contributions that material culture such as documents make in the world and to the social actors that interact with them. Key to the concept of actants are the manner in which they modify the action of other entities and my dissertation joins this battle cry to break the habit see people as the only actants not only in bureaucracies, but all social life. While paperwork like case files serve as containers of recorded information, they also possess organizational histories and paper trails that may be revisited or scrutinized in audits and reviews.

Methodologically I situate this dissertation project within the emergent research concerning clinical ethnography and medical anthropology (Brodwin 2013; Chua 2012; Hajtmanek 2015; McKay 2012; Mendenhall et al. 2010; Oldani 2004; Seligman et al. 2014). Despite the turn away from institutionalized models of care concerning child welfare and mental health, clinical logics are frequently employed when it comes to the use of patient records (Risse

and Warner 1992), referring to foster youth as "clients" who receive certain "treatment", alongside other bureaucratic methods of administration like meetings (Schwartzman 1989) and staffings (Buckholdt and Gubrium 1979). I join this body of scholarship, along with advances in ethnographies of social work and social welfare (Carr 2010; Longhofer, Kubek, and Floersch 2010), as well as work on identity and identification processes in such formal organizations (Carr 2009; Hacking 1999; Jacob 2007), which all require and invoke paperwork as the primary method of operation.

Like paperwork, I define and use "document" here as an artifact - both ideal and material - as well as a technology. In other words, documents in foster care such as case file records or court reports are physical and perceivable objects that serve as artifacts of organizational life, as they are created and used by the social actors within this state bureaucratic network of agencies. Yet these same objects are imbued with specific purposes and perform a range of social actions therefore operating as an organizational means – a kind of tool - used to accomplish administrative goals and case-specific objectives. Documents have long been conceptualized as having functional as well as symbolic value as receptacles of meaning and as vessels to communicate knowledge, even characterized as "talking things" (Levy 2003). Hull (2003) and others have empirically investigated these documentation methods and documents themselves as semiotic devices used differently as means to ends in varying contexts (Harper 1998; Latour 1998; Riles 2000).

The fundamental premise of a semiotic approach to devices such as information technology (IT) involved in the execution of case management for example, is that any tool can be analyzed with the conceptual basis of semiotics, the general theory of signs. Semiotics serves as a theoretical framework to explore the "logic" of signs and the "factors" of semiosis, the

production and interpretation of signs. Signs are the carriers of semiosis, itself a complex

phenomenon. A sign, in the most general sense, is any unit of communicated information – a

morpheme, freestanding word, utterance, or phrase whether conveyed through speech or depicted

on an object like a keyboard, computer screen, or piece of paper.

Objects themselves can also be signs (Keane 2003), whether a literal road sign or

building marquee, to even garments adorned on the dressed body (Tranberg Hansen 2000;

Tranberg Hansen and Madison 2013). In additional to spoken discourse, non-verbal

demonstrated behavior can also be signs, such as body language, movement, any social action in

fact. In this way, signs are typically co-occurring, often gaining meaning through their combined

display and understanding. Signs then are inherently *meaning-carriers*, while semiosis, which

relies upon signs, is the process of *meaning-making*, on both the productive and receptive side.

Signs are produced, intentionally or unintentionally, and they are interpreted, both operatively

and thematically.

As case files and other paperwork in foster care serve to record and create a

documentation trail of case activity and progress, these artifacts exist in order to accumulate and

provide compiled information. This data is depicted through recognized characters and symbols

like letters of an alphabet or numbers (which are themselves their own individual kind of signs),

but also structured within bureaucratese like the use of certain clinical diagnostic labels for

concerning mental health or mental states, or legalese such as specific terminology to describe

behavior or certain organizational procedures. Through a shared bureaucratic lexicon, paperwork

is employed to communicate case-related knowledge between organizational officials like social

workers, case managers, therapists, administrators, and other care staff. In this way, I argue that

paperwork and documents in general, exist semiotically as tools for meaning-making such as

recording and interpreting family or foster care life, noting and exercising administrative decisions, and visually representing social work activity both on the individual case level as well as the larger organizational levels of current foster care administration. As I show, case files are used in a range of settings, involving a variety of people, to fulfill different bureaucratic objectives.

In Chapter Three I turn to a discussion of ethnographic research that examines processes of child displacement, circulation, fosterage, and adoption. From Oceania, Africa, Latin America, to the Artic – practices of children and youth not living with or being raised by their natal kin is abundant and diverse. Whether with or without kin, informal care remains, "more common than institutionalization for the 163 million children worldwide who do not live with a biological parent" (Leinaweaver 2014, 131). However, the most obvious point that a review of literature on these informal familial arrangements reveals is the unequal attention of anthropologists towards these cultural kinship practices in non-Western settings. In such contexts, kinship is not always understood as a fixed arrangement, but rather ambiguous and fluid. In most of these kin transactions, the state is not involved and relatedness is understood more as a demonstrated dynamic, which is constantly negotiated and performed. Fostering in these circumstances is usually conceptualized as a temporary arrangement or at the very least, inherently uncertain. Despite the apparent normalization of child circulation in these areas through fosterage methods, formal adoptions – whether legalized through the state or not – remain significantly underexamined. That is, unless it involves international adoption.

Recent studies of international adoptions (children adopted out from one country to another) reveal the increasing globalization of bureaucratic methods of adoption and fosterage and the cross-cultural conflicts that may arise. Examinations of international adoptions in these

areas, disproportionately involve white and economically privileged European, Canadian, or American families adopting orphaned children of color, often from other parts of the world. Certainly, this corpus of research reflects some of the larger trends in examples of international adoptions, especially how relational categories like race and class influence such proceedings.

While increasingly popular due to globalizing forces, state-mediated formal international adoption remains a relatively new occurrence, and recent attention to such activities is therefore timely and necessary (Briggs 2012; Kim 2000, 2010; Leinaweaver 2008, 2013; Yngvesson 2010). This research reveals the importance of cultural relativity and the frequent presence of ethnocentrism regarding determinations of who should and can adopt or be adopted, and through what means. International fosterage remains rather uncharted territory in the ethnographic record, as it now is an almost impossible feat given the limitations of nation-state borders and travel across and between them, especially involving minors. This is further complicated in circumstances involving unaccompanied minors (Terrio 2015) or children of undocumented migrants (Glenn-Levin Rodriguez 2017) where documented nationhood and citizenship are of the utmost political value.

I thus use the examples of cross-cultural encounters enabled and facilitated by and through international adoption to complement and complicate the research on in-country adoption in Europe, Canada, and the U.S., which often overlooks the significance of culture in these youth exchanges. Curiously, this literature is often not put in productive conservation with existing ethnographic examples of localized forms of fosterage and youth circulation in other parts of the world, that have existed in some form or another in most cultures, and largely outside of the confines of state involvement or supervision. Within the west, the state mediates such legalized exchanges of youth such as through child protection and welfare programs like the

foster care system. Increasingly, as with other attention towards the anthropology of the state, governmental forces in the global south may model after these pervasive bureaucratized methods of the global north, as is especially prevalent in exchanges between urban and rural communities (Leinaweaver 2008). Yet, even when adoption and fosterage are examined in areas like Europe and North America, adoption well outnumbers fosterage in sheer volume of ethnographic studies.

I review this body of work to provide a context for examining the more recent studies by anthropologists of state-run child welfare systems in North America (Glenn-Levin Rodriguez 2017; Lee 2016; Silver 2015) and to situate my present project concerning the sociomaterial life of the case file within this ethnographic record. I also survey contemporary research on the anthropology of social work in other service settings like drug treatment programs (Carr 2010) and mental health treatment settings for youth in state custody (Hejtmanek 2016), and case management in these public health contexts (Floersch 2002; Longhofer, Kubek, and Floersch 2010). Combined, this literature expands understandings surrounding the anthropology of adoption and fosterage, providing empirical examples of how these kinds of child circulation processes exist cross-culturally. We see that adoption and fosterage – whether formal or informal – must be understood within a cultural context that provides structural forms that have meaning in the ways that they are constructed across a number of social groups.

I discuss my own ethnographic research in Chapter Four as it has been informed by the cited literature traditions discussed above. Fieldwork included 1) examining and reviewing blank standardized state and agency forms, 2) assisting my primary fieldsite prepare for state case file audits, 3) structured and semi-structured interviews with former foster youth, families, advocates, and staff about their interactions with case files and other paperwork, as well as, 4)

participant observation in a variety of organizational settings. Examples of the contexts relating to social service administration that I observed included the Administrative Case Review or "ACR", dependency court hearings and waiting areas, staff meetings, and trainings or workshops for families, staff, interns, and volunteers.

My initial archival research began in 2011 and continued until the completion of data collection in 2016. This involved familiarizing myself with various documents used in case management like those including in the case file, but also other reports and forms about administrative activity by examining their composition, organization, and utility in their daily rounds. Due to strict limitation in research access, ethnographic data collection involving human subjects was conducted in two phases. For research participants that did not require approval from the IDCFS such as former foster youth, current and former foster parents, advocates, child welfare attorneys, and social service students as well as faculty, participant observation, interviews were conducted from 2013 to 2016.

However, it was not until 2014 that I conducted participant observation and interviews with my interlocutors that did require IDCFS approval, such as any agency staff hired or contracted by the state (social workers, case managers, therapists, administrators, support staff, direct care providers). These encounters occurred primarily in a residential treatment facility I am calling Williams Treatment Center in suburban Chicagoland, Illinois and continued until the end of data collection. It was also during this time that I received legal authorization to conduct observations of dependency court hearings and courthouse settings like waiting rooms and clerk's offices, in Los Angeles County and San Mateo County in California. Finally, using autoethnographic data, I examine my attempts to retrieve my own case records from when I lived in state custody from 1984-2001 in California, Oregon, and Washington.

Following standard ethnographic practice, I use pseudonyms to protect identities of all research informants and private organizations that participated in this study. This excludes public officials, elected or appointed, who are identified with their legal names accordingly, as well as state agencies or departments. With their consent, I also refer to my own foster parents by their real names. I include a list of acronyms of organizational names and titles for certain standardized documents in the abbreviations section of this dissertation in order to best reflect and represent how this shorthand terminology is employed as part of the communication ideology of state agencies, public policy, and service providers. This lingua franca has been adopted as the auxiliary language within these government activities and among my interlocutors. As I soon became aware, command of these contracted forms of department names, diagnostic labels, and certain paperwork is necessary for the dissemination of case management information both through the circulation of certain records and during face-to-face interactions where forms, reports, or other case details are discussed and referenced.

My initial goal for this study was to "follow the file" using participant observation, ethnographic interviews, and analysis of records (in various forms), files, and any other relevant artifacts that relate to the social and material context of case management. I wanted to understand how case files originate (in what form - electronic, paper), the ways they circulate between participants within the care system (amongst staff, administrators, clinicians, foster families, youth) as well as in external settings (ACRs and court settings). I sought to participate with the types of documentation methods and observe the contexts of their various uses (meetings, courtrooms, families, therapy sessions, audits) in order to appreciate how the meaning of case information may change, and to ascertain the ways by which access to such privileged and confidential records is controlled and negotiated.

While I still hold these concerns, I encountered a number of problems related to research access and clearance to these documents, and had to adjust the focus of my project accordingly. The primary concern of the original research design was that I sought to witness and be made privy to case-specific data and the social settings in which such data was not only created, but disseminated and potentially contested or revised. Yet, as discussed at length in Chapter Four, ethical concerns surrounding the state-mediated settings of social service activity, namely involving minor youth who simultaneously are also wards of the court under state custody, and the highly confidential case records that follow them, prevented me from gaining the necessary research permission.

While these limitations were disappointing, it challenged me to redirect the study in order to focus on the other human and non-human actors and actants (Latour 2004, 2005) that socially and materially comprise the foster care system. Namely, I turned to the often anonymized child welfare staff and officials that interact with case files the most, many of whom are frequently nestled behind the scenes, in case management and social work. While I was unable to record specific examples from case records or any meta-level data that was not already made publically available (see Chapters Seven and Nine), I was given access to blank forms contained in the case file, as well as permission to observe and support case recording technologies such as paper and digital filing procedures, and other reports that are generated to record, evaluate, or justify case management decision-making.

Using the combined archival and ethnographic data I will show here that the governing logics of confidentiality, compliance, and documentation that prevented me from gaining research clearance to work directly with active foster youth, are the same organizational ideologies that prevent foster youth from receiving the kind of attention and circumstantial

scrutiny that I and others contend they deserve (Ferguson 2014; Hayes and Devaney 2004). Just as social work decision-making in foster care is a highly subjective process (Glenn-Levin Rodriguez 2017; Handelman 1987; Scherz 2011) aimed at the protection of children, I argue that so too is the so-called objectivity of all ethical and institutional review boards (IRBs) which must comply with the Department of Health and Human Services (DHHS) and the Federal Drug Administration (FDA) regulations in the review and approval of research in the interest of protecting human subject participants, a rather subjective endeavor. Unfortunately, the only way I was able to get this project on the social life of case files approved was to a) not conduct research with foster youth outright, and b) not have access to their files for direct data collection in the name of confidentiality, compliance, and of course, documentation.

All three of the largest child welfare systems in the U.S. – New York, Los Angeles County, and Illinois – are also the most publically scrutinized. When scandals of suspected foster youth abuse or neglect in cases arise, the first point of reference is always the case file record. In California, the LADCFS has numerous documented cases where reported partnering, "county agencies were not exchanging vital information that could prevent children's death and injuries" (Therolf 2010a) and critics caution that "confidentiality rules stand in the way of developing a computer system that would allow social workers to efficiently share data with other agencies so they might learn about a parent's criminal history or a child's unexplained injuries. Adjusting those rules would require legislation" (Therolf and Christiansen 2009b).

Chapter Four also begins my analysis of the material and social life of the case file in the U.S. foster care system based on my ethnographic research in Illinois and California. I first place the case file in the context of all of the other material artifacts that are produced within the foster care system and examine its existence and form as both a larger corpus of paper documents and

the ways that it may exist as an electronic file, or as a set of digital files. I also examine the

multiple ways that the case file becomes the centerpiece (so to speak) of the foster care system

and the variety of contexts in which it appears or is referenced. In this way, the life course of a

case file – concurrent to the lives of those foster youth documented within – is examined through

its various stages of composition and alteration, utility, and management. I focus on how files

and their contents are utilized, by whom, and how the meanings of documents change in

different contexts of use, revealing contemporary evaluative practices in formal organizations of

care both for client and case progress, as well as the supervision and certification of service

agencies.

Just like foster youth, case files are born and activated into administrative life. As with all

cases, depending on the set of circumstances, case files will change, grow, and move through the

bureaucratic nexus. Eventually, whether foster youth leave the system and reunite with families

of origin, join new ones, or emancipate and "age out"[2], their files will be closed or "deactivated",

a term used by staff at Williams Treatment Center. Sometimes however, a case and subsequent

file may be resurrected and using several examples from my informants, I show how case

records may be reactivated should a family case be reopened or even later in adult life either to

mitigate circumstantial evidence of certain behaviors of former foster youth; or, most troubling,

to establish potential ineptitudes or heightened degrees of risk regarding former foster youth as

adult parents or guardians of dependents later in life (such as taking custody of a relative's

children or even serving as a foster parent themselves). These disturbing personal narratives

expose the purportedly unintended recirculation and uses of case records for individuals no

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[2] The phrase to "age out" is the common nomenclature to describe departure from the foster care system upon reaching the age of majority or consent. As will be described in more detail, this alleged "aging out process" is actually a rather vague series of events (or lack thereof) and bureaucratic paperwork procedures that legally release wards of the court from state custody.

longer under state custody, but still susceptible to state surveillance and scrutiny.

In Chapter Five I review state legislation, the IDCFS website employee manuals, and foster parent handbooks to examine how the regulations and requirements included here generate an array of documents as well as meetings that work to produce and reproduce the foster care system. To address how this association works in practice I then turn to an example of an ACR that I was able to observe. Through this, I outline the significance of the ACR as an important context in which the case file is central to not only these proceedings, but also the dependency court hearing that will follow in the next chapter, and where legal declarations are made in relation to the progress, placement, and court-based decision-making of a case. In this kind of meeting encounter which occurs typically one month prior to an upcoming court date (approximately every six months), an updated case service plan is created, in order to synthesize and summarize recent case activity – any progressions or regressions.

Using an observation from one joint ACR involving two siblings, I identify the additional paperwork and administrative staff that such a convening requires or may potentially demand. Not only does this demonstrate the nature and amount of case records necessary in order to prepare and execute this legal event in anticipation of the upcoming court hearing, but such an example also provides yet another context in which the same case data is used by various social actors that in their own ways, participate in these steps and the larger proceduralism of case management. And what this observation also shows, is that in such a meeting as the ACR, the officials who are representing or reporting on the youth or case in question are actually less important than the content of the report itself and the subsequent written signature approval of the Administrative Case Reviewer, also present at the meeting.

Chapter Six illustrates the role that child welfare agencies and mandated recordkeeping

practices play in the legal process and especially the assemblages of people, relations, resources, case files, and other paperwork that are brought together by the need to coordinate with local legal bodies – namely, regional juvenile, dependency, or "Children's Court" systems. Using participant-observation from court hearings in two different counties in California, combined with fieldwork in and surrounding the aforementioned regional child welfare systems, I look closely at the material and social significance of case records and other paperwork within these legal encounters. I use my ethnographic and archival data here to illustrate how certain courtroom related procedures and proceedings rely upon these case archives while also simultaneously determining not only the trajectory of the paper trail, but also the case itself, thus shaping the futures of social service participants – youth, families, and staff. Such legal determinations can mean that a youth may switch living situations within care, return to their families of origin, or exit foster care entirely. But also these decisions can serve to evaluate the case management itself, resulting in the removal of social work personnel from a case, especially in circumstances where negligence as well as conflicts arise, should abuse while in state care be reported.

This same chapter also untangles the dialectic relationship between the child welfare or foster care case file and the partnering legal court case file - two separate yet interdependent dossiers of authority. Both files are institutional records of the same case, but each pertains to the state entity that it serves and is beholden to. The child welfare case file is the documentation of information pertaining to a specific family investigation or open case involving a youth or sibling set in foster care. The related legal case file, is the court record of determinations or adjudications made regarding an existing child welfare case. These two objects that serve as containers of a series of other smaller objects like reports, affidavits, and receipts rely upon and

inform one another, as well as the settings in which they are often used like case management meetings, the ACR, and dependency court hearings. I chart the coordinated paperwork and case management that both versions of case files depend upon, and provide examples of how these two separate sets of case records inform and shape one another both within legal and social service administrative decision-making settings. In this exploration, I identify and examine existing literature within these legal contexts, such as informational brochures, leaflets, and webpages dedicated to articulating and outlining the purpose and process of court settings such as the ACR, for families and other interested parties like the volunteers of the nationwide Court Appointed Social Advocate program (CASA), or the Guardian ad Litem (GAL).

I draw from observations and interviews with CASA volunteers and staff providing additional contextualization of the court and case review process and the ways in which non-professionals may also be involved in documenting youth lives and the case management progress. One example is the optional court report that designated CASA volunteers may prepare and submit to the court on behalf of foster youth they are advocating for. Such production and dissemination of a supplemental document, which can eventually be entered into the court and case records, reveals the ways in which adult social actors in non-professional roles can generate and facilitate the official case record, with the potential to influence administrative decision-making of a given case and impact foster youth's everyday life to varying degrees.

Child welfare systems have their own 'meta level' analysis when it comes to evaluating their own paperwork and recordkeeping processes. In Chapter Seven I attend to the more pervasive audit culture of contemporary foster care administration and the privileged importance of gaining authoritative consent in the everyday decision-making processes of case management. Put simply, the organizational ideology of this kind of administrative context depends upon

authority and accountability, which is typically materialized in the form of a signature. Just as Hull (2012a) demonstrated in his research of urban city bureaucracies in Islamabad, Pakistan – a notation in a file like a signature or individual initials, not only grants permission or approval of administrative action, but also relocates the responsibility of such actions from the official who may generate or propose such decisions, to someone who is in an approved position of authority to sanction such activity in a given organizational staff hierarchy. Semiotically, a simple scribbling of someone's initials or a signed autograph, can indexcially represent permission, approval, or receipt of certain case decisions or case records, but can also possess legal or organizational authority and responsibility.

My focus here is to explain and unpack the internal and external monitoring technologies generated and executed largely through state determined assessment rubrics. Through examining the utility of "billable language" measured into "billable units of time", and the transference of this data from handwritten on paper to computer-generated online, communication between service providers like Williams Treatment Center and state departments is thus evident through the documents themselves (as in notations, commentary, autographic gestures) but so too is all forms of communication. That is, every e-mail, phone call, fax, or item of mail that is exchanged in reference to or on behalf of a client is recorded, copied, and collated in the respective case file, which at any point, may be audited by the IDCFS. These scales of communication – direct and on the meta level – highlight what I observed during my fieldwork.

I locate these tangible and measurable recordkeeping procedures at the local, state, and federal levels. Despite the highly qualitative and subjective nature of foster care service delivery and subsequent case management, it is clear that proof of adherence to documentation protocols is imperative and that organization-wide assessments by the state are based entirely on reviews

of existing paperwork. This is evident in the ways in which periodic audits of case files such as

the annual IDCFS Post Payment Review or less frequent IDCFS Medicaid Recertification

Review examined in Chapter Seven, involves the manual surveillance of case records like

flipping through binders and boxes of consent forms, clinical assessments, and case service plans

to determine that certain reports and forms have been filed according to established policies and

procedures. This emphasis on 'meta-documentation' – that is, recording recordkeeping activity

or documenting documentation - is further reinforced by the necessary post-review reports like

the *Fiscal Compliance Assessment Report* generated by contracted IDCFS compliance assessors

to further document the quantifiable evaluation of foster care agencies and their administrative

performance.

What is also clear when looking at these state audits are the financial relationships

between the state and care providers which are constantly mediated through files, contents, and

documentation of recordkeeping compliance. Therefore with this data, my study contributes to

the growing public attention regarding supervision and safety of youth in care, specifically the

recording patterns of system officials, illustrating the regulatory practices designed and intended

to prevent child abuse and neglect both in and out of foster care.

Such large scale review processes serve primarily to legitimate and financially reconcile

the services delivered to foster youth and families, drawing attention to the very monetary

implications of case-related recordkeeping. Through such efforts, we see that the state greatly

depends upon the accuracy and honesty of social services records through case records, due in

large part to the absence of state officials in most everyday care settings. However, at least

ostensibly so, these same audits also serve as a means by which the state can certify that cases

are being managed appropriately.

Emergent and unforeseen tough decisions are expected and often required by social workers involved in child protection. These range from initial determinations of whether or not reports of abuse or neglect are founded such as through "wellness checks" with families in their homes, to choices executed through ongoing case management like where to place youth in residential care while in state custody, or establishing and working towards case goals. Some of this decision-making can be detrimental to youth or families and fatal.

Tragic examples of foster youth experiencing abuse or neglect, even death, under the watch of the IDCFS and LADCFS have sustained public controversy regarding appropriate interventions. Like the 2013 death of 8 year old Gabriel Fernandez or Anthony Avalos's murder aged just 10 years, in 2017. After the highly publicized convictions of both mothers and their boyfriends, it was revealed that these young boys were extensively tortured and eventually murdered due to suspicions that they were gay. Despite open cases with the LADCFS for the two youth along with their siblings, and years of repeated investigations from child welfare workers, somehow these families were enrolled in the county "voluntary family maintenance" program, allowing youth to stay in the home while the parents receive social services (Agrawal 2018). After the passage of the *California Public Records Act* of 2008, heavily redacted highly guarded case records were made available to several news outlets and eventually led to the State of California conducting its own audit of these files in 2012. Unlike the unified IDCFS, each county in California has its own child welfare system, and LADCFS officials,

> "stonewalled their efforts for months, refusing to turn over records related to child deaths, prompting strongly worded rebukes from the state auditor, who said her office [in the state capitol of Sacramento] has statutory authority to review any and all records to which the county has access" (Agrawal 2018).

The audit revealed that the LADCFS broke state laws regarding the standard 30 day period to follow up for reports made to the agency regarding child welfare, and data from investigations often never made into the statewide Child Abuse Central Index (CACI)[3] to track households accordingly. Even after these findings, the LADCFS claimed they interpreted legislation differently and they had acted in compliance to the best of their organization's ability given high caseload demands and large geographic jurisdiction. Yet as LA County Supervisor Gloria Molina cautioned, that while "These are shocking cases … The biggest problem is that no lessons are learned" (Therolf and Christensen 2009a, 1).

Extreme horrors persist as seen regarding Semaj Crosby who at a mere 17 months old, was found dead under a legless couch in a "squalid" home last year in Joliet, Illinois, a mere two days after a contracted private agency caseworker visited her family for a routine home visit as part of their 'intact family services' plan (Charles 2018a). As with the LADCFS voluntary family maintenance program, the ostensible mission of this kind of case management, which roughly 2,700 children received statewide as of 2017, is to offer resources and oversight to keep investigated families together, and avoid the trauma of placing youth in strangers' homes. Semaj lived with her mother, three siblings (ages 10, 7, and 1), paternal grandmother, aunt and boyfriend, as well as two other young cousins in cramped and dilapidated state subsidized Section 8 housing, along with reported "bedbugs, roaches, and vermin" (Charles 2018a). The local sheriff's office described the home as "very deplorable" yet remarkably, the IDCFS case file notes that during the visit, "no obvious hazards or safety concerns" were evident (Charles 2018b).

Young Semaj along with 14 other children died from abuse or neglect from 2012-2017 in

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[3] This centralized database was created by the *Child Abuse and Neglect Reporting Act* (CANRA) of 1965, for state and local agencies to help protect the health and safety of California's children.

homes receiving such "intact family services" from not-for-profit organizations, after the IDCFS

entirely privatized the program purportedly geared towards family reunification (Jackson and

Marx 2017). This case management outsourcing is not uncommon for the IDCFS, however given

the sudden spike in youth fatalities[4], public outcry has called the evaluation and surveillance of

these efforts into question, and soon after followed the resignation of the IDCFS Director George

Sheldon and other changes in leadership.

The primary method by which any of these troubling cases are investigated and evaluated

is of course through review of the case file, as it is the sole instrument of accountability for all

parties involved – officials, families, and youth. However, an overall audit of intact family

services' case records shocked even the newly appointed IDCFS Beverly "B.J." Walker,

revealing that 10% of these youth were documented as mistreated while still living with their

families, despite their open cases. Surprisingly, in her new administrative role Walker admitted,

"That's very high … I can tell you this, it happens too much" (Jackson and Marx 2017).

Both of these conflicting examples from the IDCFS and LADCFS demonstrate the

limited capacity of the case file above all, to ensure youth safety and well-being. The records

either reflect the horrid realities that these youth had to endure, or the do exactly the opposite –

they misrepresent the conditions of their care. And, even when this paperwork does show

underperforming administrative oversight, the evidentiary value of the case file to institutionalize

and operationalize legal authority is usually quite insignificant. Federally, the U.S. Supreme

Court holds that "people who are in government custody have a constitutional right to safe

conditions during confinement and protection from injuries inflicted by others," and has

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[4] As compared to the single youth death spanning from 2007-2011, prior to the privatization of the intact family service case management (Jackson and Marx 2017).

"extended its ruling to prisoners, suspects in jail awaiting trial, and the involuntarily hospitalized mental patients," however,

> "The Court has not yet decided whether foster children have the same right to protection as prisoners, criminal suspects, and mental patients. However, nine federal judicial circuit courts have ruled that foster children, who are innocent of any wrongdoing, are at least entitled to the same constitutional protections, in terms of safe conditions of confinement, as convicted felons" (Kubitscheck 2005).

Given this legal vulnerability, a review of case records can then, serve to identify what foreseeable measures were or could have been taken in order to prevent abuse, neglect, or in extreme circumstances – the loss of life – for foster youth, either while in a foster care placement or if still with their parents via the care system. When egregious events occur involving youth in custody, the case file is usually the first information that it is reviewed to determine what went wrong. Yet, as government employees social workers are protected from personal liability for duties performed on the job, usually through qualified or in some states, absolute immunity from civil suits. In Illinois, IDCFS workers are afforded qualified legal protection through the *Local Governmental and Governmental Employees Tort Immunity Act* of 1965 (745 ILCS § 10/). The purpose of the policy is to prevent the diversion of public funds from their intended purposed to the payment of damage claims. This is accomplished by for the most part through immunizing local public entities and employees from negligence in executing their public duties (Huntington et al. 2014).

While there are suits brought against social workers, these are typically only in extreme cases where grave injury or even fatality has occurred while on the state's watch. And given the privileged status of the confidential case file, this record can be a source of contention when outside entities attempt to audit and assess what series of evens and decisions may have resulted in the harm endured by youth in question,

"Some children languish for years in abusive situations while the officials charged with protecting them either do not know what is going on or choose to see no evil, hear no evil, and write no evil in the case file" (Kubitscheck 2005).

Thus, there remains for many foster youth advocates concern over *whether or not case records are intended to serve and protect youth and families or rather, shield the staff and agencies that manage caseloads*. As will be described in more detail, not only are case records conceptually and pragmatically representative of particularities of a given foster youth and their individual lives, but they are also used in evaluating the performance and effectiveness of entire departments, agencies, and institutions. Therefore, case files implement a variety of functions and for different reasons across a range of settings.

While the daily delivery of public services such as foster care increasingly become outsourced to contracted private agencies, many of these programs simultaneously develop into public-private hybrid models of state care. With each increase in administrative labor and organizational hierarchy comes of course, additional paperwork. This ever-expanding documentation universe is the palpable reality social service providers must contend with.

To organize and interpret the ethnographic data in Chapters Four through Nine, I provide institutionally created and disseminated meta-documents like administrative "decision tree" diagrams and organizational charts of agencies and state departments like the IDCFS. I provide these illustrations to further enable my investigation into the materiality of this system, providing pragmatic understandings of case charts and files as circulating objects that mirror the movement of the people and resources surrounding these bureaucratic artifacts. Such visualizations of documentation activity also contributes to archaeological studies on documents and recordkeeping practices cross-culturally and the minimal attention that has been directed towards the materiality of custodial youth in U.S. history (Morenson 2018).

As personal records, case files serve as material representations of their subject's bureaucratic and organizational identity and therefore this project advances understandings of the importance of documents regarding ideas of personhood in modern and specifically, institutional life. Scholars interested in organizations, administration, and paperwork may learn more intricately about such care systems. Key to studying this institutional apparatus is unpacking the consequences of its documentation practices for the meanings of the things and people placed within it. For this reason, closer attention to these artifacts and the meta-documentation about them, contributes to child fosterage and circulation literature by expanding knowledge of modern states of care outside the family in the U.S. and contexts abroad that manage dislocated youth in increasingly bureaucratic ways.

While such administrative efforts to manage and care for socially displaced youth is on the rise, these state interventions still exist primarily in urban communities in the global south; which calls into question the utility or universality of formalized systems of care for children and youth. If there are so many contexts where young people are somehow cared for without the state – why do so many local governments, especially in densely populated areas, intervene in private family life to begin with? And, in what ways might such state efforts in the global south and elsewhere be inherently modeled on such problematic bureaucratized forms of state care as seen in the U.S., Canada, and Western Europe, of which this dissertation takes issue with? I argue that the growing paper trail of case management misleads child welfare administration towards a dehumanized approach to care for and support developing youth who require the parental guidance and nurturing that the foster care system has forcibly taken upon itself to deliver. My project demonstrates that despite best efforts to move away from large-scale total institutional fosterage as in orphanages of the twentieth century, a significant part of child welfare work is

oriented towards communicating and evaluating accountability of agencies through paperwork.

By design, the case file is an inherently personal document recording and tracking an assigned individual through the formal system of care. Legally, 'personal data' comprises any information traceable to individuals, including combinations of data. The content of this kind of file contains case-related records of not only foster youth but also any parties involved (families of origin, foster families, care workers, and related officials). However unlike files on individuals such as medical, criminal, legal, personnel, or education records, foster care case files chronicle the systemic life of subjects, who often lack access to these documents due to age and legal status as wards of the state.

And while once the age of majority is reached – adulthood – and former foster youth are given the legal right to access their files, I draw on my own difficulties in locating and attaining my case record, questioning why it is so bureaucratically difficult for foster youth to see their own case record – within and out of state custody. I interrogate the very subjective and individual experiences of case management through examining my failed attempts to get my complete case file – both from child welfare and legal, court records - in Chapter Eight. As a former foster youth, I situate my dual positionality as a prior documented-dependent-of-the-state turned researcher in order to provide a personal narrative to support and complicate my other ethnographic data.

Increasing regulation of research limits access to confidential records contained within case files. Due to this shift in ethical attention towards the protection of personal identifiable data, it has been argued that "the lives of these same individuals may go unstudied with the consequence that they receive less appropriate services" (Hayes and Devaney 2004, 313). Through archival and ethnographic exploration of interactions between documents, social

actors, and organizations this study reveals a number of important ways that the materiality and sociality of the case file itself has a wide-ranging, and generally unrecognized, impact on individuals whose lives are documented as well as officials whose careers depend upon their own documenting activities. My analysis focuses on the way files and recordkeeping practices are thought about, executed, and negotiated as well as the material effects of these records and practices on agencies, staff, youth, and families. Ultimately, my goal is to demonstrate the extent to which such documentation can change the experience of participants involved in the child welfare system in significant ways.

To my knowledge, the significance and value of records including the proceduralism that they require and reinforce (as opposed to the personal information they contain) has not been the subject of very much examination or scrutiny within the types of bureaucratic settings that are the focus of my research. Yet I argue, it is vital to ask what may seem to be obvious questions about the construction, circulation, and use of records and files within these court and state settings if, as has been suggested already, these documents act as mediators that "transform, translate, distort, and modify the meaning or the elements they are supposed to carry" (Latour 2005, 39 in Hull 2012a, 253). I hope that by looking closely *at*, not *through*, the role of documents and documenting practices in a specific bureaucratic system, I can make an important contribution to existing efforts by ethnographers to make documents and their consequences "analytically visible" (Brenneis 2006, 42, 2009).

Chapter Two

Documents and the Anthropology of Bureaucracy

"Illinois has been organized around the functions of government which can lead
to a confusing maze of services and uncoordinated outcomes. It should not be the
burden of the citizen to figure out how to navigate government, but the burden of
government to make it easy and intuitive" (Office of Governor Bruce Rauner
2015).

This chapter reviews and engages with the existing literature on documents as a kind of

material culture in bureaucratic life. Despite their pervasiveness, anthropologists have only

recently turned to documents as an important genre of organizational artifacts in ethnographies

of the state. This emerging research expands upon the existing ethnographic record of

bureaucracy as a field of inquiry (Brenneis 2004; Ferguson 1990; Handelman 1981; Herzfeld

1992; Schwartzman 1993; Strathern 2000; Verdery 1991). As these scholars have argued, this

historical avoidance of locating ethnographic research in and about bureaucracies is due in large

part, to how taken for granted these settings are for social scientists. Rather, it is vital to

recognize the significance of any administrative apparatus that comprises much of modern state

governments whose workings and effects may be examined and critiqued in ethnographic

analyses.

Sympathetically, Bernstein and Mertz (2011) acknowledge some of the reasons why

ethnographers have avoided state contexts of "administration, regulation, delegation" let alone

have ignored the 'redtapism' inherent in such systems. Such organizational structures and

processes often involve undue delays that take place in stale office buildings, packed with

cubicles and desktops, sandwiched in between photocopiers, printers, and coffee machines,

existing forever in either tidy workspaces or buried in cluttered glory. Yet it is precisely in these

circumstances that they plea, "The humanness of the human condition gets lost in the files, the

halls, the shufflings of bureaucratic administration," calling for ethnographers to revisit these

social spheres that have long gone underappreciated (Bernstein and Mertz 2001, 7). As paper

cannot work itself, I therefore shift the analytical focus away from solely the practices of social

actors in such organizational environments as seen in existing ethnographies of child welfare

(Glenn-Levin Rodriguez 2017; Lee 2016; Scherz 2011; Silver 2015), to the interactional

conditions of how people *and* objects like the case file produce contemporary social work

practice and experiences of daily life in this bureaucratized fosterage setting.

In order to examine the various forms of recordkeeping in one branch of the government

- contemporary foster care, I then must connect these kinds of settings to existing research on the

bureaucracy of formal organizations and institutions, and the more recent attention by some

scholars towards documents of various kinds like files, reports, affidavits, and identification

records. This includes recent literature on auditing cultures and studies of organizations as well

as bureaucratic technologies of evaluation and assessment. I join this scholarship in an effort to

revisit and reinforce the significance of not only documents themselves, but also the auditing

cultures and bureaucratized methods of assessment that have come to be expected of any state

run organization in the modern era. We see through the case studies that such bureaucracies

circulate their operations around organizational artifacts like case files in markedly similar ways.

Besides paperwork, one kind of social activity that is also evident across the literature on

organizational ethnography is the practice of formal meetings. As any social worker will tell you,

going to meetings comes in at a close second to filling out paperwork in their roles as case

managers. I therefore turn to Helen Schwartzman's seminal contribution *The Meeting:*

Gatherings in Organizations and Communities (1989), which provided the first theory of

meetings in the anthropological literature. While she examines meetings in formal organizations

in the West and non-Western communities with historically less formal meetings, much of her

attention is towards cultural understandings of meetings in American society. Therefore, my

examination of meetings in foster care administration joins the cultural notion that she

challenges, "that is, that meetings are a blank-slate phenomenon useful as a tool for such

functions as making decisions, solving problems, and resolving conflicts, but having no impact

on behavior in and of themselves" (Schwartzman 1989, vii).

More specifically for the purposes of this project, I turn to research that looks at

documents, like case files, as material objects with social lives (Appadurai 1986; Hull 2012a).

Additionally I rely upon theoretical contributions from ethnographers and archaeologists alike on

the concept of materiality (Miller 2005), that is the reciprocal ways that objects shape social life

and consequently, social life shapes objects. One analytical framework I find useful to examine

this sociomaterial bureaucratic life world is through semiotic theory. In the tradition of Charles

Sanders Pierce, semiotics "offers a way of thinking of the logic of signification that displays its

inherent vulnerability to causation and contingency, as well as its openness to further causal

consequences, without setting for the usual so-called 'materialist' reductionism" (Keane 2003,

413).

Through a semiotic approach, all communication occurs through some sort of social

interaction, which is always to some extent dependent upon the series of back-and-forth

reactions. Every response influences the next reaction and so on, and therefore emphasizes the

way all communication is in some way, a form of social action. Like the ethnographic

scholarship that approaches these materialized collectives of bureaucracies and organizational

artifacts as sites worthy of closer examination by anthropologists, I attempt to demonstrate how

semiotically the case file is dialectically influential to, and shaped by, the constant and

unpredictable nature of case management in foster care administration. It is precisely because of this triangulation between the document, the documenter, and the documented that the case record is a never fixed and always potentially negotiated – materially and socially.

I therefore follow in the footsteps of these other studies that socially analyze material things (Keane 2003). However, since the case files of my study serve an American state bureaucracy, I again defer to Schwartzman's attention to meetings in the U.S., as well as her attention to methodologies of conducting ethnographic research not only within but about organizations themselves (1993). Both of her books (1989, 1993) concern formal social hierarchies within various institutions, agencies, and companies, but given her additional expertise in research concerning youth in mental health public services in Illinois as discussed in Chapter Three, I am able to apply these contributions directly to the clinical contexts as well as meetings that I observed in the IDCFS. As will be elaborated more fully in the next chapter, I also participate with the ethnographic literature examining processes of child displacement, circulation, and fosterage in and outside the U.S., and use this work to develop my study of these kinds of processes. I do so by focusing primarily within the statewide Illinois foster care system, drawing also from fieldwork conducted in California dependency court settings, and publically available statistical national data from the federal Adoption and Foster Care Analysis and Reporting System (AFCARS).

Bureaucratic Institutions and the Anthropology of the State

Intellectual preoccupation with formal organizations and institutions has largely attended to the bureaucratic model of hierarchy, administration, and proceduralism. The earliest known uses of the term "bureaucracy" were however, pejorative. Etymologically French in origin, it combines the French word *bureau* – desk or office – with the Greek word κράτος (*Kratos*) – rule

or political power (Merriam-Webster 2018). Credited to the French economist Jacques Claude

Marie Vincent de Gournay, who was quoted as saying satirically, "We have an illness in France

which bids fair to play havoc with us; this illness is called *bureaumania*" (Raadschelders 1998,

142). Later in 1818 Irish novelist Lady Morgan referred to "the *Bureaucratie*, or office tyranny,

by which Ireland has so long been governed" (35). By the mid-19th century, bureaucratic forms

of administration were firmly in place across the industrialized world. It was at this time that

Karl Marx theorized about the role and critiqued the function of bureaucracy in *Critique of*

Hegel's Philosophy of Right (1970)[5].

The first to formally research bureaucracy was Sociologist Max Weber who in *The*

Theory of Social and Economic Organization (1947) famously conceptualized bureaucractic

organization as an aspect of administrative thought and a manifestation of formal order

according to obedience, rank, and orderliness. For him, bureaucracy refers to an arrangement of

responsibilities, deriving from the institutionalization of authority assuming the qualities of a

hierarchical organizational structure "rationally oriented by deliberate planning" to coordinate

the work of many individuals in pursuit of large-scale administrative tasks and collective goals

(1947, 158). For him and others it has been argued that there exists a "spirit of bureaucracy, a

bureaucratic mentality" (Hilbert 1987, 70; Weber 1947, 340) that embraces a well-articulated

command structure for an enhanced organizational vitality. Similarly, Hull more recently defined

a bureaucracy as a type of organization that "is a social form designed for collective action, a

social technology for aligning the efforts of a large number of people so they act as one" (2003,

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[5] Unpublished during his lifetime (except for the introduction in 1844), Marx commented on fellow philosopher Georg Wilhelm Friedrich Hegel's book *Elements of the Philosophy of Right* (1820).

287). As such, bureaucratic organization is intended (at least ideally) to operate relatively efficiently and formally.

It has also been argued in the Weberian tradition that bureaucracy operates as the "central process of Western civilization, the rationalization of human behavior, a process both unfillable and unstoppable" (Hilbert 1987, 70). Accordingly, the governing characteristic of all bureaucratic action is that individual social actors must perform assigned duties impassively, with the reliability of following the official rules as the greatest held organizational value. In order to ensure success within this larger structure, as a "collective agency from the agency of individuals" (Hull 2003, 288), officials must strictly follow the policies and procedures of their position, purportedly impartial during formal operations (Weber 1946, 223-224). Thus, within the corporate administrative machine, it is through this automatic and routinized processing of duties and engaging with others in a neutral perfunctory manner, that the actions of officials are designed and mechanized to ensure consistency in organizational compliance. Additionally, "credentials, fixed salary, tenure, stability of staffing," are typically required for, "efficient functioning" of a bureaucracy (Kilcullen 1996, 3). However, as Weber cautioned, organizational ends cannot always be an ultimately test rationality. Regardless of design and official capacity, no bureaucracy can operate fully through the moral ethics of a human being in everyday decision-making processes, great or small.

Over time, officials who work for any administration run the risk of becoming desensitized to the intricacies of subjective social needs. This certainly supports the organizational ideology of a bureaucracy – objective proceduralism. The world understood through a bureaucratic lens is only black and white, there is no gray area. But as Weber and others have argued, and as is supported through the ethnographic record, bureaucracies, like all

social institutions and formal organizations, are not substantively predictable or formulaic (Blau 1955; Douglas 1986; Lipsky 1980; Schwartzman 1980; Strathern 2000). Despite the objective of bureaucracies to function impartially and mechanically, one cannot disregard the fact that even the most experienced official who works for this type of organization is liable of making individual decisions that may dissent from official policy or procedures, or even produce mistakes, thus increasing the probability for inconsistent or unreliable performance over all (Selznick 1957, 123).

While bureaucracies depend upon their own internal functions – that is, their organizational culture and ways of doing things – many interact or must coordinate in conjunction with, outside bureaucracies as well. As Weber pointed out, across these interconnected systems remains a shared bureaucratic attitude. One bureaucrat to another more easily understands the importance of following procedure, enforcing order, and typically, processing some kind of paperwork. These officials are socialized into the same cultural framework – an emphasis on time, documentation, and the proverbial red tape (Gupta 2012) – as the notion of bureaucratic organization is especially pervasive in contemporary western culture especially (Handelman 1981).

Marx posited that while corporate and government bureaucracy seem to operate in opposition, in actuality they mutually rely on one another to exist; the corporation is civil society's attempt to become state; but the bureaucracy is the state which has really made itself into civil society, "The Corporation is the bureaucracy of civil society, and the bureaucracy is the Corporation of the state" (1970, ii, 45). Using outsourced call centers in India as an example, Sharma and Gupta argue that "While transnational corporations are key players in the circuit of outsourcing, national and regional states (both in those regions where outsourced jobs originate

and those in which these jobs end up) are also important actors" (2006, 3). Ranging from entry level work like "data entry, telemarketing, and transcription," to more valued jobs that involve "credit-card processing and customer interaction, such as responding to calls made to corporate help numbers," or those in more specialized roles, "like software development and testing…image interpretation conducted by radiologists," to accounting and legal expertise, these everyday work practices can also be understood to varying degrees as representations of the state, especially in relation to global forms of governmentality (Sharma and Gupta 2006, 3,5).

From immigration, public health, infrastructure, to land use , the "fiscal austerity, marketization, consensus, transparency and decentralization," characterizing contemporary state bureaucracies that reflect, "a global shift from state-provisioning to neoliberal disenfranchisement and the privatization of public goods," remain often obfuscated through public-private partnerships (Bear and Mathur 2015, 19-21). Despite what some have called the 'empire of bureaucracy' (Telesca 2015), showcasing the power of a supranational regulatory regime to fix, manage and reproduce inequalities, even if unknowingly, Zanker argues for "a post-Weberian analysis of the path-dependent realities of 'bureaucratic authority' to help us understand the seemingly arbitrary structural violence that state bureaucracies often enact" (2015, 81).

Supporting Marx's assertion that state and corporate bureaucracies inherently rely upon one another, Lynne Haney (2010) describes that this can be seen in the U.S. in which the government at city, county, state, even federal levels, increasingly outsources public services to private for-profit and nonprofit organizations. Through this redistribution of responsibility, the state regulates largely through audits and documentation to oversee performance and any service provision. Such is the case with Williams Treatment Center involving the IDCFS audits of case

files and other records I chart in Chapter Seven. In this way, even as the state has "devolved, decentralized, and diversified" many scholars argue that is it has not shrunk, rather Haney characterizes these hybrid forms of governance as "akin to satellite states – they circle and hover around the centralized 'mother ship,' relying on her for material survival, legitimacy, and authority" (2010, 15-16).

Yet, even if we accept that people who work within these structures are socialized into behaving like machines, how do we address the likeliness that some of them may need to interact with social actors from outside the system? As in the foster care system, we see that a multitude of other partnering systems like the judicial, medical, and educational systems, interact and coordinate with child protection and case management efforts. Each system, while sharing an overarching administrative ethos of policy, procedure, and paperwork, still holds some degree or organizational autonomy and culture, which requires any bureaucrat to learn and socialize themselves into. Beyond bureaucrat to bureaucrat, child welfare also involves the case management of youth, families, and foster parents – who occupy a non-bureaucratic space and therefore, are positioned differently to the care system (and subsequent related systems), and therefore "the bureaucratic uses of documents often assume that someone outside the organization will have a rather different relation to the subjects of their documents" (Heimer 2006, 97).

How then with the vulnerability of external social forces, are modern bureaucracies defined and evaluated? In what ways is the humanistic element of bureaucratic life integrated into policies and procedures of the organizational structure? And how does one form of bureaucracy – human service delivery systems – operate as formal organizations that inherently handle unpredictable and variable social service needs of a broader public? Locating my focus on

paperwork then, I argue that the time, attention, and care given towards the case file and case-related recordkeeping showcases this materialization of social life and the necessary accommodations that bureaucrats and other social actors must make in order to fully participate and succeed in foster care.

Traditionally theorized, these professional collectives serve to standardize, routinize, and officialize. Yet, as increased attention to the anthropology of the state has shown, such encounters with the state are not always appreciated for transparency or efficiency to the outside public, let alone for officials within. As seen in a government department that is greatly understood by the public as "illegible", Colin Hoag (2010, 2014) drew attention to the frequently underrepresented perspectives of low-level staff in the Immigration Services Branch of the South African Department of Home Affairs. Not only did he give attention to officials in overlooked positions at this agency, but also highlighted the ways they negotiate the sociomaterial demands of such a proceduralized setting. The primary function of these staff was to process travel visas. Stemming from the Latin *charta visa* meaning "paper that has been seen" or "verified paper", a visa is a secondary travel document[6] that certifies a noncitizen is permitted to appear at a port of entry to apply for permission to legally come into a foreign country and remain there for a specific amount of time. A significant amount of identification documents or "IDs" and other records are required in this process. From these observations, combined with his own critique of existing ethnographic research in such settings, he argues that "Understanding bureaucracy, for all involved…requires an attention to this confluence of materialities (physical structures, technologies), discourses (personal assurances, rules, laws), and the experience of time" (Hoag 2011, 86).

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[6] In general, the passport is considered the primary international travel document.

Following Hoag, my analysis here attempts to ethnographically bring together paperwork as a material artifact, narratives about paperwork, and the temporal unfolding of life around paperwork. I do so by sharing a variety of perspectives gathered and demonstrated through my participant observation and interviews with a spectrum of social actors connected in some way by and through foster care. In particular, I argue the case file management process scrutinized here emphasizes the clear connection between social and material tools of bureaucracy, which mark a present, and notions of the past and future (real or imagined). Continuing Harold Garfinkel's exploration of bureaucratic recordkeeping described below, central to my project is uncovering and examining, "the way moments of document creation anticipate future moments in which documents will be received, circulated, instrumentalized, and taken apart again" (Riles 2006, 18).

Accordingly Hoag encourages attention redirected toward a "temporal reorientation of bureaucracy studies – from retrospective analysis of outcomes to prospective analysis of states of possibility manifest in moments of bureaucratic waiting" (2014, 410). In the context of his work involving visa agents in South Africa, it is shown how "a key aspect of bureaucracies is their ability to make clients wait, and yet there has been little inquiry into the role of waiting in the anthropology of bureaucracy" (2011, 86).

In her work investigating the role of paperwork in two U.S. Neonatal Intensive Care Units (NICU), Carol Heimer found that certain documents and artifacts, especially those materialized around the birth of an infant, "are particularly important in creating the sense of time and historicity that undergirds our understanding of how a human life unfolds" (Heimer 2006, 102). Conversely at the opposite end of the lifespan, when an unidentified body or human remains are found, a mere paper toe tag might document the "Jack" or "Jane Doe" as such at the

local morgue or coroner's office. The reality is, much of modern life is heavily documented – whether we like it or not.

Hoag is not alone in his efforts to showcase the taken for granted bureaucrat. Take Richard Harper's investigation into the somewhat hidden world of the International Monetary Fund (IMF) and the ethnographic analysis of how certain ideologies about IT systems influence the enabling (or disabling) of access to certain records in *Inside the IMF: An Ethnography of Documents, Technology, and Organizational Action* (1998). Like Hoag, Harper sought to bear witness to such staff in action in order to better understand the recordkeeping practices and role of IT in this context, but also as a means to appreciate how this is also a site of labor, a convening of people at "the Fund" (as it is often called). The most well known employees are attending to international monetary affairs, while often overlooked and overseen low profile staff keep the digitally dependent data bank up and running – attending to computerized information management systems in the basement.

Similarly, the constant and emergent social scenes in which foster care case files are co-constructed remain inherently embedded within particular varieties of organized practices that are seen elsewhere in bureaucratic settings (Harper 1998). As in Weber's time, as it is now, "the formality, the designed, planned and organized character of formal organizations depend heavily on documentary practices, which co-ordinate, order, and provide continuity, [to] monitor and organize relations between different segments and phases of organizational courses of action" (Smith 1984, 66). Despite the centrality of recordkeeping and the attributed ability of documents to generate and sustain administrative cohesion, with social actors behind the documents in supporting and interchangeable roles, the ethnographic record of the anthropology of the state shows, "we cannot take organizational records as objective accounts; they are instead accounts

that are locally produce and used. Both the universal and the local are present simultaneously"

(Heimer 2006, 96).

One growing purpose for which such organizational paperwork is understood and

anticipated, is the potential audit of the recordkeeping behavior itself, at later moment's time, by

possibly different groups of people, for various purposes (see Chapters Five and Six).

Approaching organizational artifacts like documents as multidimensional objects that facilitate

social activity such as audit behavior, I join the ethnographic record in expanding knowledge

about these kinds of sociomaterial expectations and how they are communicated, reinforced, and

sometimes, contested.

While both Hoag and Harper draw our attention to the support and service staff

frequently obscured in bureaucratic settings such as a visa office or the IMF, they also

demonstrate how organizational position and knowledge determine the practices and outcomes

of these everyday decisions. Whether hard copy or digital, in any of these contexts – the local

child welfare jurisdiction for example – users of personal documents like case files require a

frame of reference upon which an understanding of appropriate documentary engagement is

established and reinforced**.**

Activities involving typing, writing, inscriptions, and notations are essential to the very

fabric of the case file as well as files and other types of documents more generally (Riles 2006;

Turner 1974). This documentary formality has also been articulated as a situation of related

"aesthetic commitments" whereby social actors like staff, clients, or consumers coordinate their

interactions to achieve material accomplishments like completing required paperwork, in the

correct way (Henderson 1999; Kinross 1989; Riles 2006, 19). These rules of form have been

argued to administer and manage, "the belief in simple forms, in reduction of elements, apparent

not for reasons of style but for the most compelling reason of need – the need to save labor, time, and money and to improve communication" (Riles 2006, 19). Not only does ethnography afford opportunities for anthropologists to participate and observe how such administrative behavior is learned or disputed, but also how such organizational socialization is reinforced through document-based monitoring. Social workers, like other bureaucrats, come to understand what is important and what is not, by engaging with these objects and people in such bureaucratic cultural environments.

First and foremost, descriptions, inscriptions, and notations within the case file serve to convey information, but such a recordkeeping object joins the ranks of other kinds of documents in the ethnographic record through the ways in which it performs additional social actions, beyond merely data storage and sharing. Indeed, case files are intended to trace and fuel case-related activity, including the determination and dissemination of this information. Yet, regardless of the kind of form or who is filling it out, such human/non-human encounters are mediated by the organizational system in which they exist (Latour 2005).

Through bureaucratic discourse and pragmatic forms, the very composition of the lexicon and narratives depicted within this personal document is systematically preordered to meet the expectations of bureaucratic aesthetics like transparency, order, and uniformity (Handelman 2011). In other words, how staff and administrators approach, interact with, and modify case records is intended to be in accordance to established rules, policies, and organizational conventions. Staff become preconditioned to expect procedure simply because everyone anticipates that there is a certain way of doing things. The term "best practice" has even emerged as bureaucratic-speak for a method or technique that has been accepted as greatest to any alternatives. Practices that are deemed by organizations or individual staff as "best" are given

this rank because they are understood to produce results that are superior to those achieved by other means. Another reasonable explanation for how a method achieves the "best practice" status is that it has become the standard way of doing things, such as acting in compliance with legal requirements, but not necessarily due to any empirical superiority. Lest we forget that any conceptualization of supremacy, let alone concerning an administrative process, is entirely subjective, without a standardized or shared rubric to evaluate whether or not a business practice is in fact, the "best." In foster care, like all social services, so-called best practices often mean what colleagues claim works and what does not.

On case notes for example, within such established or adopted practices, what results are particular categorical records (such as in diagnostic mental health assessments) and indexed meanings or inferences from these diagnoses or recorded observations ("client has failed to adjust" or "youth is thriving"). Therefore within the case file, how lives and social activity are reported and evaluated is inherently shaped by these linguistic organizational conventions that are recognized and privileged as legitimate either through the state or internal institutional forces. Some of these constructions may exist as bureaucratese or clinical jargon, but they may also be present in the very composition and organization of a given form of paperwork. Such that, a paper-based form potentially allows for non-text-based notations and stylistic nuances (such as style of handwriting, underlining, highlighting, or notes in the margins – so as to draw attention or emphasis). Alternatively, a digital reporting format (like within a database online or a document on shared server), may only allow the use of certain preapproved clinical terminology or "billable language", and even limit the number of words or characters allowed for a given data field as discussed in Chapter Seven.

While Phillip Selznick (1957) argued that bureaucracies are not and cannot function like machines as individual agents perform the structural operations, Hull holds that within bureaucratic structures, it is the corporate agency that is ultimately realized through the "documented participation of different [individual] actors" (2003, 288). Collectively, such documentation serves and depends linguistically and pragmatically on "an impersonal tone, and to eliminate information about who is responsible for what," through the utility of abstract nouns and passive verbs (Hull 2003, 288). Garfinkel (1967) characterized early on this institutionalized assemblage of records as consisting of a series of negotiated coding rules (standardized terminology, grammatical conventions) that serve first and foremost to document the past and present in anticipation of the future. Like Hoag, Garfinkel championed early on the temporal analysis of documents in these kinds of settings.

The ethnographic record reveals that one increasingly prevalent anticipated future is the use and review of a given bureaucratic record for individual and organizational auditing activity (Gupta 2012; Hull 2012a). As the case reviews and audits at Williams Treatment Center demonstrate in the following chapters, case records serve to not only document the progress or issues that emerge for their youth residents, but also are created and treated with a future potential survey of these files from the outside authority of the IDCFS in mind. What such organizational level audits serve, is to monitor and review the overall performance of the contracted agency, ensure that state procedures were followed, and physically show that the service provider has been acting in accordance and compliance with the policies established and enforced by the state. This process requires the empirical examination of a given set of randomly sampled individual case files (see Chapter Seven).

Another anticipated use of the case record is its legal significance in dependency court proceedings. As will be described in more length in Chapter Six, the foster care case file has a close relative – the legal file, which is simultaneously informed by but also influential to, the foster care case file. Temporally, the authorized case service plan typically prepared prior to and determined during the biannual administrative case hearing, leaving the child welfare case file susceptible to scrutiny by the court at any time. Legally then, it is ultimately the decisions and documentation approved and officialized through the court bureaucracy – the dependency court – that holds the greatest administrative power.

Garfinkel noted the power relations inherent in the filling out and signing of paperwork, observing a perception, "that agency lies not with them [the responder] but with the document technology," an interpretation that locates power in the paperwork itself (1967, 168). Indeed, expertise and power are constructed within my fieldsite settings - social welfare offices, clinical and legal contexts - in specific and pervasive ways. Paradoxically, while the purpose of bureaucratic processes is efficiency, the administrative concept has come to be associated with the opposite – rather, a slowing down or gumming up of procedures. This social fact reflects one way in which bureaucracy and paperwork operate as its "main mechanism and dominant emblem," producing forms of temporality specific to the state fostering process (Hull 2012b, 12).

Auditing Cultures and Bureaucratic Assessment

Within the federal, state, and in some areas, county level, human social service agencies that oversee child protection and foster care services, are intended to address not only the quality of direct services provided by social workers and other care staff, but also seek, to improve accessibility, accountability, and coordination among professionals and organizations connected to one another through these public programs.

In *Audit Cultures: Anthropological Studies in Accountability, Ethics and the Academy* (2000) Strathern and others, review the organizational logics of management and auditing by demonstrating these bureaucratic cultures' dependence on precepts of economic efficiency, ethical practice, and transparency. From financial institutions like the IMF, to the "coercive accountability" of higher education, one kind of assessment procedure – the audit – is shown to have social consequences, intended or otherwise. Despite the more obvious ways that audits function by "locking up time, personnel and resources, as well as locking into the moralities of public management," she argues that "by themselves audit practices often seem mundane, inevitable parts of a bureaucratic process. It is when one starts putting together a larger picture that they take on the contours of a distinct cultural artefact" (Strathern 2000, 2).

In Paraguay's transition from the post-Cold War era to democracy, Hetherington traced the privilege afforded to transparency in efforts to "depoliticize" state archival records during encounters between peasants, bureaucrats, and development experts, and the issues that emerged concerning,

> "how governments ought to organize communication and interpretation … as documents do not store information so much as make it possible, and the state power is therefore not about seeing or inscribing so much as it is about controlling who reads what and under what circumstances. Information, in other words, is the quality of a document that always belongs to the document's future as a form of possibility" (2011, 151).

The central focus around such "guerilla auditors" he argued, were how such state records are used to distinguish model citizens from those that are not, focusing on rural land owners and the creative measures they ensue to circumvent these concerns,

"Documents are artifacts with many qualities which can be momentarily actualized as information in the multiple readings, negotiations, and tussles into which they are introduced. The insight of guerilla auditors is never to see documents as the end point, but as the site of possibility, not a store of information as a static thing but as a tool for making its as a political effect" (Hetherington 2011, 166).

As with these studies that have revisited the supervisory capacities of audit cultural life, so do I demonstrate here that case records are not only used to audit individual case progress, but they may also serve as documented movement of staff, administration, and organizational performance. Such is certainly true in the context of Williams Treatment Center. As discussed in Chapter Seven, case records are reviewed routinely on a semi-annual basis to determine how effectively and accurately case management and other administrative staff have processed necessary state required paperwork. A key element to this kind of institutional audit is the extent to which certain kinds of data and notarizations have been acquired or at least have been attempted to be included (such as through showing documented proof of such efforts in lieu of the actual information). Whether a signature, fax cover sheet, or specific kind of form, all of these required elements are tallied, further recorded, and compiled into a quantitative numerical evaluation of a contracted or partnering agency's overall administrative performance. One example is the *Post-payment Review Summary*, prepared after a service provider's audit of clinical billing records submitted the IDCFS for payments regarding mental health services. If after a poor review, an organization proves unable or unwilling to adhere to the stipulated paperwork requirements, they may lose their license or partnership in providing foster care services - the ultimate consequence of this audit activity.

Despite the prevalent notion that paperwork is necessary to record and implement administrative ends, Weber and others have illustrated that such tools of bureaucracy often

function in ways that would not be considered systemic, as "an enterprise is always faced with the question as to whether any of its parts is operating irrationally … and why" (Weber 1947, 204). In Heimer's work in the NICU involving critically ill children, she focused on the function of medical documents in this clinical routinization culture arguing "Just as people continue to earmark money, the most liquid of assets, giving it a social as well as an economic meaning, so do people use documents and categories of bureaucracies for very unbureaucratic purposes" (2006, 96).

Examples of using paperwork for 'unbureaucractic purposes' within foster care might include social workers gathering around a newly forwarded photograph of a previous foster youth that was under their case supervision or structuring a group therapy session where youth get to see their own birth certificates for the very first time. As Cherise, the lead therapist at Williams Treatment Center explained to me,

> "Sometimes these kids find out that their own name, THEIR OWN NAME! has been misspelled all this time, or that they've been celebrating the wrong birthday for God knows how long. I mean, how awful is that? Some of these kids have so little of their own-own stuff, you know? They move from placement to placement, and one social worker probably just made a typo along the way and no one even noticed. It's hard sometimes. Really hard for these kids, especially our clients since they have so many other issues to deal with, on top of learning your birthday YOUR SPECIAL DAY! The one day you look towards, the one day you might forget about everything ab-about you know, living here at [Williams Treatment Center] for a few years and then onto the next placement. That's why I use their birth certificate in these sessions. It's both exciting and can be very triggering at the same time. I try to provide a safe space for them to process it all."

According to Cherise some youth also find out the names of birth parents, or tragically, see that for some, the paternal information is "unknown." Former foster youth in my interviews, recounted the very realization and, in some cases, the constant reminder of "having a record" and "knowing that anything you did, or whatever they said you did, was in there." As is elaborated

more fully in several examples in Chapters Six and Nine, this unintended consequence of having a record, or the awareness by self and others that you do – can be mere grounds for a future family investigation by child protective services or resurrected later in a court of law.

Issues of access to case file records are elaborated more in the following ethnographic chapters, but the corpus of literature reviewed in this chapter reinforces the reality that in most circumstances, bureaucrats are positioned differently in relation to confidential records, often putting clients or subjects of such records at a disadvantage to their own potential use of this privileged information. As well, in human service bureaucracies where assessment, need, and risk are frequent metrics of social service qualifications and delivery, those that work more directly with recipients of such programs like "street-level bureaucrats" (Lipsky 1969) approach such records as objective evidence to support any diagnosis, claim, prescription, or organizational decision (Miller 1991, 9).

In a similar vein, Heimer contends that "we should see routinization, indeed bureaucracy, as a variable and by noting that objects can be understood simultaneously as cases and as individuals with biographies, depending on who is doing the looking, which documents they use, and what they do with those documents" (2006, 97). Such a concept, that an organizational artifact like the case file may have its own history, even biography, especially dependent upon who is using it and why, is the primary focus on this discussion. And consequently, these same information-generating and knowledge-keeping objects, may just as likely be misunderstood and interpreted differently by various social actors.

In his work and review of other ethnographies of the state, Hoag draws attention to the common indecipherability of bureaucratic methods and logics, echoing Weber's emphasis regarding the "opacity [that] empowers bureaucracies and bureaucrats…with control over the

flow of information and resources" (2011, 82). And despite attempts towards transparency as seen in Hetherington's Paraguay example on guerilla auditors, it is evident that a certain degree of bureaucratic finesse is necessary to truly understand and anticipate the effects and results of any policy and procedure. Things like paperwork, and the social actions they perform, may not always be as they seem.

Other recent political and legal anthropology literature has shown how the production of government documents such as environmental assessments (Li 2009) and identity paperwork (Cabot 2012, 2013, 2014) operate as both a "cultural practice as well as cultural material" (O'Reilly 2011, 216). This is especially the case for when such records are used for reference and review in such audit cultural contexts. Closer examination of these processes and their material results, helps identify and demonstrate not only how such activity is performed, but by whom and why.

One way to imagine such a state bureaucracy in Monique Nuijten's (2003, 2004) terms, is as a "hope-generating machine." Like Hetherington, Nuijten's ethnographic work in Mexico (2003) explored the balance of power between the state and local communities, with particular reference to societies in the developing world. She shows how rituals of bureaucratic power and accusations of corruption give flesh to incredible fantasies and conspiracy theories among officials, peasants, and brokers. At the same time, she demonstrated that in this labyrinthine world of bureaucratic obstacles and state control, local agrarian communities manage to find certain room for autonomy. One key aspect of the development bureaucracy context she argues, is the capacity to generate optimism, "in which all the time the limitations and failure of past programmes are admitted, together with [development] projects that indicate the 'new way

forward'," and thus suggesting, "that now the 'missing factor' has finally been found, that the right knowledge is being produced and that things will be different from now on" (2004, 52).

Similarly in a state bureaucracy involving child welfare, typically some sort of formal intervention into private family life has occurred, due to a variety of reasons, but most commonly happen to address a problem domestic in nature. An inherent suggestion in all cases is that state involvement brings a promise of improvement to the family dynamic, either by removing a child from a living situation, or providing social services to address the unmet needs of the family. However, as demonstrated by Nuijten in development bureaucracies this "never-ending cycle of high expectations" is frequently "followed by disillusion and failure" (2004, 51). Characterizing any bureaucracy as a machine metaphorically, is -- following the work of Michel Foucault (1979, 1980) and James Ferguson, "to capture something of the way that conceptual and discursive systems link up with social institutions and processes without even approximately determining the form or defining the logic of the outcome" (1990, 275).

This hope-orientation of the bureaucracy is also based on the potential that the system of rules and processes may also offer endless openings, and that officials are always willing to initiate procedures. In the context of foster care, the network of bureaucracies functioning as an interconnected positivity-generating machine gives the message that everything is possible, that cases are never fully closed, and that things will be different from now on. The bureaucracy never says no and creates great expectations. Yet, as with most bureaucracies, many promises are never fulfilled. Rather than producing a certain rationality and coherence, the bureaucratic machine may generate enjoyments, pleasures, fears, and expectations. Such fears and expectations form part of the future-oriented milieu of the fostering process explored here. Therefore one particularly useful approach to studying these processes is analyzing the interplay

between bureaucracy and temporality, a relationship especially relevant to an ethnographic study of the future-oriented case management context.

In addition to studies of institutions and organizations, in medical and psychological anthropology especially, clinical bureaucratic settings, have received a newfound ethnographic interest (Brodwin 2008; Chua 2012; Floersch 2002; McKay 2012; Oldani 2004; Risse and Warner 1992). Along with current advances in the anthropology of social work (Carr 2006, 2010; Lee 2016; Longhofer, Kubek, and Floersch 2010; Scherz 2011; Silver 2015), this body of research provides examples of technologies of monitoring and compliance by state and affiliated organizations, including the distribution and tracking of psychiatric medication (Brodwin 2010) and patient consent forms (Jacob 2007).

Following these investigations, this dissertation examines how through formal regulation and procedure the case file becomes and is managed as a legal, fiscal, and in some contexts, a clinical document that artifactually represents the presence of the state itself. While a foster parent or direct care staff may not actually be a state employee, through the services they provide or monitor, they represent and embody an extension of the government apparatus. Operating as a bureaucratic "communication system organized hierarchically" (Martin 1989b, 41), case management breathes and lives through the various branches of foster care services that reproduce its paperwork. In this way, what I attempt to show here are the ways in which social behavior of foster youth and foster care officials is codified and translated through administrative documentary text in order to "make a society legible" to the state (Scott 1998, 2). Or, as Foucault would argue, these recordkeeping ideologies enable and encourage governmentality – the way in which the state exercises control over or governs society. As described in more detail in Chapters

Five through Eight, the case file's very purpose is to supervise and influence those that document and are documented.

An alternative to the bureaucracy as a hope generating machine, is the viewpoint that such organizations are full of a different kind of future-oriented possibility. Introduced before World War II and continuing to play a role in world affairs during the Cold War, the widespread use of kompromat is one of the characteristic features of political life in Russia and former Soviet states. *Kompromat* is a portmanteau of the words for "compromising" and "material," as well as a double entendre relying on the fact that "mat" is not only an abbreviation for the word *materialy,* meaning materials, but also a Russian word for profanity. This compilation of potentially damaging material typically includes information or records used to gain or maintain political control over an opponent or public figure, often acquired through espionage, the practice of spying or of using spies, typically by governments to obtain political and military information. Here, the outright intentionality of this kind of file is to convey and exert power. This damaging record is frequently sexual in nature. In fact, Katherine Verdery (2013) discovered that after more than three years in Romania in the 1970s and 1980s conducting ethnographical research in the province of Transylvania, her presence and activity produced almost 3,000 pages of informer reports, surveillance logs, and transcriptions of telephone conversations gathered by the government.

Eventually Verdery requested a copy of her file in 2006 and her dissection and exegesis of it forms the inspiration for, and the basis of her ethnography on the "*Securitate*", the secret police agency of the Socialist Republic of Romania. This exceptional insight into the role of the file in communist secret police state work offers an invaluable personal reflection by the subject of such a file. It also enriches the interdisciplinary scholarship on the politics of knowledge *vis-à-*

vis such a kind of artifactual object as a personal file, as well as the consequences of its existence and potential use. This poignant example also supports the argument that one of the more reasonable explanations for why such organizational artifacts like documents and paperwork have the tendency to go unacknowledged by ethnographers is simply because anthropologists, like the bureaucrats they may study, have become desensitized to the ever present redtape during fieldwork, but also in the everyday.

Documenting Bureaucracies and Organizational Artifacts

Weber contended that "bureaucratic administration means fundamentally domination through knowledge," accomplished primarily by the "production and circulation of the documents through which regulations and laws are exercised," which may in turn be simultaneously tools of "appropriating (or misappropriating) some of the means of administration," for government bureaucracies (Hull 2008, 503; Weber 1978, 225).

The ethnographic record provides examples of the social systems and practices developed by the actors within bureaucratic and institutional systems designed to provide social, psychological, and medical services to children and adults (Buckholdt and Gubrium 1979; Carr 2009; Douglas 1986; Garfinkel 1967; Goffman 1961; Handelman 1978, 1979, 1983, 1987; Harper 1998; Heimer 2006; Hull 2003; Riles 2006; Schwartzman and Kneifel 1985; Schwartzman et al. 1984; Zimmerman 1969). Collectively, these analyses draw attention to particular similarities in how 'care' is approached in these settings and in the foster care system, some of the defining characteristics of which remain: surveillance, appropriation of time, therapeutic programming, the demarcation of space (private versus public), and a strong emphasis on documentation.

According to Jane Guyer, "For progressive political as well as critical academic reasons, it is the document, at least as much as the commodity, on which anthropology needs to focus ethnographic attention as the fetish of the modern economic era" (2004, 159). Riles echoed this sentiment, arguing that "documents appear at every turn in the constitution of modern bodies, institutions, states, and cultures" (2006, 5). Del Rosso asserted that documents as "texts are vehicles that stabilize institutional resources and, particularly, constructions of reality" (2011, 182). This is important because the case record proclaims officiality and determination regarding youth in custody or families under state surveillance. The foster care system thus affords an under-utilized lens through which to view the multitude of fraught interplay between documents, commodities, power, and knowledge.

Hoag again observed that similar to the way that anthropologists interpret and author social worlds according to formal and informal codes of conduct (such as employing ethical guidelines, methodologies), so too do street-level bureaucrats such as social workers scrutinize their clients' appearance, statements, and actions in determining whether or not to provide services according to laws, regulations, and professional norms (2011, 84).

In Summerson Carr's work in a Midwestern drug treatment program, she explains the complicated negotiation process that clients, often poor single mothers of color, had to master in order to succeed in properly presenting oneself as a "recovering crack addict" worthy of social services through public aid programs (2011). She argued that regardless of being in a sober state, the mere performance of an "interpellated identity", such as meeting the expectations of what a recovering drug addict should look, talk, and act like, was just as important, sometimes even more so than giving a clean urinalysis or passing a "piss test." Such anticipatory interpellation involves the process of foreseeing how as recipients of care, one is likely to be socially

positioned within service settings and preemptively responding to that positioning. Her study

revealed that the more seasoned and experienced clients were more likely to receive or continue

necessary support services (housing, food, and childcare subsidies). According to Carr these

service provision achievements were more frequent for women that successfully anticipated the

ways in which staff or board members thought someone who is addressing substance abuse

issues should present themselves as deserving of continued support towards recovery.

Riles too notes a connection between the study of documents and anthropological

knowledge: "To study documents, then, is by definition also to study how ethnographers

themselves know. The document becomes at once an ethnographic object, an analytical category,

and a methodological orientation" (2006, 7). In this way, as already mentioned, I have much in

common with many of the street-level bureaucrats I observed and interviewed for this study as

most were used to collecting, completing, and filing necessary consent, financial, and clinical

paperwork. So much so in this regard – an ethnographer fit right in.

Intellectual and ethnographic interest in documents and other bureaucratic artifacts, while

historically underappreciated in the anthropological record, did draw some attention in earlier

scholarship, lest we forget the work of ethnomethodologists Garfinkel (1967, 1974), Stanton

Wheeler (1969), and Don Zimmerman (1969) who challenged conventional understandings

about the types of information documents like case files contain and how these kinds of records

are used by institutions and individuals who produce them.

Wheeler produced an edited volume that examined the sociological significance of

recordkeeping *On Record: Files and Dossiers of American Lif*e (1969), which showcased not

only the pervasiveness of bureaucracy in the U.S. but, with the help of fellow ethnographers,

provided qualitative research of these processes in a variety of important institutions: schools and

universities (Alvarez and Moore; Clark; Goslin and Bordier); consumer credit agencies (Rule, Caplovitz, and Barker); general business organizations (Berg and Salvate), and life insurance companies (Ross); military and security agencies (Little; Orlansky); the Census Bureau and the Social Security Administration (Steinberg); public welfare agencies (Zimmerman), juvenile courts (Lemert), and mental hospitals (Erikson and Gilbertson).

In his contribution, Zimmerman observed the significance of paperwork during the intake process of a public welfare agency in a large western U.S. city. The primary function of records in these encounters he demonstrated was to establish and determine if state assistance is needed, such as housing, food, or medical care. He explained,

> "before any assistance can be given, especially where public money is involved, the need must be established. A case must be built to justify the decision of the agency, whether it is to provide the applicant with all the aid he requests, some portion of it, or deny it to him. In short, the applicant must be shown [via documentation] to meet the eligibility requirements of the program in question" (Zimmerman 1969, 319).

Further, one important point Zimmerman illustrated is the privileging of some records over others in the public aid context, "not any piece of paper will serve to establish objective and factual grounds for administrative action. What is it that confers upon a particular piece of paper its authority for the determination of matters of fact," and in questioning in what ways "do such records achieve the authority of objective and impersonal accounts of persons' lives? What features give them currency, i.e., permit their utilization in varied contexts distinct from the special purposes for which they were originated" (1969, 321)? As he argued then, and I assert now, these issues can be illuminated by close examination of the daily rounds of work in a social service setting like foster care.

When Garfinkel examined records in U.S. out-patient psychiatric clinics, he suggested that contrary to our expectation that items in clinic folders describe a specific past or ongoing relationship between personnel and patient, items in these documents he argued, were rather "tokens that could be arranged and rearranged in a number of different ways depending upon the purposes, interest, and questions that might be put to them in the future" (1974, 123). Thus, the assumption that clinic records serve only to document the past, ignores how they also anticipate certain futures, such as treatment outcomes but also social behavior of clinic officials and clients. And as he highlighted, as a token, any document in this kind of setting, can be created, referenced, altered, and used in a variety of ways by different staff and also, potentially, clients themselves.

In *'Good' Organizational Reasons for 'Bad' Clinical Records* Garfinkel calls into question the assumed circumstances for why certain paperwork may or may not appear 'good' or 'bad'. Ultimately though, he is concerned, like Zimmerman, with the privileging of these organizational records, arguing that "But whatever the use or misuse of records, they attain their significance largely because they are regarded as official, authoritative accounts," and further that ethnography is one research methodology that can "show how they achieve this status in the setting of their production and use" (Garfinkel 1967, 321).

Practically speaking, Garfinkel (in Turner, 1974) reported on the 'normal, natural troubles' that may be encountered by the researcher in attempting to utilize clinic records for research purposes,

"Any investigator who has attempted a study with the use of clinic records, almost wherever such records are found, has a litany of troubles to recite. Moreover, hospital and clinic administrators frequently are as knowledgeable and concerned about these 'shortcomings' as are the investigators themselves…the term 'normal, natural' is used in a conventional sociological sense to mean in accord with prevailing rules of practice" (114).

Examples of these 'normal, natural troubles' are those encountered by researchers themselves, in trying to collect information from clinic records. Not only is this kind of red tape presumed in modern day human subject research, but it is heightened by predetermined categories of risk, similar definitions or understandings of which have been shaped and influenced by prior research concerns, but are also reflected in the kinds of 'risk assessment' that operate in everyday social work case-based decision-making (Scherz 2011).

Garfinkel went on to explore the moral and practical organizational rationale for this mode of recordkeeping, such that there can seem to be 'good' reasons for what may appear as 'bad' paperwork. For example, one 'reason' for bad records is the idea of the "marginal utility of added information" – personnel may not understand the purpose of certain forms of information collection or may be suspicious of them, seeing them as ranging from "benign, to irrelevant to ominous" (Garfinkel 1974, 115). Such records, in terms of both the idea of the records from an organizational perspective and in the client's use of the records from the clinic context, fit with the "prevailing rules of practice" of the setting (Garfinkel 1974, 114).

Accordingly he suggested that clinic personnel serve "as self-reporters, [who] actively seek to act in compliance with rules of the clinic's operating procedures that for them and from their point of view are more or less taken for granted as right ways of doing things…[they] are integral features of the usual ways of getting each day's work done" (Garfinkel 1974, 114). Therefore, without a detailed understanding of the practices in a specific setting, one cannot get a

nuanced view of what may initially appear to be simply poor records and the ways in which such records are incorporated into daily work practice. Decades later, the interest within anthropology, sociology, and related fields focused on the study "of what documents do and how they do it" (Tidey 2013, 193) comes as no surprise given the widespread presence of such material culture in the ethnographic record in a range of settings and locations (Göpfert 2013; Gupta 2012; Levy 2003; Reed 2006; West 2003).

In these contexts as well as other institutional settings, the file - a discourse-mediating object – provides a continuing chronological record of transactions between officials (Garfinkel 1967; Hull 2003). Case files also provide both quantitative (demographic, numeric) and qualitative (historical, contextual) information (Brewer 2000, 21; Bryman 2001). Smaller documents within the larger archive that is the case file are a type of material culture that is oriented to be visually perceivable, using alphabetic and numerical icons to store information but also the means by which such data is disseminated. Structurally and practically, case file data also relates to labor time available for recording in the work environment and concerning what is "relevant to the everyday work of the organization," usually collected by more than one official (Hayes and Devaney 2004, 319).

As a storage device, the case file is a "graphic artifact", an object that serves semiotically as the "meditating instrumentality of communicative processes for its perceiver" (Hull 2003, 291). Like the files Hull examined in Islamabad, Pakistan, Annabel Pinker (2015) traced the political effects of documents produced in relation to a public infrastructure project in the Peruvian Andes. And as in the urban Islamabad, Pakistan, Pinker attended to "the political processes enacted through project paper" and "their relational, material, affective, and referential

dimensions" (2015, 97). Again, this demonstrates the power of documents to mediate existing regulatory ambiguities as well as open or close spaces for negotiation, even deviation.

Court and child welfare case records like the foster care case file currently exist overwhelmingly on paper containing folders and forms, although increasingly it is likely that most of these documents will be digitized. Recently, it has been suggested that bureaucratic organizations are "among the most consciously materialized of social collectives" (Hull 2003, 288) and have also been conceptualized as "object institutions" comprised of people as well as artifacts (Latour 1999, 192).

Beyond just documents and paperwork, archaeologists and ethnographers have shown that material objects construct and reproduce social relationships and how these associations exist through the methods and devices by which people negotiate positions (Chin 2001; Hauser 2008) as well as create and reproduce meaning through practice in daily interaction within social structures (Robin 2002). Turning back to Hull's (2003, 2012a) exploration on "the social life of files," he demonstrated how the circulation of graphic collections such as case files operate as a method and product of documentation that confers authoritarian, legal, and political judgments. These evaluations are conveyed primarily through the circulatory procedures of semiotic reach that are fundamental to the official declarations, co-constructed evaluations of cases, and the dissemination of this knowledge between employees. In similar ways, the case file and other related paperwork perform such documented communication but also structure and inform the discussions about cases and their developments in formal encounters like meetings.

Meetings and Organizational Ethnography

This project is shaped in large part by Schwartzman's call to "'defamiliarize' the all too familiar" forms of behavior and processes found in bureaucratic and institutional settings (1989,

5). Her research concerning professional contexts suggests that formalized activities, especially meetings, "are valuable because they are not what they seem to be" (Schwartzman 1989, 86). In this vein, I apply and extend this defamiliarization approach to documentation processes as technologies of governance and bureaucracy (Day 2001; Garfinkel 1967; Göpfert 2013; Harper 1998; Hull 2012a; Levy 2003; Riles 2006). While both her work and my project are situated in the U.S., such an undertaking is rooted in the understanding that "all societies, no matter how remote, are affected by the actions taken by governmental as well as private organizations" (Schwartzman 1993, 2).

I therefore engage with scholarship on meetings and documents, demonstrating the importance of looking at these two taken for granted features of organizational life, exploring the diverse ways these practices categorize and sort, but also construct and segregate relationships (Bowker and Star 2000; Carr 2011; Latour 1998, 2005; Merry 2011; Merry and Coutin 2014; West 2003). Following Schwartzman (1989) and Foucault (1991) I argue that paperwork and meetings in the foster care system are important forms of governmentality - a means through which the state comes into being.

From case management decisions, procedures, and encounters, to courtroom proceedings, and everyday routines in the file room, I illustrate the documented textualization of the state and social interactions in formal and informal meetings surrounding a foster youth, a particular family case, or an organizational convening. Particularly, the ways individuals, services, relationships, and social networks are fixed, concretized, or memorialized in these meeting rituals and documents, inform interactions and engagements with the state (like the IDCFS, ACRs, dependency court) and other contexts (such as contracted or partnering public or private agencies and organizations).

The classification enabled by the collection (or absence) of certain records highlights and draws attention to the different types of engagements that people involved in the foster care system encounter and frequently have to negotiate. While meetings and community gatherings may appear to be based on and create immaterial dynamics, most are also materialized in textual forms such as through programs, reports, and graphs, helping to construct and produce the sense of an organization or a state as an entity, and also to facilitate the distribution of time or attention to various items on the meeting agenda.

Drawing on anthropological studies of organizations and records, I attempt here to contribute to the scholarship on focusing on organizational artifacts like documents in bureaucratic cultural life. Just as it has been argued that documents are among "the most despised of all ethnographic subjects" (Latour 1988, 54), so too did Schwartzman (1989) argue the same is true for meetings. Not only are these kinds of social settings indeed frequently and heavily documented, but that the tendency has been for researchers and bureaucrats to look through and not at these central features of research as well as organizational life (Hull 2012a, 252). It is therefore vital to examine the materiality, use, and consequences of meetings and paperwork within bureaucratic and institutional settings especially if it is the case that both of these everyday organizational routines act, in important and generally unrecognized ways, as influential and significant mediators in these settings. I join in this effort to illustrate and analyze how within organizational contexts certain social relations are constituted and articulated through meetings, staffings, and paperwork in familiar and strange ways.

I now turn to ethnographic literature on youth circulation focused on fosterage and adoption. While there are many cross-cultural examples in these studies of how family units and youth are conceptualized differently in these contexts, it is clear that the redistribution and

movement of children between households is not as uncommon as is widely thought in American or western culture. Rather, from these examples it is evident that youth have been cared for in a variety of ways and by a multitude of social actors long before formalized state efforts to care for displaced or dislocated young people emerged historically. I engage with this anthropological record to contextualize the ways in which ideas and methods of kin formation and augmentation may or may not coincide with or challenge understandings about the state's role or responsibility to mediate and monitor these youth transactions.

I argue that despite the pervasive presence of adopting and fostering young people in non-western settings, these familial reproductions or reorganizations remain underrepresented in most studies on family life. More poignantly, attention to these behaviors has largely overlooked the stark absence of the state in facilitating many of these kin transactions, with the exception of more recent studies that have turned to professional interventions by government officials and social work agencies in the global north and some postcolonial contexts. I join this corpus of research in an effort to both heighten awareness of this lacunae in existing ethnographies but also to support the growing attention to formalized ways of state care for young people. However, while all of the contemporary examinations of child welfare efforts in the U.S. to which I now turn effectively describe and interrogate local foster care systems and experiences of participants within these welfare programs, the pervasive presence of bureaucratic artifacts like case files or other records in these encounters remains underexplored. Despite the social service administration that characterizes such state efforts, the dependency upon paperwork and meetings about paperwork are marginalized ethnographically. By bridging these kinship studies with theories on the anthropology of bureaucracy and the state, further enhanced understandings about the circumstances of foster care in the U.S. that I argue are necessary, are more possible.

Chapter Three

Fostering Practices and Foster Care in Anthropological Perspective

"Euro-American social representations of human maternity present birthing and raising a child as inseparable issues. There is something so abhorrent in the idea of a mother's 'separating from [her] children' (Sanger 1996) that the woman who chooses to do so is practically ejected from the human category" (Fonseca 2011, 311).

Studies of kinship are nothing new to anthropological inquiry. Some of the earliest ethnographers, used kinship as the basis for understanding a community's social order, hierarchy, distribution of labor, property, and value system. A common visualization of genealogical lineage for a social group was the kinship chart (Malinowski 1930). With these examples, it was understood that families represent larger understandings of belonging within a greater network of people. The family unit was conceptualized a localized version of the larger social structure.

This initial work provided the foundation for the ethnographic record of communities and family arrangements around the world, and over time. The majority of these studies took place in contexts outside of North America and Europe, contributing essential evidence of the wide array of kin organizational models that challenge assumptions about the dominant western 'nuclear family' structure. Through these examples, we see that kinship is a construct of relatedness both biological and social, that can vary in meaning and through behavior not only from culture to culture, but even from one family unit to another.

Across these ethnographic settings spanning from Oceania, Africa, Latin America, and the Artic region, families are composed of both biologically ascribed and socially achieved kin. Historically in many of these cultural contexts, methods of fostering and adopting children and youth, have and continue to be not only common, but also sometimes viewed and embraced as

advantages and available resources. These exist in stark contrast to most dominant western models of family that privilege 'kinship by blood' and see fosterage or adoption as less-than-ideal responses to unfortunate circumstances (Leinaweaver 2014).

Regardless of how they are understood or enacted, both fostering and adoption reveal important cultural assumptions about processes of relatedness and concepts of personhood. In this chapter, I review the anthropological attention to ways of familial reproduction, child rearing, and circulation cross-culturally, but also the varying degrees by which notions of 'family' and raising young people influence understandings of age and generations, relationships, identity, and responsibility. Such studies range from reflections on life course development and human adaptation, to examining the exchange of monetary funds and paperwork in administrative proceedings of fosterage practices or adoption. Through this, ethnographers have addressed how social and ecological settings influence cultural conceptualizations of and localized practices of care for young people in multiple settings.

Here, I turn to a discussion of the diverse tradition of ethnographic research that examines processes of child circulation, fosterage, and adoption as well as child displacement and its multiple causes. It is abundantly clear that all societies have been managing familial reproduction throughout history, and that notions of family and social obligation continue to be negotiated through these kin-based ideologies. I begin with an overview of the presence of child fosterage and youth circulation in the ethnographic record. I then turn to what some (Terrell and Modell 1994) have argued is the ethnocentrism of many anthropologists to approach and interpret both adoption and fosterage as non-normative and therefore, less important to understanding family as a cultural construct.

Next, I review ethnographic research on foster care in North America, noting the similarities across each study – namely, bureaucracy, poverty and inequality, and the tendency of ethnographers in these settings to overlook the significance of paperwork. I then situate studies of U.S. foster care into the research on total institutions (Goffman 1961) and street-level bureaucracies (Lipsky 1980), and historicize child welfare in the U.S., and contextualize the foster care system alongside other human service delivery systems.

Child Fosterage and Circulation in the Ethnographic Record

Two orientations dominate the ethnographic record concerning adoption and fosterage. First, a rich but small body of research examines child-circulation and fosterage across family units in non-Western cultural contexts (Anderson 2009; Betzig 1988; Bledsoe 1990; Burton, Nero, and Egan 2001; Coe 2016; Golomski 2015; Leinaweaver 2007, 2013, 2014; Payne-Price 1981; Schrauwers 1999; Silk 1980, 1987; Verhoef and Morelli 2007; Walmsley 2008). Informal ways of more permanent adoption arrangements are also evident in these case studies (Berman 2014; Leifsen 2009; Van Kleet 2009; Weismantel 1995). This literature is significant in that it provides an anthropological normalization of child-circulation, including via fosterage and adoption cross-culturally in predominantly non-bureaucratic settings. That is, regardless of the reasons or methods, communities around the world have and continue to practice adoption and fosterage in a variety of ways.

Despite these examples of less bureaucratized "assembling and disassembling of families" (Anderson 2009), in some of these contexts non-governmental organizations have emerged to provide care for displaced youth in orphanages (Freidus 2010; Leinaweaver 2008; Scherz 2014). Ethnographically however, these efforts have provided mixed results as far as the benefits of these kinds of interventions over existing informal kinship-based fostering and

adoption models. Notably in the global south, the state is getting more involved in mediating

these youth transfers and kin transactions, especially in densely populated urban areas (Cardello

2009) but also in more peripheral spaces involving impoverished, rural, often indigenous

communities (Fonseca 2009, 2011; Leinaweaver 2007, 2008).

The second analytical orientation focused on adoption and fosterage in the ethnographic

record attends to contexts of state intervention either officially or tangentially. As already noted,

there is a disproportionate attention in full length ethnographic studies on formal adoption

proceedings, especially international processes involving youth entry into western settings like

Spain (Frekko, Leinaweaver, and Marre 2015; Leinaweaver 2013), the U.S. (Briggs 2012; Gailey

2010), as well as Canada, Australia, and the United Kingdom (Kim 2000, 2010). Concerning

fosterage specifically, these ethnographies attend to child and youth state social services. It is

notable that all of these studies focus on North America, placing more explicit attention to

bureaucracies of public and private institutions and organizations in Canada (Handelman 1978;

Mills and Champion 1996) and the U.S. (Brown and Rieger 2001; Lee 2016; Scherz 2011;

Schwartzman and Kneifel 1985; Schwartzman et al. 1984; Silver 2008, 2010, 2015; Wittner

1978; Wozniak 2001, 2004). This also includes research on American immigration policy,

namely youth detained at the U.S./Mexico border (Heidbrink 2014; Terrio 2015) or custody

issues involving mixed-status families (Glenn-Levin Rodriguez 2016, 2017), sometimes

requiring the Mexican government to intervene as well.

Most importantly, these two orientations examining cross-cultural examples of adoption

and fosterage combined, demonstrate how such practices of familial reproduction and care

provide "two alternative adaptive mechanisms" (Payne-Price 1981) to emergent social situations

and needs. A child leaving or joining a family unit is often out of necessity and understood as a

solution to a problem, but the act of child movement between households is not necessarily considered a problem in and of itself. Notably, in contrast to urbanized western cultural norms, such responses to various circumstances through methods of fostering and adoption have existed historically throughout the world, in often rather unofficial and unbureaucratic ways. Youth have circulated between and across family groups well before any state organization existed to oversee such transactions.

As seen through the ethnographic record, in many situations child circulation is not viewed as non-normative or taboo, but rather understood as a means for kinship formation and a use of, especially in certain contexts an extension of, broader social ties. Such kin arrangements are employed to provide "a means of adjusting extreme family sizes and modifying family composition, and may thereby provide important economic benefits to the participants" (Silk 1987, 40). Reproductively speaking, adoption and fosterage challenge the 'blood is thicker than water' assumed privilege to biological kin assemblage or reproduction.

According to Joan Silk scholars that previously had "been influenced by contemporary theoretical developments in evolutionary biology, expect[ed] kinship to have a profound impact upon the pattern of human social interactions" (Durham 1979; Irons 1979b; Silk 1987, 39). She outlines that the primary theory of kin selection from a sociobiological perspective generally predicts that "unreciprocated altruism will only be favored among kin, and that as the costs of altruism increase, altruistic acts will be increasingly restricted to close kin" (Hamilton 1964; Silk 1987, 41). Furthermore, she argued that if one accepts this evolutionary claim, then the following predictions can be made:

1. fosterage transactions are more common amongst close kin,
2. relative caregivers are likely expected to endure the economic burden of additional children,
3. conflicts may arise over treatment of biological or non-biological children, and
4. families that foster or adopt children out, may rescind such transactions if their offspring are mistreated or abused, or if the economic prospects originally intended through such child circulation practices are no longer advantageous (Silk 1987).

While some of these assertions clearly explain certain ethnographic examples, they certainly do not account for all variation in fosterage and adoption practices in the anthropological record. For Silk, the mere frequency of adoption and fosterage in some societies (such as the Pacific Islands and Oceania) begs the question – why does it occur frequently in some societies and rarely in others? She and others argue then, that it is therefore important to have continued attention and examination of these child-circulation patterns, especially in our increasingly globalized economy. As our world becomes ever more interconnected through communication, information, and travel technologies, so do ideologies and methods surrounding childhood and family life become more widely spread and synthesized across nation-states and cultures within. As seen through this literature, the privileging of government interventions into private family life such as through child protection organizations or legalized fosterage or adoption proceedings, demonstrate how modern and urban bureaucratic logics shape such activities, especially through the emphasis on documentation and recordkeeping.

As in other areas of social life, practices like fostering and adoption have become increasingly all the more state-mediated and formalized, especially in urbanized areas and certainly regarding international adoptions. Accordingly there now is a much greater documentation of such youth movements and kin transactions not only by anthropologists, but also government records. Accordingly, additional empirical data on these developments is not only more available through various state departments but also has come increasingly back to the

attention of contemporary ethnographers, especially those investigating the relationship of the state in daily life. Despite the more recent return to studies of kinship by anthropologists interested in adoption and fosterage, there remains few ethnographic investigations into the bureaucracies that such youth circulations are mediated in and through. And from a Garfinkel or Hoagian perspective – even less attention to the temporalities these bureaucracies produce, specifically through the various points in their administrative processes.

Prior to the 1990s, anthropological engagement with adoption and fosterage was limited in scope, the social practices of which were investigated primarily, "as a way of illuminating a kinship system, as a mechanism of social mobility, or as a way of transmitting property," in non-Western cultural contexts (Terrell and Modell 1994, 157). The early 2000s saw a proliferation of ethnographic studies, many of which shifting their focus homeward for many anthropologists to adoption in North America and Europe, and expanding the breadth of analysis to include negotiations of "culture keeping" (Jacobson 2008); intercrossings of globalization and family formation (Seligman 2006); race (Dorow 2006; Yngvesson 2010); belonging (Yngvesson 2004, 2010); the market (Anagnost 2004; Briggs 2012; Cadoret 2009; Dorow 2002, 2006; Hansen and Pollack 2006; Khabibullina 2009; Spar 2006;) and gift economies (Model1 1994). However, there remains an asymmetrical focus both on international adoption and its aftermath at the expense of analyses of the ways in which children circulate *within* the global north,[7] and the modes of preparation in which birth parents, adoptive parents, and professionals engage. This is likely due to the frequency of international adoptions occurring in a unidirectional manner between non-western youth usually from the global south relocating into western families in the global north.

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[7] Exceptions to this pattern are Modell (1994, 2002), Gailey (2010), Harris (2011), and Rothman (2005), who all take up the issue of U.S. domestic adoption.

While international adoption has been a privileged site for anthropological investigations (Briggs 2012, Dorow 2006, Frekko, Leinawever, and Marre 2015; Howell 2006, Jacobson 2008, Kim 2000, 2010; Leinaweaver 2008, 2013; Yngvesson 2010), I and others (Ludwig 2012) however suggest that domestic adoption as well as foster care in the U.S. can provide as fruitful an opportunity for insight, particularly into the neglected analytics of materiality and temporality. I therefore seek to elaborate on the ethnographic portrait of adoption and fosterage further, by bringing the analysis stateside and interrogating the ways in which materialities and temporalities of paperwork specific to the state foster care system (and in some cases, adoption) are produced within the bureaucratic context of the institutions that mediate and govern child welfare as a social practice.

Adoption, Fosterage, and Ethnocentrism

To address the underappreciation of adoption and fosterage by anthropologists, Terrell and Modell (1994) discuss what they argue is a historical avoidance or marginalization of these practices in the anthropological literature, due in large part to the ethnocentrism of U.S. and European majority researchers. They contend that most in the field hold the understanding that offspring reproduction or circulation beyond birth parents does not adhere to western culture's biological or social norms. Statistically, most anthropologists originate from societies where adoption and fosterage are simply less common, and especially in the U.S. and Europe, historically stigmatized. While their argument is from 1994, there is little in the ethnographic record that challenges their assertions, nor have any scholars revisited the literature since then to interrogate these earlier claims. Yet, with marriage rates on the decline and the mounting acceptance of divorce and remarriage in Euro-American culture,

"the kinship system in modern, urbanized settings is characterized – no less than kinship in other settings – by its ability to bend, relocate, and adjust to new situations (Thompson 2005). In a word, it is characterized by a certain "plasticity" (Fonseca 2011, 311).

In the language-socialization study by Susan Frekko, Jessaca Leinaweaver, and Diana Marre (2015), even contemporary discursive efforts are institutionalized and internalized by adoption professionals and adoptive parents on "how to not talk about adoption" in contemporary international adoption proceedings in Spain. They argue that this language ideology of "adoption talk" is not only situated in "professional jargon of 'dos and don'ts'," but rather nestled within a pervasive cultural understanding of what they call "communicative vigilance" that requires a mediation of these "two contradictory understandings of talk and kinship" (Frekko, Leinaweaver, and Marre 2015, 713). Through their participant observation of and interviews with staff and adoptive parents, it became clear that while adoption was the focal point of these encounters between staff and families, adoption was not supposed to be emphasized in everyday speech in these interactions.

Firstly they observed that such a discursive logic required, "a referentialist understanding of the [presumed] undesirability of adoption, that must first be acknowledged and then linguistically masked," followed by then yet simultaneously, a level of linguistic performativity that ostensibly conveys a reimagining of adoption[8] as, "equivalent to and as valuable as traditional ways of creating families" (Frekko, Leinaweaver, and Marre 2015, 703). While this current example harkens back to not-so-distant an era in western cultures where adoptions were mostly kept secret, especially from adoptees themselves, it emphasizes the ways in which such organizations that mediate formal youth circulation through adoption reinforce their own biases and subjective opinions about the proceedings they exist to facilitate.

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[8] In their study, they specifically examine linguistic conventions concerning transnational adoption into Spain.

This is not to suggest that the aforementioned scholarship all entirely supports such claims, but the absence of adoption or fosterage practices from the study of kinship in most ethnographic studies is striking. And while there are many possible reasons for this underrepresentation of child-circulation across and beyond traditional notions of family life, the lack of presence in the ethnographic record does not accurately represent the occurrence of adoption and fosterage cross-culturally and historically.

Accordingly, adoption and fosterage are important and culturally specific practices and unique "categories of meaning" that while have been present throughout history, the diverse ways in which "people think about, react to, and represent" such behaviors in varying contexts remains underexamined (Terrell and Modell 1994, 156). In this way, the very documentation and examination of these practices is statistically limited, which according to Terrill and Modell is evidence that such behaviors or familial arrangements are conceptualized and approached as atypical and usually by extension – undesirable – by the broader anthropological community. What the cited studies in this chapter contribute then, is the very presence and appreciation of adoption and fosterage, most of which showcase how such activity is beneficial and integral to the ways in which various communities overtime and cross-culturally, have negotiated historical and emergent social, economic, political, biological, and environmental forces.

The majority of research on foster care in the U.S. stems from clinical social work and public policy. These studies are often concerned primarily with foster child or familial pathology and how these individual or family issues result in poor foster care system outcomes. Unlike anthropological research, there is an inherent emphasis in this scholarship to always connect research findings to public policy implications. As I was told by a faculty member in a social service administration program, "there is usually an assumed potential application of research to

inform public policy," which influences not only the analytical scope of these efforts, but the extent to which research on foster care is expected to influence social work practice.

It is surprising then that this body of work tends to take the very bureaucratic and organizational context of social services for granted. I argue then that many of these studies offer limited examinations and provide minimal opportunity for critique and theorization of foster care as a state system, a cultural context, a care setting, or stand-in for family life. Many of these studies draw upon and cite statistical data much of which is publically available through AFCARS which collects, "case-level information on all children in foster care and those who have been adopted with Title IV-E agency involvement" (U.S. DHHS 2018).

Title IV-E of the *Social Security Act*[9], legally authorizes The Federal Foster Care Program, managed by the DHHS under which the Administration for Public Services', Office of Human Development Services, oversees social services under Title IV, Parts B (Child and Family Services) and E (Federal Payments for Foster Care and Adoption). The Children's Bureau, an office of the DHHS Administration of Children and Families, is the federal department that "focuses on improving the lives of children and families through programs that reduce child abuse and neglect, increase the number of adoptions, and strengthen foster care" (U.S. DHHS 2018) through The Federal Foster Care Program in order, "to provide safe and stable out-of-home care for children until the children are safely returned home, placed permanently with adoptive families or placed in other planned arrangements for permanency" (U.S. DHHS 2018).

This annually appropriated program has "specific eligibility requirements and fixed allowable uses of funds," and therefore understandably requires a great deal of recordkeeping to

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[9] As amended and implemented under Public Welfare, 45 C.F.R. § 1355, 1356, 1357.

reconcile payments and expenses. However, much of the AFCARS data is self-reported from

local child welfare and foster care systems themselves, leaving variability to the information.

Details about these existing data management systems and the use of this information to audit

child welfare and foster care agencies on the federal and local levels is discussed at more length

in Chapter Seven. However, it is worth noting that the website which provides the AFCARS

data, purports to provide this access to information in the interest of transparency and

accountability, but also impacting social work practice:

> "Child Welfare Information Gateway promotes the safety, permanency, and well-being of children, youth, and families by connecting child welfare, adoption, and related professionals as well as the public to information, resources, and tools covering topics on child welfare, child abuse and neglect, out-of-home care, adoption, and more.
>
> A service of the Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services, we provide access to print and electronic publications, websites, databases, and online learning tools for improving child welfare practice, including resources that can be shared with families," (U.S. DHHS Child Welfare Information Gateway 2018).

Drawing heavily from this publically available AFCARS data, exhaustive discussion in

the social work, social welfare, and public policy literature regarding foster youth and the foster

care system focuses on the detrimental outcomes of youth after leaving the state custody, how

elevated vulnerability is often experienced, and the ways this impacts society at large. In has

been claimed that youth in the foster care system are three to six times more likely than youth not

in the foster care system to have emotional, behavioral, and developmental problems, including

conduct disorders, depression, difficulties in school, and impaired social relationships.[10]

Additionally, it has been suggested that approximately 30% of the children in the foster care

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[10] The Temporary Assistance for Needy Families (TANF) Program which is overseen by the DHHS, Administration for Families and Social Services, Office of Family Assistance reports that over 80% of children in foster care have developmental, emotional, or behavioral problems (U.S. DHHS 1999).

system have marked or severe emotional problems (Wertheimer 2002). The attention attributed

towards the educational needs of foster youth has been substantial. Various studies have

indicated that foster youth tend to have limited education and job skills, perform poorly in school

compared to children who are not in foster care, lag behind in education by at least one year, and

have lower educational attainment than the general population (Wertheimer 2002).

Studies of youth who have left foster care have shown they are more likely to not finish

high school, as statistics suggest that less than 50% of youth will graduate, in contrast to the 86%

of the general population.[11] As compared to non-foster youth, only 38% of youth are reported as

employed 12-18 months after leaving the foster care system,[12] often dependent on public

assistance programs. While still in foster care, one forth report encounters with the juvenile

justice system[13]; and 42% (60% of young women) leaving foster care will have unplanned

pregnancies within four years of aging out[14] (U.S. Census Bureau 2000; Wertheimer 2002).

Furthermore, it is reported that nationwide 38% of the homeless[15] and some 25% of those in

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[11] Percent of high school and college graduates of the population 15 years and older by age, sex, race and Latino origin in March 2000 (U.S.Census 2001). For an alternative estimate on national high school completion rates – see Greene and Forster (2003). They present a lower estimate of 70% national high school completion and contend that census statistical data regarding graduation rates may underestimate the national dropout rates. Additionally, national statistics exclude military, prisoners, and other institutionalized populations.

[12] Nationally, youth aging out of foster care are often underemployed, progressing more slowly in the labor market than all of the youth in the comparison groups, both prior to and after their 18th birthday, often with mean earnings beneath the poverty level (Goerge et al. 2002).

[13] Madelyn Freundlich and Leslee Morris (2004) argue that foster youth who experience multiple residential placements are 5-10 times more likely to become involved with the juvenile justice system than youth in the general population.

[14] The notion of foster youth 'repeating the cycle' (of poor parenting) with future children is prevalent in the discourse of the aging out process (Cook 1991). Former foster youth are almost twice as likely to see their own children placed in foster care or become homeless than parents who are not former foster youth (Shegos 2010).

[15] Rates of homeless and residential instability during childhood, adolescence, and adulthood are high with foster youth. 25% of former foster youth stated that they had been homeless at least one night within 2.5-4 years after existing foster care (Cook 1991) and homeless parents who report a history of foster care are almost twice as likely to have their own children placed in foster care as homeless people who were never in foster care (Roman and Wolfe 1995). A longitudinal study that followed over 700 foster youth transitioning out of foster care in three Midwestern states (Iowa, Wisconsin and Illinois) was conducted by Chapin Hall Center for Children at the University of Chicago. Findings report that one-third had lived in at least three different places, including 20% who had lived in four or more. 18% had been homeless at least once since exiting care with more than half homeless

prison were once in the foster care system[16] (The Jim Casey Youth Opportunities Initiative 2008; Roman and Wolfe 1995; University of California 2008).

It is these widely distributed claims that give the dominant paradigm of locating and connecting problems in foster care within current and former foster youth behavior, the most purchase. Yet, these statistics offer little insight into the significance of participating in state child welfare programs as young people, in contributing to these outcomes. These reports and characterizations of foster youth come as no surprise to anyone familiar with the care system. Foster youth are a complex social group, many of whom have challenging situations with family, school, and social life. However, few studies attend to the experiential challenges of circulating in and through foster care that are unfortunately very common indeed.

I and others too, see evidence of problems and real issues, but resting on the structural level of the foster care system environment itself. Notably, former foster children up to twice as likely to suffer from Post-Traumatic Stress Disorder (PTSD) as U.S. war veterans (Kessler et al. 2005). Many interpretations of this astounding probability, attribute the condition to trauma experienced prior entry into the care system. However, advocates caution that while in circumstances of trauma such as due to abuse or neglect the successful removal of a child is a healthy step, it is important to note that many youth report experiences of additional trauma

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more than once (Courtney et al. 2007).

[16] The relationship between foster youth and the penal system is often an intimate one. 11% of youth in foster care have a mother who is incarcerated for at least some period of time while in the foster care system (Ross, Khashu, and Wamsley 2004) with 10% of the total incarcerated mothers having a child in a foster home or another form of state care (Mumola 2000). Additionally, children of incarcerated mothers are four times more likely to remain in foster care than all other foster youth resulting in a greater probability of aging out of the foster care system (Ross, Khashu, and Wamsley 2004). After aging out, one quarter of former foster youth will be incarcerated within two years (Courtney 2007). It has been reported that more than 70% of inmates in California's prison system have spent some time in the foster care system (CDSS 2014, 2).

while in state custody. It is for this reason, that it is difficult to identify what trauma triggers the onset of disorders like PTSD, or merely reproduces it such as, possibly while in foster care or farther down the life course.

When youth are removed from families and taken into state custody, sibling sets are often separated, leaving behind pets, belongings, and familiar surroundings. Friendships and social networks are severed, as youth can be relocated to new areas and placed into difference schools. Since federal funding guidelines encourage state-run foster care programs to emphasize short-term, crisis-management services, critics argue that youth are put into inappropriate placements, not designed to offer family counseling, psychiatric treatment, or drug treatment (if needed). Youth are also not prepared to return to families, whether temporarily or permanently, nor are they provided with a specialized educational and vocational training they need to survive after they become 18 (Lepak 1988; McAffrey 1994).

Few of these studies look critically at social service organizations themselves or specific policies and procedures, yet these investigations remain designed and written with an understood intention and ability to make public policy suggestions. As advocates have argued, there are reasonable explanations for the statistical outcomes. Such as youth in foster care often do not get the help they need with high school completion, employment, accessing health care, continued educational opportunities, housing and transitional living arrangements. Most markedly, these studies also lack thorough conceptualization or examination of structural forces such as poverty, inequality, racism, and gender ideologies that typically influence why families end up involved with social services to begin with (Roberts 2002, 2007, 2012). This is not to suggest that such critiques or analyses are entirely absent, but they remain few in numbers and not widely cited.[17]

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[17] For some provocative and insightful literature, see Golberg 2013, and Katz and Courtney 2015.

Ethnographies of Foster Care in the U.S.

Within the literature attending to state mediated child welfare services, there are only four full length ethnographic books examining state mediated child welfare, which happen to be located in the U.S (Glenn-Levin Rodriguez 2017; Lee 2016; Silver 2015; Wozniak 2001). My doctoral study therefore joins these contributions in a timely and important way.

A former foster parent herself, Danielle Wozniak's deeply personal study of foster mothers in Connecticut in *They're All My Children: Foster Mothering in America* was the first by an anthropologist to explore the perspectives of these social actors within the context of their own, "care-work in the face of exploitative social relations with the state," (2001, 212). This research was conducted while she was hired by the Connecticut Department of Children and Families (CDCF) State Legislative Program Review Committee to conduct ethnographic interviews with foster mothers about themselves and why they foster. Central to her analysis is the frequently underappreciated role that foster parents (disproportionately women) play in the administration and delivery of state foster care. While technically in a volunteer capacity despite receiving a monthly check for youth in care, Wozniak's study brings the very laborious nature of being a foster parent to the forefront of U.S. foster care. According to her, the women she interviewed were both mothers and workers and it is at this intersection of parenting and labor that she argues any effort to reform the system must be located, a state program which remains based upon patriarchal, nuclear family ideals.

The other studies by Naomi Glenn-Levin Rodriguez (2017), Tina Lee (2016), and Lauren Silver (2015) were conducted more recently, focusing on different perspectives on the foster care system. Both Lee and Silver examine foster care in New York, each attending specifically in different administrative and social settings, while unpacking the related procedures of each

bureaucratic process in the larger organization of child welfare services involving state invention. Glenn-Levin Rodriguez also examines these issues based off of fieldwork in the San Diego-Tijuana border region of California. As state services through and in coordination with child welfare increasingly become outsourced to for profit and not-for-profit organizations, such ethnographic research is vital in order to understand the changing institutional and organizational culture of foster care, that is increasingly formed into public-private hybrids of care allocation. An emphasis in all three ethnographies is addressing the gap in the existing literature by focusing on everyday decision-making practices regarding the prevention of child neglect and abuse, especially parental experiences in this process, particularly efforts to maintain or regain custody of their children.

Using family case examples that complicate the pervasive notion that kids end up in foster care due to severe abuse or neglect, Lee's study in *Catching a Case: Inequality and Fear in New York City's Child Welfare System* (2016) highlights the important, yet often overlooked, circumstances that many families involved in this system find themselves in: living in poverty, inadequate access to education and employment, discrimination due to race or ethnicity, and unequal distribution of gendered parenting expectations. Her study emphasizes the reality that many families involved with the child welfare system are marginalized of single moms and youth of color.

Her ethnography examines how in this system, primary emphasis is placed on child protection, while also ostensibly preserving and supporting families. The bureaucratic process involves state intervention into families' lives through coordination of professionals from the local child welfare state agency, contracted private organizations, the court system, and for some, penal institutions. Families that are investigated due to allegations of abuse or neglect are more

likely to come from communities that are underserved to meet basic everyday needs such as through affordable housing, access to fresh and healthy foods, and viable educational or employment opportunities. As Lee illustrates, the administrative case management practices of foster care simultaneously build upon and reproduce many of the existing stratified social inequalities that these families frequently experience in daily life.

Lee focuses on the process and impact of "catching a case" for investigated families and the residual effects of state surveillance and policing parents, resulting in a pervasive fear of being reported or accusations of unfit parenting, overwhelmingly experienced by mothers. As the phrase implies, to 'catch a case' means to be under the scrutiny of local child welfare officials due to allegations of abuse or neglect towards one's children, ultimately leading to the temporary or permanent removal of the children from a parent's care and custody.

The case examples provided by Lee demonstrate the ways that in the U.S., mothers face higher rates of parental state surveillance than fathers across the board. Testimonies of single mothers interviewed and in support groups, describe traumatic experiences with state representatives and partnering agencies such as family court, public aid, health, and housing services. These issues stem from a lack of resources and meaningful support to meet their own needs as well as that of their children, in addition to arguably unreasonable and challenging expectations set forth by the court and the child welfare system. Many also struggle to avoid homelessness and find access to mental health services. Supporting Wozniak's earlier accounts of foster mothers, Lee illustrates how these surveillance techniques over parenting disproportionately affect women as the majority of parents under investigation and child welfare officials who perform the state monitoring (including foster parents), identify as women.

Paradoxically Lee argues the vague and subjective reporting guidelines of risk assessment used to provide child protection, in fact, encourage the reporting of surmised abuse and neglect with aims to protect children from it. This supports the ethnographic and archival findings of China Scherz's (2011) shorter study examining reporting guidelines and practices of child welfare officials in the San Francisco Bay Area, California *Protecting Children, Preserving Families: Moral Conflict and Actuarial Science in a Problem of Contemporary Governance.* According to Scherz, such necessary procedures were situated in a constant tension between adhering to organizational compliance through everyday subjective observations of family life and parenting behaviors. Most starkly, child welfare reports occur disproportionately in impoverished communities of color, where there is also already high police presence and surveillance. As such, both Lee and Scherz contend that structural violence privileges protecting children from suspected or potential harm over preserving and strengthening families in need of vital service and support. Ultimately, such decisions are not only on a case-by-case basis, but almost entirely dependent on subjective and individual understandings of abuse and neglect by social welfare officials (and those that may report such accusations such as teachers and other mandated reporters).

Anyone who works either directly or indirectly with children is considered a mandated reporter, and is legally required to report any suspicion of child abuse or neglect to relevant authorities. As elaborated in the next chapter, no formal training or information is required for someone to accept the responsibility of being a mandated reporter, other than signing the state or county specified form. I and critics alike argue that the mere signing of a form, does very little to establish a shared definition of what should be considered abuse or neglect. Such vague and undefined terminology is not only unhelpful to those deemed mandated reporters, but also leads

to frequent false allegations against parents, disproportionately single mothers living in poverty, many of whom are already from communities of color, already under state scrutiny.

Ultimately, it is clear that the social context of each family case should be applied to determinations of such accusations regarding youth wellbeing and safety at home. Instead, such evaluations of neglect and risk are highly subjective, and regularly ignore the challenges rooted in structural violence that many families in the child welfare system face, in addition to a lack of cultural relativity surrounding ideologies of parenting practices. The inherent power imbalance between the state and parents investigated remains in the tension between policy compliance and parental rights. Fundamentally, the management of a family case depends on whether bureaucratic procedures were followed, and less so on whether the initial reported behaviors of abuse or neglect have been addressed effectively. Simply put, a case is not evaluated on whether through such state interventions have the initial reported family issues been even addressed or resolved by removing children from their homes of origin, requiring parenting or anger management classes, enforcing supervised visitations between parents and children, or providing assistance in attaining social services deemed necessary. This focus on proceduralism over effective intervention outcomes results in what for Lee and others merely reproduces the same social hierarchies many of these families already find themselves in, calling for a system wide reform.

As the ethnographic record on fosterage focuses mostly in non-U.S. contexts, and largely non-bureaucratic, there remains a need for more context-dependent case analysis on child welfare and the foster care experience, specifically in bureaucratic settings. In this way, Lee supports Silver's research about the disjointed and fragmented nature of child welfare systems nationwide in *System Kids: Adolescent Mothers and the Politics of Regulation* (2015). Both Lee

and Silver argue that such organizational issues are caused, in part, by budgetary cutbacks stemming from the neoliberal attack on the welfare state and resulting in increasingly high caseloads for social workers, and subsequent reduction in attention to individual case management.

For Silver, the primary focus is on how a "system" characterized by cumbersome bureaucratic procedures, inequalities between service settings, and disconnected social welfare "silos" regulates the lives of adolescent mothers who are in care within a child welfare program? Like Lee, Silver interrogates the consequences of this regulation, specifically for young teenage mothers who also happen to be under state care themselves as active foster youth. How do such experiences impact their own children and the good intentions of street-level caseworkers caught up in this system?

Silver's study shows how a richly detailed ethnography, based on fieldwork in a large northeastern city's Supervised Independent Living program (SIL) for adolescent mothers, can provide answers to these questions. Methodologically drawing also from her previous work as a practicing program manager within the SIL site and the circuits of service that became the focus of her study, she adopts the perspective of "researcher-advocate." Taking such a position is less common in the discipline of anthropology, yet more present in the field of social work and public policy, of which she has experience in both. In this way, she provides a distinctive appreciation and understanding of not only the young mothers and their children, but also of the overburdened and often underappreciated case managers, middle management, and direct care staff.

Silver illustrates several of the major dilemmas of child welfare (and really, any social welfare) systems. This includes the two of the most important problems identified by all participants in these systems: 1) the limits of disconnected and fragmented service silos; and 2)

the heavy client caseloads assigned to case managers, which result from ongoing austerity measures reducing funding for child welfare services. But the result is, that by "setting" the problem as *fragmentation* coupled with high caseloads, the recommended solution is always to improve the *coordination* of services. This approach to problem-setting has informed child welfare policy recommendations for at least the last 45 years with little evidence of any change in these practices (Schön 1993; Weiss 1981).

Again, with the shift towards privatization and outsourcing of not only social service provision, but also funding, such efforts towards organizational and service coordination become understandably more complicated and arguably, less effective. Silver wisely recognizes this issue as she seeks to "imagine new kinds of questions and to look through different lenses," as a means to develop alternative recommendations and actions for the improvement of services like the SIL program (2015, 153). She argues that just as her ethnography focused on how the young teen moms and case managers navigate the multiple child welfare and court systems that seek to regulate and manage their daily lives, solutions to the problems these groups face must also be situated in everyday, "ground-level" interactions and experiences that show "how youth and their caseworkers connected compartmentalized aspects of their lives across fragmented systems of care….[And] how relationships across macrolevel and microlevel structures, policies and institutions shape the daily lives of youth and children" (Silver 2015, 165–166).

A constant thread throughout the ethnography is the way institutional and individual identities are entangled within everyday case management. Silver's two primary interlocutors - adolescent mothers and case managers - depend upon one another to establish and negotiate their own identities as providers and recipients of state "care." Like Scherz's (2011) study in California, Silver demonstrates that closer attention to these service negotiation strategies reveals

the highly subjective modes of administrative decision-making necessary for SIL program officials to meet the organizational, ethical, and practical needs of the supervised, yet somewhat independent, living of young families. Mid-level case managers must enforce rules, but also mentor young mothers, while establishing a sense of their own selves in the marginalizing work environment of their own staff hierarchy. However, as is made evident, the objective obligations of program standards are also employed through the self-advocacy efforts of the adolescent mothers themselves, to receive the services they argue they need.

Silver understands this as a reversal of an organizational narrative, in which the young mothers use existing program goals and objectives in order to motivate case managers to perform particular administrative tasks and, when necessary, cut certain bureaucratic corners. This is similar to Carr's (2011) examination of how women in a drug rehabilitation program learn to represent their changed identities from "addict" to "recovering addict" by speaking in prescribed ways that are highly valued by treatment counselors and case managers – a practice clients referred to as "flipping the script". Like Carr, Silver creatively juxtaposes these two positionalities - care provider and care recipient - calling into question the assumed power dynamic of controlling, middle level administrative case managers and passive social service recipients. The reality both studies show, is that neither social position is exactly what it seems.

Glenn-Levin Rodriguez's ethnography *Fragile Families: Foster Care, Immigration, and Citizenship* (2017) supplements Lee and Silver's work, as it concerns children of detained and deported non-U.S. citizen parents - further complicating child welfare proceedings. Just as many families who come into contact with the state regarding child protection have precarious lives due to poverty and inequality, for mixed-status Latina/o families, one of the primary issues centers on determination of residency status. Based off on fieldwork on both sides of the U.S.-

Mexico border with local child welfare systems and foster care organizations, as well as immigration enforcement agencies, family integrity is put into question when American-born children are separated from their undocumented parents and taken into state custody.

Similar to Susan Terrio's (2015) research on undocumented and unaccompanied minors detained at this same international boarder, paperwork re-emerges again in a different form - migration documents – as a central player in these social scenes. Despite unauthorized entry into the U.S. from Mexico at a record low, many migrants began their journey from Central America, with a recent increase in youth traveling alone or without an adult guardian or relative. Many of these Unaccompanied Alien Children (UAC) report either fleeing from their families of origin due to alleged abuse and neglect, some having been orphaned and abandoned, attempting migration on their own free will and accord. Even fewer actually try to connect with family already across the border living in the U.S., resulting in a number of these detainees eventual entry into the local child welfare and foster care systems, sometimes after spending several years in purportedly 'least restrictive settings' as determined by U.S. Immigration and Customs Enforcement or ICE. Again, documentation mediates these encounters and influences decision-making involving local child welfare bureaucracies, but also court systems in the U.S., Mexico, and if applicable, those in Central America as well.

These concerns are present in Glenn-Levin Rodriguez's ethnographic account, but much of her examination looks at the additional complexities surrounding appropriate living placements for foster youth of undocumented parents. Of particular importance for one San Diego based agency was placing youth in bilingual and bicultural foster homes, especially for those under the age of five, as they many either be monolingual Spanish speakers or not yet verbal. This linguistic concern was an attempt to lessen the degree of trauma for youth, many of

whom will not see their parents for quite some time, if at all. Her fieldwork included going back and forth across the U.S.-Mexico border, in order to better understand the ways in which such an international demarcation obscures the fluidity of family lives in much of the San Diego-Tijauna region. We also see similar state bureaucratic systems that function in the interest of child protection, like the San Diego County Child Welfare Services and the *Desarrollo Integral del la Familia* or "el DIF" as it is known, the national "system that provides a variety of support services including nutrition programs, legal services, a temporary shelter for children, and a network of private orphanages, many of which are run by religious organizations and supported by U.S. donors, volunteers, and staff" (Glenn-Levin Rodriguez 2017, 23-24). And unfortunately, as is the case for my dissertation project – she was never given research clearance to conduct fieldwork directly within the San Diego foster care system. Rather, she conducted participant observation in private organizations, contracted by the state to deliver foster care services.

Despite these limitations, she witnessed all aspects of social work practice and interacted with the assortment of social actors in case management – families, officials, legal personnel, and advocates. In this way, her project includes a patchwork of data due to research access concerns, much like my study. However, she argues that this serves as a:

> "mirror of the experiences of families embroiled with the child welfare system…as the actors and agencies involved often operate with partial information and constrained access. Cases are opened and closed according to the recommendations of social workers and lawyers and the determination of judges. Decisions are often made based on incomplete case notes, and case files handed from social worker to social worker often go unread by overworked social workers who are regularly operating in crisis mode and constantly pressed for time. Social worker turnover is tremendous and children routinely interact with more than half a dozen case workers over the course of two years in foster care, which at the time of this writing, is the average time a child spends in the system. Children and parents who have been legally separated often have difficulty locating each other, and obstructing this continued connection may, in some circumstances, be the goal of the child welfare agency, pursued in the name of

child protection. Child welfare authorities operate in this realm of partial knowledge – it is rare a case that involves institutional actors who have a clear sense of what feels to them to be the 'full story' from beginning to end. As a researcher, my access was similarly partial and fragmented, and there were few stories that I was able to track from start to finish. The gaps and omissions, however, are central to how this system operates, and are part of the story that needs to be told" (Glenn-Levin Rodriguez 2017, 7-8).

In order to put the two intellectual ethnographic foci identified in the beginning of this chapter – 1) understanding adoption and fosterage from a cross-cultural perspective as social adaptations, and 2) the examination of state-mediated and clinical approaches to adoption and fosterage via child welfare - into productive conversation with one another, my project here provides an artifactually-based ethnographic study of the social service system in the U.S., drawing from fieldwork conducted in Illinois and California. This study therefore contributes to knowledge of not only child fosterage and circulation locally, but also provides another example of this bureaucratic network of systems' dependence upon reportage practices that present and encourage the documentation of pathology, often constructed in such a way to incentivize diagnostic administrative discourse, in order to efficiently raise youth by the state, as seen already in the aforementioned studies by Glenn-Levin Rodriguez, Lee, Scherz, and Silver. My explicit attention to the significance of paperwork in foster care is less so a departure from these other ethnographic endeavors, but rather complementary to and, an expansion of, these earlier efforts. From a more personal perspective, my project also provides a perspective of a researcher who has extensive history with the foster care system as a youth in care, which supplements the narratives of foster mothers as seen in Wozniak's example, as well as her own prior experience as a foster mother.

It should also be noted that of the entire corpus of ethnographic literature on adoption and fosterage, all but Terrell and Modell (1994) is research conducted exclusively by women. While

this trend is not surprising, it supports Hirschfeld (2002) and Terrell and Modell's (1994) assertion that anthropological ethnographic research involving children and youth has been largely avoided due to the assumption that familial production and child rearing are predominantly roles performed by girls and women, reinforcing the pervasive gender norms of such activities. But also, this lopsided gender divide amongst anthropologists, suggests that such a distribution of labor carries over even into areas of research in academia.

Additionally, youth-oriented research has largely been conceptualized by ethnographers as being less predictable and more messy in terms of data collection *vis-à-vis* adult-centered research due to:

> 1) the strain between recognizing that youth have agency but also are considered more vulnerable to surrounding forces than adults and,
> 2) how the very cultural definitions and understandings of childhood and other pre-adult life stages vary significantly, making comparative research all the more challenging (Bluebond-Langer and Korbin 2008; Hirschfeld 2002).

An even more neglected area of childhood research is that focused on very young children, babies. For many studies, youth remain the secondary informants, as these studies often attend to parenting perspectives or examinations of family life, located from the analytical vantage point of the parents or adults involved. In a remarkable departure from these trends, is Alma Gottleib's *The Afterlife Is Where We Come From: The Culture of Infancy in West Africa* (2004), which focuses on the Beng cultural notion of reincarnation. Contrary to the western understanding that youth are born innocent and as little sponges absorb cultural knowledge through socialization over time, Beng babies are thought of as reincarnated beings and thought to begin their current lives full of spiritual knowledge.

In his survey of anthropological studies of childhood in the 20th century, Robert Levine (2007) argues that there was additional influence of theories from developmental psychology that

made many of these earlier studies problematic, resulting in a focus for early ethnographers of childhood on Freudian stages of psychosexual development which approached early childhood development as a series of biological drives unfolding, that were considered at the time to be universal. Next came the Neo-Freudian shift, which still employ psychoanalysis but accounted more for cultural variation and the significance of the childhood context in shaping development farther down the life course.

All of these claims for Hirschfeld and I are reasons enough why youth-centered research is necessary and intellectually fascinating, but specifically for the purposes of my research interests of examining the cultural context of U.S. foster care – entirely crucial. As the ethnographic record effectively demonstrates, the very circulatory and often unforeseen nature of adoption and fosterage practices requires different analytical and methodological approaches than most anthropological research endeavors. The inherent chaotic nature of foster care and unpredictable dynamics of family life requires a flexibility that greatly complicates the ethnographic process. Most starkly, it must first be acknowledged that the very definitions of adoption and fosterage not only vary cross-culturally, but also historically. Any investigation into such practices must also accept the intrinsic variation in these activities and understandings in any given social context, and across kinship arrangements.

As research on adoption and fosterage involves at the very least, consideration of youth social actors, Hirschfeld argued that attention to youth in ethnographic research reveals the ways, "in which children, their cultural acquisitions, and their cultural productions can be studied," encouraging fellow ethnographers to turn more to youth in order to appreciate and examine, "the ways that this knowledge can be used to extend our understanding of cultural environments generally" (2002, 612). I too contend that attention to the youth who remain the focus and

purpose of foster care is not only long overdue, but vital for any meaningful appreciation of the culture of foster care administration, or possible system wide reform.

Street-Level Bureaucracies and Total Institutions

In many ways the organizations, agencies, and state departments with which subjects interact throughout the foster care process are prime examples of what Lipsky characterized as "people-processing street-level bureaucracies" in his pioneering work *Street Level Bureaucracy: Dilemmas of the Individual in Public Service* (1980). For Lipsky, street-level bureaucrats are the teachers, police officers, social workers, and other professionals who interact directly with citizens on behalf of the state. His classification of these officials as being "street-level" brought the significance of these workers in the public policy-making process to the attention of governments around the world. As most legislators are far removed from the sites of social service delivery, they depend upon and require fellow bureaucrats who are closer to the public to enforce such policies on the ground.

For Lipsky, these civil servants are the people who meet at the interface between citizen and government. They are the conduits through which policy that has been constructed elsewhere in legislation is delivered, contested, and negotiated in service settings like foster care, and welfare programs, like subsidized housing organizations. These agents of the state are vital to the citizen because what resources they get from the government is ultimately depends upon whatever street-level bureaucrats actually do with and for them.

As any social worker will tell you, what street-level bureaucrats like themselves learn in school or when training for their profession, is rather different from what the particular situations of their jobs require on 'the street.' For this kind of bureaucrat specifically, this often requires applying their educational or practicum experiences to the emergent circumstance of their clients

in a relatively quick manner, and often without full information. Because they frequently have to respond to the needs of the public without much time or knowledge with which to make decisions, they must develop routines of practice that enable them to be able to do their jobs well, in some way.

For these reasons Lipsky contends, many street-level bureaucrats are in fact the ultimate policy makers because they determine the immediate decisions that directly influence the public's daily lives. He cautions that in order to succeed, those who are training for or who actually are in these jobs, require their own individual coping mechanisms to prepare themselves for the nature of this kind of a profession. Therefore the anthropology of social service administration, is suited to not only examine these sites of ethnographic research of the state, but also to bear witness to the assessment and decision-making devices that staff in these settings develop through experience and exposure on the job. The aforementioned studies by Wozniak, Lee, Scherz, and Silver all show that Lipsky's street-level bureaucrats of 1969, are indeed still alive and well today.

However, one characteristic of social work involving foster care in the U.S. that has changed since the 1960s, is the widespread use of what Irving Goffman referred to as 'total institutions' in his early work *Asylums: Essays on the Condition of the Social Situation of Mental Patients and Other Inmates* (1961). For him, a total institution is a place of work and residence where a great number of similarly situated people, cut off from the wider community for a considerable length of time, together lead an enclosed, formally administered daily rounds of life. His analysis over four essays included prisons, religious institutions, poorhouses, and orphanages. While his attention focused primarily on mental health facilities known as "mental asylums" or "mental hospitals" as they were often called, his exploration of this type of

institutionalized bureaucracy draws particular similarities with how 'care' has been approached historically in the foster care system. And, he was not alone at this time for conceptualizing these kinds of organizational contexts under the same umbrella typology. As Foucault held, "It is surprising that prisons resemble factories, schools, barracks, hospitals, which all resemble prisons" (1979, 228)?

For Goffman, the ideology of total institutions is not merely containing residents in a secure and controlled treatment environment, it also requires a process whereby great efforts are made to maintain and sustain predictable and regular behavior on part of both staff and resident (inmate, patient, client, youth). Such a reciprocal dynamic for him, suggests that many of the features of this genre of facility, serves the ritual function of ensuring that both groups of people know their function and social role. Staff enforce the rules that clients must abide by. This mutual understanding is learned mostly through the socialization of an established routine, schedule, and procedure.

Such "institutionalizing" depends greatly on what Verdery characterized as "etatization" or the appropriation of time (1996, 39). In her work in the Socialist Republic of Romania, she examined temporal management under Nicolae Ceausescu's rule, "the ways in which the Romanian state seized time from the purposes many Romanians wanted to pursue. There are a number of means through which time can be seized – rituals, calendars, decrees (such as curfews), workday schedules, and so on" (1996, 40). Like other Soviet contexts, the *Securitat* (one of the largest secret state police in the Eastern Bloc) were responsible for mass surveillance and ensuring that even in private life – citizens were engaging in appropriate social activity. For Verdery, these efforts introduced another example of the intersection between a bureaucracy's materiality and temporality, "the vehicle through which these devices organize time: the body,

site of many possible uses of time, only some of which can be actualized," yet socially she argued, "struggles over time are what construct it culturally, producing and altering its meanings as groups contend over them" (1996, 40).

Total institutions for Goffman provide an extreme example of such control over time and the body, with the adjustment of residents within such a facility to these norms holding as much importance, if not more, than actually addressing the underlying issues that brought them to the site in the first place. As will be elaborated in the next section of this chapter, housing and treatment settings for foster youth have followed suit from mental health services and changed from primarily total institutional care in large scale orphanages, to a mix of single-family foster homes, group homes, and residential treatment centers or "RTCs." Yet, a number of youth will experience time in some institutional or pseudo-institutional facility, and for those that do, many of the characteristics of such settings identified by Goffman like routine, procedure, staff, surveillance, and time control are still the primary methods of order and service delivery. Not unlike Foucault's theory of panopticism (1979), whereby prisons function as experimental laboratories of power where behavior could be modified, so too do other total institutions, where some foster youth reside.

While over half of foster youth reportedly live in single-family foster homes, strikingly over half of all adolescents in state care live in some form of institutional care – either a group home or RTC (U.S. DHHS 2015, 3). A common reason cited for why youth are placed in the strictest setting like a RTC is for mental health or severe behavioral reasons. We see from the few ethnographic examples that exist, not much has changed in addressing foster youth and their coping abilities with their case situation and family life.

In *Children, Families, and Mental Health Service Organizations: Cultures in Conflict,*
Schwartzman et al. (1984) addressed the social and medical services provided to youth during
placement into a state hospital children's mental health ward. The study focused on the 'culture'
of the social services system and the multi-cultural aspects of 'care.' The analysis was based on
the placement and progress of twelve youth in care that come from a spectrum of circumstances:
a range of mental health and behavioral conditions, different family structures, a variety of racial
and ethnic backgrounds, and socio-economic positions. They chronicle the variety of living
placement options and care facilities that youth experience, as well as the exhaustive treatment
teams that are assigned to jointly meet the needs of each youth: social workers, psychologists,
psychiatrists, residential care providers and related personnel, school officials, and some cases
the families of origin. While occurring over three decades prior, my findings show that not much
has changed in contemporary state services such as foster care – even in cases where youth are
not living in total institutions. While in extreme cases, youth are mandated to undergo
institutional care through RTCs (and potential short-term hospitalization), case management
teams function with similar staffing structures as identified in Schwartzman et al.'s study.

Then, as is true now, collectively such case management teams coordinate around a joint
'case goal' of each youth, established in order to determine what the anticipated permanency
placement will be (reunification with family, adoption, long-term care, or future aging out of the
foster care system). Within the bureaucratic life-world, a 'case' stands in for the phenomenal
experiences of the client, overshadowing how such a concept of a 'case' is in and of itself – a
bureaucratic construction (Handelman 1983). However, within this framework, each decision
and action made regarding foster youth is justified by the potential achievement of the present
goal of the 'case'. The goal involves not only an objective or ambition held collectively between

foster youth and the foster care system but also a "care plan" is formulated to achieve the desired outcome (Buckholdt and Gubrium 1979). The goal is used as a foundation from which the assigned individual parties situate themselves in relation to foster youth and evaluate treatment effectiveness and interventions exercised by professionals assigned to cases.

Therefore, the nature of the relationship between foster youth and the foster care system is deeply dependent upon the status of the case. In most situations, status change occurs as result of continual reevaluation of what services will best meet the needs of the foster youth (Buckholdt and Gubrium 1979; Schwartzman et al. 1984; Stukes Chipungu and Bent-Goodley 2004). Status change often results in modification of the association between every party occupied with the case at hand (Schwartzman and Kneifel 1985).

Such deliberations occurred collectively in meetings that David Buckholdt and Jaber Gubrium discuss at length in *Doing Staffings* (1979). Using ethnographic data from two social residential institutions of care – a nursing home and a RTC for emotionally disturbed children – they describe the interrelated process of staff evaluation, interpretation, and negotiation of each 'client.' In such 'staffings' characteristic of social service case management, assigned human service professionals routinely congregate together to assess the condition of client cases. Buckholdt and Gubrium identified that each staffing focused on client improvement or regression (1979, 261). Such discussions are centered on recent behavior of each client and how the established care plan should be maintained or modified. Most importantly, as a kind of meeting, these staffings operate as a structured forum for professionals to develop collective explanations for client behavior, to agree upon proposed diagnoses, and document all adjustments to care plans. Then, as today, this documentation is recorded in the case file of each client just as with foster youth.

Buckholdt and Gubrium (1979) along with Schwartzman et al. (1984) illuminate how the systemic challenges of social welfare agencies inflict significant burden on individual professionals and thus frequently prevent them from adequately performing the necessary oversight to ensure the development of each 'case goal.' Both examples stress that the condition of a 'case' is fluid and in a perpetual state of flux. Each augmentation to the objective 'case goal' is thoroughly documented in the case file of each client – foster youth.

The Brief History of Foster Care in the U.S.

To my knowledge there is not yet an ethnography in the anthropological record that fully situates the present day foster care system within its the relatively short history. State interventions to protect youth from violence, exploitation, abuse and neglect - can be divided into three primary eras (Myers 2008).

First, prior to 1875 responsibility for child care primarily rested within families. Needy families and children were often cared for by community-sponsored efforts that varied widely in quality such as through poorhouses or almshouses, as well as by benevolent organizations dedicated to children's welfare chiefly care for orphans and homeless youth. In Illinois, the Chicago Orphan Asylum (now the Chicago Child Care Society) was founded in 1849 for children orphaned by the bubonic plague passing through Chicago westbound for gold (IDCFS 2014, 4). Soon after in 1853 a group of social reformers started the New York Children's Aid Society; the first formal organization to operate housing and industrial school programs for an estimated 30,000 youth. It was at this time that original yet unofficial free school lunch program also began through these efforts.

The agency went on to pioneer the controversial Orphan Train Movement, which circulated more than 120,00 orphaned children with families across the U.S., Canada, and

Mexico from 1953 into the early turn of the twentieth century. Such an effort was aimed at redistributing homeless youth from the streets of New York City to rural farms, in the hopes of deterring them "from a life of crime and poverty" (Children's Aid 2018a, 2018b). Despite the criticisms, these early initiatives went on to soon result in a number of child welfare reforms, including child labor laws, formalized adoption proceedings, the eventual establishment of state foster care services, as well as the creation and growth of child protection organizations.

The late 1800s was also marked by major social service infrastructure construction and development. Guided by progressive concerns about the role of the state in responding to social changes resulting from urbanization and industrialization during this period, local governments took on a more active statewide role in public education, infrastructure, prisons, and child welfare systems. New ideas about civil rights extended to race, women, labor, and children. Old institutions, such as town almshouses and poor farms, were replaced by state institutions like mental asylums and orphanages such as The Civil War Orphan's Home (later known as the Illinois Soldiers' and Sailors' Children's School) in Normal, Illinois which opened in 1865. However, this institution provided care for children of "honorable" veterans, and local state and private agencies were still shouldering the responsibility for child welfare overall (IDCFS 2014, 4). The State Board of Commissioners of Public Charities was started in 1869 to begin monitoring these social welfare efforts and it was at this time that information concerning the conditions of dependent individuals (youth and adults) was collected, and later in 1899 granted authority to "inspect private as well as public child welfare institutions" (IDCFS 2014, 4).

Secondly, from 1890 to the 1930s social work became professionalized, requiring education programs to establish and train practitioners in methods of casework and management (Levine and Levine 1992, 155). Along with this development towards child protection was the

creation of the first juvenile court in Cook County, Illinois in 1899 to oversee delinquent youth.

Soon after in 1905 the Department of Visitation was established and later incorporated into a

new Department of Public Welfare in 1917 to monitor youth in foster homes and publicly funded

institutions. This was also the first state agency to grant licensure certification for these care

providers, that began annual inspections and recertification according to state law passed in 1919

(IDCFS 2014, 4). At this time, all but three states had juvenile courts, that also presumed

authority over investigations into child abuse and neglect. Also at this time, the economic crisis

of the early twentieth century impacted the ability for nongovernmental agencies to administer

and deliver services to orphans and socially displaced youth calling for widespread demand of

federal interventions. For this reason, despite the expansion into the Child Welfare Division in

1920, this state department "dealt mostly with administrative matters" (IDCFS 2014, 4).

From 1920-1930 social work quickly came under the influence of psychology and

psychoanalysis, increasing the focus on individual pathology as well as clinical modes of inquiry

and evaluation. Issues surrounding a youth's behavior or mental state, were largely attributed to

their deficiencies, which needed to be diagnosed and then treated through professionally

determined interventions. One of the primary tools through which such assessments and

decisions were made, was through the case record, in order to document such administrative

activity but also to create a paper trail of treatment progress.

Thirdly, during the 1930s-1940s child welfare reform gained popularity subsequently

resulting in eventual widespread closure of orphanages. This was in conjunction with the larger

national deinstitutionalization movement from 1941-1980 (Jones 1993) which involved the

significant downsizing and closing of much of the nation's total institutions including

orphanages and mental hospitals (Brodwin 2013). This shift also occurred during the time when

new arrangements for child welfare policy emerged that sought to address the difficulties in efficiently managing the nation's displaced youth (Crenson 2001).

Efforts of efficiency and consistency became central to the ideology of institutional calculation, not only in Goffman's total institutions like orphan asylums but in the clinical method of treatment more generally. At this juncture, not only were clinicians and legal professionals dependent upon paperwork and meetings to facilitate their interventions into the public's life, but such an approach carried over after the orphanages and long term mental hospitals became outsourced treatment programs like we see today.

It was not until 1964 that legislation created the IDCFS, and legally "assumed the fundamental responsibility for safeguarding Illinois children by providing comprehensive child welfare services" (IDCFS 2014, 5). This statewide agency remains the largest to earn certification from the Council on Accreditation (COA), an international non-for-profit accreditor of human services since 1977.

In recent decades since the last period ending in the late 1970s – early 1980s (depending on the local jurisdiction like state or county), child welfare has overseen many adoptions into permanent family placements and has transitioned into housing foster youth primarily in single family foster homes or smaller 'group' home models of care. A small number still reside in a form of total institutional care that provide comprehensive services, treatment, and housing predominantly on-site. This redistribution of foster youth from almost exclusive institutional upbringing into this mix of residential settings, sought to address the growing concerns regarding the problems of youth development exclusively in such restrictive settings and the potential long-term implications of anti-social behavior, criminal activity, or a lack of developed life skills needed in order to live independently as capable adults and contributing members of society.

Still technically under state supervision, the modern form of domestic fosterage is entirely outsourced to either foster families, group homes, or contemporary institutions like Williams Treatment Center. Social welfare workers or case managers are charged with particular "case loads" to monitor through routine "home visits" and "wellness" assessments of foster youth while in care. While almost entirely eliminating facility management, staffing, and the delivery of absolute services demands that institutions such as orphanages once required, this new form of child welfare policy promised to provide a more humane form of care for dependent children and youth through "family care" while promising to downsize care costs (Crenson 2001).

However, in our present era of austerity, professional expertise is ever more so the primary model of governance in social welfare and the modes of evaluation are commonly assessment reports concerning service users. Accompanying this mostly post-institutional era, additional reporting laws emerged over time as well, requiring officials to report suspected child abuse or neglect, increasing investigations, documentation, and cases.

I now provide a summary on the organization of foster care administration and its relation to other forms of state social services and circumstances of other legal guardianship such as when adults may become wards of the state. In all examples, such governmental interventions are accountable to the broader public and rely upon excessive recordkeeping to both maintain operational and fiscal records, but also as their primary method of decision-making, and information sharing. Each client receiving any formal social service has a state record of this, and is usually kept in a file of some kind, with their name and other identifiable information in it. Such programs offered through public social services often known by supporters and critics alike

as the "social safety net", are not only intended to provide effective and necessary support for quality of life, but also function just like any other bureaucracy – they rely on paperwork.

Human Social Service Bureaucracies

Foster care administration in the U.S., like other forms of state sponsored social work, serves to ensure that youth, like all residents,[18] are ensured a basic quality of life; one that is deemed culturally appropriate for the average American. Not yet a part of the adult majority, all youth are entitled to grow up free from abuse, neglect, and exploitation, which includes access to food, housing, healthcare, and education. However, human services administration is a broad category of state programs that monitor and regulate different kinds of social work, "focusing on prevention as well as remediation of problems, and maintaining a commitment to improving the overall quality of life of service populations" (National Organization for Human Services 2018). Such direct services range from referrals to existing resources like the local housing authority for assistance in paying rent or attaining affordable housing, to local early childhood education or child care support, to more invasive and sensitive interventions into one's everyday life depending on the established level of need.

I argue that child welfare or child protection, of which foster care is a part of, is unlike most forms of public social work that provide specific opportunities and services for particular communities and their needs, such as Women, Infants, and Children (WIC) or the Supplemental Nutrition Assistance Program (SNAP), both of which are federal allocations of food assistance for low-income individuals and families, administered on the state level. And while there is Medicaid that subsidizes access to state-approved healthcare or custodial care, foster care typically serves a more comprehensive purpose for its service users – that is, youth and families.

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[18] Some youth in care are not U.S. citizens such as refugees, asylum seekers, undocumented migrants.

For foster youth, the state takes the responsibility upon itself to ensure their young wards' health and wellbeing, and essentially functions in lieu of parental care.

However, adults can also become wards of the state as well, either due to adjudication of mental or physical incapacitation, or through incarceration. Depending in the circumstance, adult wards of the state may experience varying degrees of imposed intervention into their daily life, ranging from a family relative assuming legal guardianship over an aging or impaired person, to more intimate management of service provision like daily custodial care which may include assistance with eating and personal hygiene. The most extreme example of this relationship of dependency with the state for adults in the U.S. though, is incarceration. Through the penal system, individuals that are sentenced to institutional prison confinement are entirely dependent upon the state for the provision of services to meet the most basic needs of food, housing, and healthcare. This ultimate removal of independence is a result of the legal termination or reduction of certain rights and privileges through the criminal justice system.

While many do, not all families and children come to the attention of child welfare or child protective services (CPS) agencies because of reports of abuse and neglect. Such departments may also offer programs intended to support or prevent existing families from experiencing distress relating to home life such as through state facilitated housing, food, or health-related resources. Referrals or interventions into private family life in these ways may not result in the removal of children from their families into the foster care system.

Structurally, the hierarchical and organizational relationship between child protection and foster care social services is determined on the state level. As seen through the organizational charts for each state, Illinois and California could not be two more different examples. In Illinois, the IDCFS is the joint statewide governmental branch responsible for providing child protection

and foster care. This reflects the organizational arrangement of the state government in Illinois. Each branch head, such as the Director of Children and Family Services, reports directly to the Governor and General Assembly.

Conversely, in a more populated state like California, state child protection and foster care departments are not only not one in the same, but also are administered differently from county to county. The California Health and Human Services Agency (CHSS), is the state-wide agency tasked with administration and oversight of all "state and federal programs for health care, social services, public assistance and rehabilitation" the auspices of which oversee the CDSS division which administers federal and state funds for adoptions, foster care, as well as providing disability services and support for the elderly, children, and adults beyond child protection or custody concerns. Its mission is "to serve, aid and protect the needy and vulnerable children and adults in ways that strengthen and preserve families, encourage personal responsibility, and foster independence" (CDSS 2018).

While this office handles the licensing and regulation of foster and group homes, and residential care facilities, the actual administration and delivery of foster care services is further localized on the county level. Each county has their own organizational hierarchy therein, such as the LADPSS, that oversees the LADCFS versus the unified San Mateo County Human Services Agency (SMCHSA) of which children and family services is just one of the many kinds of social services they administer. Despite the state of Illinois and every California county with their own bureaucratic idiosyncrasies and organizational structures, each foster care context shares the same objective of administering their social service of state mediated fosterage, and the mutual emphasis on paperwork is no more obvious than when exploring the use and significance of the case file.

As far as entry in the care system, youth can also be forcibly taken into state custody if they are found homeless or unaccompanied by immigration officials, such as seen in Terrio's ethnography of youth detention at the southern U.S. border with Mexico (2015). Regardless of the reasons why they are in this system, due to their age and legal status as wards of the state, I argue that foster youth experience an all-encompassing state imposed dependence that for many, is akin to incarcerated inmates.

Beginning in Chapter Four, I discuss what happens parents have their child removed from their custody, how and why it may be temporary or permanent, as will their suspension of parental authority. And while the time a youth spends in the care system consequently varies, so do the range of social services they receive or have access to. Most foster youth live in single family homes with foster parents, individuals who have taken on the volunteer role of overseeing their daily life, while others live in more restrictive settings like group homes or total institutions, such as Williams Treatment Center. In these kinds of facilities, staff oversee routinized care of youth, and in the absence of any parent (biological, adoptive, or foster), such duties are administered, measured, and evaluated through paperwork.

Likewise, within the various departments, offices, and partnering agencies involved in state mediated child welfare, paper does bureaucratic work, but it also labors intensively to create social relations, categories, expectations, and imagined futures, all of which can be seen as existing simultaneously within and outside the bureaucratic process of contemporary foster care. And the case file – a linear, historical record of foster care activity – is also materialized around the activation of an open family case; and is punctuated by moments of behavior, social service delivery, and periodic meetings that create and display the timeline of case management. In the ethnographic vignettes presented here, it becomes clear how paperwork helps social workers,

administrators, direct care and legal staff, as well as clinicians navigate the requirement and

expectation to document social activity and decision making, endemic to the social service

administration process. In the case examples, we also see how one's social position in the foster

care dynamic – staff rank, foster parent, youth, or volunteer – greatly influences how they

approach and interact with such things like case reports, files, and permission slips in a variety of

ways for sometimes, differing reasons.

Paperwork as Kinship

In the context of international adoption, Signe Howell explores the practice of *kinning*,

"By kinning I mean the process by which a fetus or newborn child is brought into a significant

and permanent relationship with a group of people, and the connection is expressed in a

conventional kin idiom" (2006, 8). She continues that "One may identify three aspects of

kinning: to kin by nature, to kin by nurture, to kin by law" (2006, 9). I argue that there also exists

a fourth aspect: to kin by paper, a process which overlaps with legal kinning but also transcends

it, through the creation of very specific materialities and temporalities. For Howell, the process

of kinning has an equal opposite - *dekinning*:

> "transnational adoption is possible because the child given up for adoption
> becomes a naked child; often literally naked, but, more importantly in this
> context, socially naked. The child is denuded of all kinship; denuded of
> meaningful relatedness whether its identity is known or not. As such, the child is
> an example *par excellence* of the autonomous individual—so central in
> contemporary Western thinking. But this also, paradoxically, renders him or her a
> non-person; in a sense, non-human. By being abandoned by relatives (whether
> biological or not is irrelevant in this context) and left for strangers to look after,
> the child is at the same time 'de-kinned' by them, removed from kinned sociality"
> (2006, 4).

This nakedness Howell argues, allows states to exchange these children - and as such is a

process unique to adoption and foster care. According to Claudia Fonseca (2011), this dekinning

is not only experienced by those who are adopted or fostered, but also by birth parents in legal

plenary adoption proceedings as seen in her work in Brazilian courts involving, "the

institutionalized effort that goes into undoing the naturalized category of biological motherhood"

(i-ii). In these instances, as well as cases where parental rights are severed in U.S. dependency

court rulings, "lies the mechanisms that so readily permit birth parents to be written out of their

children's lives" (Fonseca 2011, 307).

Regarding kinning, there are several ways in which my current ethnography diverges, but

also converges, with these examples. In the foster care system dekinning is definitely at work, as

the majority of the children are not only socially removed from their families of origin, but also

these ties can be legally severed as discussed in more length in Chapters Four and Six. However,

as frequent circulation between foster homes and families is common, youth may also experience

a recurring degree of dekinning with each placement and removal they experience while in state

custody. Even more extreme, for youth who are residing in group homes or RTCs – the staff in

these institutions function in place of parents or relatives, and it is no clearer how many youth

lack meaningful kin relations when special holidays come around like Halloween, Thanksgiving

Day, Christmas, and birthdays. For some youth, the staff remain the closest they will ever

achieve as far as kin. Yet, it is not uncommon for youth to return to families of origin, or even

experience repeated stays with foster families or in institutional care, further complicating the

notion of kinship and belonging as a fixed arrangement or state of being as is the dominant

American cultural model of family.

Additionally, much of the paperwork in contemporary American adoption proceedings

renders birth parents and adoptive parents as acquaintances rather than strangers (the social

workers, with the help of the adoptive family profiles and birth mother intake forms, doing the

work of introduction), resulting in the child exchanged in this domestic process as only in very rare instances considered truly naked in Howell's sense (Ludwig 2012). According to Howell, dekinning requires disowning or abandonment, neither of which is common in domestic adoption but is however rather typical in foster care. I argue that the notion of dekinning is useful to think with when considering the ways in which the process of foster care, mediated by paperwork, *transforms*—and in some cases, strips—existing kinship.

In *Kinship of Paper: Genealogical Charts as Bureaucratic Documents* (2016), Liviu Chelcea revisits the kinship chart to examine how state institutions inscribe relatedness to regulate inheritance in post-socialist Romania housing restitution requests in the late 1990s and early 2000s. Of her informants who were claimants, most were not the original property owners, but rather their surviving relatives, who had to provide proof of their rightful inheritance through records found in administrative and court files, along with authenticated genealogical charts. In this context, via kin networks and state institutions genealogical charts connect and "also disconnect people from objects and people from people" as a statecraft intent on making people and their established relations legible to "link them to kin groups for purposes of taxation, conscription, and property deeds" (Chelcea 2016, 306; Scott 1998, 65).

Like inscriptions within the case file, the genealogical chart offers another example as to the ways bureaucracy and law generate evidence as means to achieve certitude by "visualizing ties, even though many verified genealogies include mistakes and exclusions" (Burri and Dumit 2008; Chelcea 2016, 295; Rosen 2008, 68-130). As with the kinning or dekinning described by Howell (2006) and Fonseca (2011), such "boring things" (Star 1999, 377) as bureaucratic routines and the state-issued artifacts therein like birth, marriage, or death certificates reinforce

the reality that, "in many societies, however, kinship is also grounded in shared paper(s)" (Chelcea 2016, 295).

The ethnographic literature on fosterage and adoption reviewed in this chapter reinforce the significance of these forms of youth circulation cross-culturally. It is evident that family composition and notions of kinship are socially constructed and often negotiated, sometimes even contested. As the recent studies on child welfare systems in North America illustrate, so too are the concept of the child welfare 'case' itself and subsequent case file - bureaucratic constructions and also social accomplishments. The scholarship on the anthropology of bureaucracy and organizational artifacts like documents examined in Chapter Two therefore informs my contributions to the emergent anthropological interest in child welfare administration to further examine the relationship between kinship, law, bureaucracy, and paperwork. I now turn to what the case file is, how it is created, circulated, and regulated. I argue that it functions as a knowledge-making and representational device in bureaucracy and anthropology that is in an organizational position with transformative capacity (Asdal 2015) to "authorize, allow, afford, encourage, permit, suggest, influence, block, render possible, forbid" (Latour 2005, 72) different forms of actions in the foster care and dependency court systems.

Chapter Four

Following the File: Case Work and Research Work

"Presumably, papers document the paths that adoptees, émigrés, and deportees have journeyed, making it possible for these individuals to retrace their prior movements and encounter earlier selves…Because time assumes planar as well as linear forms, however, paths, selves, origins, and destinations are multiple. As a result, paper trails (records of birth, adoption, citizenship, etc.) do not merely document prior moments and movements but also have the potential to redefine persons, compel movement, alter moments, and make ties ambiguous. Instead of only trailing into the past, papers jut out into the future, requiring the selves who are authenticated by these documents to chart new and sometimes unanticipated courses" (Yngvesson and Coutin 2006, 184).

In this chapter I examine the materiality and functionality of case files in the context of foster care administration. I explore some of various documents that comprise these records and how these objects are created, altered, reproduced, and negotiated. In daily care delivery and case management, such paperwork like clinical forms and case summary reports can be used in different social settings and even for a variety of means to serve diverse purposes by a range of social actors. This often involves a lot of handwriting, typing, printing, scanning, faxing, stapling, and three-hole punching. As the title of this dissertation indexes, the policies, procedures, and sociomaterial orchestration surrounding case files in foster care not only provides a paper trail of administrative activity, but also documents the lives of those who intermingle with and through these processes.

Focusing on the case file in this way brings to light the relationships between people (foster youth, families, officials, advocates) and bureaucratic systems (child welfare, foster care, and courts). As administrations are dominantly prevalent in the everyday of modern life through government, educational, medical, and many employment organizations – so too are they

pervasive in modern nation-states writ large, especially in densely populated urban areas. While this project concerns one type of bureaucracy in particular – a human services delivery system – I attempt to advance understandings of how people interact systematically and structurally through this kind of organization, in order to coordinate social action mediated largely through paperwork. I emphasize that there are a lot of contributing factors that assist in successful navigation through the foster care system. As the ethnographic vignettes I described reveal, activities such as getting a legal guardian signature on a permission form, to successfully sending a fax, or participating in a case review meeting or court hearing, all depend upon command over paperwork. As seen through these encounters, access, awareness, and confidence of what documents to use, with whom, and for what reasons, often reflects organizational hierarchies that may result from experiential wisdom gained over time or simply authority due to their social status.

Whether creating a new case file, processing intake forms, or submitting a periodic mental health assessment I argue, as others have that by looking at the conditions of case file use, one gains some additional perspective concerning the "practice of social work and the mediating influence of the worker between the bureaucracy and the individual service user [youth clientele]" (Hayes and Devaney 2004, 314). This chapter introduces what a "case file" and "case work" are as I came to understand these concepts in my own "research work". I use this as an opportunity to spell out my research methods and how I came to understand the centrality of the case file and its significance for the rest of the research project.

In order to contextualize my research process, I first outline my data collection methods of examining case file uses and users, as well as identify the different sites where I conducted fieldwork. I then review the necessary ethical considerations of this effort and the bureaucratic

maze that I had to traverse to get my research approved by the necessary IRBs of Northwestern

University and the IDCFS. I situate discussion of the case file together with a description of my

research methods to illustrate how the problems I encountered in trying to gain access to case

files and shadow them through foster care revealed important information about how case files

are constituted, referenced, and evaluated within the system (and related systems) that I may not

have otherwise seen or appreciated. I include a brief history of these research oversight entities in

the U.S., and connect the development of these ethical ideologies (mostly concerning official

paperwork and documentation) to the governing logics characteristic of child welfare and foster

care systems across the country. I then provide some examples of the same bureaucratic

roadblocks that I encountered in the research clearance in the name of confidentiality and

proceduralism as I soon witnessed in my participant observation and from interviews. Many of

these administrative hurdles mirror the ways in which organizational setbacks like waiting for

certain documents and paperwork to occur can create issues in the case management process and

problems for foster youth and families.

Next, I turn to theories of materiality and the social life of things – objects and artifacts

like case files and other paperwork – and how attention to the dialectic and reciprocal nature of

human/non-human relationships (Latour 2005) contributes to further appreciation of the

sociomaterial world of state bureaucracies and our increasing dependency on recording social

life. Finally, I detail what a case file is – how is created and used – throughout its life course and

those lives that may interact with it over time.

Case Work and Research Work - Examining Case File Uses and Users

In order to situate the case file in its social context, I employed participant observation to

follow case records through the foster care system and related 'systems' (such as legal and

financial, which is discussed at length in Chapters Six through Eight. Here, I draw from the clinical ethnography of Paul Brodwin (2010) who followed psychiatric outpatient care in a Midwestern U.S. urban city. He observed how case management was outsourced and compliance assessed through the distribution, circulation, and documentation of medication cassette delivery to clients. His study illustrated the on the ground street-level ways in which the historical shift away from large institutional care venues to increasingly decentralized, sometimes neighborhood based, community settings has placed new demands on human social service providers and social workers.

As traced in the last chapter, contemporary foster care functions in a similar way through residential placement in more intimate living arrangements such as individual foster homes, moderating sized group homes, with a small percentage of youth living in the larger and more restrictive congregate care[19] settings. The same can be said for mental health services. Housing and care are no longer exclusively performed in a hospital, with continued increase in austerity measures resulting in a decrease in resources for public mental health efforts. However, these programs and treatment services remain bureaucratized whether located in a community clinical setting or by bringing case management right to your front door and of course, the necessary paperwork that always tags along for the ride.

Social work in Brodwin's (2010) example and in foster care is also heavily dependent upon another type of material culture – the personal automobile – of which most case managers are required to own and drive to conduct home visits with families of origin or foster families, attend ACRs, court hearings, and other meetings, or to transport a youth for an appointment or relocation to another living situation. Since all of these activities revolve around case

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[19] Congregate care is a term for placement settings that consist of varying degrees of highly structured settings.

management, and because case files are still considered mostly as existing on hard copies of printed media, the car then provides another context in which case records occupy and exist in seemingly rather less predictable or obvious ways. Therefore in addition to the circulation of objects like case files and the confidential information they contain within understood as being mediated by digital or print technologies, all the while vulnerable to human imperfections or error, so too are these documents transported and sometimes even stored, in the trunk of a trusty beige Toyota Corolla.

As already noted, in order to protect client privacy my engagement with youth records was necessarily restricted during the formal data collection period. This means that personal identifiable information concerning youth, families, or staff from case files was not recorded but rather the general material document of the archetypical case file was explored by me through a range of administrative activities and contexts of use such as file rooms, staff meetings, fax transactions, ACRs, and court hearings. Using blank forms and documents contained in case files, observations, and interviews with informants, I soon became familiar with the materiality of the documents to understand the anatomy of case management. While this limitation of access was disappointing initially, it led me to redirect my attention towards the documents and documenting behaviors themselves and the ways in which these artifacts quite often represent, and stand in place of, the social actors that are tracked by case records like youth, families, and staff. And as will be illustrated in upcoming ethnographic examples, many encounters between staff are entirely centered around and mediated by the preparation and review of reports, evaluations, and assessments of case progress.

In the following chapters, I use the kinds and types of information contained in the contents of files such as specific identifiers, along with their circulation observed during my

fieldwork regarding case management to address questions such as: do particular forms contain 'boxes' to check or do they require open-ended narratives regarding client progress and activity? Are notes in the margins even a possibility? Do specific forms and given diagnostic labels change over a period of time, thus reconstituting explanations and interpretations of client behavior? As different combinations of evaluations (physical and mental health, social and academic life) from various administrative contributors to the file are used to assess the status of cases, how is this institutional data (case file content) valued in specific settings and contexts of use? What notations, citations, and other specific recorded indicators are used to assess and evaluate case management?

My exposure to case management has shown that a wide range of social actors interact with case file contents in both clinical and non-clinical settings. I was privileged to witness and track the deployment of files – emphasizing the bureaucratic or organizational steps that mediate interactions between the state, legal professionals, administrators, child welfare agencies, foster youth, and families. This required me to attend many meetings, long hours in file and storage rooms, court hearings and waiting rooms, and the spaces in between like ride-alongs with case managers and other staff on outings and errands pertaining to foster youth. During these interactions, I built upon Schwartzman's (1993) organizational ethnographic methods and analysis of these formal encounters such as meetings (1989, 1994, 2007). This also includes the recurrent informal types of meetings that also occur; such as when parents or foster families meet with legal counsel in the court room waiting areas, or the impromptu interventions that staff often make with clients experiencing episodes of crisis at Williams Treatment Center. I also paid attention to not only the material exchanges that occurred every time case records came into play and but also how the meaning and value of a case record may change given the context of use.

Such observations enabled me to consider for example, when administrators meet for an ACR as discussed in the next chapter, often requiring a significant amount of paperwork, how documents are engaged with and by whom, which participants have copies of what documents, and whether or not a verbal dialogue is generated around paperwork in order to contextualize and assess the case review. In these instances I ask, why does the designated official Administrative Case Reviewer solely examine case records while the rest of those at the meeting merely observe? I soon discovered that these same questions can be addressed within court environments such as hearings examined in Chapter Six.

With local court authorization, I observed court hearings in two counties in California and other legal settings such as court waiting rooms areas also in Illinois, sites where often rather private and sensitive informal meetings occur between attorneys and families, in these open public spaces. Regardless of formality, I was able to observe the many moments in which documents took active roles in these situations. Again as with the ACR, in an active dependency court hearing, does a presiding judge read court materials prior to being presented with the case in the actual court room, or rather is the entire hearing dependent upon the judge's ability to quickly and efficiently skim case records for essential information in real courtroom time? For agency audits performed by the state as seen in Chapter Seven, who participates in these reviews and what kind of case information is sought and why?

Collective observations in these circumstances allowed me to more fully understand how case files and management function in daily rounds of operations and the ways that people in various positions interact with case files – often only selected portions. In order to represent this relational data, in Chapters Five through Seven, I provide staff organizational charts that visually represent how individual officials are situated to not only one another, but to the foster care

system and connected systems in their various hierarchical roles. And when applicable, these same charts show how staff are positioned to interact with case records and other paperwork activities in certain ways. Coupled with interview data from case managers, file clerks and other foster care staff, as well as IDCFS "compliance" assessors that conduct period audits such as those described in Chapter Seven, this offers perspectives from people at various points in the care system and surrounding systems in order to better ascertain the significance of case files and the constant recordkeeping required of social service administration.

I also interviewed former foster youth and foster parents. As my project is no longer concerned with specific personal, identifiable information contained within case records, these dialogic encounters with informants provided the contextualization necessary to connect the perfunctory documentary procedures in this institutional setting with real, living people. Through this interview process, I sought to understand how social service administrators and former foster youth and families conceptualize case files and the routine bureaucratic procedures that accompany case management. Because direct contact with these files is generally denied or often very limited to youth while in foster care (and other family members also documented in such records), these interviews provide reflections from participants who interact with case files in ways often unlike professionals do. This reflexive data further qualifies me to examine how the case documents record youth and families in particular ways and the effect this may have on care delivery and especially how it may impact interactions with staff in these settings (Carr 2011).

Key to any research project is the preparation of necessary data collection materials such as recording instruments (audio-visual devices, writing utensils, notetaking supplies), but especially important to ethnographic endeavors is establishing and refreshing relationships with key community partners, informants, participating agencies, and service providers.

Thankfully, I was connected early on to my primary fieldsite in Illinois – Williams Treatment Center in January 2011 through the Northwestern University's Graduate Engagement Opportunities (GEO) Community Practicum offered through the Center for Civic Engagement. This newly formed graduate level service learning program partners doctoral students with local organizations relevant to their dissertation research interests in an effort to encourage the exploration of the link between active citizenship and academic knowledge. It aims to facilitate opportunities for "students to bring their expertise to bear on important community issues, positioning them to become leaders in public policy and public service" (Center for Civic Engagement 2016). Since then, I have maintained a steady and relatively constant presence at this facility in the following official and unofficial ways.

By way of this early internship, I assisted with several internal case file audits prior to the IDCFS Medicaid Recertification Review, and later on in preparation of the IDCFS Post Payment Review. In this role, I located specific legal and medical documents, verified they possessed certain signatures, and were arranged in the correct order in each youth client's three-ring binder or on-site 'case file'. The eventual external audit by the state is an effort to confirm that contracted agencies comply with the privacy and confidentiality policies established and enforced by the IDCFS. Of great importance, is the extent to which contracted agencies accord with the regulation of the Illinois Department of Healthcare and Family Services (IDHFS) Medicaid Rule 132[20] (Ill. Admin. Code 59 § 132).

I have also maintained an ongoing presence at the facility by assisting with holiday events, fundraisers, instructing West African hand drumming classes for clients, and internal case binder audits as necessary to prepare for outside IDCFS reviews. After research clearance,

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[20] Often abbreviated in state documents as Rule 132.

I conducted interviews with staff and administrators in conjunction with ethnographic participation in the daily rounds of case files and case managers, splitting my time between administrative settings and interviews with former foster youth and families. I then held follow up interviews with administrators and staff as well as met with former foster youth concerning their experiences with files in order to clarify prior interview responses but also to better understand changes in policy overtime and how this may impact paperwork procedures.

One of the surprising benefits of longitudinal ethnographic work with documents in such a setting like foster care administration, is that I was able to see how the same state or agency document like an intake form or clinical report may have changed over time, sometimes resulting in the different versions of the same standardized paperwork or template, stored within a single case file or binder. Alterations to recordkeeping occur for a variety of reasons I was told by my informants. As I discussed in the upcoming chapters, quite often additional documents are created and disseminated in order to inform staff about new paperwork and related processing procedures. As the digitization transformation continues, unforeseen complications regarding such virtual technologies are rather common and bring with them new challenges and limitations regarding documentation.

I also completed the Illinois 40-Hour Domestic Violence Training, required for any volunteer or employee in a domestic violence shelter or advocate organization. It is also mandatory for probation officers and other state officials involved in the legal system, especially domestic, dependency, civil, and criminal courts. Illinois, like other U.S. states and the District of Columbia, have statutes for some forms of protection order. Therefore, survivors of domestic violence have several civil and criminal protection or restraining order options to protect themselves from further abuse. These orders do not stop an abuser from stalking or

hurting a victim, but they do permit the victim to call the police and have the abuser arrested if they break the order. It is not uncommon for families involved with the child welfare or foster care systems to have active orders of protection. These are typically orders from mothers against fathers, but can also include youth protections against parents, usually the father or mother's romantic partner. Even if a youth is in foster care and removed from their family's custody, these court orders are upheld and included in the case record. And, orders of protection can also have legal evidentiary value when determinations are made regarding a family case in dependency court proceedings.

I participated in this training over several weeks, through the Centralized Training Institute (CTI) at the Chicago Metropolitan Battered Women's Network, "a collaborative membership organization dedicated to improving the lives of those impacted by domestic violence through education, public policy and advocacy, and the connection of community members to direct service providers…[that] envisions an end to our society's tolerance of domestic violence" (2018). CTI offers several different trainings, all of which "provides participants with an overview of the complex social dynamics of domestic violence and intervention principles for working with domestic violence victims and their children" (Chicago Metropolitan Battered Women's Network 2018). This comprehensive training included a range of topics, including a section on the child welfare system and presentations from attorneys who work in dependency court throughout Cook County. A heavy emphasis in the training was familiarizing the different forms of domestic violence – physical, sexual, psychological, and emotional – and the relationships that this could involve – partners, relatives, or roommates, especially concerning dependents like children, the elderly, or adults with disabilities. And of

course, my completion of this training was materialized into a paper certificate, sent to me in the mail.

I later then observed dependency court proceedings in Los Angeles and San Mateo counties in California in order to ethnographically observe the circulation and use of case files and contents in legal, non-clinical settings like at Williams Treatment Center. Such exposure not only expanded and enhanced my examination of reports generated for and reviewed during the ACR discussed in Chapter Five, but also drew my attention to the presence of the legal case file, a separate yet interdependent corpus of records that exists before and alongside the foster care case file. Data collection eventually concluded with final interviews with former foster youth and families, staff, and administrators again to verify accuracy in responses from my interlocutors but also to address any unanswered questions I had from participant observations.

Institutional and Ethical Research Review Boards

An ethnographic and document-based exploration of the contemporary foster care system understandably involves concern for confidentiality and informed consent from participating bodies (individuals and institutions). What I quickly discovered and encountered through this endeavor are the governing regulations and intricate processes that characterize the hyper-surveillance of any research concerning this branch of the child welfare system. Most clearly, my own participation within the document-dependent bureaucracy of social service administration revealed the closely similar ways in which the same logics and ideologies of consent, compliance, and surveillance are used to govern, monitor, and shape the daily life of participants within the foster care system and connected systems (legal, medical, educational, criminal). I now first begin with a brief history of the modern form of research ethics oversight – both the

organizations and the types of research – followed by a description of my own necessary participation in several different review processes for this dissertation project.

Over the course of modern institutional research involving human subjects in the U.S. there have been accounts of unethical experiments, often performed illegally, without the full knowledge and consent of testing participants. Despite these reported cases, it was not until the twentieth century that any formal regulation of human subject research was established. This relatively recent surveillance of research has developed into a complicated system of liability oversight, methodical management, and copious meta-documentation. As defined in Chapter Two, meta-documentation is paperwork that describes or pertains to documentation protocols or recordkeeping, often regarding specific documents. It means in other words, to document documents as well as the act of documentation itself. Most notably, a particular form of organized research supervision has emerged attending to the ethical implications of data collection and management in the name of science – the IRB.[21]

Much of the research activities that eventually came under scrutiny involved biomedical experimentation that in large part included research subjects that were poor, mainly people of color, incarcerated, with disabilities, and or were otherwise deemed mentally unstable. Such social groups are now referred to as "vulnerable populations" in contemporary IRB-speak. Given the already compromised and marginalized status of most of these individuals, many were left completely unaware of their own participation in the research process and in some extreme cases, at deathly costs. One of the most well-known research scandals was the Tuskegee Syphilis Study[22], a clinical experiment from 1932-1972 involving 600 rural and impoverished African

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[21] Or independent ethics committee (IEC), ethical review board (ERB), or research ethics board (REB).
[22] *The Tuskegee Study of Untreated Syphilis in the Negro Male*, intent on studying the "natural history of syphilis in blacks" was conducted in Macon County, Alabama at the Tuskegee Institute (Tuskegee University 2015).

American men who were told through their participation were receiving free health care from the U.S. Public Health Service, a division of the Department of Health, Education and Welfare (HEW) - which later became the DHHS, the federal agency that oversees child welfare, including foster care.

Just prior to the public exposure of this atrocity[23], and the implementation of federal rules on human subject research and informed consent[24], was the publication of a crucial article by the anesthesiologist and medical ethicist Henry Beecher, *Ethics and Clinical Research* (1966). This report provided evidence of at least twenty examples of unethical human experimentation in mainstream American research contexts.

Many other projects were also conducted with funding from the U.S. government, specifically federal or military corporations. As with the Tuskegee case, much of these projects were secretive and confidential, leaving not only research subjects often unaware of the projects, but the majority of the public as well. This lack of transparency coupled with countless harmful effects on participants aroused a significant amount of skepticism when the relevant research findings were released, many years later.[25]

Unknowingly, 399 of these men had syphilis prior to the study with many acquiring the disease through the course of the forty-year project, of which 201 participants were the control group. The men received free meals on examination days, some complimentary health care services (medical exams and treatment for minor ailments) and burial insurance in exchange for the biological data provided to researchers for what participants were told was just their 'bad blood', a term used locally by people to describe a host of diagnosable ailments including but not limited to anemia, fatigue, and syphilis.

[23] What made this project ethically fraught was that none of the program participants knew they were simultaneously also research subjects. And, the investigators deliberately withheld knowledge of any syphilis diagnoses despite the widely established use of penicillin as effective treatment for the disease in 1947, leaving the experimental and control groups untreated and, for those with the disease, unaware of their illness. Not only did this impact those that lost their lives to syphilis but also their partners who contracted the disease and those children who were later born with congenital syphilis.

[24] Such as the process for disclosing the research study, highlighting potential benefits, undue risks and harm, and acquiring permission from research subjects to knowingly participate in the study .

[25] Of particular concern, were the ethical and legal implications of the research subjects' participation, specifically the disclosure of any harm that they might experience at the hands of the professionals in the medical and scientific community. This public outcry led to the investigation of many additional government sponsored experiments and

Beecher's exposé combined with the aftermath of the Tuskegee scandal resulted in a number of advances towards the protection of human subjects in research, one of the first and most significant being the creation of the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research through the enactment of the first human research subject legislation the *National Research Act of 1974*[26] aimed at legally defining the appropriate ways in which any research – biomedical or behavioral – involving human subjects can be ethically conducted.[27]

The federal office charged with this meta-protection of research subjects is the Office for Human Research Protections (OHRP), part of the DHHS and founded in 1991 when a uniform set of rules concerning human subject research was established.[28] It was at this time that the current version of this document the *Federal Policy for the Protection of Human Subjects*, colloquially referred to as the "Common Rule" was created and continues to serve as the primary reference source for all ethics review boards and committees. However according to critics this office lacks the necessary oversight of any significant post-harm justice should research study participants experience undue and unforeseen harm as a consequence of their involvement

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confidential projects leading to the convening of congressional hearings. These meetings ultimately resulted in the formation of federal departments, institutions, and policies intended to ensure the safety, integrity, and legality of any research involving human subjects.

[26] An Act to amend the *Public Health Service Act* to establish a program of National Research Service Awards to assure the continued excellent of biomedical and behavioral research and to provide for the protection of human subjects involved in biomedical and behavioral research and for other purposes.

[27] It should be noted that prior to this legislation the first important document *Policies for the Protection of Human Subjects* was published in 1966, the same year as Beecher's article, by the National Institute of Health (NIH), recommending the establishment of independent review bodies concerning the role of human subjects in research endeavors. However, these recommendations were not advanced to regulatory status until the *National Research Act of 1974*.

[28] The commission produced the *Belmont Report: Ethical Principles and Guidelines for the Protection of Human Subjects Research* in 1979 to specifically articulate and address the state position and rules regarding ethical research conduct. From this report surfaced the three most important research policy rules: 1) participants must have provided informed consent to partake in a specified study, 2) any diagnosis made during the study must be communicated to the project subject, and 3) all test results must be accurately reported. This historical document paved the way for what is now considered the moral framework for contemporary ethical considerations and regulatory nature of human subject research. In 1981, the DHHS and the FDA, also revised their existing human subject regulations to align with this report.

(McNeil 2007). Most notably, this development of public awareness regarding appropriate research conduct has led to the establishment of public and private IRBs. These committees operate primarily in higher education, specifically delegated to manage and oversee professional research conducted by university employees and students. Outside of academia, similar boards exist, such as the IDCFS IRB.[29]

Institutional Ethics Codes and Professional Conduct

While IRBs have historically presented themselves as having the protection of research subjects at the forefront of their ethical agenda, some have argued that in fact, the primary concern is actually legally protecting their own institution, employees, and board members (Elliott 1999; Schrag 2010; Stark 2012). Criticism into the ethics review process[30] has also included scholars outside of the sciences, such as Matt Lamkin (2014), who has taken this debate on ethics and responsibility into the realm of legality. Of particular concern for him is how the increasing commercialization of medical care is reshaping understandings of disease and disability, informed consent and personal responsibility, and the role of government in regulating

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[29] The OHRP established the federal law mandating the procedures required by any institution or individual conducting research on human subjects – universities in particular – to monitor projects under their oversight. Accordingly, they purport to provide, "leadership in the protection of the rights, welfare, and wellbeing of subjects involved in research conducted or supported by the DHHS. Ostensibly, OHRP helps ensure this by providing clarification and guidance, developing educational programs and materials, maintaining regulatory oversight, and providing advice on ethical and regulatory issues in biomedical and social-behavioral research," while also supporting, "the Secretary's Advisory Committee on Human Research Protections (SACHRP) which advises the HHS Secretary on issues of human subject protections" (U.S. DHHS 2015). A significant portion of supervised research involves projects administered through the NIH, the smaller agency within the DHHS that is primarily responsible for biomedical and health-related research endeavors. The FDA also has legislation that influences this kind of regulatory oversight.

[30] Following such historical developments, one of the key ways institutions such as universities have articulated how they propose employees and other members of their organizational communities conduct research is through ethical codes – guidelines designed to help individuals and groups of investigators understand differences between 'right' from 'wrong' and assist in applying that to their research-related decisions. These codes of professional conduct now serve as the primary method through which IRBs review, evaluate, and oversee university-sponsored research – monetary or otherwise. Ethical codes are not charged with promoting morality per se, but rather providing the pragmatic necessity to institutions to address the widely believed social values and views concerning appropriate cultural behavior. In the case of IRBs, this explicitly concerns research conduct including any "systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge" (Public Welfare, 45 C.F.R. § 406.102).

medical care. And, given that much research is conducted at universities in the U.S. – the

majority of which are considered tax exempt non-profit organizations – there is tension between

the public and private sectors, and debates continue regarding the degree to which research can

adequately address and regulate these potential conflicts of interest (Emanuel, Lemmens, and

Elliott 2006).

   While tasked with protecting human research subjects from physical or psychological

harm, an IRB is charged with conducting a risk-benefit analysis both in advance and during

periodic review (often when the study timeline is near completion). As research protocols may

change or alter over the course of a study, these modifications are required to be conveyed and

approved by the appropriate IRB bodies. While all formal research involving human subjects is

required to communicate with and receive review from the institutional board, according to

federal regulation, some research is considered exempt from IRB oversight (Public Welfare, 45

C.F.R. § 46.101[b]). The categories of exemption are:

- research conducted in established or commonly accepted educational settings or involving the use of educational tests,
- research involving human subjects that are elected or appointed public officials or candidates for public office,
- the collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens,
- and studies intended to assess the performance or effectiveness of public benefit or service programs, or to evaluate food taste, quality, or consumer acceptance.

   Most notably within this final exempt category, human subject research conducted

abroad, while covered by the federal policy, are generally understood to follow "procedures

normally followed in the foreign countries to protect human subjects" which it is noted "may

differ from those set forth in this policy" (Public Welfare, 45 C.F.R. § 46.101[b][6h]). Beyond

research within this last exempt category, other human subject research conducted abroad, is

accountable to existing international ethics review committees and policies in these specific

contexts. However, the organizational responsibilities and the scope of the oversight purview can

differ substantially from one nation to another, especially in the domain of non-medical research

(U.S. DHHS OHRP 2013).[31]

Much of the criticism of IRBs rests in the understandable challenge of regulating a vast

array of disciplinary approaches toward research involving human subjects. Many scholars in the

social sciences and humanities have noted the inadequacy of the current formal system of

research-ethics review to fairly offer ethical consideration in light of their research needs. The

formal system of ethics review has placed the social sciences (and some humanities research) in

a precarious situation. One primary concern is that the dominant bio-medical conceptions of

research on which the system relies upon are not up to the task to give discipline-appropriate

advice to other fields. Schrag (2010) argued that biomedical researchers and bioethicists

repeatedly exclude social scientists and humanists from rule making and continue to ignore the

existing ethical traditions in nonmedical fields. The result is that university ethics panels

routinely impede the work of scholars in those fields, as often, "things that are possible

scientifically are not necessarily desirable ethically" (Brewer 2000, 89).[32]

Like most proposals for research funding, like the National Science Foundation (NSF) or

the NIH key elements of ethics reviews involve the "research protocol."[33] This includes a

summarized description of the proposed research under review, interview questions that will be

asked (if applicable), data collection methods, data management and storage plan, including

[31] OHRP compiles known guidelines and regulations for 96 countries reported from international and regional organizations into the *International Compilation of Human Research Protections* (U.S. DHHS OHRP 2013).

[32] In 2004, Schrag became increasingly interested in the operations of IRBs as bodies that monitor research with human subjects by affiliates of universities and other research institutions. He is particularly interested in how these boards, established to govern medical and psychological research, affect the work of scholars in the social sciences and humanities, as well as to a lesser extent, journalism.

[33] The term 'protocol' is often used in the biological and hard sciences, as opposed to project 'description'.

ensuring the anonymization of subjects. This emphasis on planned research is understandable, especially from a review board perspective and regarding more quantitative data collection methods, but a primary gap in this logic is accounting for qualitative research methods can be difficult to predict and enforce when the unit of examination may be emergent experiences of everyday life in a given context, or a range of social settings such as during participant observation.

In *Regulating Creativity: Research and Survival in the IRB Iron Cage* (2007) Caroline Bledsoe et al. argue that this hyper-regulatory process does not account for the unpredictability of some data collection, the ethnographic method in particular, a key method in not only anthropology but many other social sciences and communication studies programs. Also, part of their contention is within these "intensifying efforts to develop techniques to preempt risk," researchers understandably have altered their approaches, in order to "incorporate the regulatory demands into their thinking and practice," consequently "resulting in chilling and distortion of research" (2007, 597). While articulating broader research questions in a project proposal is to be expected, predicting the precise course of an ethnographic endeavor is more challenging and arguably, goes against the beauty of the unexpected in observing and participating in social activities under investigation, that is the goal of ethnography. This research oversight also posits that research and creativity cannot co-exist, yet Bledsoe et al. firmly disagree and probe this presumed mutual exclusion of the convergent logics attributed to regulation and creativity in the research process. Consequently they show that "social scientists themselves have been recruited to create legal rituals of controlling risks that hardly exist, in order to show that they are properly regulated" (Bledsoe et al. 2007, 597-598).

In the case of oral history collection (most characteristic in the humanities but present in social science research as well), other scholars have argued against two common IRB concerns: the potential an interview might have for inflicting psychological harm on the narrator within the interview; and maintaining narrator privacy in any subsequent use of the interview (Shopes 2015). Specifically, the Common Rule articulates that research should avoid potential, "harm or discomfort . . . encountered . . . during the performance of routine physical or psychological examinations or tests" (Public Welfare, 45 C.F.R. §46.102[i]).

Ethically, to address the aforementioned concerns, any research proposal that involves predetermined 'vulnerable populations' like children, prisoners, even pregnant women, requires additional measures must be taken to ensure the safeguarding of these individuals. What my own ethnographic experience has shown though, is that for these processes of ethical oversight, reviewing IRB officials not only had varying degrees of experience concerning child welfare and the foster care system (in some cases, no knowledge whatsoever), but also had rather dissimilar interpretations of how federal research policies should be applied to my dissertation project.

Bureaucratically, this oversight process involved acquiring the documented institutional approval from the sponsoring research organization (Northwestern University), the state (IDCFS, Los Angeles County Children's Court, San Mateo County Dependency Court), and my primary field site (Williams Treatment Center) through court orders and letters of approval. Much in the same way that I discovered in foster care case management, these administrative maneuvers were centered on certain paperwork and adherence to required organizational procedures, shaped in large part by existing public policy.

Participant Observation of the Institutional and Ethics Review

Given that my project involved fieldwork in highly confidential settings such as clinical, administrative, and legal contexts, as well as examination of documents designed to contain private and identifiable information, it is within reason that this investigation process had to undergo a significant amount of ethics review. Both Northwestern University and the IDCFS have their own research IRB. As I now explain, these processes of regulating my study ultimately limited the data collection in several important aspects.

In Illinois, I was only granted permission to collect data in contexts where no identifiable case-specific information was to be recorded by me as the researcher. In other words, I was prevented from interviewing and collecting personal data directly from current foster youth or their case records, including using the various agencies I was in contact with in order to recruit participation from former foster youth, foster families, or families who had their children removed into foster care. I was however able to continue to assist with internal preparations for external state case file audits, since this was always done in the presence and under the supervision of administrative staff, like Althea, who I would supported in putting records in the right sequence in their binders, staple multi-page documents together, attach fax cover sheets, and mostly, help keep the 'files' as a corpus, together and intake. At no point during these periods did I record the content of the case records or details about a given case, including any relevant parties. I did help identify when records were missing a guardian signature, which was easily noticeable at the bottom of any consent form or clinical report, and quite common in fact.

I also sat in on various staff meetings as long as I did not record any personal information revealed about the youth or their families. This typically meant names were not used in my presence in such convenings between staff. While this seemed impossible initially, after

explaining to staff what my limitations were, it soon became very easy for them to leave out a client's name when in meeting, even the ACR I observed, since many of these meetings were scheduled to discuss a specific client or case. This meant that with the exception of me, staff were usually completely aware of what client was being discussed without having to verbally mention by name, because that was the entire reason why they were meeting. Since I was unfamiliar with most of the cases discussed in these contexts, without further identifiable information, I had no way to determine which youth or families were being discussed, but I did get to hear about their case status in general summaries that were discussed amongst employees from service delivery and court agencies. There were also times, when sensitive or identifiable details did need to be discussed, in which case, I voluntarily would leave these meetings so as to respect client confidentiality.

In addition to the NU IRB and IDCFS IRB, I required clearance from the Ethics Review Committee of the parent company of Williams Treatment Center, Families for Kids. Documented authorization was also required for the two California court systems, including my signing of a confidentiality waiver in San Mateo, and in Los Angeles County, receiving a paper court order granting me permission to observe dependency court hearings for research purposes. Like in Illinois, for both court settings I was given permission to discuss procedures and observed behavior but not reveal any personal or identifiable information. One way that I achieved this was not taking field notes during court hearings, but rather jotting my observations during breaks and time spent in the public waiting rooms.

In California and Illinois I had to undergo criminal background checks and drug testing through urinalysis. Given the sensitive nature of case management, this multi-scalar level of institutional oversight comes as no surprise, but a closer examination of the aims and objectives

of each review process reveals some degree of variation as to the purpose and utility of the different organization's use of the IRB as a method of oversight. Ethnographic description of my own attempts at gaining approval from these review boards illuminates the complicated and at times conflicting nature, of this form of institutional (legal) oversight.

It is widely known that the reported aim of IRBs is the ostensible goal of protecting people who become subjects of research. Yet as it seems, some of the very conditions of 'vulnerable populations' that IRBs are intended to protect, often go underexamined simply because they are deemed most likely to be potentially harmed by research. As already stated, I and others (Bledsoe et al. 2007; Hayes and Devaney 2004; Schrag 2010) take issue with this premise because such institutional cautions do nothing to address the contributing factors that create the marginalization of certain social groups in the first place. To not study entire groups out of fear for their own further harm, does not ease existing harm. Rather, it aids in the reproduction of these concerns by not addressing them.

A primary participant base of my initial study design included current wards of the state (foster youth) whom according to the federal legislation, can be included in research. This is limited to investigations that meet the following criteria: research involving greater than minimal risk and no prospect of direct benefit to individual subjects, but likely to yield generalizable knowledge about the subject's disorder or condition, or research not otherwise approvable which presents an opportunity to understand, prevent, or alleviate a serious problem affecting the health or welfare of children (Public Welfare, 45 C.F.R. § 46.406-7).

Protected under this, are research projects related to their status as wards or conducted in schools, camps, hospitals, institutions, or similar settings in which the majority of children involved as subjects are not wards (Public Welfare, 45 C.F.R. § 46.409). Unfortunately, my own

navigation through this ethics review process challenges the uniformity of the policy application and enforcement. And much to my own dismay, this eventually resulted in my decision to exclude current foster youth from this dissertation investigation entirely.

In summer of 2009, I began exploratory summer fieldwork, characteristic of new doctoral students in anthropology. Accordingly, I started the NU IRB review process. Over the course of four and half years as my project design changed and altered, I continually worked towards getting the required approval of all ethics reviews from my university as well as the necessary outside institutions. That first summer proved challenging in this bureaucratic process. Most obviously, I was pre-field and still in coursework. My project design was still in the early stages, an uncertainty that complicates the IRB review process. I already knew that my area of study – the anthropology of social work and social service administration – especially involving wards of the state, would involve significant red tape. However, what I experienced are the ways in which what may appear to be even the most clear and articulate policies (institutional), can still be interpreted and enforced differently, depending upon who is charged with oversight of the specific project. [34] Such degrees of interpretation and implementation variation of policies mirror those that I and others have observed in social service settings (Glenn-Levin Rodriguez 2017; Scherz 2011; Silver 2015). Like IRB officials, social workers and case managers must constantly negotiate interpreting how to enforce policies in effective ways through service delivery in their professional roles through frequent assessment and decision-making for their heavy caseloads

Before a study can be formally entered via the eIRB website, [35] all researchers need to complete the fourteen online training modules administered through the Collaborative

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[34] NU IRB staff assigned to review a given study are often not the same person or set of people – such as the in the case of a study requiring a full board review.

[35] https://www.irb.northwestern.edu/eirb

Institutional Training Initiative (CITI) Program. According to their own website, CITI provides research ethics education to the research community offering basic (initial) and refresher courses covering human subject research and HIPAA[36] requirements.[37] After these modules are complete, the research study submission process may begin.[38]

Surprisingly after my first attempt at study review submission, the assigned IRB Coordinator, who happened to hold a Master's degree in Social Work (MSW) did not know what I meant in my project protocol as "foster youth" or wards of the state. As the review attempt progressed, it became obvious that at this juncture, acquiring IRB approval for exploratory fieldwork was not possible. According to this staff, I needed to have more details of my summer participant observation in order for a review to occur.

I volunteered at local group home for adolescent young men in the San Francisco Bay Area, but without research clearance, I am unable to include any data from that experience. However, it does supplement my limited access in Illinois, and reinforces observations elsewhere regarding the centrality of documentation in foster care settings. As a volunteer, I helped with various social outings and activities alongside existing interns, attended staff meetings, and spoke informally with on-site direct care workers, case managers, and therapists about their roles. As I predicted, most of their daily routine pertains to the creation and circulation of case progress reports, billing paperwork to the state, and internal agency documentation procedures like staff charts, timesheets, and reimbursement requests for gas or other expenses spent by staff out-of-pocket on behalf of youth residents. Unsettled in this determination after the summer was

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[36] *The Health Insurance Portability and Accountability Act* of 1996 is federal legislation that provides data privacy and security provisions for safeguarding medical information.

[37] Additionally, optional Good Clinical Practice (GCP) modules are available for completion or recertification.

[38] At the time of my first study submission, none of the training modules had information regarding the logistics of the procedure of submitting for review on the eIRB system.

almost over, I waited to continue this process. Over the course of that year, I remained confused and bewildered by the abyss of the NU IRB process.

The following summer I was contacted by another NU IRB Coordinator as to whether or not this study was still in process. As all submissions to the university IRB are made electronically, I needed to formally withdraw my previously submitted study from the system, a step in the submission process which I was unaware of. This staff member presumably replaced the previous one (who had left this position) and was entirely different in communication and advisory approach with me. They were widely knowledgeable about applying research guidelines within a social science framework, even in a government and confidential research context such as the foster care system.

I began the resubmission process, including disclosure of future planned fieldwork, even if the precise details of this data collection were still to be determined. As I did not advance to candidacy until winter term of 2012, the specifics of my dissertation research project design were still in the early stages. However as I soon discovered, I had to also supply site approval letters from any of the institutional contexts where I would be gathering data (interviews, participant observation, archival examination of paperwork). William Treatment Center, where I had already been interning and volunteering through NU's GEO program, provided much needed consultation to the project design, but their parent company unfortunately could not issue a research approval letter without first an approval letter from the NU IRB and IDCFS IRB. On top of this, prior to conducting their own review, the IDCFS IRB also required NU IRB approval. In the middle of my attempt to reconcile these conflicting requirements, my then second IRB Coordinator unexpectedly left the university.

After this additional staff turnover, a new NU IRB supervisor agreed to meet with me to develop a plan to move forward with my project review. Discovering that this official had a background in social services came as a great relief and may likely be the key to why I was able to eventually succeed through the internal and external review processes. Because there was some level of knowledge regarding my research context, this staff was able to guide me in ways that prior staff were not. Here, it was not only experience in the review process itself, but also knowledge about how federal policy can be interpreted and then abided by within a research setting that is already under so much scrutiny by the state.[39] However, given the realization that this preliminary documentation process (IRB approval) had already taken so long and under the professional advice of this supervisor, I decided to exclude wards of the state (foster youth) from my study. This was a pivotal point in my project design development as it meant that I was no longer pursuing a research project that involved actual foster youth. The primary reasoning behind this was that with IDCFS approval still uncertain, I should revise my project design in order to expedite and ensure the most reasonable review possible. I could still interview *former* foster youth, especially those still somewhat involved with their regional foster care system that may be experiencing the aging out process.[40]

Limiting my research participants to only adults, that is, participants 18 years of age or older and not also wards of the state (adults with developmental disabilities or those that are incarcerated), limited the amount of additional due process required for this research effort. After this consultation, I was able to finally acquire a conditional NU IRB approval (June 2013),

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[39] It was noted to me that the only doctoral study that was considered similar to the foster care system, was another ethnographic dissertation project conducted with incarcerated women.

[40] Legally, this process (both socially as well as involving paperwork) is referred to as emancipation. In some areas youth participate in what are called "after care" programs and services, intended to support young adults as they transition out of state custody.

contingent upon the necessary outside project review approvals such as from the IDCFS and research sites. However, while I was told via e-mail from my then now third assigned NU IRB Coordinator (not supervisor), and that I could begin collecting data not requiring IDCFS approval, I discovered that this permission was not authorized or materialized until a formal letter from the NU IRB was produce documenting this.

Due to my own confusion, I mentioned to the fourth designated staff how thrilled I was with several of my initial research interviews, only to receive strongly worded e-mails about how I was never given such permission, because a formal letter had not from the NU IRB yet. As I has unknowingly begun collecting interview data prematurely, I was required to complete an additional Safety Submission Form documenting that I had conducted unauthorized research, despite the soon to be forthcoming NU IRB permission letter authoring said fieldwork. The formal letter was given to me via e-mail stating that I could conduct human subject research with participants identified in my project proposal that would not require IDCFS IRB approval.[41]

By spring of 2013, I had already started the IDCFS IRB review process, which involved e-mailing documents of my project proposal summary, interview questions for every category of participants requested[42], sample participant consent forms, and a standardized IDCFS IRB review submission form. All of these had to be submitted to an IDCFS staff e-mail[43], with no other contact information provided.[44] Unlike the NU IRB and Williams Treatment Center's review process, the IDCFS conducts only 'full board' reviews, requiring all members of the

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[41] Foster parents and former foster youth not recruited through IDCFS or contracted agencies.

[42] Social service administrators and staff, including scholars of social work and social service administration.

[43] Alternatively, project review applications can be sent in the mail in electronic format submitted on disk or CD. If you cannot submit your proposal, with all of the required components electronically, then you must submit ten paper copies of the entire application.

[44] As of this writing, a phone number is now available.

department's IRB to convene[45] and review research requests the fourth Tuesday of every month. Proposals must be sent no later than one week prior to the scheduled meeting, otherwise it is tabled for review the following month cycle. I submitted my review and because this single staff member in charge of the e-mail account was on vacation, I only later received a response e-mail the following week stating I had not completed the forms correctly. After e-mail clarification, I resubmitted the required documents and waited one month, until I inquired to the contact e-mail. I was told I would be receiving a phone call from a board member within the next week.

One week passed and I notified the staff that I had not been contacted. With no response, I was caught off guard as I received a phone call from the then appointed IDCFS Guardian Administrator, D. Jean Ortega-Piron. Not only was this public official the legal guardian for all wards of the state in foster care[46] and widely recognized at the 'head' of the IDCFS[47] but as I soon found out, she was also the chairperson of the IDCFS IRB. Ortega-Piron informed me that the phone call was a "courtesy" to let me know that my project proposal had been reviewed and my request to conduct research was denied. Over the course of the call, it was clear that she had not reviewed my entire proposal and I attempted to bridge these gaps in knowledge with her. Unfortunately, in between her outright laughing at the research contexts I was requesting to conduct observations in (such as social service staff meetings and case filing procedures in administration settings), it was apparent that the phone call was not intended to open the door for project design suggestions or advice.

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[45] Which occur via telephone conference calls.

[46] As discussed at more length in Chapter Seven, this individual also provides the necessary guardian consent for all foster youth in Illinois like activities ranging from school fieldtrips to ear piercings, psychophysiological decisions such as changes in therapeutic treatments, and even removing youth off of life support.

[47] While this was in fact the lead administrator for the IDCFS, the agency director is in fact the technical head staff person appointed by the Governor of the State of Illinois.

When I addressed the resubmission process, it appeared as though the most access I would be granted would be interviewing social service staff - which was already articulated and requested in my initial proposal. Understandably, Ortega-Piron's primary concern was client confidentiality, which, according to her, meant that I could not be present when anything regarding a specific client, set of clients, or anything case related that was referenced. She suggested that I try to work with Williams Treatment Center, which had already given me preliminary permission to conduct fieldwork, to see if they would be willing to "create" situations where I could observe staff (not staffings[48] she stressed) discussing what I still was not clear about, but making sure to exclude client information. Given my own knowledge of the foster care system – what exactly is *not* confidential and privileged information? Knowing that the IDCFS had in fact a multi-page website devoted to promoting their purported welcoming and approving research within their state organization and the fact that other scholars have studied similar contexts (residential and other institutional settings, court contexts, mental health facilities, prisons), I began revising my project description for the purposes of what I needed IDCFS permission for.

Coincidentally the following month, Ortega-Piron retired unexpectedly after 17 years as the IDCFS Guardian Administrator. While several declarations of appreciation were made throughout various local news sources honoring her public service, more critical examinations were made regarding her tenure in this role. In fact, earlier accounts address her office's approach towards outside research,

> "Some child welfare experts said she has been an obstacle to research on foster children that could have helped them. Others in the system said she should more

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[48] In such 'staffings' characteristic of social service case management, assigned human service professionals routinely congregate together to assess the condition of client cases.

critically examine the practices of DCFS, which has come under fire in recent abuse cases for failing to take timely action to protect children" (Casillas 2008).

She has been characterized as overprotective according to the American Civil Liberties Union and delayed research that investigated issues in foster care such as frequent moving between home to homes, a typical experience for youth in custody,

"We need protections. But sometimes the bureaucracy has been slow to consent to let things go ahead. In some cases, we were delayed in getting information that would be helpful" (Casillas 2008).

Soon after her resignation in May 2013, I resubmitted my project proposal to the IDCFS, following the same procedure as before. I waited a month, and after no communication, I reached out the IDCFS IRB contact via e-mail and was told "Some members are the board will be contacting you shortly about some questions that came up regarding your proposal." Within a few weeks time, I received a phone call from another IDCFS IRB board member. This time, it was not the new Deputy Director of the Office of the IDCFS Guardian Administrator, Debra Dyer-Webster[49], but a Northwestern University faculty member from the medical sciences. As they began addressing the same confidentiality concerns that Ortega-Piron had several months earlier, it soon became apparent that the IDCFS IRB had in fact, not reviewed my revised resubmission proposal, but rather my initial first submission for a second time. After some clarification, this board member seemed encouraging, remarked that "We just don't see too may ethnographic project requests, more quantitative." He further went on to explain that the majority of research requests submitted to the IDCFS IRB seek access to existing reported meta-data - some of which is already publically available online through AFCARS.[50] This mostly includes

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[49] The current chairperson of the IDCFS IRB is no longer the IDCFS Guardian Administrator, but another official from the IDCFS.

[50] The AFACRS collects case-level information on all children in foster care and those who have been adopted with Title IV-E agency involvement.

unidentifiable statistical data such as population and demographic information concerning youth under state custody.

Alarmingly, he casually mentioned how his own daughter has a master's degree in cultural anthropology and that when these qualitative research requests come to the IDCFS IRB, she is asked to review them.[51] Because the IDCFS IRB would not reconvene for another additional month, I was instructed to wait during this time and then if an approval letter had not been sent to me, to inquire via the same e-mail contact as before. Two weeks later, mid-October of 2013, my IDCFS IRB approval letter finally arrived.

With the state approval, I now could begin the research Ethics Committee Review (ECR) process for the local non-profit the parent organization of Williams Treatment Center, Families for Kids. This larger agency offers a wide range of services for foster youth and adoptions – mostly funded through the IDCFS and other state programs in Illinois. While not all research requests require permission form the IDCFS, in the case of my dissertation project, it understandably did. In one month, I was sent this agency's *Ethics Committee Review Submission Form*, and instructed to e-mail this application along with the IDCFS IRB permission letter, IDCFS Proposal Summary, IDCFS consent forms, and the conditional NU IRB letter. It was the end of November, and in early January 2014 that I received the *Ethics Committee Review Research Approval Letter*.[52]

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[51] With identifiable researcher information removed.

[52] With the additional external IRB/ECR approvals complete and research permission documented, I then had to upload both letters on the NU eIRB system. This procedure required me to also submit a *Revision Form*, which then also has to be reviewed by NU IRB staff. On top of this, because my NU IRB letter only permitted me to collect data for one calendar year (July 2013 – July 2014), I then had to request a Continuing Review one month prior to the initial study's timeline end. A continuance of permission to conduct research was granted and a second Continuing Review request in the summer of 2014 was reviewed and permitted. During both of these requests for continued research clearance, my dissertation advisor and technical research Principal Investigator (PI), Helen Schwartzman, also had to review first and then submit these requests. And, during the most recent Continuing Review request, I was assigned a fourth NU IRB Coordinator as the previous staff member had also left the university. Bringing the

Logics and Legality of the Research Ethics Review

Despite staff turnover and variation of interpretation of my project proposals, a number of apparent improvements towards procedure and policy transparency have taken place with both the NU IRB and the IDCFS IRB since I began the review process in 2009. Most notably, in fall 2014 the NU IRB Transformation Project launched providing a new and improved eIRB+ website along with additional resources for researchers such as referential literature as well as periodic trainings addressing concerns involved in research. With these enhancements come additional procedural steps such as during the Continuing Review process (and also in cases involving new study submissions). Here the Primary Investigator or "PI" is also required to complete an additional online *Research Supplemental Submission* (RSS form) before submitting the research project for review. And according to the eIRB website, "Note that although RSS information is collected in tandem with IRB information, RSS information is not considered to be a component of your IRB submission and is, therefore, not reviewed by the IRB. Any questions regarding RSS information should be directed to the appropriate institutional office managing that information," which is the Northwestern University Office for Research (NU IRB 2015). Due to my lengthy period of NU IRB review, I now had to access both the rebranded eIRB+ website and the archived older "legacy" eIRB system, thus doubling the amount of electronic paperwork required for my project to move forward.

The IDCFS IRB website has also changed from a multi-page website to a single webpage[53] with links to downloadable documents.[54] One of these forms, the *IDCFS Research Agenda* document outlines five "priority issues for research involving DCFS wards":

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total to five NU IRB staff involved in reviewing and eventually approving my research submission request, a process which spanned from 2009-2014.
[53] As part of the State of Illinois and IDCFS website.

I: child protection and family maintenance (outcomes for children and families, child protective services "CPS" service delivery, decision making),
II: family maintenance,
III: substitute care (child well-being, service delivery, mental health, delinquency and violent offenses),
IV: family reunification,
IV: adoption and guardianship (permanency and service delivery).

Researchers must identify which of the aforementioned research agenda areas that the proposed project would address. Accordingly, I had used a version of this agenda in order to craft both of my IDCFS IRB submissions. Which, is in part why I was perplexed both times that I had to verbally explain and justify my project's goals and objectives after each IDCFS IRB review, over the phone to both Ortega-Piron and the NU faculty.[55]

The *Institutional Review Board Evaluator Review Form* is a new document available on the IDCFS IRB webpage providing a general overview of the IRB review criteria. This rubric outlines the categories of review through the IDCFS IRB process: potential benefits and risks, sample description/selection, cultural sensitivity, consent, confidentiality, and methodology/design.[56] However, a disclaimer notes,

> "The Evaluator Review form is not inclusive of all aspects of the IRB review process, but can serve as a tool for researchers to 'self-evaluate' whether or not the proposal being submitted has addressed key areas of concern to the IRB. The IRB evaluation criteria outlined in Appendix B are based upon federal and state regulations, in addition to standard measures for sound research practices" (IDCFS IRB 2015).

Most obviously, the primary difference between the NU IRB, IDCFS IRB, and Families for Kids' ECR, is that NU IRB does not outline or identify specific research areas of priority.

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[54] These include instructions for project proposal submissions, sample participant consent and assent forms, the current IDCFS IRB committee, *IRB Evaluator Review Sheet*, and *IDCFS Research Agenda* document.

[55] It is noteworthy that neither of these phone calls were scheduled, recorded, or documented (to my knowledge). This is a departure from the NU IRB process, which records all areas of concern with any proposal and any actions taken to address such issues by the investigator or IRB staff.

[56] As of December 28, 2013 all monthly IDCFS IRB meeting agendas and minutes are posted on this website.

Rather, the emphasis is placed on areas of concern and institutional liability that shape and guide

the review process. Conversely, the IDCFS IRB specifically identifies "priority issues" for

research involving wards, which limits the scope of investigations. This also uniformly

contextualizes these five agenda areas they will consider around research involving youth wards

of the state:

    I.   Child Protection and Family Maintenance
        A. Outcomes for Children and Families
        B. CPS Service Delivery
        C. Decision Making
    II.   Family Maintenance
    III.   Substitute Care
        A. Child Well-Being
        B. Service Delivery
        C. Mental Health
        D. Delinquency and Violent Offenses
    IV.   Family Reunification
    V.   Adoption and Guardianship
        A. Permanency
        B. Service Delivery

While noted within the *IDCFS Research Agenda* document that projects outside the

priority areas will also be considered, my own participation in this process challenges this.

Because the IDCFS IRB functions as a public state organization (that largely contracts out its

own services to private organizations), it oversees research requests specific to its own agency

and social programs it funds and monitors. After closer examination, the priorities outlined

emphasize research concerning social service recipients (youth and families), *not necessarily on*

social service providers (agencies and staff). The IDCFS IRB webpage most explicitly

references both the Common Rule, specifically the "use of children and other vulnerable

populations" (IDCFS 2015) in addition to the *IDCFS Rules and Procedures 432 Research*

Involving Children and Families. I suspect that because my project emphasis shifted from wards

of the state (foster youth) to procedures and administrative processes (the state and agents of the state), my research proposal likely caught the IDCFS off guard during both reviews. And, despite my attempts to articulate this and position the submissions in alignment with the expressed priorities of the *IDCFS IRB Research Agenda*, it proved difficult to compel the IDCFS IRB to approve my research request.

In stark contrast, the not-for-profit Families for Kids ECR had no web-based resources for such requests. All of my interaction with this process was mediated via e-mail through my main contact Casey, the kind and generous Director of Programming at Williams Treatment Center. Concerning my project, this ECR had noticeably fewer concerns than either the university or state IRBs. I developed my project design in close consultation with Casey, who cautioned me about concerns that his organization may have, while also supporting my efforts to get clearance from the IDCFS IRB. The entire research approval submission process for this agency's ECR took much less time – under two months, over the winter holiday period, a time of year when even the foster care bureaucracy slows down.

I argue what appears at first however to be a comparatively simplified ethical research review, can be interpreted in several ways. First, since Williams Treatment Center[57] is so financially dependent upon their state contract, they are limited as to what authority they have over their own organization's activities, including participating in external research. This includes limitations on materializing this formally through documentation like the approval letter I received. The ECR approval letter is an artifact that is,

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[57] And subsequently, Families for Kids.

1. Proof of the agreed upon terms of the approved research,
2. A physical representation of the completion of the establish bureaucratic ritual which upholds and is understood through compliance to the organization's policies, and
3. A mutual reference point for I as the researcher, Williams Treatment Center and Families for Kids, and the IDCFS.

This letter is not evidence that my research participants have consented to participate, which was later acquired through individual consent forms. Legal guardian consent for foster youth participation would require separate adjudicated court orders for each youth. Then, I would need to document their own assent through their signing of a youth assent form. Since youth were excluded from this study, I avoided these last two additional procedures, which undoubtedly would have taken an unpredictable amount of time.

Second, the ECR is smaller in scale and likely receives significantly fewer research requests than either the NU or IDCFS IRBs. Not only is the process over research oversight less burdened and, likely requires fewer staff or board members, but also involves fewer bureaucratic steps thus, appearing to streamline the process. This interpretation might also support the possibility that the agency simply does not care as much about the minutiae of research details or further bureaucratizing how they determine and oversee research participation, potentially because they are not a state bureaucracy and have some degree of flexibility. However, since approval from the ECR was completely dependent upon prior documented clearance from both the university and the state, I argue that it should be understood as actually merely a final sequence of the a long and extended process, which initially began in 2009, but formally lasted from June of 2010 to October of 2013.

Most interestingly, according to the information provided by the DHHS Administration on Children and Families, Children's Bureau, IRBs are used to explain the intention of the

biannual pre-hearing case review, the ACR, as described in next chapter. On this federal website, an IRB is defined as,

> "a committee that reviews, approves, and regulates research involving human subjects conducted by its members or under its sponsorship. Some child welfare agency activities that evaluate the effectiveness of programs and practices require IRB approval" (U.S. DHHS Child Welfare Information Gateway 2018).

This website section also includes resources that describe the functions and practices of IRBs, including ways in which DCFS managers and researchers can best utilize these entities to support their evaluation efforts (U.S. Child Welfare Information Gateway 2018).[58] Therefore, I argue that my own participation within this collective ethical research review process reinforces not only the relationship between federal and state-level public policies, but also how these regulations should be employed by governmental organizations to investigate their own activities, and if granted, external research as well. This reinforces how certain collectivities (state organizations, nonprofits, court systems, and research sponsoring institutions should coordinate to facilitate or prohibit research, but also shows how influential specific individuals (IRB board members and staff) determine access to not only research – but to certain types of necessary paperwork like research approval letters and for my purposes – case record data.

My initial submission to the IDCFS IRB was denied and only later approved, after the long standing head of this committee (who also happened to be the IDCFS Guardian Administrator), retired after nearly two decades in both positions. I revisit this key institutional figure who was referred to as the legal "mom to thousands" later in Chapter Seven, as she was instrumental in the exponential expansion of the IDCFS administration during her tenure (Schlikerman 2013, 15). Critics argued she abused her level of power in not only research

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[58] One of the primary reasons I was encouraged by the NU IRB to exclude research involving youth was that it was presumably going to involve more liability concerns and less likely to be approved by the IDCFS.

requests, but also in controversial decisions such as deciding whether or not to take a youth off of life support, or preventing youth from seeking medical care like abortions.

Through this IRB ordeal, one can more fully appreciate the relationship between public policy and the significance of these regulations in not only shaping research activities, but also how the state as seen through the IDCFS, also enacts these rules into practice. Without a national child welfare system, individual states and counties are reliant upon these federal mandates to determine their own organizational compliance, but also to structure the bureaucratic logic of case management on the ground. And despite how laborious and tedious this process was for me, it reinforced to what extent recordkeeping and documents are part and parcel to the administrative culture of all bureaucracy but especially in the unique context of foster care.

Such was the case for many of my case manager interlocutors who quickly and nonchalantly signed their own consent form to participate in this dissertation project. Incorrectly, I anticipated that more so than the former foster youth, families, or other staff that agreed to let me interview or observe them for this project, social workers and case managers would treat the consent form with the most skepticism and scrutiny. Quite the opposite – they were the most familiar with this process of proceduralism – the circulation, completion, and submission of a permission-granting document. Thus, most offered their own signature with little hesitation, not only performing their own willingness to share their stories and answer questions about experiences on the job, but also demonstrating their awareness of the necessity to record their own informed consent - as they did this kind of paperwork for a living.

Much of social work requires grappling with objects and agents, through bundling and gathering of various records and graphic artifacts, which have the power to create and sustain different subjectivities and meanings. I now (finally) turn to what exactly a case file is, or can be.

In the following section, I shift the discussion to theoretical approaches towards materiality - the active and recursive role of material culture in shaping social worlds.

The Materiality of Foster Care

Anthropologists and scholars from other fields like sociology, political science, communication studies, as well as science and technology studies (STS) recognize the value of earlier insights about the nature and uses of documents and files within bureaucratic contexts (Das 2004; Hull 2012b; Jacob and Riles 2007; Schwartzman 1980). Processes of documentation have been intimately associated with modernity (Riles 2006), capitalism (Day 2001), the information revolution (Megill 1997), and print capitalism (Anderson 1991). Some contend that there presently exists a 'documentation movement' drawing attention to documents themselves and calling into question what a 'document' really is (Riles 2006). That is, what may be considered a document, is especially relevant even more so during the present digital era. In some contexts, documentation is necessary, and depending on the circumstance, certain material qualities of a document trump others.

Identification records for example, not only serve to establish and prove an individual's identity to a group or organization, but may also enable or disable them from certain privileges. In U.S. immigration law for example, often multiple forms of residency-related paperwork must be provided in conjunction with other documentation (such as employment, education, or medical records) to legitimate and authenticate legal residency or eligibility for certain state programs or support. Surprisingly still, most of the paperwork considered 'vital records' in the U.S. are only intended to exist on paper (birth and death certificates), along with 'naturalization' records (social security cards) or proof of private property (titles and deeds to homes and vehicles). Most of these items are legally considered null and void if tampered with, such as if

written on, burned, or damaged, and even through efforts to preserve such records via lamination, which is considered altering of government records. Or, if duplicates are discovered (as in a driver's license), one must be destroyed according to state law. But this emphasis on certain forms of paperwork materiality over others is of course, historical. It was not until recently that all state driver's licenses were even produced on a hard plastic wallet sized card and possibly will take digital form as pilot programs are already moving forward to digital IDs.

For centuries, paper was the material of choice when it came to producing identity documents. From the 1970s onward, plastic has gradually taken the place of paper for IDs. Polycarbonate has taken hold as the newest material of IDs, as it is laser engraved and more impact resistant, unlike acrylic that are printed and less durable, albeit easier to create and less expensive. Despite these changes to improve material composition, physical IDs remain as one of the weakest links in the identity chain skeptics caution.

Typically, case records in the foster care system and in similar service settings, are understood to primarily represent and record client-related information. However, from a labor perspective, related to the notion of apparently 'bad' records is the idea of records and recording technologies as 'representing work'. In this way, records – good or bad - represent the work of individuals, teams, and departments as well as the operation of an organization. In more contemporary bureaucratic and clinical settings, which increasing depend upon digital technologies to create, change, or store records:

> "the design of display artefacts [such as data servers, online forms] to support everyday work…[allow ethnographers the opportunity to] explore the practical ways in which 'representations' and 'information' are produced and utilized as part of routine and ongoing managerial work" (Riles 2006, 25).

For bureaucracies, it has been suggested that a kind of document - the file - functions as the essential technology, with written files still very much of core (Blau 1995; Garfinkel 1967; Goody 2000; Hull 2003, 291; Weber 1978). Files and filing are associated with order maintenance. A 'file' may explain an orderly line or row, and 'to file' describes the process of marching or walking in arrangement. In the military, 'to file in line' means a linear sequence of people moving in formation, usually according to rank. Filing may also be the process to bring forth a suit in a court of law. As well, filing describes the act of placing documents into a file object. In this sense, as a noun, the file is a container either - physical or digital – that simultaneously operates as a verb, through the assemblage of information. This data collection is stored as a unit, usually under a shared name for a given file record. In the virtual world, files are the most basic units in computer technology to store and retrieve data.

Within the records and information management (RIM) literature, files are further divided into two primary categories – subject files and case files (Arma International 2016). The type of file will depend on the purpose of the record and how the record is going to be retrieved. A subject file contains a collection of documents and evidence relating to the same topic or subject matter. This kind of file can deal with a number of different, but related, topics such as covering a single topic from a variety of perspectives. It can also contain many different types of documents. Subject files are created because it is easier to retrieve records that are grouped together as they deal with the same subject matter. In practice, subject files are usually based on a topic, type of document, or source.

A case file on the other hand, contains documents containing standardized content relating to a specific, time-limited entity or event, such as a person, event, project, or organization. For example, a personnel file is a case file – all of the information contained deals

with one individual while they are employed. A case file series may be a set of files that deal

with similar types of cases, such as client files or project files. Each case file within a case file

series contains the same or very similar types of documents. The main difference is that each file

deals with a different case or instance. For example, each case file in a series of application files

may contain a copy of the application form, a document that was used to evaluate the

application, and correspondence with the applicant. Similar information could be found in all of

the files in the series. The main difference between the files is that each one would deal with a

different applicant.

The same can be said for case files in child welfare systems like the IDCFS. Every family

case file in a series of other family case files will typically have copies of similar paperwork like

intake and consent forms, court orders, residential placements, and other decisions concerning an

individual case. Therefore, similar information is typically found: demographic data, historical

narrative statements, and case assessments. And like personnel files, the most important

difference between files in a families case file series are the individual social actors that are

being represented by it – foster youth.

Case files are also time-limited. This means that an event or action has to take place

before the case file is opened. For example, a project file will not be created until a project is

being planned. Likewise, a client file will not be created until a client shows up. An early

observation of mine at William Treatment Center is how youth residents are usually referred to

as "clients" by staff and "wards" by IDCFS officials. This is also reflected in how they refer to

the shared care record of a particular foster youth – "client case file" or simply, "case file." This

foster care case file then is created when a child protection investigation begins for a youth or

family in question. Client files such as those in foster care usually close because of a specific

event such as when an active child welfare case ends because a youth has left the care system. Project files close because the project is completed or suspended. Client files close because something has happened that takes the client off of the caseload. While the case file is open, all of the information on a single case will be gathered into one file.

Building on this framework, in Chapter Six I discuss how documents and case files comprise a significant portion of the materiality of court-dependent foster care and produce as well as reinforce particular social interactions through everyday routines that they may establish and facilitate. These encounters overwhelmingly are with other administrators, client support staff, but also officials from partnering agencies and 'systems' of social management (penal, educational, judicial, medical, and so forth). Through formal regulation and procedure, the case file also becomes and is managed as a legal document, in obvious and inconspicuous ways.

Closer attention to the very material nature of the case file, reveals that in addition to handwritten notes, most case records in foster care are generated digitally. Yet, actual case files presently exist mostly on paper containing folders of records, when necessary compiled into filing boxes, stored in a locked filing cabinet or room. It is likely that most of these documents will be eventually digitized or exist entirely in virtual form. This system wide impending digitization of case records calls into question the very idea of what a case file is, who has control and access to it, and how confidentiality is secured during these anticipated potential changes in the coming years.

As "paper-based documents allow and support a certain form of embodied interaction," (Harper 1993, 22), in what ways does the material qualia (Gal 2013) – the pragmatic signs that semiotically materialize into sensuous forms – shape, influence, and determine the material composition and state of the case file? To address these questions, I examine here the case file as

a bureaucratically constructed material document - object and technology - that develops a systemic social life (Appadurai 1986), meaning, uses, and purposes while purporting to document institutional, legal, and social movements of subjects (foster youth), and actions of organizations and officials (staff, administrators).

Indeed foster care case files, like the psychiatric records analyzed by Garfinkel belong to a certain documentary category that "anticipate[s] future events" (Reed 2006, 159). As discussed in Chapter Seven, social service providers such as case managers, therapists, other treatment staff, and volunteers report their clinical encounters with youth both as a as means of recordkeeping compliance, but also as a technology of treatment prescription. This means the same document or case documents can both record past behavior while also predicting potential outcomes. This dual-directionality is further complicated by its organizational material infrastructure – some of this paperwork is handwritten, typed, printed, faxed, and photocopied, while an increasing amount remains virtual either on personal computers or on a shared server. For case managers specifically, one of the challenges of the everyday task of this bureaucratic environment is negotiating code switching necessary to qualify client status and behavior with specialized clinical lexicon that must be formulated and reported into "billable language" according to the IDCFS Diagnosis Codes for Rule 132, for example:

Diagnoses for DHS Reimbursement of Medicaid Community Services – Rule 132

DSMIV - TR[59] Code	DSM IV-TR Name (version published in 2000)
295.10	Disorganized Type Schizophrenia Disorder
295.20	Catatonic Type Schizophrenia Disorder
295.30	Paranoid Type Schizophrenia Disorder
296.02	Bipolar I Disorder, Single Manic Episode – Moderate
296.03	Bipolar I Disorder, Single Manic Episode – Severe Without Psychotic Features
296.04	Bipolar I Disorder, Single Manic Episode – Severe With Psychotic Features
309.24	Adjustment Disorder With Anxiety
309.28	Adjustment Disorder With Mixed Anxiety and Depression
309.3	Adjustment Disorder With Disturbance of Conduct

Certainly while some case records are official, standardized, and time sensitive such as

for state services and necessary billing paperwork), other records within a given case file may

adhere to less strict formalities and the information they contain may or may not be useful at the

time of creation, but could be compiled into the case record for potential future use. Examples of

this are receipts for expenses that could be reimbursable to a staff or foster parents[60], letters

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[59] Most recent text revision of the Diagnostic and Statistical Manual of Mental Disorders (DSM)
published by the American Psychiatric Association (APA) and offers a common language and standard criteria for
the classification of mental disorders.

[60] For expenses related to foster youth like clothing, personal items, or emergency medical care.

submitted by foster youth, family members, foster parents, or youth advocates[61], even pictures of youth, relatives, or hand drawings included less so to record or document, but rather to join the corpus of what is known (or not) about a given case.

In order to trace the movement of casework, I use Hull's example (2012a) from his study of files in the urban government bureaucracy of Islamabad, Pakistan to review how file contents are used in order to identify and gather general information concerning their circulation. I do so through first identifying the documents themselves, making note of their context of creation, by whom, and why. Then, borrowing also from Garfinkel's focus on 'good' and 'bad' records (1969), I analyze their utility, in sometimes multiple circumstances of use, paying attention to the content of these documents, what is required data, what is deemed unnecessary, and how the very material form an arrangement of a given item or series of paperwork indexes – indicates - these bureaucratic ideologies.

As Harper (1998), Hetherington (2011), and Hoag (2010, 2011, 2014) argued, it would be difficult to examine closely the importance given to certain kinds of documented case data, while ignoring how relevant social actors are positioned differently to these files or noting what individuals or institutional networks of people may interact with not only the paperwork, but with one another. The organizational charts as well as the upcoming digital flow charts in subsequent chapters provide logical and physical representation of this meta-level data illustrating not only the circulatory movement of a specific case file and subsequent case activity, but providing organizational knowledge of the distribution of accountability between officials, agencies, and the state.

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[61] Pertaining to an incident, in response to or in preparation for an upcoming ACR, court hearing, or staffing.

Case files offer an opportunity to explore materiality, the conceptual description of the nature of the material world and its ability to bring subjects and objects together. It conceives of the ways through reciprocal and dialectic relationships that people make objects and objects make people. Archaeologists and ethnographers have documented, analyzed, and interpreted the profound importance of material culture on the human condition as objects are embedded in every turn of daily life (Appadurai 1986**;** Ash 1996; Bourdieu 1971; Chin 2001; DeMarrais 2004; Earle 2001; Gell 1986; Hansen 1995, 1999, 2000, 2003, 2004; Hauser 2007, 2008**;** Kopytoff 1986; Miller 2005**;** Pinney 2005; Robin 2002; Rowlands 2005; Weiner 1992**;** Winegar 2006, 2008). From this perspective, any conceptualization of material culture directly relates in some way, to construction of social culture. A separation of the two is impossible as subject/object or persons/things are given meaning through the relationship between each other.[62]

We see instances of how the phenomenon of case filing is, to use Latour's (1993a) phrase, 'purified'. The human and non-human components that make up case recordkeeping are separated – or rather, as we shall see, the role of the human (that is, behavior or culture) is privileged even while the interconnections between the person and thing are tacitly assumed. The previous work reviewed here and in earlier chapters sheds light on some of the ways in which filing and recordkeeping in foster care administration has been constructed – that is, purified (especially by the state and an apathetic populace). This includes consideration of the public discourse that has attempted to examine this kind of state-mediated care historically, cross-culturally, and micro-socially. Microsocial here refers to "those other local social situations

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[62] For Pierre Bourdieu (1971), these relations are crucial for abstract construction and conception of social meaning. He described the Berber house through a series of binary and parallel oppositions that simultaneously create and gain meaning through one another: male/female, sacred/profane, light/darkness, culture/nature. He argues that the analytical dichotomy of inclusion/exclusion of the domestic space demarcates the definitions of meaning upon which symbolic value is attributed to the Berber house and all other "areas of existence" (105). The positionality of material objects and the physical structure of the home represent the organization of the broader culturally specific universe.

wherein are found…behaviors that resemble" what you might find in case management like

emphasis on documentation, policy, and procedure in other clinical and legal settings, technically

not part of any foster care system (Michael 2001, 65).

Part of the reason for this general neglect has been the emphasis upon the 'social' and the

'society' in social science. As Latour (1993) argued, this division into the human and the non-

human, the social and the natural has a long history which he referred to as the 'Modern

Constitution' according to which we moderns have been predisposed to see only these

dichotomies. Moreover, attention has also been brought to bureaucracies in part due to the

material-semiotic restructuring of the Western world from the instigation of identity documents,

especially vital records, receipts, time stamping correspondence, and the ways in which the very

material composition of paperwork has shifted from something physical to increasingly digital

and virtual.

In their aptly titled *The Myth of the Paperless Office* (2002), Abigail Sellen and Richard

Harper take issue with the presumed disappearance of printed paper that the use of e-mail in an

organization implies. As they argue, since the introduction of computerized documentation of the

last three decades, organizations on average have increased their paper consumption

considerably.[63] Like Susan Gal's semiotic concept of qualia, the subjective experiences of

sensuous qualities (colors, textures, sounds, smells), Sellen and Harper consider the paper itself,

its physical characteristics, "being thin, light, porous, opaque, and flexible" and the ways in

which these material properties "afford the human actions of grasping, carrying, folding, writing,

and so on" (2002, 17). I employ this concept of "affordances" that is, the activities that an object

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[63] At the time of their publication in 2001, the average rate of increased paper consumption for organizations that also used e-mail was 40%.

like a document – paper or digital – allows in foster care and case management to examine its sociomaterial significance.

A particular arena in which one can begin to detect the crumbling of the modern constitution is that of political ecology (Latour 2004), where the complex mutualities of the human/non-human, the cultural/natural – that is, of hybridities – are increasingly actively and self-consciously deployed in doing such politics (Whatmore 1997). Furthermore, hints of an occasional grasp and valuation of such hybriditization, pervade popular cultures (Michael 2001). Such a process of judgement of hybrids is important because, according to Latour, the modernist blindness to them has enabled their sometimes dangerous proliferation, most dramatically exemplified in their increasing pervasiveness of biotechnologies and their products (Haraway 1991).

However, the key purpose of this dissertation project is to look at how in the shared practice of recordkeeping, such mutualities, reciprocalities, hybridities are systematically expunged. I aim to show how these contextualizations, while presupposing the hybridity of humans and technologies, simultaneously function to purify such hybridities: that is, the role of paperwork is downplayed; documents as they were, 'invisibilized.' Through purification: the file and person are extricated from one another. From this perspective, people are dehumanized by virtue of everyday engagement and exposure to recordkeeping and an artificial sense of insulation and empowerment provided by processing certain documents.

Culture, as a social construct adopted through influence, depends upon transmission of cultural knowledge and is achieved through those who embody it (Foucault 1980, 1991). Through socially available systems of significance, individuals actively participate in this embodiment of social ideology through daily ritual activity. Yet while we are socialized to

understand and use objects in certain ways, in turn these same objects have the capacity to shape social life. In child welfare and foster care administration, certain organizational artifacts are more present than others, the case file dominating much of bureaucratic life.

As embodiment is essential for cultural acquisition, I contend that qualia is useful to untangle how these understandings come to be, as it emphasizes how even sensations of perceptible qualities, "softness, lightness, clarify, pain, stink … are endowed with cultural value, whether positive or negative" (Chumley and Harkness 2013, 3). Qualia emphasizes experiential meaning-making of qualities in all social life. Even though there is often a tendency to approach "qualities as purported properties of things in the world," qualia reinforces that "the experience of qualities is a fact of sociocultural life" (Chumley and Harkness 2013, 4).

I argue that what I am calling "procedural ethnography" – participant observation and interpretation of formal procedures like in bureaucracies, offers an opportunity to witness how the aesthetics of a case file (size, shaped, order) or material presentation (paper, digital) are subjectively experienced by those that interact with these organizational artifacts. This approach is akin to what scholars of social work and champion of ethnographic research of case management Longhofer and Floersch (2010) referred to as "practice ethnography" as a lens through which to examine how,

> "The distance travelled (the case manager and client) between the stated aim and the actual practice can be represented as an experiential space where meaning (that is, *being* and *having* a case manager) is produced. This space, or gap, is where practitioner and client experience is lived. Thus, the goal of practice ethnography is to discover how treatment, service or intervention 'meanings' emerge from the potentials and liabilities of ongoing practitioner and client relationships" (306).

However, like most research on social work, this ethnographic attention to the practice of this labor, remains within the interactions and dynamics between service provider and service

recipient. In his use of this ethnographic method following child welfare caseworkers on home visits in England, social work researcher Harry Ferguson's use of "mobile methods" is similar to Brodwin's (2008, 2010, 2013) extra-clinical ethnography through American community based psychiatric care management. They both followed care workers as they made their daily rounds to client homes as their method of service provision. However, unlike the adult-to-adult careworker-service interactions that Brodwin focused through on the delivery of psychiatric care via the distribution of prescription pills in medication cassettes, Ferguson shadowed officials that are responsible for adult-child-adult encounters that required often invasive occupation in rather private and intimate home life like entering a child's bedroom or inspecting a home for mandated compliance, as a performance of child protection. Both of their studies showcase how the modern practice of contemporary casework by the state - either for child welfare or mental health - is largely deinstitutionalized, outside of traditional clinical settings, and into one's living room.

While Ferguson locates the intimacy of the home visit as both spatially private and emotionally sensitive, like Brodwin, I diverge from the emphasis on the human-human interactions in so far as they are mediated by and contingent upon the circulation and distribution of social work artifacts like medications or case files. While they and Longhofer and Floersch (2010) do account for and seek to capture ethnographic moments of client-provider coordination and negotiation, the material culture that facilitates and informs these encounters through human-nonhuman interactional accomplishments, remains mostly absent from these studies. Therefore I propose procedural ethnography as a research technique that affords the ability to understand how all casework requires certain 'things' in order to in Longhofer's words, "be and have a case manager" (2010). And, I argue that through closer attention to the banal and tedious procedures that often are facilitated by certain kinds of objects in order to practice these kinds of social work

artifactual-ethnographic findings can also generate and define opportunity gaps and unmet needs in these service provision activities, by focusing on the user behaviors and the overall flow of user-device-procedure.

The case file is part of a complex heterogeneous socio-technical network (Latour 1987) whereby the cultural conventions which structure the production of bureaucratic behaviors are related to records themselves, where the case file is conceptualized as a distributed material-semiotic 'nexus' (Whitehead 1929) or "hybrid collectif" (Callon and Law 1995) that mediates, and is mediated by, cultural and material conditions.

As culturalized material and materialized culture, documents prescribe and proscribe. In the modern era, documents are entities that, both material and sign, flow cross-culturally (Appadurai 1990). In a similar way to Nuijten's concept of the hope-generating bureaucracy, as a material-semiotic artifact, the document has been a means through which these technologies as networks themselves, entail a 'promise' that is inscribed in them materially or semiotically. At minimum, such promises might include that the technology should not break down, nor should users be impeded from accessing or sharing the information they are designed to contain.

Within any social scene, the capacity for agency depends on cultural competence and this knowledge is shared through exchange between relations and shared behaviors (DeMarrais 2004, 12-13). This is seen most clearly in the ways in which more experienced staff manage their caseloads and paperwork often with more ease that novice colleagues, but also how families under investigation, youth in custody, or even foster parents understand and abide by the established policies and procedures enforced and regulated often through social work recordkeeping and bureaucratese. Those who are more familiar with and appreciate the

significance of documentation – what is documented, and what is not – are more likely to use this kind of social service system to meet their own needs.

This is certainly true of the foster care system. The bureaucratic process of living under state custody can be long and complex, but the social workers, administrators, and other staff that I interviewed and observed at Williams Treatment Center made a great deal of effort to explain procedures to me, as hand-holding by fellow colleagues either new to a method or an organizational process is quite common for staff. An ethnographer such as myself inquiring about certain paperwork and processing either in order to help in daily office tasks, or for clarification in formal interviews, was welcomed accordingly. Put simply, many staff are used to having to explain procedures to one another as policies frequently influence and change necessary paperwork, but also due in part to the high turnover rate of staff in the foster care system, and ever present shifts in caseloads.

Noticeably though, in my interviews with parents who had previously 'caught a case', no one reported any explanation about paperwork or recordkeeping in how they should work towards getting their children back in their custody. Of the required trainings that foster parents must take (see Chapter Five), none of my interlocutors reported ever having to learn or demonstrate command over necessary paperwork. As Viola, a university administrator and foster parent told me,

> "It was LITERALLY useless information. It-it was, 'here is what child abuse is' um, and I-I some of me, and maybe I'm just naïve, um we sat through most sessions going, 'if you are above 12 years old, you already knew this information.'
>
> Like, 'don't beat kids up', that would be 1. You know. 2, 'don't withhold food'.
>
> Like, to us, that-that is information you should be giving to the families you are removing them from, right?"

Existing curriculum in undergraduate and graduate social work and social service administration programs, typically do not require explicit training or familiarization with recordkeeping procedures. This is knowledge that students are expected to gain through practicum at their field placements. Despite the emphasis on proceduralism there is a significant dependency upon the experiential weight of recordkeeping exposure. The more you have to endure, increases your understanding of why documents like permission slips, court orders, medication 'scripts, receipts, food vouchers, and case reports are so central to the act of state-mediated fostering as a kind of care.

Therefore, this dissertation argues that an analysis of the materiality of social life in foster care requires attention to both objects and subjects. As already noted, the site of inquiry and analysis of the foster youth experience by many in social work and public policy disproportionately focuses on the subjectification of foster youth as individual social actors, who understandably may exhibit a range of behavioral and psychological issues. These widely circulated statistics reinforce a narrative and public image that foster youth – as individuals and a group - are a social problem. This data is frequently interpreted to represent youth deficiencies, rather than as reasonable responses to trauma experienced before or while in care. Most notably, the state rarely uses this data to evaluate their own effectiveness in enhancing youth lives, instead treating case records as a means to determine the compliance and accountability of its agencies and partnering service providers regarding policies and procedures. Rather, the all too frequent disappointing outcomes of youth while in and out of care are simply used to justify the state's existence in these family cases. Making this decontextualized data publically available, creates a

veil of transparency and accountability that does little to address the systemic and complex issues that are well known in child welfare and foster care administration.

The poignant examples from recent ethnographic studies take issue with these limited analyses, and have focused on the structural forces, staff limitations, and stigma against foster youth and families investigated by the state (Glenn-Levin Rodriguez 2017; Lee 2016; Scherz 2011; Silver 2015). However these studies combined, still largely negate the impact and importance that objects serve in the everyday lives of participants within this state care system. Most importantly, these studies offer some much needed expansion of the limited presence of scholarship attending to the broader implications of the foster care experience to the larger general public.

To my knowledge, no research has examined how this ascribed position of being a ward of the state imposes an identity that is intimately situated within a legal and political discourse of great consequence on the development of self and personhood throughout the rest of the life course. I argue therefore that case files and other paperwork are so ubiquitous in foster care administration, that their significance is profound and in need of more critical attention. Taking a materialist approach to understand the culture of foster care and case management is not only a departure from existing research, but also timely and necessary as most other social service sectors have moved away from the dependency towards paper-based recording and more centrally stored, digital data management systems.

State medical and dental programs rarely require any more documentation than completing an online application and providing a wallet sized coverage card to provide your care providers. It is highly unusual for more than a few paper intake forms to be completed once at the provider, as most records are now entirely digital and accessible via computer screens. Even

x-rays, once requiring a complicated printing process onto hard film, can now be digitized allowing for the ease of e-mailing and virtual storage. The object formerly known as food stamps were actual paper vouchers for state approved nutrition purchases. In many areas, these took different forms; some looked like bank checks, others more akin to "Monopoly Money" as I have been told. Now, many states across the country administer food assistance programs like SNAP or WIC through plastic Electronic Benefits Transmission (EBT) debit cards that allow program recipients to more discreetly purchase food. The available balance on such cards like the Illinois LINK Card, is simply a phone call away to an automated system, or a quick login to the program website. This allows the state to more immediately monitor the use of these programs, but also remotely control the distribution of funds. It also suggests fewer bureaucratic steps in the triangulation of the state, service user, and food vendor. It is also worth offering the interpretation that such an object – the EBT card – is semiotically less noticeable than paper food stamps, and therefore carries potentially less social stigma. Only through a quick swipe and four digit pin number are you 'linked' up to the state program.

In addition to objects as having material value like monies in an account, objects can also tell stories about the people who use them. Individuals and even collectives have life stories, narratives through which sense is made of their existence. From a narratology perspective, life stories assist with understanding individual identities (McAdams 1996, 296) and may also aid with constructing and ratifying group identity (Jackson 1990, 400, 402; McAdams 1996, 313; Myerhoff 1977, 1978). The same can be said of things according to Igor Kopytoff proposing an approach to the study of objects that acknowledges the biographical trajectories of things (1986, 66-67).

Accordingly I argue that the case file should be understood as also having a social existence, a social life (Appadurai 1986, 3, 13; Hull 2003, 293). Furthermore Alfred Gell contended that objects, like narratives, also serve a role in establishing and reinforcing both individual and group identity (1986, 102). From this perspective, things can be conceived as having a social value, often communicated through exchange (Gell 1986, 117; Kopytoff 1986, 69; Weiner 1992, 47, 56). Therefore, I propose it is also possible to look at foster youth life histories in terms of care and use of the case file.[64]

However, due to the limitations of research access for this project I was not able to explore the relationship of the case record to how foster youth recount their case histories. This roadblock redirected my examination of case file historicity as also providing narratives about bureaucratic life in case management and the other social actors like state officials, court personnel, and families besides foster youth who also are represented in a variety of ways in the case file. Whether notations regarding placement with a foster family, an extended description of recent events concerning a family, to someone's signature on a form granting permission for a decision or officializing a recommendation – individuals are peppered all over case records. And

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[64] The utility of "one's own story" was first championed by Clifford Shaw in the wildly cited biography *The Jack-Roller: A Delinquent Boy's Own Story"* (1930). This work documents and interprets the behavior of one "Stanley", a young man with a life long history of truancy, deviant behavior, and criminal activity in the 1920s Chicagoland. Over the course of six years, Shaw and Stanley develop a relationship that follows through transitions as a ward of the court, juvenile offender, and eventually a young prison inmate. It is during this time that Shaw asks Stanley to share his life narrative, both from his own perspective and in response to what patterns of circulation are documented in his case file. Most importantly according to Shaw, are the rehabilitative potential and social improvement benefits of this subjective personal account in not only social science research, but the treatment of what he characterized as juvenile delinquent behavior more generally. Despite the presented narrative in this book - which depicts a troubled young person, down on life's luck who develops into a changed and contributing member of society – Shaw strongly proposed that the combined use of legal records (the case file, medical and behavioral historical information) with another form of personal document – one's own life story – would best enable improvement of juvenile delinquent behavior and future adult criminal patterns. Such an approach was supported significantly during the mid-twentieth century by ethnomethodologists in sociology but until recently has gained less purchase in the ethnographic record both for theoretical and methodological preoccupations. As an ethnographer, I was inspired by Shaw's attempt with Stanley to provoke other socially conscious researchers to work *with* informants and subjects to improve pathological environments and destructive actions individually and collectively.

despite the rather corporatist quality that paperwork often serves in bureaucracies, the people behind the records can also be seen through looking at documents. This is especially evident in human social service settings like foster care administration. In this way, we can also characterize case filing as entailing the altering of an individual's identity by a process of dehumanization and to a certain extent, loss of self-control in the interest of bureaucratic authority.

While objects like case records can provide identifying information and historical knowledge, they also demarcate social relationships. One approach to this material significance is through materialization, the process by which humans select means to objectify non-material notions to control or resist. It describes how the control of the process of making material culture gives differentiation – how individuals and collectives regulate access to the material world. Michael Rowlands (2005) argues that personhood, self-realization, and even consciousnesses itself are inseparable from the material. The material - whether it occurs prior to or as a result of the abstract (perhaps immaterial) – possesses social and political force. According to Elizabeth DeMarrais, "monuments, icons or symbols, events, and written texts" – are devices employed to communicate ideology (2004, 21). Annette Weiner (1992) argued that some objects are specifically utilized to demarcate otherness through the lack of exchangeability that is exercised. Through the accessibility of something, people communicate a separation between themselves and those who do not possess the same things (Weiner 1992, 46-48). These objects then are given value in their limited (or lack of) mutual use. If regularly exchanged across various peoples, communities, and places, the very nature of value alters.

The case file can be understood as such an object. It is possessed and accessible only by officials who supervise foster youth and case management. Families under investigation as well

as foster families are not given complete access to case records. Parents and other legal guardians are legally entitled to any legal records such as those included in their legal case file. As illustrated in the example from the ACR described in Chapter Five, even when copies of case reports are made available to families under investigation, there is frequently little attention towards their understanding and ability to even read such reports. This only reinforces the peripheral position that many families occupy in foster care proceedings, especially those who struggle with literacy and command over the English language, let alone legalistic bureaucratese.

Foster youth may only acquire a copy of the case file after exiting the foster care system; which if this occurs prior to 18 years of age, becomes an ever more challenging feat. Upon exiting the foster care system, the case file is archived in the local county or state filing system and the records remain securely controlled until eventually destroyed to make room for incoming 'closed' case files. Any exchange of knowledge – the life course of participation within the foster care system via the case record – occurs only through the agency of the individual former foster youth to acquire the case file. In Chapter Eight I provide more details pertaining to my attempts to get my own foster care and legal case files from Los Angeles County. The power further communicated through this isolated possession between officials, families, foster youth cannot be overstated. Yet, as mentioned in the previous chapter, foster youth advocates also continue to call attention to internal communication issues amongst officials, calling into question the effectiveness of the current methods of case recordkeeping and information sharing.

As seen in the ethnographic record and through my own participant observation, the circulation of foster youth is experienced in all facets of daily life: residency, school, locality, peer groups, access to resources, and social networks. With the exception of institutionalized living placements like group homes or RTCs like Williams Treatment Center, overwhelmingly

foster youth have very little material culture that will follow them through the life course of the foster care experience. As such, the single guaranteed unifying material objects (besides the human body) that all foster youth share are the state documents that record their trajectories throughout their time in the foster care system. This paperwork may include family law court orders (living placements and status updates on reunification with families), medical records, school records, and penal system records (for juvenile offenses, if applicable). The culmination of these "graphic artifacts" not only comprises the case file of foster youth but contributes to constructions of legally legitimated bureaucratic authority, agency, power, and subordination (Hull 2003, 291).

Of the existing scholarship on child welfare in the U.S., only one study has ever taken an archaeological approached to understanding custodial life for children in state homes (Morenson 2018). This very recent contribution through The Rhode Island State Home and School Project began in 2001 as a multi-year research, documentation, and preservation project. The project involved excavations, oral history interviews with former residents, and an initiative to catalog and preserve the records of the facility. Through excavations, reading unexamined case histories from archival records, and collecting narrative accounts, this provides the single anthropological and archaeological investigation into a former orphanage and institutional care setting in U.S. history. I attempt to join this remarkable contribution to the drastically limited record for custodial youth in social science and historical literature. Just as thousands of children and citizens lived portions of their lives in this former State Home that until now have gone unexamined, I hope that by also focusing on the material culture of socially orphaned youth in current foster care I also show how documenting children's education, social, and health experiences in the case file are not inconsequential.

Using the lens of legal anthropology, Yngvesson and Coutin (2006) presented an exploration of adoption temporality within the comparative context of international adoption in Sweden as well as immigration and deportation in the U.S., investigating "the potentially powerful role of law and papers in figuring belonging and being" (185). They argued that certain forms of paperwork are instrumental in molding adoptees' and deportees' experiences of return, or going "back", a process in which time and space amalgamate as social and national borders are crossed. At base, the argument is as much if not more about place, movement, and belonging as it is about the generative power of paperwork.

In order to frame my current project, which takes Yngvesson and Coutin's comparative adoption temporality as a jumping off point, an important contribution can be made to theorizations of the relationship between bureaucracy (the analysis of which is absent from their ethnographic account), materiality, temporality, and the creation of new forms of kinship. I do so in this chapter by outlining the ways in which paperwork involved in foster care administration creates trails through both time and space in ways that are almost entirely mediated by recordkeeping activities. While paperwork functions to create subjects in both domestic and international adoption, I argue that so does such documentation in foster care. The case record activates and creates a new legal identity as a "ward of the court or state" for youth under state custody, but also facilitates the foster youth's sociomaterial identity, often taking on such other colloquialisms as "ward", "foster child", "foster kid," even "foster."

In the tradition of anthropologies of international adoption, Yngvesson and Coutin focus on the experience of adoptees long after the finalization of adoption, an emphasis required by an analysis of return to one's country of origin. Through the birth certificate they argued, adoptee subjects are constituted, both the past and present (2006, 178). Upon return, adoptees and

deportees are also confronted with "selves that might have been" (Yngvesson and Coutin 2006, 181) a reference to a future that never unfolded. Space and time are inseparable in the concept of "going back," which entails notions of starts and origins.

Case File Activation

In the U.S. any resident – citizen or visitor – has the potential to 'catch a child welfare case' (Lee 2016) for any length of time: a night, a week, months, or years. Any formal involvement with the state must first begin with a report to the local child welfare organization, such as the IDCFS. Such requests involve allegations of abuse or neglect and are typically made through a local, central telephone number, commonly referred to as "the hotline". In Illinois, such a contact number is referred to by the state as the "Abuse Hotline" (IDCFS 2018). Anyone can make calls to the hotline – youth, family, professionals, or general public. Calls can also be anonymous. All calls are reportedly documented and this recordkeeping activates the creation of a case record. One point of important clarification though is that just because a case record has been created, a file of sorts, this does not mean that a case has been "caught." Cases can also be caught in other ways such as if youth are found to be unsupervised or abandoned at home, school, or other public settings, or if youth are involved with the juvenile justice system.

Calls to the hotline are intended to be authenticated and if deemed necessary, investigated within 24 hours by a delegated agent of the local child welfare system. It is only after an investigation has occurred and the allegations of abuse or neglect have been substantiated that a potential formal case can be opened. Such opening of a case becomes a court matter, and results in the activation of the partnership legal dependency court case file.

Regardless of the outcome, a typical family case is first documented and filed in the mother's name, with relevant youth dependents listed accordingly. Because single mothers are

disproportionately reported and investigated, family cases are usually listed under their surname, by default. The historical roots of the professionalization of social work as discussed in Chapter Three identify that the initial public concerns regarding state intervention in family life surrounded issues of alleged abuse and neglect. One of the primary groups that was targeted and subject to such state efforts were immigrant families, many of which were led by single-mother households. As most of the early social workers were white, economically privileged women, it is clear that class-based ethnocentric notions of family norms were guiding ideologies behind such children and family support services.

Abuse and neglect were also historically understood as two separate, although frequently interrelated and co-occurring social problems. Therefore allegations were initially categorized and treated as either abuse or neglect, or abuse and neglect of children in question. However, it was not until the *Child Abuse Prevention and Treatment Act* (CAPTA) of 1974 that public policy merged these two issues – abuse and neglect – under the same legislative umbrella as a social problem. And what has resulted is that calls concerning either suspected abuse or neglect are made to the same central hotline number, of which at least in the case of Illinois is deemed the "*Abuse* Hotline". This not only centralizes a wider array of allegations surrounding potential abuse or neglect, but has subsequently resulted in a system wide culture of using such terms and concepts of "abuse" and "neglect" interchangeably.

For example, a parent who is experiencing economic hardship and is unable to provide for their children, would previously have been reported for neglect. But with the current public policy as it stands, this same parent is accused of not only neglecting their children (which of course could occur for a variety of reasons, including beyond the parent's own doing, as in losing

employment, personal injury, and so on), but now is also simultaneously accused or later potentially charged with – abuse.

Abuse is an equally vague and highly subjective concept as seen in Jill Korbin's edited volume *Child Abuse and Neglect: Cross-cultural Perspectives (*1982). Just as practices of fosterage, adoption, and child circulation are indeed social constructs, ethnographic examples from New Guinea, Africa, South America, India, Turkey, Japan, Taiwan, and China show how understandings and determinations of child abuse, child rearing, even infanticide must be contextualized in their appropriate cultural context. The blanket concept of "abuse" in the U.S. and Canada is equally problematic, especially concerning the subjective interpretations of abuse and how instances of suspicion are translated into cases of abuse (Glenn-Levin Rodriguez 2017; Handelman 1987; Scherz 2011). However, it is a label that is emotionally charged and socially taboo in American culture.

Accused parents shoulder a powerful blame for their alleged inability to prevent their children from experiencing abuse or neglect. As seen in the support group meetings discussed in Lee's (2016) ethnography, many parents feel unsupported by the very social service system that is supposed to protect children, while upholding family integrity. This was so much the case for the mothers in her study that they took it upon themselves to start an external support network for families currently or formerly 'caught' with a child welfare case investigation. These meetings were hosted by families and advocates who feel that they have been wrongfully accused or systemically marginalized in their state involvement.

Abuse historically has been mostly understood in the physical sense. A child is allegedly victim to physical harm either directly by a family member (youth or adult) or another member of the public (youth or adult), and the supervising parent, parental unit, legal guardian is suspect

to either knowingly enabling such abuse, or is unaware of its occurrence. Such abuse could happen in a single event or ongoing. Establishing and authenticating abuse in the physical sense, is usually achieved through visible marks on the body, and then photographic or written documentation of such evidence. It is only somewhat recent that emotional or psychological abuse has gained recognition in the field of social work, although it is understandably more challenging to investigate, authenticate, and document.

Mandated Reporting

According to the IDCFS, "Everyone who suspects child abuse or neglect should call the Illinois Department of Children and Family Services Child Abuse Hotline to make a report, but Mandated Reporters are required by law to do so" (DCFS 2018). Individuals designated as mandatory reporters typically have frequent contact with children. Such individuals may include but are not limited to: social workers, teachers, principals, and other school personnel, physicians, nurses, and other health-care workers, counselors, therapists, and other mental health professionals, child care providers, medical examiners or coroners, or law enforcement officers. In Illinois, any mandated reporter is required to sign a single-sided form, often during their hiring process, or training for volunteers. I personally have signed this form a number of times for different capacities and at no point was I given any literature or resources regarding how to properly identify neglect or abuse. There is now an optional free online training course available from the IDCFS website, *Recognizing And Reporting Child Abuse: Training For Mandated Reporters*, but to my knowledge this is not mandated. The burden of proof however, regarding these reported suspicions, rests on the local child protection agency.

Once an investigation is active the child may or may not be taken into state custody. If a child is taken into temporary protective custody, the IDCFS is required to then bring the case in

front of a judge within 48 hours (excluding weekends). The judge will then decide whether or

not to keep the youth in custody, return them to their parents, or another relative. Legally,

parental rights are not lost until adjudicated in a court hearing. Guardianship is then assumed by

the state until an alternative parent unit is identified through adoption proceedings. Usually,

parents do not lose their parental rights in the legal sense, but this does not mean that children are

necessarily returned to their families of origin.

There can be a variety of decisions that result in different actions for a case. Youth in

custody may be returned to their families once an investigation is complete, sent home on

conditional short-term family visits, or only through supervised visits with state officials. As

with the cases examined in Glenn-Levin Rodriguez's (2017) examples involving mixed-status

Latina/o families, it is not uncommon for case trajectory to be in constant flux.

As a foster youth, in our interviews Delilah reported similar feelings of public shame for

having an open investigation, and described the mandatory parenting classes she had to complete

as part of the case management plan. She like Corinna, cites her own status as a previous ward of

the state as one of the reasons why she was under state scrutiny. Her experience is outlined more

fully in Chapter Seven, wherein she describes being accused of abuse and neglect, and forced to

attend state sanction trainings that from her perspective were "A total waste of time." One

notable example given was that the class instructor openly remarked that "you aren't supposed to

spank your kids, but we all know that a lil' spanking never hurt anyone." Despite Delilah's

shock, she was further dismayed at how unhelpful the classes were at addressing the lack of

social support she needed as young single mom, who also aged out as a product of foster care. As

she described, "I just kept my head down, and did what I had to, to get my baby back," which

according to her involved attending certain classes on discipline (despite no allegations of abuse

in her case) and getting the necessary paperwork signed off that she had completed these

obligations to submit to the IDCFS and the Cook County Juvenile Justice and Protection

Department's, Child Protection Division.

Case File Anatomy and Composition

As noted, one of the marked distinctions of case files in foster care as compared to other

social service system records is the materiality of recordkeeping. Despite the use of computer

and cellular technologies, case records remain for the most part, on paper. As Stella, the unit case

manager I accompanied for the ACR in the next chapter pointed out to me, "Every e-mail I send

or receive regarding a client has to eventually be printed, and stored in their binder," at Williams

Treatment Center. This is not unique to just this contracted agency as other officials I

interviewed echoed her remark. This means that most documents that are created on behalf of

youth are either completed by hand, such as in the example of intake and consent forms see in

Chapter Seven, or through a computer screen, which are stored on a shared company server, and

when finalized, later printed out and filed. As much of the direct case management in Illinois is

contracted out to private agencies, what results is frequent duplication of certain records.

As Peggy, another unit case manager at Williams Treatment Center suggested, "If we

could only have direct access to the SACWIS66, then we could save a lot of wasted time." This

database, is sponsored by the federal Children's Bureau, Administration on Children and

Families and contains foster youth demographic data and case-related information. Concurrently,

the Residential Treatment Outcomes System (RTOS), is specific to the kind of care setting that

William Treatment Center provides, as it is an application "intended to track Illinois youth in

case who are in residential treatment facilities. Each youth's clinical, academic, vocational, and

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[66] Statewide Automated Child Welfare Information System

assessment data are recorded here on a period basis" (IDCFS 2018). This password protected

system, is housed on the IDCFS website, but is only accessible by state employees.

Therefore, as with SACWIS, case managers at non-state agencies must rely upon

designated state case managers to not only provide the information from either system to outside

service providers, but they are also responsible for transferring outside case data into the system

as well. For youth not in a residential treatment center, such as those living in smaller group

home settings, or individual foster homes, SACWIS is the database that houses their

consolidated electronic state records. The same issues of access exist here as well, namely that

despite the outsourcing of most case management to contracted non-state organizations, state

officials still control official case records.

Due to limitations on my research access, I have to rely heavily on my exposure to case

records from participant observation in the following settings: Williams Treatment Center

(Chapter Seven), the IDCFS ACR (Chapter Five), dependency court hearings in two California

counties (Chapter Six), and my own attempts at getting my case record from the LADCFS and

Children's Court (Chapter Eight). I also draw from interviews concerning case-related

paperwork with officials, families, and advocates. This combined data, offers an opportunity to

better understand and examine the heterogeneous relations to social actors and recordkeeping.

And, as illustrated in Glenn-Levin Rodriguez's (2017) examples from the San Diego-Tijuana

region – most case records and decision-making are based on partial and incomplete information.

In this way, my ethnography joins her study as well as Silver's (2016) to showcase how

disjointed and fractured much of contemporary case management is – even regarding what a case

file is and how it is used.

Case files, like other kinds of files, are designed to store information in an orderly fashion. At a minimum, the following information is required in the foster care case file (Public Welfare, 45 C.F.R. §1355, 1356, 1357):

(a) Verification that the youth is or is not of tribal heritage

(b) A written case plan (established within 30 days of placement), which would include a permanency plan detailing the need for and expected length of placement;

(c) Information on each child's health status and school records, including medications and immunization records;

(d) Parental consent(s) for emergency medical care, school, and transportation;

(e) A signed plan for payment, including financial responsibility of parents and use of other appropriate resources;

(f) A copy of the certification/license of the foster home;

(g) A current photo of each child;

(h) A copy of the social security card, birth certificate, Medicaid card and current court order;

(i) For a placement beyond 30 days, copy of the action taken or authorized by a court of competent jurisdiction that documents the need for protection of the child;

(j) For an involuntary placement, a social services assessment completed by a social services worker within 30 days of placement;

(k) Documentation of a minimum of one visit to the placement setting per month by the social services worker with each child; and

(l) A list of all prior placements, including the names of the foster parents and dates of placements.

At Williams Treatment Center the contents of case binders are organized according to a predetermined format, outlined in the beginning of each binder set. As cases become more complicated, they too develop in size and scope. It is not uncommon then, for a case binder to outgrow a single binder, into subsequent binders. The largest binder set I saw at this facility was three binders for a single youth client. The binders are then combined in numerical order, "Binder 1 of 2," and so forth.

It is usually the first part of the binder that is most used, as this includes legal consent and entry forms (Section I – Intake/Consents), authorizing youth to live and received services at Williams Treatment Center, as well as periodic case and mental health assessments that are completed on a set schedule (Section II – Clinical Documentation). These are the documents that are in greatest use and legally binding. As illustrated in Chapter Seven, these are some of the most heavily audited records by the IDCFS as seen in the Medicaid Recertification Review. The next sections of the binder record serve more for historical purposes as this is where case notes are kept either in (Section III – Case Notes Billable) or (Section IV – Case Notes Unbillable). Billable records pertain to documentation of reimbursable services, and these will also be scrutinized heavily in the event of a randomized case file audit from the IDCFS through the Post Payment Review. It is not until (Section V – DCFS/Permanency) that "Anything from the DCFS or Court System" are included in this joint record.

As implied through the lengthy Table of Contents (two pages), the binder will also include additional documentation in sections,

VI Education (school records, report cards),
VII Outcomes (Cognitive Assessments),
VIII Verification Documents (Birth Certificate and Social Security Card),
IX 906/Financial (Independent Care Grant records),
X Other/Miscellaneous (Clinical documentation from outside providers), and
XI Unusual Incident Reports

Conversely, the child welfare legal court file, takes a slightly different format. These files are like other court files, are organized in descending chronological order, with the most recent documents on top. They are attached in such a way that documents cannot be removed out of order, resulting in the manual detachment of any document that needs to be taken out and reviewed. One would assume that this record is as comprehensive as the partnering child welfare

case file record. My own examination though of my case record in Chapter Eight challenges this. Despite my joint 'family case file' – shared with my young sister – being very large, and consisting of two heaping stacks of files, I found noticeable discrepancies regarding case timeline, residential placements, and entire gaps of periods of time. Since I elaborate on this in more detail later, I will spare all of the intricacies, but it is worth mentioning that in this legal record, non-official document such as hand written notes from my own mother and foster parents to the court and LADCFS were also included.

As mentioned, the utility of the current state of case records has been called into question by not only many of my interlocutors, but also public criticism. One of the issues concerns the reluctance to digitize and remains an ongoing debate among social workers, many of whom are now dependent upon digital technologies for their own personal lives. The looming threat of "breach of confidentiality" as has been explained to me by countless social service administrators, combined with increasing budget cuts, rest as the two repeated arguments in favor of keeping everything "on paper."

As in Los Angeles, California, the nation's second most populated county, with one of the largest caseloads nationally. In 2007, the county foster care system invested $5.9 million dollars for 2,400 tablets (Therolf 2010a, 2010b). These tablets were purchased to enable case managers to connect to their office servers remotely, while conducting home visits with youth and families, and attending countless case management team meetings throughout the county, in order to equip "Social workers and others responsible for the well-being of children [who] should have every piece of available information to get our children out of dangerous situations before it's too late" (Therolf 2010c, 21). However, just a mere 400 of the required wireless cards were purchased, resulting in most staff relying on their own personal cellphones to try to connect

with "the overwhelming majority of the tablets gather[ing] dust on social workers' desks" (Therolf 2010a, 24).

Given the size of the county, some social workers reported that even with the wireless cards, some locations they had to visit were still out of range, resulting in no ability to access case information via the new tablet. This tablet pilot program was intended to circumvent some of the more practical limitations to requiring case management staff to carry around confidential case records in their personal cars, often for much of the average day. There are also reports of case records potentially being unsupervised to more complicated cases with box loads of paperwork simply proving too difficult to transport. While the tablets were never designed to have every bit of a case record, they were an attempt "to try to have some organized information" to equip a social worker as much as possible (Therolf and Christensen 2009a, 3).

However, several controversial cases faced outside investigation from the State of California, where youth deaths were investigated. It was argued by some, that these deaths could have potentially been avoided had the attending social worker been able to access important case records concerning youth safety. In these circumstances, without remote access to the department's centralized computer system, the social worker at the scene was unable to make an informed decision to leave youth in their current living placements. When the county was subpoenaed for the case records by the state, they argued that in order to respect the deceased youth's privacy, client privilege, and for some HIPAA laws, they could not release the records. While accountability ultimately was never agreed upon or determined besides the failure of the tablet pilot program, internal county reports dating back several decades concluded that county agencies were not exchanging vital information that could prevent children's deaths and injuries (Therolf and Christensen 2009b). It is repeatedly argued that confidentiality rules stand in the

way of developing a computer system that would allow social workers to efficiently share data within the foster care agencies internally and externally with partnering agencies. To adjust these rules requires legislation.

While this poignant example illustrates some of the ideological avoidance to digitization, there remains the obvious limited utility of paper based recordkeeping. The ability to organize, search through, or identify keywords, behavior trends, or potential documented red flags remains extremely limited in everyday social work practice. Given the advent of data management software, technology startups, and vocational training on how to search for and use data in many clinical and legal fields, foster care continues to stand by its emphasis on confidentiality and surveillance. This adheres to examples in the ethnographic record of some contemporary state governance efforts, whereby institutional and political discourse is also shaped by material form (Hull 2008).

Case File Circulation and Suspension

The purported purpose of the case file is to create a tangible, material record of case activity. This includes contextualizing information like family history, youth activities, and other assessments that were reviewed during the initial investigation and subsequent legal proceedings that place youth in state custody. This record is considered highly privileged and confidential and therefore, reasonable policies are in place to protect the privacy of families and especially youth wards of the state. In accordance with federal legislation concerning state records of wards of the court – adult or youth – special precautions are in place to control access to these documents.

For example, as staff at Williams Treatment Center explained to me, hard case files must be stored "behind two locks." This means that at their facility case file binders are stored according to their given unit, in a locked file cabinet, within a photocopy and mail room that is

locked after standard business hours of 8:00am-6:00pm on weekdays. The facility is closed at all times to the outside public, and no one may enter without staff authorization. Since this "locked down" brick and mortar institution also houses a local public school that only serves their internal youth residents, staff are given specific door keys to move around the campus as necessary. A limited number of administrative staff have keys to the front offices, where the joint photocopy-mail-file room is located. Legally speaking at any given time, the case binders are usually in accordance with the two-lock security policy.

Exceptions to this are when case records are in transit offsite usually by car, such as when IDCFS case managers must bring relevant case documents to begin the intake process of a new youth client, or when a client leaves and is relocated to another living situation. I had the pleasure of riding sidekick on a number of car rides with case managers to and from various appointments. Through this autoethnography it became clear that out of necessity, these employees not only shouldered the responsibility of transporting themselves and confidential records to various destinations, but that they also had to know and have a license to drive a private vehicle, and a good sense of direction, an added bonus. "I don't know what they used to do before GPS," was a common remark made by my social work interlocutors, who many times, through no fault of their own, would spend hours a day in their cars on casework business. Besides unpredictable traffic, parking issues, and vehicular performance, I was told about one extreme situation where a car was stolen, with case records in the trunk. Such an alarming example certainly reinforces the material vulnerability of paper based records, but skeptics of digital media caution that other security issues arise all the time during breaches in digitized data management systems. Is ultimate confidentiality ever really achievable and if so, for what purpose and for whom?

Additionally, twice a year, sections of the case binders are transported in accordance to federal policy, mandating that each case must be reviewed in the local Dependency Court by a judge. As the next chapter describes, just prior to each court hearing, a preliminary ACR occurs, wherein key case details and updates are used to evaluate the case progress and services provided. Here, both case managers from Williams Treatment Center and the IDCFS typically meet alongside a representative of the court, the Administrative Case Reviewer to conduct this formal, in-person assessment of case progress. This encounter is entirely structured around the visual and oral review of the case record, and thus, requires case managers to prepare and bring necessary case records, like the case service plan. Once this event occurs, a subsequent case report is signed by the designated Administrative Case Reviewer, an agent functioning as an extension of the court system. Then, during the following court hearing, this deduced case update is typically the basis for the court hearing review, which has been again transported via social workers' own vehicles. At said hearing, the decision to continue or terminate care services, are adjudicated. Ethnography examples of these two kinds of case review settings are described in more detail in the next two chapters.

As far as security is concerned, I was told that case managers often rely on the trunks of their personal automobiles when in transit for such meetings as well as court hearings, which also requires the movement of case records in hard copy. Some even go so far as to use portable lockable file boxes, those popular in courthouses among legal personnel, and then store these larger containers in their locked trunks during transport.

Despite this movement, the complete hard case record spends much of its social life dormant, waiting to be used as a reference point for many encounters. In this way, I suggest the case file's sociomaterial life is one of continuous suspension. This interstitial state is part and

parcel of the social context of its existence, but also the material conditions of its own production and circulation. The clearest example of this is the relationship between the complexity of the case and the volume of paperwork involved. For youth who spend more time in the care system, there will be more paperwork to reflect this. For those who circulate from placement to placement with more frequency, a paper trail will follow this case management activity. Conversely, for foster youth who experience less time or movement through state custody – their file will likely resemble this different participation the bureaucratic life world.

First and foremost, the case file solidifies case management decisions and tracks the delivery of services between officials. If a foster youth is relocated from one foster home to another – this is noted in the file. If a foster youth needs to seek medical care, this is recorded in the file. The case file is intended to serve a centralized information hub, a physical envelope to hold anything deemed relevant concerning a youth or their case progress.

Individual case records can be reviewed to assess agency compliance. Through the annual IDCFS Post Payment Review and less frequent IDCFS Medicaid Recertification Review described in Chapter Seven, case records are randomly selected to represent an organization's adherence to recordkeeping policies set forth by the state. As already noted on the federal level, the AFCARS collects case-level data on all children in foster care through various monitoring and reporting systems submitted by local child welfare systems like the IDCFS. A part of the national Children's Bureau, this information is analyzed and reports on this data on a variety of topics, including adoption, foster care, and child abuse and neglect.

Case File Discharge and Deactivation

A case closes when youth are removed from legal state custody. This can occur when youth are returned to their families after an investigation has closed, and termination of state

responsibility has been adjudicated in Dependency Court. For families where parent rights are legally terminated, a case may close due to adoption into a new family and out of the care system. Cases can also be closed when you age out of the system upon reaching the age of majority, usually on their 18th birthday. In more unfortunate situations, youth may experience death while in foster care, and thus a case is deactivated. Statistics show that children run away from foster homes or other residential care settings at a greater rate than children living in permanent families (Benoit-Bryan 2011, 3). For youth who may go "on the run" and leave the foster care system for a temporary period of time, their case file stays active. However, for those that may permanently leave the case system on their own accord informally, their case record stays dormant but inactive until their eighteenth birthday. It may be reactivated should they come into contact with runaway or homeless youth programs (U.S. DHHS 2014).

However, a case is only ever really officially closed, when the case record is complete. This means that a series of exit forms and transition records must as be created, authorized, and kept to complete the case record. These records typically include a final case summary report, recommendations for future social service programs, and usually a notation of where the youth will be residing once exiting the system. In the case of deceased foster youth, a copy of the death certificate must also enter the case file.

Once deactivated, case records may be stored in several places. Hard copies of older IDCFS case files are stored in a data management facility in Rantoul, Illinois, located 30 miles from the IDCFS Director's Office in Springfield, Illinois. These records are legally required to be stored for no less than six years. After this time, these records can be destroyed. Legal case files are kept like others in court systems and are archived accordingly. This legal record is never destroyed. Williams Treatment Center, like all contracted service providers also have to store

their own internal records, which may also include case records such as the content of the case

file binders. Once a client is relocated from this facility, binders are emptied and the contents are

stored in order into 'red rope' or expandable file folders and manila envelopes, in card board

bankers boxes. According to IDCFS policy, these records must be stored on site for not less than

six years. Williams Treatment Center has several locked storage rooms that only a few

administrative staff have access to like, Althea, the front office support staff member who I

describe in Chapter Seven's discussion of IDCFS audits. Since her arrival, there have been some

noticeable adjustments to how case files are stored, especially once deactivated. I had the unique

opportunity to see this change during the period of time that I conducted fieldwork alongside

here, from 2011-2016. With my help and other interns, she was able to get this mass of case

record archive organized, and eventually transferred discharged files older than seven years to an

off-site facility for long term storage.

The Illinois DCFS Closed File Information and Search Service provides "service to

individuals seeking information from closed IDCFS files and/or search service" and this free

program is administered by the state agency but delivered through Midwest Adoption Center

(MAC), a private contracted agency provider and is available to the following:

- Adopted person, 18 years of age or older
- Adoptive parent(s) of a child who is under the age of 21
- Guardian(s) of a child who is under the age of 18
- Person who was a ward of DCFS but never adopted (in foster care or institutional care)
- Person who was in foster care or institutional care through DCFS but never a ward
- Professionals providing service to an individual party to an adoption completed through DCFS or who was under the guardianship of DCFS but never adopted
- Birth parent(s) of a child who was placed in adoption or guardianship through DCFS (Midwest Adoption Center 2018).

This same program can also be a resource for getting in contact with individuals who may have been adopted through or resided in foster care in Illinois. Those who may request this search service include:

- Birth sibling of a person who was placed in adoption or guardianship through DCFS
- Other birth relative of a person who was placed in adoption or guardianship through DCFS
- Caregiver or caseworker of a current ward of DCFS
  (Midwest Adoption Center 2018).

One crucial caveat though according to the agency that provides this service, as outlined on their website, "If the Illinois Department of Children and Family Services was involved in the completion of the adoption or in the provision of foster care, there may be records within the DCFS system" (Midwest Adoption Center 2018). This exception – that there *might* be records suggests some degree of variability in the extent to which such a digitized data management system offers complete case information, if any at all. As I graphically describe during my ordeal of getting my own LADCFS case record in Chapter Eight, I am aware of no evidence that entire case records are actually archived, at least not in an accessible, utilitarian or referenceable way. As further clarified on this same website, there is no guarantee that case records will in fact surface and there appears to be little reconciliation for this absent data:

> "Individuals who were wards of the Department but never adopted: These clients receive a copy of their own file if it is found, with information about other individuals removed. If a client's own file is not found but the 'family file' is found, information from that file that is specifically about the client will be provided" (Midwest Adoption Center 2018).

Illinois law specifies the information that must be provided, upon request, to adult adoptees, and adoptive parents or guardians of minors requesting information. Only then do requests,

"receive a written summary of the data found in the file(s). The amount and type of information in department files varies from very little to extensive social and medical history. All information specified to be released under current Illinois law will be provided if it is available. The law does not permit the agency to release identifying information such as names, addresses and social security numbers without the written consent of the other person" (IDCFS 2018).

According to the Midwest Adoption Center, the content of these requests may also include "copies of medical and psychological reports and evaluations if the information is medically complex. Photos and other keepsake items found in the file that belong to the adopted person are also provided" (2018). Under this legislation, birth parents are also entitled to certain information from closed files that pertains to services that they, themselves, received from the IDCFS.

Adoptees from foster care looking for birth family or birth parents trying to find your birth children adopted out, the Confidential Intermediary Services of Illinois has access to information from court files, adoption agency files and vital records like birth and death records, as well as divorce and marriage records. After getting all available records, a Search Assessment will show if birth parents are known to be deceased, if information about siblings and other birth relatives was received, and provide an assessment of how difficult the search for each of them would be. This program is available to:

1. Adopted person 21 years of age or older,
2. Adoptive parent of a child under 21 years of age, or
3. Birth parent whose birth child is 21 years of age or older
   (Midwest Adoption Center 2018).

Case File Resurrection

It is not uncommon for cases to be reopened and thus, case files are reactivated into use. Causes for these cases might be a family is under IDCFS investigation again for allegations of abuse or neglect or families have surrendered their children into state custody due to an inability

to provide care for them. However, case files can be resurrected even if a case has not reopened. Examples of these circumstances are when a related case is opened involving extended family, or if an investigation regarding a case's management activity is called into question like if a foster youth reports issues while in care. While less common, the IDCFS and other child welfare state agencies have been prosecuted for misconduct, resulting in lawsuits and settlements.[67]

Case records can also serve as historical data in instances of mitigation such is in juvenile or criminal court proceedings. In these ways, the case record is referential knowledge used to contextualize the social life or offer some evidence of foster care participation. Such interpretations of case file text are of course highly subjective, but can be entered into future court proceedings and evidence discovery in legal case files. Closed case files can also be reexamined during period audits of contracted service provider compliance, as seen in my own participation preparing for these reviews by the IDCFS in Chapter Seven.

In the following chapters, I turn to my own ethnographic examples of how case files and their various components, are created and given meaning as they are used and enacted in very specific settings including ACRs, as part of the dependency court hearings, and in the audit of case management recordkeeping processes. First I describe and examine the pre-court setting where the case record is initially visually reviewed and orally discussed by case managers, social workers, and the Administrative Case Reviewer. During these biannual ACRs, case developments, progress, or regressions are textually presented and previewed prior to the dependent court administrative hearing that will base its adjudications upon these case reports. The ACR is significant because it is during this meeting that open-ended discussions, interpretations, and suggestions about how a case being managed and the effects of this

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[67] Franet v. Alameda 2008; Fogarty-Hardwick v. County of Orange, et al. 2007; Gates v. Texas Department of Protective and Regulatory Services 2008; Julie Q. v. DCFS 2013; Nicole P. v. DCFS 2018.

management on youth in custody (and to a varying extents, their families) can occur. While formal case summaries are prepared and presented for preliminary review in this convening, the encounter also functions as a last-ditch effort for system officials to ensure that the necessary paperwork and the procedures that enable this documentation to occur have been performed and recorded in the case file and are prepared in accordance with the procedures set forth by the court.

Chapter Five

The Administrative Case Review

"As wards of the state they legally and emotionally belonged to no one in particular; their very existence was often overlooked" (Wozniak 2001, 10).

In this chapter I focus on the Administrative Case Review or "ACR" as it known, as one of several contexts in which case files (or parts of them), are used in child welfare administration. I begin with a description of what an ACR is, why it exists and for what purposes it serves - namely as a routine private convening to review a dependency court and child welfare case. As a special kind of clinical-legal meeting that brings relevant people involved in a case together like state officials, families, and youth, I identify in what ways these social actors are involved in this process.

The encounter includes not only people, but also things, including copies of certain paperwork and ink pens, and centers entirely around the review of existing case records. But as most contexts of use for the case file, only certain case records are used in the ACR and, as any kind of formal meeting often does (Schwartzman 1989), this event also requires the creation of new kinds of paperwork to be used prior to, during, and after the in-person review occurs. As with all case-specific proceedings in child welfare systems, paperwork can be just as idiosyncratic as the case itself. The same is true for the ACR. There is some paperwork that will always be required and other paperwork that may be enacted into the process.

Before presenting the ethnographic vignette of an ACR I observed, I first provide some background on Williams Treatment Center, the RTC serving youth in state subsidized mental health care, most of who are foster youth. I do this to contextualize in what ways this institution functions as an extension of the paternalizing state apparatus, while also providing potentially

lifesaving social services to youth and families in need. I include details of the different kinds of

residential settings youth may experience like foster homes and group homes to articulate the

ways in which these different arrangements influence case management but also the

sociomaterial differences of these placements and how this relates to case records and other

documents and the manner in which they are used in an ACR, and the social actors involved. As

part of this contextualization, I provide examples of recordkeeping and other activities that foster

parents must perform in order to maintain their licensure, including reflections from some of my

research informants who question the purpose and utility of these bureaucratic procedures.

Drawing from participant observation, I then examine an ACR that I observed during

fieldwork involving two sisters, Mina and Jasmin. Through this convening, certain case records

were used to evaluate case progress and determine recommendations that were later presented in

a dependency court hearing. I then trace how the ACR relates to and prepares for the following

court meeting, where legal decisions about the case will be officially adjudicated – orally and

artifactually. In this way, the ACR both functions as an organizational means to evaluate case

management via existing records from the case file, and in turn, generates additional documents

that will be entered into both the child welfare case file and legal case file.

The Administrative Case Review – Purpose and Use

ACR's are periodic "supervisory-clinical staffings" that occur approximately one month

prior to every dependency court hearing for each case in the child welfare system. The first ACR

for any case must occur within six months of the initial Temporary Custody Hearing and

conducted every six months thereafter. The IDCFS defines "clinical staffings" as meetings used

by direct care staff to identify clinical concerns like a mental health crisis or behavioral issues

and address them using a care team approach like employing immediate consultation, therapy,

even hospitalization for clients, if necessary. One form of these meetings are supervisory-clinical

staffings like the ACR that are also "*clinically-focused staffings* involving the caseworker,

supervisor, clinical experts, child, family, caregiver, and service providers," but serve as the

official method of all, "plans for clinical intervention and social work or specialty services, and

recommendations about permanency" (IDCFS 2014, 98, emphasis in original).

Unlike the average clinical staffing that can occur at any time for a variety of reasons

such as to assist a youth in a state of crisis or simply a routine meeting of all clinical staff,

supervisory-clinical staffings are where formal case management decisions are presented,

discussed, and legitimated. These meetings typically involve those who are most intimately

involved in a case in order to support treatment planning that is "family-focused and move[s]

children towards a lifelong relationship that ensures safety and providers for their well-being"

(IDCFS 2014, 98). Ostensibly this kind of review serves to monitor the delivery and efficacy of

services to clients:

> "Federal legislation requires that cases of children in out-of-home care be reviewed at least every 6 months, either by a court or through administrative review. An administrative review may be conducted by a variety of individuals, but at least one should not have responsibility for case management or service delivery to the child or his/her parents. These reviews may examine an individual case for purposes of permanency planning or may be part of a wider process examining the effectiveness of the system as a whole" (U.S. DHHS 2018).

The ACR is one of a number of different reviews in child welfare cases that are, "used to

examine programs and practices as part of an overall system's improvement effort" (U.S. DHHS

2018). In accordance with this federal policy, states are required to have a review system in place

like the ACR. The types of reviews wherein individual cases may be used to determine

organizational productivity and adherence to public policy, are discussed in more detail in

Chapter Seven. Unlike these other reviews, the ACR is a case-specific assessment legislated on

the state level as in Illinois:

> "The Department has an administrative case review system for all the children in placement and their families. Administrative case reviews are conducted for children living in foster family homes, relative homes, group homes, child care institutions, youth emergency shelters, or detention, correctional, mental or physical health related facilities" (Ill. Admin. Code 89 § 316.30).

In accordance with federal and state policy, the ACR itself is defined in Illinois as:

> "a review of permanency planning open to the participation of the parents of the child, conducted by a person who is not responsible for the case management of, or the delivery of services to, either the child or the parents who are the subjects of the review. The administrative case review is also open to the participation of other professionals involved in assessing or treating the child, any legal representative of the parent or child, and the foster parents as specified"
> (Ill. Admin. Code 89 § 316.30).

The ACR serves as the stage where the IDCFS Child Welfare Administrative Case

Reviewer (henceforth "Reviewer"), evaluates case progress in accordance with the established

service plan, defined as "a written plan on a form prescribed by the Department that guides all

participants in the plan toward the permanency goals for the children" (Ill. Admin. Code 89 §

316.20). Permanency goals refer to, "the desired outcome of intervention and service that is

determined to be consistent with the health, safety, well-being and best interests of the child" (Ill.

Admin. Code 89 § 316.20). Unlike more common clinical staffings that may involve staff who

are involved in a case in a variety of ways like a case manager, therapist, psychiatrist, or direct

care staff like the unit "counselors" as they are called at Williams Treatment Center, the ACR is

considered a supervisory-clinical staffing because it is conducted by the Reviewer, "*who is*

independent of the supervisor and caseworker, and therefore, not responsible for the case

direction, management of the delivery of services" (IDCFS 2014, 98, emphasis in original). In

this way, this kind of staffing serves to bi-annually assess the case management by a state official

in a more impartial and unbiased manner, based exclusively off of information from the service

case plan and the discussion that may ensure, as reinforced by the IDCFS Foster Family

Handbook:

> "The outcomes of each ACR are:
>
> - an objective, independent evaluation of progress towards permanency;
> - an objective, independent review of the service plan for the next period; and
> - report of the finds and recommendations regarding the case progress toward permanency for the child" (2014, 27).

There are a number of considerations that the ACR is oriented towards, and thus, this kind of

case review is conducted in order to:

> 1) "assure that parents and the children (if participating in the planning) are involved in and collaborating in development of the plan and understand and discuss the plan and know what is expected of them;
> 2) ensure siblings are being placed together whenever possible; when sibling are placed apart, efforts continue to locate a placement that will accept all of the children; contact and visitation between siblings is encouraged and occurring in accordance with the Visitation and Contact Plan; efforts are made to support contact between siblings in substitute care with siblings who are not in substitute care (e.g., because of adoption, legal guardianship, emancipation or adulthood);
> 3) review whether the Department's continuing intervention is necessary;
> 4) review whether services, including placement services, are necessary, relevant, coordinated, and appropriate and address the health and safety needs of the child;
> 5) identify services needed but that are not being provided to the child, family or foster parents and the reasons why they are not being provided;
> 6) review the disability status of a child to determine the need for and/or appropriateness of specialized services;
> 7) review the appropriateness of the child's educational placement and the child's educational progress and recommend changes to the caseworker;
> 8) review health information on the child and family;
> 9) review any special physical, psychological, educational, medical, emotional, or other needs of the minor or his or her family that are relevant to a permanency or placement determination;
> 10) review, for any minor age 16 or over, programs or services that will enable the minor to prepare for independent living;
> 11) review whether the Department, the service providers, the family, the substitute care provider, if any, and the child are complying with the service plan

and, if they are not complying, whether changes in the service plan or goals are needed;
12) review whether there is progress to resolve the child's and family's problems and whether the progress is satisfactory and whether the child can safely return home;
13) review whether the projected month for achieving the permanency goal should be changed;
14) review the appropriateness of the permanency goal and recommend changes in the goal (if appropriate)" (Ill. Admin. Code 89 § 316.20).

In addition to evaluating case progress prior to the ACR, this meeting also functions in anticipation of the forthcoming dependency court hearing and therefore serves in order to:

"15) review and finalize the service plan for the next period, including analysis of:
A) the appropriateness of the services contained in the plan and whether those services have been provided and, if not, why not;
B) whether reasonable efforts by the Department, and reasonable progress by the family, have been made to achieve the goal;
C) whether the plan and goal have been achieved;
16) refer the case for a family meeting[68] when one has not been conducted; and
17) report findings and make recommendations"
(Ill. Admin. Code 89 § 316.20).

In Illinois, as part of the DCFS Division of Administrative Review and under general direction of the ACR Program Manager, the designated Reviewer must be "a trained professional who is not responsible for the case management of, or delivery of services to, either the child or the parents who are the subjects of the review,"[69] who:

"reviews service plan and amends to ensure consistency with laws, rules, court orders, and established social work practice; provides a monitoring function to public and private providers on all chronic and critical feedback reports; alerts administrative staff to vital case issues; conducts special reviews on difficult cases; identifies and makes recommendations regarding policy revisions in the areas of case planning and service delivery" (IDCMS 2018).

The primary document and content under examination in the ACR is the service plan, of which the Reviewer may ask questions or bring up concerns. However, there is space for the

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68 As described in Ill. Admin. Code 89 § 315.120.
69 Ill. Admin. Code 89 § 316.20.

Reviewer to also raise issues not addressed in the presenting service plan, such as, "family services or system obstacles that are hindering progress in a case," (IDCFS 2014, 98) and therefore, depending upon "the caseworker's response to the these issues and best social work practice, the reviewer may advise the caseworker to include or delete information and/or services in the service plan" (IDCFS 2014, 100). So while the ACR is a formal in-person review of the documented proposed service plan, that will eventually be presented for adjudication in dependency court, it is also the venue through which the service plan is also potentially contested, altered, and reimagined, eventually recreated into the eventual document that will artifactually and symbolically represent the case management plan in the upcoming hearing.

As in the following ethnographic vignette involving siblings, for cases where family reunification is still a case goal, the Reviewer may use this convening to evaluate whether parents have followed the list of steps in the service plan and are making positive changes towards getting their children back in their custody. In addition to the Reviewer, the IDCFS or substitute case managers responsible for the youth and family, the ACR is also meant to:

1) "be open to the participation of the children's parents and their representatives. However, if parents are known to be violent and potentially dangerous to other participants in the review, they will be excluded. If a petition seeking the termination of parental rights has been filed, these parents will be invited to the review until a final decision has been made on the petition.
2) be open to the participation of the foster parents or relative caregivers the section of the review for the child in their care. Foster parents or relative caregivers may be able to participate in other segments of the review involving the child's family *provided that the information being presented at the review is essential for understanding the needs of and providing care to the child. When a positive relationship exists between the foster parent or relative caregiver and the child's family, the child's family may consent to disclosure of additional information*[70]

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[70] 20 ILCS §520/1-9 in accordance with the consent provisions of Ill. Admin. Code 89 § 431.

3) be open to the participation of children 12 years of age or older with consideration given to the material in the review and the benefits of having the child present. Younger children may attend if the caseworker and supervisor determine that the child can benefit from participation in the review process;

4) be open to the participation of the child's guardian ad litem or legal representative" (Ill. Admin. Code 89 § 316.50, emphasis in original).

Despite the appearance of transparency about the process, finding publically available information about the ACR from the IDCFS website took some effort. In addition to the 339 page long Foster Family Handbook, which can be downloaded under the "Loving Homes" section, under "Foster Care", the only other resource about the ACR is curiously buried under the page titled "Promoting Independence and Self Sufficiency." Further through a subsection titled "Legal System" is where one finds any information about the legal system involved in child welfare proceedings, including the ACR. The way the website is organized does not intuitively lead a visitor to this information, even if they are deliberately looking for it. For example, I was able to find this information trying to navigate through the site, but only by using the internal search feature. From here, I was able to trace back the exact web addresses of these buried pages.

The access to this information can be interpreted in several ways. First, the information, while available suggests that the state has done its part to make this accessible to the public, regardless of how user friendly the website interface is. Since child welfare and foster care is still a system that privileges and depends upon hard documents as seen through the uses of the case file, the compromised web presence, can also been seen as a reflection of this paper-based organizational ideology. Or, in a more cynical way, this translucent display of information for both foster youth and foster parents, represents the deliberate efforts by the state to obscure these processes to dissuade the public's informed participation in these efforts. To this last point, it is

noteworthy that there is no information about any kind of legal proceeding or resources for

parents under investigation or with active child welfare cases. In addition to the semiotic

significance of how this information was not easily accessible, it is all the more concerning why

the ACR is referred to as a process geared towards youth exclusively, as seen through the

language on the subpage titled "Legal System":

> "It is a process that DCFS uses to check that everything is going well with your case and appropriate services are available for you and your parents. The reviewer will discuss the progress you and your parents are making. The ACR is held every six months and depending on your age, you will be invited to attend the ACR. We encourage you to be present at all these meetings. This allows you to keep up to date on what is occurring in your case and allows you to express your opinions and be heard" (IDCMS 2018).

Yet the IDCFS Foster Family Handbook states that "Foster parents, as caregivers and members

of the child welfare team, should expect to be invited to the supervisory-clinical staffings…[and

thus] make every effort to attend the ACR to add to the discussion, stay informed and advocate

as needed" (2014, 98). In this way, since Mina and Jasmin are institutionalized, Stella and her

colleague a Rose, a case manager on another unit, represent not only the immediate case

management but also stand in lieu of a foster parent, for either foster parents or congregate care

staff typically possess important firsthand knowledge about:

- "the wishes and opinions of children under 12 years old who are not usually asked to attend, or older children who cannot attend;
- the quality of services being provided;
- services in the service plan not being provided;
- the need for new services not in the service plan; and
- whether or not the above information was used by the caseworker to develop the service plan" (IDCFS 2014, 98).

However, institutional care staff like Stella and Rose are privileged differently than foster

caregivers like foster parents (and not case management staff) as seen in the extent to which they

may fully participate in such proceedings. After closer examination, it is clear that foster parents

– whether relatives or non-kin – are actually only available during the "child's portion" of the

ACR:

> "The caregiver's input is needed in the child's portion of the ACR for the reviewer to have an accurate view of the case. Caregivers may be present during the child's portion of the review, but, due to confidentiality, cannot be present for the parent portion of the ACR without the parent's consent" (IDCFS 2014, 99).

In addition to caregivers, the GAL (or Public Guardian) is encouraged to attend:

> "GALs are invited to the ACR. Their participation gives them a clearer understanding of the goal and services the child and the family will be addressing. GALs are allowed in the child's portion of the ACR. Birth parent/s have the right to ask that GAL *not* be present for their portion" (IDCFS 2014, 31, emphasis in original).

GALs as they are often referred to in Illinois are discussed at more length in the following

chapter, as they serve as an appointed officer or agent of the court to protect the best interests of

the child and represent youth in legal proceedings. Therefore, as part of the larger series of

ongoing court-related activities, GALs may be appropriate at the ACR prior to the upcoming

dependency court hearing.

Of particular relevance to the ACR involving the sibling set of Mina and Jasmin I now

turn to and describe, according to Illinois state law:

> "The Department shall provide training for all Administrative Case Reviewers, their supervisors and their managers regarding the importance of maintaining sibling relationships and the child's sense of attachment to his/her siblings, the importance of maintaining sibling relationships over the child's lifespan, and the impact on the child if those relationships are severed"
> (Ill. Admin. Code 89 § 316.20).

This consideration of sibling relationships is a markedly new emphasis in foster care, as

one of the unintended consequences of the massive deinstitutionalization movement is that it

become more of a challenge to ensure that siblings were placed in the same residential care

setting like individual family foster homes. Until recently, it was not unusual for siblings to circulate through the care system separated from one another. Furthermore, since Mina and Jasmin are institutionalized together as Williams Treatment Center, despite living on separate units with different unit case managers like Stella and Rose, their case will be formally reviewed as in a joint ACR.

The Administrative Case Review – Documents and Related Paperwork

One of the first new documents created in preparation of the ACR is a written notification of the date, time, place, and purpose of the meeting, sent by the IDCFS Division of Administrative Case Review. This letter should be mailed within 21 calendar days prior, and received no later than 14 days in advance by the following:

1) "the parents. The notice shall also inform them of their rights to bring a representative with them to the review
2) the child, if participating in the review
3) the child's foster parents or relative caregiver
4) the purchase of service provider agency caseworker (if applicable)
5) the child's legal representative. The caseworker is responsible for providing the name and address of the child's legal representative and all parties that are to be invited to the review" (Ill. Admin. Code 89 § 316.60).

Depending on the case management arrangement – either the IDCFS or substitute care provider agency worker are responsible for preparing and providing the records that will be the basis of the ACR:

a) "present a completed service plan, based on the assessment and developed in collaboration with the family;
b) present a recommendation regarding the permanency goal;
c) report on the placement, best interests, health, safety and well-being of the child;
d) present a copy of the Visitation and Contact Plan and report on the efforts made to encourage and maintain sibling relationships;
e) present a copy of a Post-Permanency Sibling Contact Plan when one has been developed;

f) report on the progress of the parent to date toward changing the behavior and conditions that require the child to be in out-of-home care;
g) provide a statement as to whether the child can return home, and, if so, when and with what supports;
h) provide the casework rationale and supporting documentation for all decisions and recommendations" (Ill. Admin Code 89 § 316.80).

Similar to other contexts of use for the case file, the ACR is an in-person encounter, centered on case-specific information. As seen in the above list, the case data that is reviewed is a combination of documented case activity, including decisions made, youth or family responses to such determinations, or other administrative details regarding a case, like changes in housing, school, treatment plan or services, even staffing changes, as well as oral explanation and clarification of case details on paper. In this way, the official record – what has been given evidentiary value or legitimacy through inclusion in the case record - is not expected to stand alone as the only source of information for the Reviewer to base the ACR proceedings upon. Rather, the IDCFS social worker or private agency case manager are expected to verbally supplement the documented information in order to further contextualize relevant case details through the social encounter of the ACR.

Mina and Jasmin's joint family ACR was in many ways similar to individual case ACRs, but was unique in several aspects. One of the reasonable results of having an ACR for siblings is that they have to be reviewed as individual cases as well as a combined family case. And, since the IDCFS contracts out a large number of their direct case management to non-state agencies, this may mean, as in the sisters' example, that multiple staff are present to represent their organization's role in the case being reviewed. For the Mina and Jasmin, who at the time of the ACR were placed on separate floors at Williams Treatment Center, this meant that they each had separate unit case managers like Stella and Rose, but also a shared social worker from an entirely

separate private social service agency The Children's Network, technically responsible for supervision of case management through a state contract which was further delegated through them to Williams Treatment Center.

This kind of joint venture model of multiple private agencies managing the same cases or set of cases is not unusual, as it reflects the often limited ability of most organizations like these to provide comprehensive social services. Therefore, agencies will rely on one another and coordinate the delivery of care programs in conjunction with the state monitoring through the ACR or court hearings. However, there are agencies that do provide more encompassing services and in settings like an ACR, fewer social actors will be required or present accordingly. Williams Treatment Center is one of those facilities, as part of the larger agency Families for Kids, which is designed to provide almost all necessary services in-house to youth on-site.

As with any distribution of labor, shared case management models inevitably result in certain staff having different proximity to youth and families, service settings, and case records. This was certainly clear in the ACR for Mina and Jasmin. Here Stella and Rose, the two Williams Treatment Center unit case managers, had more comprehensive command of case knowledge because the sisters were living at the same total institution where they spent most of their daily rounds. And, due to the nature of such a RTC as a hyper-documented living placement, which understandably means there is more intimate and detailed knowledge about the sisters' lives and behaviors and this is information is more often materialized in their internal case binders at the facility. It is this corpus of data that the case service plan under review at the ACR is generated from, by Williams Treatment Center staff.

Yet, this knowledge was privileged in a delicate manner as ultimately, is was the supervisor filling in from The Children's Network whose authority was most appreciated, as seen

in the social interactions of the ACR. This example reinforces that case records are never entirely self-sufficient for case management as a kind of administrative social process. Rather, at least as seen in the ACR context, human and non-human actors work in tandem to assess and review the effectiveness of state intervention through case management activity.

In addition to certain sections of the existing case file used like the service plan, *Visitation and Contact Plan*, and *Post-Permanency Sibling Contact Plan*, and the consolidation of certain case details into special documents like the recommendation report, the ACR is further recorded by a written report of findings from the meeting itself, which is prepared by the Reviewer. It is this final summary report that this then presented to and serves as the basis for, the following dependency court hearing. The utility of this exit report is for the Reviewer to document and share these, "findings and recommendations to those persons who can implement changes in the case and/or the child welfare system" including:

- "any issues not addressed in the service plan that were discovered during the review;
- family service problems or system issues that are hindering the progress and/or permanency of the case; and
- systemic issues identified in the child welfare system"
  (IDCFS 2014,100).

As far as the authority of the Reviewer, who is hierarchically the most powerful in this ACR context, they may only make recommendations regarding how best to achieve the permanency goals and subsequent plan, established by the court. Should there be a significant concern or discrepancy, the program operations supervisor shoulders the responsibility for addressing problems identified in the final written report authored and signed by the Reviewer.

I now turn to a brief overview of the different kinds of residential circumstances that foster youth may experience. Foster youth circulation through the care system occurs not only

bureaucratically, but often, geographically as well. It is typical for foster youth to move between

multiple substitute care settings, as was the case for Mina and Jasmin. For a variety of reasons,

youth may be moved from 'home' to 'home'. While for most this means living in multiple single

family foster homes over their span of time in state custody, this can also refer to movement

between and through other living situations as well. Therefore I outline these different living

arrangements and how they may influence the overall "Child Welfare Team" as it is called by the

IDCFS and the subsequent contexts of use that case data and records are used, like the ACR.

Foster Homes, Group Homes, and Residential Treatment Centers

Due to the widespread closure of total institutions like orphanages and mental asylums

across the U.S. in the mid twentieth century as described in Chapter Three, adults and youth

taken into state custody for protection reasons, including psychiatric concerns, are usually not

served through "brick-and-mortar institutions" for long term care (Brodwin 2010, 129, 141).

These larger residential settings were considered inappropriate for many who needed better

community support services. Therefore the nationwide restructuring of these systems of care

(like public mental health and child welfare) was proposed and enacted to promote better

prevention and encourage family or external community support for youth and adults as part of

an international shift towards individualized intervention and community support programs.

Nationwide, approximately 7% or 31,679 of youth experience foster care in an

institutional setting like William Treatment Center according to the most recent reports (U.S.

DHHS 2018). While this statistic suggests that only a small percentage of youth reside in this

kind of placement while in foster care, it is important to distinguish some of the following living

arrangements from one another. According to the AFCARS, the following figure represents the

most recent placement settings for youth as of September 30, 2016 for the Federal Fiscal Year

(FY) 2016:[74]

Most Recent Placement Setting	Percent	Number
Pre-Adoptive Home	4%	16,572
Foster Family Home (Relative)	32%	139,017
Foster Family Home (Non-relative)	45%	196,446
Group Home	5%	21,649
Institution	7%	31,679
Supervised Independent Living	1%	4,559
Runaway	1%	4,660
Trial Home Visit	5%	21,556

Of the settings listed above, group homes can also be considered a kind of institutional

setting. A group home is typically a private residence model of care for those with more complex

needs. Group homes emerged as a kind of outpatient treatment model in the U.S. after the

closure and stigma associated with life in institutional service settings like orphanages.

Historically, this model of residential care has been used for youth and adults with chronic

disabilities whether physical or mental. One of the distinct markers between what is considered a

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[74] According to the AFCARS report webpage, individual states are permitted to resubmit data, which may influence the results of these estimates over time. These statistics reflect information received from states as of October 20, 2017 as they pertain to the reporting periods through September 30, 2016. The Federal Fiscal Year includes October 1st through September 30th.

group home versus an "institution" has to do with capacity. Group homes are typically limited to the number of residents. In Illinois, any "Child Group Home" cannot serve more than 10 youth at a time, per living arrangement. By comparison, Williams Treatment Center can legally accommodate up to 50 youth at a time, which they arrange across five separate units that for the most part, function independent of one another as separate sub-communities within the larger institutional social life.

While policies vary by state (or as in California by county), unlike foster homes, group homes require special licensure, more akin to RTCs like larger institutions. Single family foster homes require foster parents to complete a criminal background check, attend introductory and occasional supplemental training, and a home site visit to ensure that there is adequate space and facilities for youth to reside there. Foster parents do receive a monthly stipend to supplement the cost of housing and caring for youth in the home. But unlike group home and RTCs, foster homes are intended to be just that – a private residence that assists with the care of youth in state custody. Therefore, the reimbursement that foster parents receive from the state is not taxable income and is intended to be dispersed at the beginning of each new month, for the prior month.[75]

Pay rates for various forms of care are discussed in more detail in Chapter Seven on audits of foster care services, but it is important to mention that pay rates for single-family foster homes are considerably lower than for either group homes or RTCs. Regardless of living placement, reimbursement rates are determined by the number of days in residence, type of residence, and other factors like age or level of care required, such as for youth with special

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[75] This can take longer, based on each state or county's individual child welfare or foster care system.

needs. Generally the rate increases with youth age, but may also reflect additional costs like diapers for infants or clothing allowances, which are minimal.

Most notably, the term "group home" suggests a smaller, more intimate 'home-like' care setting, but from my experience and those of my former foster youth interlocutors, most group homes operate and feel like mini-institutions. One of the reasons that group homes often do not appear like a private residence is because in order to maintain licensure to operate, group homes require full-time staff on-site. In this way, group homes are more similar to larger institutions in that they are managed by paid staff that typically do not reside in the 'home'. While some group homes may have a set of house "parents", most usually employ a rotating staff, with caregivers of various levels of training and expertise. Like larger institutions, some group homes provide specialized therapeutic treatment to meet the needs of youth with certain emotional, intellectual, physical, medical, or behavioral challenges.

Group homes are popular for adult outpatient treatment like mental health services or for residents requiring more intensive or invasive support due to experiencing psychophysiological disabilities. For example, adults living in group homes may require continual or supported assistance to complete daily tasks, such as bathing, preparing or eating meals, taking medication, or travel to work or outside appointments. Group homes unlike larger institutional congregate care settings, are also often intended to offer individuals the more intensive support of paid professionals, but also facilitate opportunities to develop life skills. Depending on the need and level of ability, such skills may involve learning to prepare meals, budget personal allowance, grocery shopping, and living communally with fellow residents in a shared living space, through group activities like commensality over a shared meal or recreational programming. For some adult care settings, individual group homes may exist alongside other group homes as part of a

larger residential campus. Even in these examples, the smaller group home is ideologically and pragmatically supposed to mirror domestic life in a single-family home, not a total institution.

For adult or youth wards of the state, group home staff may also serve in a social worker capacity to deliver and administer case management. Depending on the jurisdiction, group home staff may include licensed clinical social workers or case managers that administer or coordinate necessary services to residents. Staff may also have other specialties like therapies for individuals or groups or survivors of sexual abuse, but most group homes use external providers for these services. For those who have been charged with criminal activity, group homes offer around-the-clock supervision that may be court mandated. Even when residents sleep during evening hours, there is usually a staff member awake on duty.

Given this staff-heavy structure, it is understandable then that group homes are also more costly to operate than single family foster homes. However, unlike larger institutions that function as private businesses or non-profit entities, group homes can be owned and operated either by an organization or individual. As a result, an emerging group home business model has grown with increasing popularity in the private sector to provide residential care for youth and adults alike. Therefore, group homes use the guise of a 'home-like' environment and critics argue that in some instances, these licensed care settings prioritize profitability and less so about the public social services they provide. This is a crucial point, especially in our current era of austerity, where not only public funds are decreasing for social services, but also how these programs are administered and delivered, are ever more through public-private partnerships, or entirely outsourced to the private sector, including not-for-profit organizations and for profit companies.

Combined then, approximately 12% or 53,328 of foster youth live in a form of institutional care and advocates have argued that this form of residency is costly on many levels – it is more expensive and repeatedly produces poorer outcomes than family-based settings like foster homes, posing roadblocks to the timely achievement of permanency goals set forth by the court. While over the past ten years, there has been a continued reduction of youth in congregate care settings of approximately 37% nationwide, available data indicates that youth will spend an average of eight months in these residential placements. However, the scale and pace of these reductions have been inconsistent across jurisdictions, with five states actually increasing the use of congregate care, one of those being Illinois.

As finding appropriate substitute care settings for all foster youth is understandably challenging, it is well known that older youth are less likely to find a foster home. This can occur for a number of reasons. First, for families or foster parents interested in fostering towards to the goal of adoption, infants and young children are in the greatest demand. In most foster care systems, youth are removed from adoption eligibility at the age of 16, as presumably if they have not already found a permanent family, it is unlikely they will before turning 18. As I was told by Melinda, a social worker from Families for Kids, the parent company of Williams Treatment Center,

> "When we do have openings with families, most want to work with babies to toddlers. Of course we have families that will take in older kids, but that's often out of need, since we always are looking for available beds. Teens, especially high school age are the hardest to place [in a home], so it's making it hard for us to help find good homes for them."

As youth can enter the foster care system for a variety of reasons and at any age, older youth in care may either have been recently placed in state custody or have been in it for quite some time. As is common with this age range, middle and high school is often a period of self-

discovery, hormonal shifts, and identity formation. These factors may surface and influence

youth behavior or the home environment in a myriad of ways, on top of the particular

circumstances of a given child welfare case. It is for these reasons combined, that older foster

youth are simply more difficult to find foster homes for. Consequently, adolescents in foster care

are also more likely to experience some form of institutional residential placement than younger

youth in custody, as the average age to enter congregate care is 14 years old, according to the

most recent national data collected from 2009-2013 (AFCARS 2017; National Conference of

State Legislatures 2017). And since reimbursement rates generally increase with youth age,

combined with the high cost of running a congregate care setting like a group home or RTC, it is

clear that there is an entire economy that depends upon excessive documentation, and the

surveillance of these practices via further documentation (see Chapter Seven).

For severe mental health issues involving adults or youth, hospitalization is seen as an

extreme measure - a short term solution for those experiencing extreme psychosis and unable to

control their ability to not harm themselves or others. Unless voluntary, each state has policies

that authorize a qualified officer or specifically designated clinician to involuntarily confine a

person suspected to have a mental disorder or experiencing a mental health crisis that may make

them a danger to themselves, a danger to others, or gravely disabled. In these psychiatric

emergencies, an individual can only remain in state custody and subsequent hospitalization, for a

locally designated period of time. In Illinois, involuntary hospitalization can last for five days.

This process is formalized after signing a written declaration stating the psychiatric diagnosis

that the diagnosing medical professional believes to be the cause or reason why they argue the

patient needs to remain in custody, such as harming self or others, or inability of making

personal medical treatment decisions.

These policies also apply to youth in and out of foster care. For the general population, families are responsible for managing their children's mental health needs, including psychiatric care. In my interviews with staff, it was clear that Williams Treatment Center identifies itself as a pediatric mental health facility and not a foster care provider. Technically, this institution offers intensive residential treatment services to all youth, regardless of legal status. However, I am unaware of a youth in the institution's history that was not there due to public health funding to subsidize their treatment at this facility.

All youth during my fieldwork were recipients of an Independent Care Grant (ICG), an Illinois program that subsidizes services for youth in need of intensive and comprehensive psychiatric care. I elaborate more on this funding source and its relationship to care records in Chapter Seven. This funding is available to all families based on income, and there are occasionally youth at the facility who are not in foster care. These are families that have completed the application process and have submitted their children to receive residential and educational services at Williams Treatment Center. Staff reported to me that of these few youth, many come from families with challenges shared by those with open child welfare cases – such as socioeconomic marginalization. However, there are some youth who despite their placement in such an intensive RTC and enrollment via the ICG, do have strong ties with their current foster parents. Unfortunately, these cases are atypical and is it precisely because of the lack of these important social bonds with parental figures or fostered relatives, on top of trauma from severe abuse and neglect that youth find themselves at this total institution as a last measure for foster care.

The majority of youth that qualify for this kind of social service program come from poverty, with an overrepresentation of youth of color. Youth with disabilities are also not

uncommon. Seen in this way, the state is offering support towards an unmet social need - youth and families in crisis. It is important to acknowledge this, because even though I use experiences from my own fieldwork at this agency to represent the IDCFS and the foster care system more broadly, it is also in many ways akin to any state mental health delivery site, and carries certain clinical characteristics that are less present in single family foster homes.

As noted in the aforementioned residential care statistics, most foster youth (77%) reside in individual family homes of foster care parents who may be family members or strangers. In Illinois, the process to become a foster parent begins with a call to the central IDCFS phone number or local office (IDCFS 2015, 1). After contact by an agency representative, prospective foster families are required to:

- "Participate in a home inspection and social assessment;
- Complete 27 hours of training focused on foster care and the needs of children who are in foster care;
- Complete a criminal background check of all household members;
- Be financially stable; and
- Complete a health screening that includes verification that immunizations are up-to-date" (IDCMS 2018).

Only if recommended by the agency or IDCFS licensing worker, do prospective foster parents complete the 27-hour PRIDE Pre-Service Foster Parent Training. Related caregivers who are interested in "kinship care"[76] however, only complete the 6-hour Related Caregiver PRIDE Pre-Service Training, which is offered either in a classroom or as "DVD training" (IDCFS 2014, l25). The PRIDE Modules include:

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[76] Kinship care or relative care refers to state mediated fosterage of biological or legal relatives of youth.

1. Foundation for Meeting the Developmental Needs of Children at Risk (12 hours)
2. Using Discipline to Protect, Nurture and Meet Developmental Needs (9 hours)
3. Addressing Developmental Issues Related to Sexuality (3 hours)
4. Responding to Signs and Symptoms of Sexual Abuse (6 hours)
5. Supporting Relationships Between Children and Their Families (9 hours)
6. Working As A Professional Team Member (9 hours)
7. Promoting Children's Personal and Cultural Identity (6 hours)
8. Promoting Permanency Outcomes (9 hours)
9. Managing the Impact of Placement on Your Family (6 hours)
10. Understanding the Effects of Chemical Dependency on Children and Families (15 hours)
11. Understanding and Promoting Pre-Teen and Teen Development (6 hours)
    (IDCFS 2014, 128).

Despite this process, there can be apathy regarding foster parents, which is reflected in the low expectations often held by staff towards these volunteers. Such opinions are palpable not only as reported to me by foster parents, but also other professionals. As Alice, a private practitioner who offers trainings for social workers admitted to me, based off of her feedback in these interactions,

> "There is a general disdain that caseworkers have for foster parents. That there's a belief that they're in it for the wrong reasons, that they're in it for money or that they're in it for, whatever, and if that is the mindset, I get it why we hit nothing but walls."

All of my interlocutors in this role reported frustration with their interactions with the system and officials. Foster parents assume an underappreciated responsibility, a kind of quasi parent-meets-social worker. In Connecticut, Wozniak (2001) observed that foster mothers outnumber foster fathers and these women are often especially "suspect in social worker's eyes" (52) noting that,

> "all foster mothers were aware of the stigma associated with fostering and accepting 'state money.' Most (especially poor and working-class) women had their motives for fostering questioned" (86);

> For social workers, these characteristics went hand in hand with low-social-status and linked socioeconomic status with poor motherhood. Poor mothers were "bad," "lazy," and those who would not perform routine maternal duties" (198).

Sunshine, a professor and foster mother agreed with these interpretations of the interpellation of

foster parents. In our interview, she noted her observation of where recruitment signs for foster

families are located and how this reflects the projected image of candidates for this role,

> "I was pulling into a Wal-Mart parking lot and I point out that it's Wal-Mart because this is I think it germane to my point about documentation. Anyway, I saw a little sign that said you know 'We Need Foster Parents Call This Number.'

> So anyway I saw this sign and I said to my husband 'Why don't we think about this?' And we met the requirements that we had an extra bedroom. And so, we thought, 'Ok' and so we took the training and we put ourselves on the list for emergency care because we weren't sure that we wanted to commit to anything long term. Since that time, we've had three placements. So we had a boy who was age yeah 10 or 11 at the time. And then we had a boy who was age 7, and now we have a girl who's age 8. She's going to turn 9 soon. And so now that I've been to lots of foster parent trainings and I've done some reading like one book I've mentioned to you.

> So um it's become clear to me that um Danielle Wozniak is right. At least her findings I think. Which she found in Connecticut match what I see in my city. So both foster children and foster parents come from low-income backgrounds; they tend to come from low-income parts of the city. And so, they're not going to put a sign like 'We Need Foster Parents' at the hoity-toity organic food market, right? They're going to put that in the Wal-Mart parking lot. And I now understand why."

Like with all spheres of child welfare, paperwork is present in these trainings. This may include

informational materials for participants, but also data-collection documents that must be

submitted to the IDCFS from Sunshine's experience,

> "Anyway, when we first applied I think I was telling you we had these documents to fill out, a kind of self-study or whatever. And it asked questions that I found strange but I only find them strange because we are middle class professionals.

> So questions like, um 'Do you have access to a car?' like not even 'Do you OWN a car?' but 'do you have ACCESS to a car'. And then, if you don't, you know 'What is the closest bus stop?' and 'What is the schedule of the public transportation?' Um, and so there's an assumption, right? that the person filling out the form might be low income, right? And then um, the one that I found is the weirdest and I was little offended at first and I shouldn't have been because it was very you know, classist on my part. But anyway, the question was something to

> the effect of 'Describe three instances in which you set goals and you achieved them.'

> And I'm like 'What the hell?' Like everyday we set goals and we achieve them! So I wrote a snotty answer and I-I'm not proud of it, okay? I'll just tell you. It was something to the effect of 'I have an Ivy League PhD, clearly I know how to set goals.' And I like, I refused to give examples. And I forget my husband put or I might have put on his behalf like, you know, like 'He earns six figures. Um, he is an independent consultant. Like, he runs his own business. He clearly, like, we're on top of it here.'

In this way, these trainings serve as bureaucratic opportunities to gather information about foster parents like educational history, employment status, even questions asking for participants to describe their own appearance, presumably to gather biometric data as indexical of overall health and fitness according to Sunshine,

> "Oh and there was a question about describing your appearance. And so, I didn't know the word cisgender back then and so I'm like, you know, 'Well, you know, generally we dress pretty casually, you know my husband works from home, so he doesn't have to wear a business suit' I go on and on like this, right? And I remember the worker going over this with us and saying 'No no, you're supposed to put your height and weight.' And I'm like, 'Uh, it's kind of offensive."

Since these trainings are topical and cover a range of topics, assessment documents like quizzes are also used purportedly to determine whether foster parents understand the material correctly. However Sunshine deduced that rather, these paper-based tests are administered in order to record that participants have attended the class more so, than to demonstrate knowledge of the training content,

> "The most telling moment about sort of documents or whatever, and this whole theme that I sort of sense, as in very low expectations regarding foster parents, is, after we came to our twelfth session or whatever it was, the end of the pre-service training, we had to do a test to make sure that we learned right? What we were supposed to learn in the pre-service training. So the test was really short, it was two sides of the same page. And it was all multiple choice questions and maybe like a dozen of these questions, and, the woman who was leading the training the night before the test was officially handed out, went through each question and said 'Ok, question number 4, blah blah blah. Do you think it would be A duh duh

duh, B duh duh duh, or C?' And then everybody would say, 'Oh well it's obviously B' and she be like 'That's right' and then she handed out the test. So essentially she made sure that everyone in the class knew the answer to every question.

And here-here I am a university faculty member right? So I give tests all the time and like, it was just ringing so many bells for me.

There's uh, a kind of bias on their part. They're not interested in nuance. They're not interested in complexity. They want uh get these foster parents trained and qualified. And if that means telling them every answer on the test then so be it right. Now just rubberstamp it and let's move on."

Foster parents are incentivized to attend these trainings with nominal compensation for their time and are required to complete a paper exit evaluation form in order to receive this pay. As explained by Sunshine, this document is presented by trainers not for solicitation of genuine feedback to improve training curriculum, but rather, to record participation in the training itself,

"Anyway, uh my-my concern about the training persists you know we have to fill out an evaluation form after every training and they blatantly tell you 'You won't' (we get paid $10 an hour to attend the training) 'You won't get your money unless you fill out the evaluation form.' And so I don't know if anybody ever reads them but I started being really honest. And I say things like 'You know, the entire back two rows were texting or sleeping for the whole three hours.' You know, 'You're trainer might wanna speak to that,' right? People aren't getting trained here, they're LITERALLY just showing up because they're required to have a certain number of hours because somebody has to put a check on some document somewhere, right? Saying we got 40 hours of training in a two year period so that we're still certified.

Always at the beginning of trainings they go around the room and they say 'Say your name and say why you came' and so people will say, "My name is Blah Blah and uh I got to be honest, I just need the hours.'

Part of this eagerness to record participation and evaluation of these trainings is of course, to document accountability and compliance for the foster parents, so that they maintain licensure. However, this recordkeeping also serves as a means to document that system officials, and by extension, the state has administered these trainings in accordance with existing legal mandates,

"Yeah, they're very concerned to document that you showed up at the training and we've gotten a number of fiery e-mails like, e-mails that are sent out to foster parents by people at the agency, more or less what I am getting from it, and I'm probably am just reading between the lines a little too much but, what I'm taking from it is like, people have been I don't know, signing each other's names or cheating in some way and they're gonna to step on this and you absolutely HAVE to get your 40 hours of whatever.

And I'm just trying to imagine honestly like, I've only been at it a few years, like I said, and I've taken a lot of classes and it's like I don't want to take African-American hairstyling, AGAIN. Like, I've learned it now. I don't want to take like, 'How to Parent Your Traumatized Child' you know? So, these people who've been at it longer and you know, no wonder they're sleeping through the class, 'cus it's just repetitive and, it's not in many cases made to be engaging.

I get the sense and I don't know for sure, but I get the sense that the people who teach it are not trained pedagogues or lecturers or whatever, so they're not very engaging. Um, they're social workers who don't want to do case work anymore or whatever, right? And so they-they teach these classes in the evenings and for the most part they aren't very good teachers. Um, but anyway, they're very concerned to document that you came in and you came in on time and stuff like that."

Another foster mother, Viola, a university administrator offered similar reactions to the trainings

and questioned their relevance to foster parenting,

"We went through the training which we found to be next to useless. Um, we also tried to give them the benefit of the doubt in that we are both extremely educated individuals both with you know, a Master's degree and law degree and the classes are clearly not geared to us. So we kind of came out of that going, what is this system and what-who are these people and how is this going to work? Um, so we received our first placement and were abandoned almost minutes after um the children arrived. There were two young boys and uh we couldn't even get them to return our phone calls. The children were sick and they didn't have Medicaid cards. Um, it was just a hot mess.

They were with us a week um when I had to go and just sit-in protest at children's services to get someone to speak with me. I did that and I finally got some attention, only to learn that they were never supposed to be placed with us anyway – we do not have the proper beds in our home for these two particular children and their needs.

So that uh placement ended an uh, now we have received placement of a teenager which was not on our list of ages to accept, um, we wanted someone younger than our six year old, um but she presented particular needs to be in our area of the county, and uh, we agreed to it and she is delightful. Um she has you know, PTSD, severe depression and lot of things that are commonly um found in people that have been removed from um very violent situations. But she herself doesn't have behavioral issues. I mean other than wanting to post on Facebook, which really isn't an issue.

So we found that process wonderful with her and have, and have decided once she either becomes our daughter through adoption or goes back to her family, um we will not be fostering anyone because of the bureaucracy and the inability for Children's Services to provide any sort of care."

Despite the tedious nature of these trainings and their inconsistent utility to equip foster parents effectively, the reported interactions of these volunteers with staff in these classes challenge the PRIDE Module 6 that typifies the role of the foster parent within the IDCFS as a "working relationship of professional team members", as well as surrogate parental figure:

"All foster parents provide a stable, caring and safe family home, and work with DCFS as part of a team to ensure that a child's developmental, educational and medical needs are met" (IDCFS 2015, 2).

There is no manual of how to be a good parent. There are laws and social norms. When families challenge these cultural expectations, parents carry the responsibility. In current American culture, this includes keeping a certain kind of stable home environment, providing adequate nourishment, non-physical disciplinary methods, and some elementary level education. Despite the subjective nature of these concepts, they are loosely used as a cultural framework within which public policies are enforced on the ground, even in private family life. This is one of the contradictions of social work practice – providing individualized special programs to meet unmet social needs, often on a very idiosyncratic case-by-case basis. Yet, all public social work is dependent upon the public policies that enable their operations, even if there are subsidized

with private funds. In this way, social work is also very much about enforcing rules and reinforcing social norms.

It can be a slippery slope in some family encounters with the state. Regarding disciplinary methods, there is a spectrum of acceptable behavior and a lot of ambiguity. Corporal punishment like spanking is discouraged but not necessarily unlawful as long as it is not excessive, or leaves visible marks. However, when youth break laws on their own accord and find themselves involved with the juvenile justice system, then a lack of parental discipline may be what is at issue according to the state. In either extreme, the state is using its power and authority to reinforce not only the rule of law, but also are part of an ethic in a shared responsibility of the state to intervene into private lives of the public, even regarding how parents discipline their children.

In addition to promoting healthy and appropriate boundaries between parents and their children, the state's affordable public obligation includes ensuring that youth, as minor citizens, are provided with the basic necessities to have a healthy life in order to thrive and become contributing adults in society. Especially in our capitalist society, it is understood by most that the state should provide some degree of social services for the most vulnerable like the elderly, those with disabilities, and youth without reliable parental care. Regarding foster youth, this can been seen more clearly through the tendency for policy makers and civil servants in child welfare to turn to statistics of what happens to youth after they leave the foster care system. These findings emphasized two outcomes. Either individual former foster youth 'pulling themselves up by their bootstraps' and thus, becoming success stories of the foster care experience, or rather as for many, youth struggle to meet the social obligations expected for adults in American society

and are subsequently seen as evidence of individual failure. The state then, as a paternal figure,

has a stake at assuming responsibility for youth as noted on the IDCFS website,

> "As a parent to every youth in our care, the Illinois Department of Children and Family Services is responsible for understanding and meeting each youth's needs. This is true whether a youth moves quickly into permanency, stays in the system a year or more, or does not achieve permanency and must look toward independence and self-sufficiency" (IDCMS 2018).

This parental conceptualization of the state is not only evident in the above language

from the IDCFS website, but also in the use of the "guardian signature" on all case paperwork

requiring legal consent on behalf of a youth in custody. In Chapter Seven focused on the

pervasive audit culture of child welfare and foster care, I examine the unique way in which

Illinois depends upon this method of guardian consent, which involves the same administrator,

the acting IDCFS Guardian Administrator's name signed on every line on any form requiring

parental authorization. At the time of Mina and Jasmin's ACR, this public official was D. Jean

Ortega-Piron, a self-proclaimed "legal parent of these children" under her authority and

responsibility (Schlickerman 2013, 15). I focus on this influential child welfare figure in more

detail later, but I mention her to emphasize that while parents who have not lost their parental

rights like Berta, Mina and Jasmin's mother, are still entitled to participate in the ACR and have

access to any documents involved in the process, they are still viewed as a peripheral social actor

when it comes to case management decisions, and any assessment thereof.

In Illinois, it is common for staff and advocates alike to refer to foster youth as "wards."

While this is obviously shorthand for the complete legal category of "ward of the court or state,"

I have never heard this abbreviation used elsewhere like in California, Oregon, or Washington,

or in any of the existing ethnographic literature on the New York State Office of Children and

Family Services (NYOCAFS) (Lee 2015; Silver 2015). One interpretation of this discursive

practice might be the more intimate relationship between the IDCFS, the IDCFS Guardian Administrator, and foster youth. As the IDCFS is part of the Executive Branch of the State of Illinois, the IDCFS Guardian Administrator is appointed by the Governor, and assumes the legal guardianship of all foster youth in state custody. This is highly unusual and unique only to Illinois, and it is bureaucratically problematic as seen through my examination of the guardian consent process in Chapter Seven. In this context then, dependent youth are equally as 'related' to the state government, as compared to other states and child welfare jurisdictions. Not only is the legal accountability directly connected to the IDCFS Guardian Administrator, but also more closely with the Governor's Office.

The delivery of mental health care, like foster care, is predominantly outsourced through various outpatient service settings. For foster youth in need of comprehensive psychiatric care, most receive residential services and mental health treatment through contracted substitute care providers like Williams Treatment Center as part of Families for Kids, or in conjunction with partnering agencies like The Children's Network for case management. Like with space and service constraints in foster homes and group homes, siblings are frequently not placed together and with rapid system circulation so common, siblings often can go long periods of time with no contact between one another. Given this probability, it is rather unlikely that sibling sets like Mina and Jasmin reside at the same RTC, a facility serving youth ages 6-13. As the majority of these young people referred to by staff as "clients" are also foster youth, it is typical practice for state officials to distinguish the youth as either "wards" or not.

The Administrative Case Review of Mina and Jasmin

Early in my time at Williams Treatment Center, I was invited to shadow Stella and Rose as they participated in a routine ACR. As we drove over into an unassuming business park, just

on the outskirts of town, it was explained to me that this was a special joint case involving two clients, sisters in fact. As the likeliness foster youth are placed in a congregate care setting is less common, especially for an extended period of time, it is even more unlikely for siblings to live in this facility. But this case is unusual for other reasons as well.

These girls were placed into state custody when their mother's paramour[78] was suspected of sexually abusing an older sibling. All five children were removed from the home and distributed into various foster homes (with non-relatives and kin) resulting in the three older siblings eventually growing up and out of the foster care system, all aging out on their own trajectories into young adulthood. However Mina and Jasmin, significantly younger than the other siblings, still remained in custody. Despite entering the foster care system so young during just their first few years of life, the sisters had circulated together for the past decade. In their young lives only aged ten and eleven, they had passed through approximately twenty different living placements by the time of this ACR. Because candidates for comprehensive residential treatment at this facility must exhibit extreme behavioral and psychological challenges, it is remarkable that the sisters have once again remained 'living' together.[81] Given their lengthy tenure in and through the local child welfare and foster care system, it should come as no surprise that they also both have boxes of paperwork that collectively comprise each of their case files.

In circumstances where multiple youth are involved, usually a collective 'family' case hearing takes place at the regional dependency court. On behalf of Mina and Jasmin, we traveled to a nearby city where the assigned Reviewer analyzed the status of the respective case by 1)

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[78] Paramour is the term most commonly used to refer to non-marital partners in case records I reviewed.

[81] When I arrived at Williams, the sisters were placed on different units; hence the need for two unit case managers – one for each sister. The older sister was later relocated to join her sister on the same unit, resulting in the same single case manager.

assessing the documented case management from case records and, 2) during oral discussion with state officials and outsourced service providers. By serving as a bureaucratic extension of the court, the Reviewer in this role authorizes the case as it is documented in the present case report to be presented in front of the judge as scheduled, as a means to accelerate the legal process of the following court hearing. Should there be any hesitation, the Reviewer may delay a court hearing until the condition of the case (and the relevant case reports) are deemed more acceptable or appropriate to the adjudicated permanency goals set forth by the court. However, the Reviewer, while representing the state via the court system, may not change these established permanency goals, rather, any concerns must be articulated and documented in the written report at the end of the ACR.

Alongside Stella and Rose, we eventually made our way into the windowless office of the absent Reviewer and sat at a rectangular table surrounded by four bare walls in a small meeting room. For this ACR, the assigned Reviewer for this family case was out sick and the available department supervisor filled in. Also present must be the case manager or social worker. Case managers are the staff ultimately responsible for the administrative management of specific cases, although this is most evident in their collection and processing of case records – paperwork – not necessarily involvement with direct service delivery. For those employed at contracted agencies, case managers serve as the conduit between direct service providers like Williams Treatment Center and the state.

Mina and Jasmin happened to share one of these outsourced case managers from The Children's Network. Their assigned caseworker from this agency, like the absent Reviewer, was also away from work that day due to illness instead, leaving their supervisor to represent this department. This mid-level administrator oversees case management staff like the caseworker

responsible for the sisters' case, but generally is expected to know little about particular cases. Therefore, the utility of this substitute supervisor was notably minimal regarding case specifics. Excluding me, this brings the meeting up to four officials half of whom have not met the sisters and most likely, never will.

Within the cramped meeting space, towers of case records take up most of the available tabletop space, clearly emblematic of the sister´s membership in and circulation through the foster care system. Case ´loads´ are literally heavier as they grow along with their youth subject. It is largely assumed by most in the foster care system, that the bigger the file, the more complicated the case. Thus, semiotically operating as an indexical icon of the assigned youth, intended to simultaneously resemble and point through each collective text of documents, to a fostered life of the state.

As we took our seats, brief introductions were made but no contextual information was verbally communicated. The acting Reviewer began to read through the documents while the rest of us sat in complete silence for a good fifteen minutes. The tiny space, echoed with the sound of loose pages turned, one by one. The Reviewer skimmed the pages as quickly as possible, in a manner suggesting his attempt to grasp just the necessary knowledge from the documents. Eyes frantically moved left to right, working with focused effort to identify the most important 'facts', reflected in his expressive brow and facial performance accompanied by a "sssss…" and shaking his head during several deep breaths. He clearly was not happy with what he read and appeared more apathetic, than disturbed. He looked up and sighed – not in relief, but rather in exhaustion to ascertain how truly complex the sisters' collective case is. He began to ask a few clarifying questions to which the supervisor from The Children's Network quickly responded in a direct and matter of fact way. She was obviously familiar with the sisters' collective

circumstance, at least to the extent necessary to meet the Reviewer's inquiring needs. Yet Stella and Rose, the on-site unit case managers were noticeably treated like secondary consultants, despite overseeing the daily delivery of services to the girls.

As unit case managers, Stella and Rose each monitors 8-10 youth on 1 of 5 units within the residential facility. In addition, direct service floor staff often referred to as "counselors" directly support and interact with youth on a constant, daily basis. Most youth have their own cinderblock walled room, with the occasional double room, housing two clients. Each unit has its own mascot though such as the "All Stars" or "Super Heroes", a common living area, kitchen, and restrooms. For certain meals, youth rotate through the central main dining hall, along with other units, but for the most part, much of daily life outside of school is experienced on the unit.

What makes the sisters' case all the more complicated is precisely why we were meeting. The sisters were placed into custody from a monolingual home. Their biological mother Berta spoke Spanish, and reportedly could not read or write. Despite her five children being administratively raised by the state, she remained a somewhat active presence to varying extents in each of their lives. For her youngest daughters, she regularly attended family therapy at Williams Treatment Center. During these visits however, she required a translator because she could no longer communicate with her two youngest children who now only spoke and had command of English fluently. Due to the sisters' early entry into state custody combined with extensive circulation through various foster homes, little attention was paid towards sustaining and nurturing their first language of Spanish.

This is unfortunately not unusual, as Glenn-Levin Rodriguez's work has shown (2016, 2017) involving multilingual families, especially monolingual Spanish-speaking parents or children at the U.S.-Mexico border. Such a concern is also relevant in Illinois, where there is a

long but often overlooked history of Mexican and Mexican-American presence. Despite the greater geographical distance from Mexico and the American South to a northern U.S. state, sociolinguistic issues also impact case management and the delivery of services to these families. This diasporic factor is also evident in that the IDCFS Foster Family Handbook is also available in Spanish, the only language translated from English on the entire website.

Initially Berta was ruled as an unfit care provider for her children due to the sexual abuse accusation of her former partner. But at the time of this ACR, he had since left the country and was reportedly no longer in contact with the family. Berta was also evaluated as having some developmental delay which was determined a limitation in her capacity to provide effective parenting. Despite this earlier finding, she had more recently been reassessed to be in good standing as a parental option. Her employment and residency was also consistent, securing a livelihood strategy for herself and children. Because of these improvements, it was recommended at this ACR to consider her as a possible placement option for when the sisters eventually leave Williams Treatment Center as part of their permanency plan, previously adjudicated six months earlier at the last court hearing.

As part of the shift from total institutions such as mental health asylums and orphanages, youth clients at facilities such as Williams Treatment Center are court mandated to stay no longer than two years. Unlike foster homes where youth may stay (and are likely hopefully encouraged) to develop more family-like bonds, clients in large facilities and smaller group homes, know they are only there for a set period of time. As the "discharge" time approaches, case management staff work to determine what the next type of resident placement will be for youth, typically onto other placements in the foster care system.

While they may return to prior foster or group homes, many move on to new ones. For those deemed necessary, youth are relocated to other congregate care settings that can provide continued institutional care. Youth who are classified in this way, typically exhibit the greatest limitations to healthy and safe behavior management. By the of the time of this ACR, Mina and Jasmin had made considerable improvement with their own behavior and emotional regulation, combined with ongoing monitored family therapy sessions with Berta.

To bridge the linguistic barrier during these visits Williams Treatment Center begun orchestrating weekly onsite Spanish tutoring sessions for the sisters. Nevertheless, the court expressed serious concern that the inability for effective communication consequently weakened the mother as a possible future caregiver. And, given Berta's alleged inability to read or write in any language, it was surprising when The Children's Network supervisor remarked, "Yes, we will provide the mother with Spanish copies of all of these documents."

For each sister there are copies of the ACR documents that will be presented to the court at the upcoming hearing – the service plan, *Visitation and Contact Plan*, and *Post-Permanency Sibling Contact Plan*. There will also be a joint written report that the Reviewer will create and submit after the ACR. There are then translated Spanish copies of this paperwork for the mother as well, bringing the total to four separate copies of essentially the same shared documents, which are so large, that they are quite literally, four individual stacks of single-sided printed papers.

"Is she…?" the Reviewer's head moved up with a look of concern. "Yes, she is an illegal immigrant," The Children's Network supervisor replied nodding her head most assuredly. It went left unsaid that due to her undocumented status, the mother likely had limited knowledge of

or access to social welfare services, especially assistance with translation and interpreting legal documents. It is also not noted at least orally at this meeting as to why the mother is not present.

I inquired afterwards during the car ride back to Williams Treatment Center with Stella and Rose about Berta's absence. They reported that she was working and given the remote location of the ACR, it would require a great deal of time and effort for her to attend, since transportation is not provided by the IDCFS or courts. ACR's much like other court activities occur during standard business hours of 8:00 a.m. to 5:00 p.m. Monday through Friday. The same is true for formal meetings in foster care more generally as I observed and was told in interviews with officials and families.

Magnolia, a former foster mother I interviewed in Illinois quipped that this was one of the factors that dissuaded her from continuing as a foster parent. As a college administrator, she understood and appreciated the importance of going to any meeting she could about her thirteen year old foster daughter, "I knew I needed to be there, if at all possible. Even if that meant, taking time off from work." For her, she never understood why social workers would schedule mandatory meetings or supplemental trainings that were usually only held during standard weekday business hours,

> "I mean, listen, I get it. Much of my job here on campus is going from meeting to meeting. I'm an administrator, th-tha-that's what I'm here for. S-so-so I understand why there must be meetings in a bureaucracy like foster care. I really do. When I took on the responsibility of being a foster mom, I knew what baggage came with it, especially taking in teens, who nobody wants. Not just the unpredictable needs of these kids, but also the meetings and paperwork. Like I said, I get it.

But…I also know that I'm not the typical foster parent out there. I'm the kind of working professional they want to recruit for foster homes. But then why have all of these required meetings and classes, forcing us to miss work? I just never understood that. With all the stereotypes out there about money-grubbing unemployed foster parents, you would think they would time things better. I knew I would probably have to miss work for [court] hearings and stuff, but not nearly this much.

And anyone who thinks you get paid to be a foster parent is wrrrong! (laughs) You get *reimbursed* mind you and even when that comes, it's so far gone that you've forgotten about all the paperwork you had to then fill out just to get reimbursed for all kinds of things like clothing, toiletries, food. I'm a homeowner and thankfully paid well, but I can only imagine how difficult it would be if I was waiting for the overdue check just to pay rent each month. You know, technically, that's part of what you are reimbursed for – putting a roof over the kid's head."

In addition to the timing conflict and remote locale of the ACR, it also would have further complicated matters, as Stella explained to me, that neither she nor Rose were fluent in Spanish, and presumably neither was the Reviewer or substitute supervisor from The Children's Network. All four of these staff presented themselves as white, culturally American, and monolingual English speakers. Due to confidentiality reasons, they would need to have requested a previously screened interpreter in accordance with the IDCFS Communication Requirements:

"A prerequisite to the provision of services to Department clients is that the services be made available in a manner that can be understood by clients with special communication needs such as those who have limited or no English speaking ability or who have hearing impairments. It is the Department's intent to facilitate communication with such clients through the early identification of communication needs, the assignment of staff who can communicate with the clients, the translation of forms, notices and letters into a language the client can understand and through the use of interpreters and other auxiliary aids as described in Section 302.20, Definitions.

Interpreters are to be obtained for clients who are limited/non-English speaking or for clients with hearing impairments who communicate in sign language, in accordance with regional agreements with interpreter services. If situations arise when interpreters are not available, then staff shall explore other possible resources such as churches, social service agencies, court interpreter services, foreign consulates, universities, neighborhood associations and local centers for independent living (for sign language interpreters). Each region will have a communication access liaison appointed to assist staff in obtaining resources related to communicating with clients who have special communication needs.

Clients with hearing impairments or who are limited/non-English speaking shall be given a notice which describes their right to an interpreter free of charge.

In addition to providing interpreters and other auxiliary aids in order to enable clients to access the services described in this Subpart, they shall also be provided when clients must be present in court related to Department matters, if the court does not have such services available, when clients attend a hearing or appeal, when clients must be present at an Administrative Case Review and all other appearances required to conduct business with the Department related to their case" (IDCFS 2014, pg. 1).

The overlooked significance of these professional interpreters surfaces again in my observations in the next chapter of dependency court settings in California. As seen through those examples, these social actors are also responsible for word-for-word translation of spoken discourse in real time, as well as ensuring that families understand what legalese or decisions are being made for their open case.

Turning back to Mina and Jasmin's ACR proceeding, the Reviewer probed a bit further, "But she's managed to have a steady source of employment?" The Children's Network supervisor quickly responded, "Oh yeah, I believe she has a factory job. She's had it for quite some time now," making eye contact with Stella and Rose, begging for their assurance and support of this statement. "And she's doing well? In family therapy?" asks the Reviewer. The supervisor, Stella, and Rose exchanging glances, nod their heads somewhat nervously in unison, "Uhum!"

"She was recently recommended for another Parenting Capacities Assessment," Stella added, "to propose that she become the anticipated placement after discharge of the girls." This *Parenting Capacities Assessment* (PCA) is part of a series of different clinical evaluations[82] that are used to determine psychological conditions of both youth and parents who are either under investigation or have an open case. The PCA is administered through the IDCFS Psychology Department and monitored by an agency Consulting Psychologist, but conducted by an Approved Testing Provider. Reasons for such requests can be due to either administrative or clinical reasons. Administrative reasons involved consideration of termination of parental rights, a change in visitation such as from supervised visits to unsupervised visits, or youth returning home. Clinical reasons pertain to concerns about parenting skills, youth attachment to parents as observed by staff, or other potential impairments like developmental delay or emotional and social issues that may impact parenting.[83] The referral itself is a process that begins with the caseworker submitting the CFS 417 - *Psychology Department Testing Referral Form* along with all supporting documentation to the IDCFS Consulting Psychologist. After review, the form will be given to the caseworker. Upon approval, this form and the supplemental documentation is mailed to an Approved Testing Provider. With parent cooperation, then the PCA "is completed by an appropriate mental health professional using nationally standardized assessment instruments" (IDCFS 2018).

The Reviewer, quickly taking this all into consideration for Berta, Mina and Jasmin's family case, skimmed the case reports stacked in front of him. "Good-good" he noted and with

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[82] Other examinations of this kind include: Psychological Evaluation, Neuropsychological Evaluation, and Specialty Assessment Parenting Capacity Assessment.

[83] Similar to a PCA, a Parenting Assessment Team (PAT) Evaluation is another kind of assessment that pertains to parents that have a DSM-V diagnosed mental illness and are prescribed psychotropic medication, or have a secondary diagnosis of substance abuse or developmental disability. All of which must be documented.

one grand swoop with his hand out came his pen. But this is not just any pen; trimmed with gold detail, the deep blue ink flew generously. The Reviewer then leaned his head slightly closer to each page as he signed and at several points blew air to dry some signatures. The four paper towers begin to morph as large sections of stacks were moved and reorganized through this documentary exchange. This orthographic process was autographically representative of not only the institutional approval of the case status and proposed service plan but also of the legal authority of the state. And, autographically since all case plans are simultaneously reflective of an earlier court decision and, in anticipation of the forthcoming dependency court convening, the final step in this interrelated process of the formal case review by the state. The ACR signifies completion of this procedural step, in the perpetual administrative process.

After the Reviewer signed off on both sister's copies of the service plan, *Visitation and Contact Plan*, and *Post-Permanency Sibling Contact Plan*, including the additional copies in Spanish, we sat patiently as he communicated directly to the supervisor filling in for her staff from The Children's Network. This interaction suggested that their bureaucratic roles interact in a different manner than with Stella and Rose. In this way, the supervisor occupies a mediatory role between the state representative – the Reviewer – and the delegated direct service provider – physically manifested through the unit case managers on behalf of Williams Treatment Center and Families for Kids.

At this point for Mina and Jasmin, their case file contents were compiled and guarded by Stella and Rose who were also responsible to transport the documents to and from this ACR meeting. The court documents being signed - the approved service plan, the *Visitation and Contact Plan*, and *Post-Permanency Sibling Contact Plan* - however were produced and circulated to both the dependency court and mother Berta by the substitute supervisor from The

Children's Network, as this agency was directly charged with case management responsibility. The Reviewer is the only person who orthographically participated and was represented in this process through his various signatures before the judge will at the subsequent court hearing.

What these administrative ethnographic observations illustrate most poignantly is the central role that paperwork serves in not only the young girls' lives, but also the mother Berta's, and for each child welfare official assigned to the collective case. Because the sister's are institutionalized, the volume of individuals who produced and (to varying degrees) consulted with the case file contents was significant. For all clients at Williams Treatment Center, this list of case file 'coauthors' may include but is not limited to unit case managers, direct service residential counselors or staff, individual, family, group, art, sexual abuse and trauma therapists, educators, psychiatrists, and in the case of the sisters – language tutors. Above all however, the most important contributor legally, is the IDCFS Guardian Administrator, whose signature is found on every parent/legal guardian signature line. This complex bureaucratic process of guardian consent is explained in Chapter Seven.

Despite her reported parenting limitations, historically Berta remained a relatively consistent figure in her youngest daughters' lives. However, it is unlikely to find her signature on any case records. As family members are purportedly welcome at ACRs, no explanation was provided as to why she was not present, although I was told by Stella that this was noted in advance of the ACR to caseworker from The Children's Network and the assigned Reviewer. Though, it was explained to me that her absence in this kind of bureaucratic convening was not atypical. Whether the meeting time conflicted with her work schedule, the location was perhaps not accessible to her, or she simply was not invited, given her repeated participation in family

therapy and supervised visits with her children, it is within reason to assume that if accommodated, she would likely have attended this meeting.

The IDCFS Guardian Administrator however, D. Jean Ortega-Piron, the same administrator appointed by the Governor of Illnois, whose name is listed over the past decade every time parental consent has been required (or when provided) for Mina and Jasmin, was also not present to this ACR, or to my knowledge, any ACR that was conducted during her longstanding administrative position and legal responsibility of all Illinois foster youth from 1996 – 2013 (see Chapter Seven). She had not, and likely never met, either sister as well.

In the event that a caregiver like a foster parent or a service provider like either Sara or Rose on behalf of Williams Treatment Center disagrees with any portion of the service plan or amendments made by the Reviewer, they may formally request a Decision Review – a review of the ACR itself. This request must be submitted in writing directly to the IDCFS Deputy Associate Director either in person or via fax, within five business days after the ACR (IDCFS 2014, 28). Upon receipt, a decision review conference will be then be held within ten business days. It is important to note that any amendments to the service plan resulting from court decisions from the pervious permanency hearing may not be the subject of a this follow-up decision review. After this additional conference, a final decision will be made over ten business days, and during this time, there is a stay on any new implementation of the service plan. The only exception would be "when an issue affects compliance with a court order or the residual rights of parents" (Ill. Admin. Code 89 § 316.90[d]). After this decision review, if further changes are reuqired of the service plan, copies of such amendments will be sent to all parties entitled to a copy of the service plan, with notations and explanations of the changes made.

Through this ACR convening, we see that certain case records are used to evaluate case progress and determine recommendations that will later be presented in a dependency court hearing. In this way, the ACR itself provides a clinical-legal context that relates to the prior court hearing the decisions of which serve as the basis for the service plan that has been the road map as it were for the case management of the past six months. In turn, the ACR also prepares the reports that will be the basis for the following court meeting, where legal decisions about the case will be officially adjudicated – orally and artifactually. In this way, the ACR both functions as an organizational means to evaluate case management via existing records from the case file, and in subsequently, generates additional documents that will be entered into both the child welfare case file and legal case file. The foster care case file serves as a *descriptive* record of these administrative activities but also functions as a *prescriptive* device to inform future adjudications. I now turn to these legal settings which further exemplify the anticipated uses of these case records.

Chapter Six

Dependency Court

"Court Etiquette:
There are some simple rules to follow while your hearing is taking place.

- Dress appropriately. Do not wear shorts, halter tops, torn jeans, short skirts, T-shirts with printing and/or logos, or hats.
- Address the judicial officer as "Your Honor".
- Answer yes or no questions out loud instead of nodding"
(Los Angeles Dependency Court 2014-2015).

One component of the bureaucratized assemblage of people, relations, resources, and paperwork that is the focus of my study is the coordination that must occur with local legal bodies, namely regional dependency court systems. Using participant-observation from court hearings in two California counties – Los Angeles and San Mateo, this chapter looks closely at the material and social significance of case records and other paperwork within these legal encounters. Since any child protection investigation where allegations of child abuse or neglect are determined to be valid will then require a court order authorizing youth taken into state custody, the foster care case and subsequent file become legally activated by and through the in-person court hearing. Using examples from these court houses, I identify and illustrate the role that child welfare agencies and certain mandating recordkeeping practices serve in the legal process of managing open cases where youth are under state supervision.

In addition to the ACR described in the previous chapter, the following vignettes from public court waiting rooms and closed hearings show how court proceedings rely upon these case archives as the basis for their entire adjudication. And in turn, as seen through these instances, the ways that certain documents like the service plan are used to evaluate progress towards permanency goals first within an ACR and then in a court hearing, also simultaneously

determine not only the trajectory of the paper trail, but also the case itself, thus shaping the futures of social service participants like families, youth, and officials. In this way, these additional examples illustrate how case files and records in the various child welfare and dependency court systems influence and structure contemporary fosterage practices of the state. We see in what ways these same documents function similarly or differently, in the contexts of courtrooms, case management, or daily service delivery in the foster care system.

Before I begin thick description of these legal contexts of case file use, I first discuss the semiotic implications of the case file as a discourse mediating object that functions as a technology of governance and compliance by the state. I then provide background on juvenile court, which oversees all dependency and juvenile justice cases. Next I articulate the two different kinds of hearings like trials or the bi-annual case review, the latter of which works in tandem with the ACR twice a year. This leads to the case record itself – or rather, themselves, as this data takes on two forms as the legal case file and the child welfare case file. Both files have distinctive characteristics across and in between one another which reflect the relationship within which agencies and departments handle, assemble, and manage various case-related paperwork. Drawing from observations of court hearings and time spent in waiting rooms and visiting areas, in two rather different legal jurisdictions in California I then semiotically examine the ways that documents surface as a non-human actants in the sociomaterial dynamic of these legal bureaucracies.

Semiotic Implications

The social organization of communication through bureaucratic institutions such the foster care system or dependency court is situated around a particular structural ideology that shapes and is influenced by, the circulation of documents. Like the aforementioned ACR, a

supervisory-clinical staffing or other more frequent clinical staffings – the case file sets the stage for the entire courtroom performance. Therefore a critical analysis of the ethnography of compliance and governance in these settings requires attention to communicative practices as well as the social life of human and nonhumans in the institutional context (Appadurai 1986; Hull 2003; Kopytoff 1986). These examples of case records and their utility are not only symbolic of broader processes, but also function as semiotic signs, because, as it has been argued, "all signs are material and their material properties shape their significance" (Keane 1997, 2003; Peirce 1955, 98-119).

However, as signs are always arbitrary when taken outside their context of meaning, we must situate our present focus on the case file – an entity that represents people, relationships, and organizations, but also performs social actions (Latour 1992, 163). This assortment of case records therefore not only functions to officialize administrative history, recording and disseminating organizational decision-making, but often requires the creation or collection of other documents like certain reports or receipts, even authorizing the purchase of social services like specific treatments or therapies, including prescription of pharmaceutical medications. In other words, the case file is a bureaucratic object and tool. Because the materiality of this object directly relates to its functionality, the case file is conceptually and pragmatically, a non-human agent operating within a "graphic regime of surveillance and control" (Hull 2008, 505; Riles 2000). Through discursive materialization, graphic signs such as these are depicted and communicated through orthographic and autographic conventions. This physicality holds in it an implicit understanding that written artifacts secure fixity and from an institutional standpoint, establish legitimacy.

For some contemporary state governance efforts, institutional and political discourse is also shaped by material form (Hull 2008). The singular materialized medium of this is the document of record. It has been revealed the heterogeneity of the function and symbolism of documentary inscriptions go beyond the perfunctory norms of rule following, passive agentive behavior, and systematic coercive power within the larger ethnographic record. Not only do particular documents possess specific "program[s] of action" (Latour 1992, 152, 175) – that is, institutional instructions for certain "aesthetics of form" (Riles 2000) particularly the sanctioned and unified "material qualities, discourses, and careers" (Hull 2008, 503) of the artifact – but also hold the agency of compliance. Managers of documents depend upon an accumulation of not only co-authors and administrators, established bureaucratic policies and procedures, but also the materialized instruments of the dominant institutional ideology (Brodwin 2010, 132).

Viewed in this manner, compliance is an ongoing process of institutionalized form, but also a social attainment between human and nonhuman actants (Latour 1992, 159, 177). As a social technology then, this relationship of immaterial and material means establishes and reinforces the systematic signaling of compliance production through prosthetic projection that is so central to bureaucracies such as regional courts and local foster care systems (Brodwin 2010, 136; Pinch, Ashmore, and Mulkay 1992). Court proceedings whether during a hearing, trial, or the preceding ACR operate as encounters between people and the documents that connect them, but also through legal mandate, as demonstrative contexts of compliance both through oral discussion and textual review of case records.

Despite the inherent emphasis on proceduralism however, both the ACR and the court examples in this chapter illustrate how, "particular utterances and referential processes," enact

bureaucratic objects like the case file or case reports in praxis (Hull 2008, 504). To be clear, this is not to suggest that nonhuman institutional actors such as documents are only vehicles through which communication occurs, but rather, they themselves create the very opportunities and occasions during which words are used such as in the ACR or dependency court hearing (Latour 1992, 162). The case file then, operating as a "delegated nonhuman character" (Latour 1992, 157), also brings to light the "discursive dimension of governmental semiotic technologies" (Hull 2008, 504). The very way that this container of graphic artifacts does so is through the inherent precipatory nature of the file in bureaucratic representations – material and discursive.

However, the case file as well as all graphic artifacts is embedded within and through the individuals, collectives, localities, occurrences, and additional artifacts that it represents. As a discourse mediator then, the case file remains in a liminal position between government and populace, social networks, and political economies of human service professionals. Through a complex series of transactions of and through documents, people and things are connected in the court dependent foster care system. Like child welfare and foster care systems, dependency court also operates as a "communication system organized hierarchically" (Martin 1989, 41) wherein social behavior is translated through administrative documentary text within the court record and the case record in order to "make a society legible" to the state (Scott 1998, 2).

Former practitioners and now academics of social work Hayes and Devaney (2004) argued that investigation into objects such as case records is crucial to social science research because of the context of their production and consumption. Focusing on the mundane and routine processes by which case files are created and circulated within the legal and local care systems enables exploration into how legal documents are used and for what purposes in this institutional childrearing nexus. This examination of the flow of files in everyday operation

draws attention to the anticipated and actual uses as well as the potential consequences of the legal decisions that are established and conveyed through the circulation and dissemination of specific case information.

"My name is….and I'm going to be your attorney," was a common phrase that I overheard while sitting in between dependency court hearings. The encounter typically began when a court appointed attorney repeatedly called out the assigned party's name in court waiting rooms "Ramirez! Ramirez!," usually with a case file and pen in hand, until the right person or family heard their last name called. While I was not privy to the details of these conversations, over the course of several weeks some of these interactions were difficult to ignore. I, along with everyone else in these settings observed these impromptu meetings between families, attorneys, social workers, and other court staff in openly public areas such as the expansive waiting rooms. I also had the privilege of witnessing more formal meetings in the private spaces within closed court room hearings. As will be described here, dependency court or "Children's Court" as it is known in Los Angeles County, is a legal environment that involves complicated and sensitive family dynamics as well as negotiated power and authority between child welfare officials, attorneys, judges, court staff, families, and youth. It, like child welfare settings, involves a lot of paperwork.

As I have described and discussed, social work takes on various forms through direct service delivery, administrative activity, interactions with youth, families, and case management team meetings. In these technically non-legal settings, case records pump as the heartbeat of daily life in state foster care. The primary administrative document and technology – the case file - comprises the collection of records kept regarding a particular family case with the local foster care system, investigating allegations of child abuse and neglect, and when necessary,

intervening through legal guardianship of the minor, and placement into the local foster care system. This chapter seeks to piece apart observations from this participant-observation in explicitly legal settings like court houses and the spaces within, while connecting these interactions and processes to the partnering and legally dependent, regional child welfare and foster care systems.[85]

Through formal regulation and procedure the case file becomes and is managed as a legal document. This paper 'work' and documents more generally have been shown to be semiotic technologies used differently in varying contexts (Harper 1998; Hull 2012; Jacob 2007; Jacob and Riles 2007; Latour 1988; Riles 2000). Recent legal anthropology literature has shown how the production of other government documents such as environmental assessments (Li 2009) and identity documentation (Cabot 2012) is both "a cultural practice as well as a cultural material" (O'Reilly 2011, 216).

In the following ethnographic discussion, I describe court contexts in two distinct counties in California – Los Angeles and San Mateo - wherein case records are used to structure and facilitate court hearings, as well as legitimate evidence in these legal settings. And, less formally, these same records are used to inform and mediate attorney-client relations, often experienced in public spaces such as courthouse waiting rooms.

Los Angeles County Children's Court

In the summer of 2014, I was afforded the opportunity to observe proceedings for open child welfare cases.[86] My ethnographic engagement with these court hearings was first mediated by a document – a court order granting me, "authorization [as a] court observer." Despite this

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[85] Allocation of legal guardianship responsibility varies by jurisdiction. In Illinois this is held by the IDCFS Guardian Administrator whereas in California, counties delegate guardianship to a presiding judge or if appropriate, foster parents.

[86] With the exception of adoption proceedings.

adjudicated permission, it was explained to me that any judge could chose to exclude me from a hearing, as Honorable Michael Nash the Presiding Judge[87] of Children's Court noted, "Just show this to the bailiff when you go in and you should be free to go in and out of any courtroom." My first day of observations, I left his office unsure of what to expect as I headed up to the two floors full of courtrooms.

As a former foster youth, from Los Angeles County in fact, I have faint memories of court hearings, but none within this newest building the Edmund D. Edelmen Children's Court, constructed in 1992 to replace the former Children's Courthouse. This present facility is located in a nearby suburb, just a ten minute drive from downtown Los Angeles, depending on traffic. The modern institutional building is located above a steep hill, at the bottom of which a modest public bus stop frequently takes visitors to and from court. Parking is rather affordable, a mere $5, cash only, with no in-and-out privileges. After my first few days of observation it was obvious that many visitors spent significant time at the courthouse, just most of it within the waiting room areas of each floor.

Mandatory check-in time or "calendar call" for court is at 8:30 a.m., and visitors wait until their name is called by attorneys or courtroom bailiffs. The parking structure was nearly full by the time I arrived each morning, requiring me to park on the very top, uncovered level. Those summoned are given a courtroom number to report to, but the only evident hearing schedules are posted on white dry erase boards within each courtroom, and on a handwritten list on each bailiff's clipboard. Access to these spaces and courtrooms agendas are limited to relevant

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[87] Presiding Judge of Juvenile Court in Los Angeles County

attorneys, clerks, bailiffs, judges, court reporters, court interpreters[88], and representatives from the LADCFS, referred to as "the Department" in hearings.

I witnessed families waiting all day for their hearing only to be told as the courthouse was closing (4:00 p.m.)[89] that they needed to return for check-in the following day. Given this format, it is reasonable that over time, patience and politeness wan, as families and other court visitors, enjoy the view of Los Angeles County from the expansive waiting room windows. This juxtaposition of natural beauty within the vast developed urbanscape, to the depressed and stressed courtroom contexts is a tension that became more apparent as my observations continued.

I spent a good deal of time taking in the cacophony of sounds that these waiting rooms generate. Crying babies are comforted by adults staring at the court instructional videos shown on constant repeat overhead or passing the time on smartphones, while older children and teens, pass the time away as best they can. Adults meet with attorneys and advocates, right out in the open, while discussing very private matters, as discrete as possible. During these consultations, attorneys scramble to focus to complete necessary paperwork asking clients to "please sign here" and "be sure to put the date, here." As the day goes on, family interactions, and those with attorneys began to get more hostile.

"This is the game you have to play honey," a grandmother explained to her adult child, "you have to play by their rules." This disgruntled and confused young mother passionately reacts to what her newly acquainted attorney just shared with her, "the social worker has alleged that you…and failed to protect your child when…" "FUCK 'EM!" shouted the accused young

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[88] These staff interpret for parents and families, thereby helping to insure access to justice for those with limited English proficiency.
[89] The courthouse closes daily at 4:30 p.m.

mother, "She's fired!"[90] Similar sentiments could also be overhead in the cafeteria, such as another young mother of a toddler loudly proclaiming "FUCK MY ATTORNEY!" when she learned that the foster parents of her child wanted to change her daughter's name. Her own grandmother attempted to assuage these feelings by asking her calmly to "Don't raise a fuss." While moving around and within this chaotic space, the most significant and reassuring moments come when bailiffs break the monotony of commotion to call out last names for families and relevant parties to report to court (such as supportive family members, CASA volunteers, or trial witnesses).

Questioning whether or not to enter, I see and hear a bailiff call out "Patterson! Patterson!" With my court order in hand, I enter my first hearing as a researcher. After showing the document to the bailiff, he motioned where I should to sit, on either bench in the back of the surprisingly small yet very busy courtroom. "Your honor, there's a law student here to observe, from Northwestern University." Not wanting to disrupt the room any further, or try to explain participant-observation, ethnography, or anthropology I just smiled and waved to the judge, who informed the courtroom that I was present to observe and asked if anyone is opposed. No one responded with reservations or questions, and the hearing began.

As state sponsored meetings (Schwartzman 1989), court hearings function in a very formulaic way – characterized by the linguistic practice of turn-taking and constant reference to legal paperwork. The judge called the hearing to order, asking for each officer of the court to recite their name and purpose, for example, "Abigail Hemmings, your honor, council for the minor," and "Marta Rogers, your honor, council for the father, who is absent," an unfortunate yet common occurrence. Given the weekday time of all hearings, it is reasonable that the youth

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[90] Court appointed legal counsel.

discussed in many cases are absent, but often either one or both legal parents are also not present. All three of these parties however will be represented verbally and textually by attorneys and paperwork – regardless of their own physical attendance. Remarkably, even one stepmother was able to participate telephonically, due to a severe anxiety disorder prohibiting her from travel. Foster parents or other residential care providers like congregate care are typically not required to attend court hearings, but may be summoned to provide testimony or chose to come on their own admission.

In addition to parents, youth, or care providers, a multitude of other social actors occupied these spaces, as I moved in and out of court hearings. Per courtroom, this included a judge, attorneys assigned to cases for a given courtroom on a particular day,[91] and anywhere between 1-4 court clerks that work to support a specific judge and their assigned courtroom. Sometimes present is a district attorney or "DA" on behalf of the Department, in addition to the required representative from this state agency like a social worker or case manager, along with a bailiff, and if necessary, a court interpreter.

While there is a general standard arrangement of courtrooms in the U.S., the exact arrangement of furniture, paperwork and other objects like computers or typewriters, and people greatly depends on the size and arrangement of the physical space. Of the twenty two courtrooms at Children's Court, most were rectangular and divided into parts by a wooden partition or the "bar". Many of these rooms were small enough that only one or two benches were available for the general public, positioning myself and other court observers like family members, advocates of youth or parents, and court interpreters in very close proximity to the rest of the room.

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[91] Not necessarily assigned to the active case under review in a given hearing.

In every courtroom I observed, the bailiff, when not standing or escorting parties to and from the courtroom, sat for the most part at a desk in between the audience benches and the tables for counsel and case-related parties. This distance was so close in fact, that one could easily view over the shoulder of the bailiff to see what they are reading and looking at on a laptop (such as Facebook). In the smaller courtrooms, clerks' desks were to the immediate side of the judge's bench whereas in larger courtrooms, clerks remained at semi-partitioned work stations in the back, usually adjacent to the bar.

Because hearings are scheduled back to back (with a mandatory lunch break), many attorneys come in and out of hearings, to double check hearing agendas, as well as grab necessary court case files from the heaping stacks that are scattered throughout the room. This volume of paperwork is found in a variety of places within each cramped court space. Clerks are sandwiched in between piles of paperwork that they constantly reference, file through, and move, while consistently typing and talking ever so quietly on work phones. The noise of this clerical labor including the often overlooked court reporter provided the background soundtrack of each courtroom. Case files were often stacked by various attorneys in rolling plastic file boxes, or cardboard bankers boxes on collapsible hand trucks along the sides of walls, even within the public's section of the courtroom, often unattended and for the most part, unsupervised.

On top of this administrative movement – material and aural – doors to courtrooms were constantly opening and closing while attorneys wove in and out along with other social actors during and in between hearings. Court interpreters are also present during active interpretation or merely to observe until needed. While interpreting in a range of languages including Spanish, Vietnamese, Mandarin, and a language referred to as "Ugandan" most spoke at a volume, almost as loud as what was being exchanged in English. And, in the case involving the telephonically

present stepmother, the family dog provided additional noise that finally the judge had to ask her to relocate to a quieter area of the home.

With the exception of the court interpreter and represented parties such as the "minor" (youth in state custody) and parents – individually or as a unit, every active participant at the hearing has paperwork in hand, which is quickly flipped through, requiring attorneys and other representatives to move hands and heads up and down with the utmost frequency. Due to this repetitive and frequent shuffling, the windowless space can appear very hectic at times, mostly due to the constant flow of people moving within as well as in and out of each courtroom. The busiest hearing I witnessed involved twenty people, most of whom had nothing to do with the case being discussed in the hearing but were active in the room, excluding myself. Paperwork also moves in these spaces both in hard copy in case files and court briefs, but also digitally through computers on the desks of clerks and judges.

One of the unpredictable variables of this context is of course, the complex nature of each case. "People are always so quick to judge the system," Jack a middle aged bailiff explained to me as he took me behind the judge's bench and behind the courtroom to show me the cells where parties in custody are detained before hearings, "People don't understand that we get all kinds of folks in here, requiring different protocols." What he was referring to as we stood just outside these cells is the possible parent-child combination of parties involved in dependent court family cases, and the potential diversity within each.

As Jack went on to explain, only one person can be detained per cell, with two cells per courtroom, this most commonly is used to separate mothers from fathers, youth who may be in a juvenile detention center from an incarcerated parent, or another youth also under state custody for criminal reasons or without an adult to supervise them for their court appearance. Same-sex

parents must also be separated. And, given that it is the court serving Hollywood, even the occasional celebrity may be required to await the court hearing apart from "gen pop", the common colloquialism for 'general population' used in jails and other detention centers. While courthouses are not technically punitive environments, the intimate connection with court-dependent penal systems is pervasive. And given that many of the families summoned to Children's Court are poor and of color, their relationships with such a setting are frequently fraught with complex emotions and complicated understandings given the disproportionate presence of members from both socioeconomic and racial communities in prisons nationwide.

Jack was very passionate about his job as a bailiff and eagerly spoke to me about being a fellow graduate student, as he was working towards a Master in Divinity degree, assigned material of which he openly read during court hearings when not actively required to participate beyond just being present and available if needed. As we exited through one of two doors past the judge's bench to the holding cells in the back, Jack locked his gun into a small cabinet on the back wall, clearly purposed solely for this reason. When we reentered the courtroom, he equipped himself again to prepare for the next hearing and summon the parties from the large waiting area on that floor.

Walking more closely near the judge's bench I saw a large box of the same teddy bear, a token most children receive if present for their hearing. While many that received this stuffed animal were younger children, the oldest recipient I observed was a sixteen year old girl removed from her parent's care because she was sexually abused by an adult family friend. Needless to say, combined with the careful nature of all the judges I observed when interacting and addressing minors, this hyper sensitive environment may have made the teddy bear seem a bit

overkill for the traumatized teen. While these gifts were pretty standard across courtrooms, each judge had the ability to also decorate their assigned legal space in their own way.

Despite that most clerks, attorneys, and representatives from the Department were women, the judges provided more gender parity. Notably however, female judges showed more effort to decorate and make their courtrooms kid friendly. Commonly, the wall behind these judges' benches were decorated with hand drawn pictures from children surrounding the seal of the State of California, some desks even overflowing with a variety of stuffed animals. One judge had various Disney movie posters taped to the walls, including a deflated metallic balloon that read "CELEBRATE!" Many provided crayons, coloring books, and other toys for younger youth to play with during hearings. In the event that disturbing or potentially harmful case information was to be shared during a hearing, the social worker or other representative advocate (which sometimes is a therapist or CASA volunteer) would request youth be excused from the courtroom.

The Social Life of Case Records in the Court Room

The primary document that was in constant reference was the court brief, generated by case managers and caseworkers from agencies directly administering case management, usually not in attendance. This key document, serves as substitute for any absent party, most commonly parents and youth. However, there was one example where the court hearing was on the calendar, and all necessary parties were present, but due to a clerical error, the court brief had not be prepared by the court clerk, because the information was unavailable in the minute order – the legal document recorded within the minutes of a court session. Given this mistake, the necessary copies of the court brief – which every party already had been previously sent – were not printed

and available for the referential use in the current hearing itself. Within a few minutes time, the judge declared, "I apologize on behalf of the court for this oversight, and the next hearing date is set for two weeks' time." The gavel was hit, frustrated parents excused from the hearing, only to report to court again in a few weeks. Administrative processing time takes priority.

What became increasingly clear within these legal contexts of case record use was the ways in which "recommendations" by the Department had to be officialized through court room speech and court reporting documents. These suggestions to the court, from the state, of how specific management should proceed come in the form of the court brief. As was explained by a judge in one hearing, "these need to be filed in a timely manner so all parties can review accordingly." This required court brief had not been processed within the general timeline, leaving the Department representative unable to respond to some recent case developments pertaining to the parent's adherence to the state's recommendations since the last hearing six months ago.

Another example of how these recommendations are negotiated between the court and state are the ways in which the ACR, usually occurring one month prior to the court hearing "six month review" is used to evaluate a party's compliance with required interventions, services, or treatment ordered by the court from the previous hearing. Ostensibly this kind of review serves to monitor the delivery and efficacy of services to clients, with regards to the upcoming legal encounter in front of a judge and representatives of the Department. This review also serves as a rubric by which to measure the extent to which families and youth have adhered to case management plans ordered by the state during court hearings.

In most of my observations, Department representatives including the occasional DA had different understandings of what expectations were on behalf of a particular party. In one

hearing, a parent had been ordered to undergo drug treatment and was enrolled in residential care to receive these services. However, the Department representative interpreted the order to mean that the parent needed to have undergone and *completed* drug treatment. This was one of many occasions during which a judge felt compelled to remind a court actor of a procedure and verbally clarify the intent and expectation of this legal action, "Counsel, the *six month* review is not intended for parents to have completed all programs outright – that's why it's called a '*review'*. And, that's why we are meeting here today. To check-in and see how much progress has been made."

On other occasions, there were times when determining what within a case is in fact a "legal matter" is, how it is conceptualized, and also potentially contested, filled up court hearing minutes. In one example, a teen had been caught smoking cannabis and was detained by the local juvenile justice system.[92] The father of this minor, who had recently lost his wife, and was working two jobs to raise his three children, now was under state scrutiny. After some investigation into the family, the father also tested positive for cannabis and now it was being debated whether or not his drug use is pertinent information regarding his ability to safely care for and supervise his children.[93] Independently, these two drug-related citations could be viewed as relevant and also related, however, from the perspective of this minor-centered court, it needed to be determined whether legal custody should be temporarily taken away from the father. If not, then this case is no longer a dependency court matter but rather, a delinquency court concern.

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[92] Technically, dependency court usually is overseen by the umbrella department of Juvenile Division of the Los Angeles County Superior court. However, court hearings for juvenile offenses and related matters are held separately in delinquency court. Although, relevant information is of course shared and cited in dependency court proceedings.

[93] Given the widespread decriminalization and legalization of cannabis for adult recreational use in California, this legislative change will likely impact future child protection efforts.

Another way in which these briefs serve the court is by authenticating evidence that will be presented in front of the judge and used to determine the outcome and ordered actions on behalf of the court hearing. This could include e-mails, letters, photographs, drug test results, and so forth. For the most part, hearings in this context serve one of two purposes. Firstly, to bi-annually legally review – both verbally and textually - each case and monitor the status of the minor's development and progress while under state custody through administrative case hearings. This is simultaneously then an assessment of the youth ward of the court (and state) as well as the case management. The former of which is the primary focus, but both are evaluated through the previously prepared and circulated court brief.

The other form of hearings is the trial. These usually occur during custody battles either involving parents needing to negotiate custody after some form of state intervention regarding a child, or, when parental competencies remain in question from the perspective of the Department. During one trial where a father was cross-examined, several references were made to family incidents reported in the court brief. At one point, the father argued with these allegations to which the judge quickly responded, "It's what the files says – go look at it!" As became apparent, this father while fluent in English, did not understand the legal jargon and manner of cross-examination and American English was likely not his first language. The genres of cross-examination vary widely across counsels and one particular Department attorney was struggling with her questions directed at this father.

In this case, the father and mother of two children had a history of conflict dating back a number of years. At one point, the mother sought help at a domestic violence shelter. From the beginning of this line of questioning, the father demonstrated confusion at what was being asked of him by the Department counsel, "Why didn't you contact the court to get custody of your

kids?" Appearing somewhat perplexed the father responded, "Because I'm not a citizen of this country!" He and the mother met and lived in Russia for most of their marriage until recently. And, as the questioning carried on, he continually struggled to understand the context-dependent meaning of some of the questions directed at him. In this example, despite the father not appearing outwardly to require a court interpreter, the court was ineffectively communicating with him both during direct questioning as well as in reference to a legal document such as the brief. It was obvious that he remained rather confused both regarding functionality of the court document, as well as the information contained within it, and apparently unaware of the extent to which this court proceeding was defined by the case file and subsequent court brief.

Setting the (Court) Record Straight

Court records are also contested during these hearings in order to "set the record straight." During another hearing a father was brought into the courtroom shackled, wearing a royal blue jumpsuit that read "LA COUNTY JAIL", while the mother sat beside her attorney. The judge reviewed the recommendations from the Department in the court brief noting that "mom is in a drug rehab program." However, the mother's counsel quickly pointed out,

> "Your honor, please let the record reflect that the mom is in fact in a DV [domestic violence] program and *not* a DR [drug rehabilitation] program."

Somewhat defensively, the Department counsel noted,

> "Your honor, the point was that the treatment services can usually be moved around to accommodate the visitation[94] scheduling that we are suggesting."

While this example highlights another inaccuracy contained within a formal legal document such as the court brief and therefore the legal and case files, this typo – along with the Department counsel's dismissive remark - is also indexical, that is, semiotically points to, the

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[94] Visitation scheduling concerning the youth involved in this family case.

homogenization of families under state surveillance and scrutiny. Such an administrative oversight not only inaccurately recorded court speech and legal decision-making but also highlights the all too frequent associations of poor families, many of color, with drug abuse, let alone domestic violence. Specifically, this documented mistake materialized how the Department representatives often view and categorize parents of youth currently, or potentially, under state supervision. This mom's DV or domestic violence program might as well have been the same as DR, drug rehabilitative treatment.

I soon became aligned with other social actors that for the most part, also observe the majority of these legal encounters. Trials were distinct in not only their length of time (usually much longer than administrative case hearings) but also in the performance of the active court participants. For example, in one courtroom, mostly trials were scheduled for that day. As I entered one morning a clerk cheerfully whispered to me, "Welcome! There are a lot of trials in here today, so lots to watch." Obviously as an ethnographer, I enjoy watching people interact and negotiate one another within this legal context. However, it had yet to occurred to me that some of these court employees that appear to be rather disengaged from the active hearings, may in fact, take some satisfaction and even find entertainment from watching these proceedings unfold. And perhaps longitudinally, following the outcomes of specific cases over time enhances their experience of the daily rounds at work while connecting their labor with the lives of the families served by the Children's Court.

Jack, the soon to be M.Div. bailiff often sought me out when I would be reflecting and observing in the waiting area. "There's more happening in here!" he could say with a smile, encouraging me to come back into the courtroom. Of all the bailiffs at the Children's Court, he certainly was the most friendly and talkative, and very much took pride in the community service

he provided through this work. As I discovered during an observation up north in San Mateo

County Dependency Court, bailiffs were court participants that need not be overlooked.

San Mateo County Dependency Court

The newly constructed San Mateo County Juvenile Court building was perched high

above a curvy road off a major highway, in the San Francisco Bay Area of California. This was

reminiscent of the landscape and semi-elevated position of the courthouse down south in Los

Angeles County. For this observation, I tagged along with the Supervisor of San Mateo County's

CASA program, Neal, and a new CASA volunteer. CASA is a program that was started in

Seattle, Washington in 1976 to connect community volunteers with young people (foster youth)

with an independent court appointed social advocate. Through expansion across the country, the

universal function of this optional court participant is to regularly review the educational history

of the minor, confer with social workers, therapists, and attorneys as needed, and "connect" with

the minor.[95] Just as each county in California has its own local child welfare or foster care

system, and dependency court system, so too does each county administer and organize their

own CASA program. Unlike in Illinois, where CASA volunteers serve in a more advocacy role

outside of legal settings, in San Mateo County this role is more akin to what GALs serve for the

IDCFS. As Neal explained to me, here in this county, CASAs also prepare a written report at

least once every six months under the guidance of the Advocates for Children Supervisor like

Neal to be presented at court hearings.

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[95] This is left very vague, somewhat intentionally according to Neal.

In his role, Neal provided his volunteers with a template of how to document the progress of the specific foster youth either educationally, socially, medically, or psychologically. In the case of youth with a history in the juvenile justice system, the report will include updates regarding the youth's compliance with relevant court orders. The report and court brief work in conjunction to provide the judge with the current case facts. As CASAs volunteer, they occupy an ambiguous role in court proceedings and are usually only consulted when an additional opinion is needed to address a concern or assessment of a case status.

Presumably due to the difference in county scale and resident population of both California counties discussed here, it is no surprise that multiple judges remarked during hearings in Los Angeles County that, "I'm going to recommend this youth for a CASA, although there is a high demand and shortage of volunteers." Los Angeles County serves 9,818,605 residents, making it the most populous county it the U.S., and incredibly diverse racially, ethnically, and economically. San Mateo County is much smaller, at a mere 718,451 residents and is overall, a much wealthier and significantly less diverse jurisdiction. The difference in scale is reflected in that there are just two courtrooms for this dependency court, a fraction of the twenty-two courtrooms down south in Los Angeles County.

I reported to my observation at 12:30 p.m., the second required check-in time for hearings. In San Mateo County "trials are always scheduled in the morning" Neal explained, "and regular hearings are after lunch." This stark difference between Los Angeles County's universal morning calendar call explained why so few people were in the waiting area. Enjoying the equally picturesque view from the large windows of this suburban and semi-rural courthouse, I eagerly listened for bailiffs to call out names of the next parties to report to their hearings as they did in Los Angeles County. Over a rather quiet intercom I heard, "Jones, Jones, please

report to courtroom 2, Jones." After I signed a court confidentiality form[96], Neal looked to the CASA volunteer and I with an excited grin, "that must be us!"

As we entered the courtroom, it was undoubtedly less burdened then the courtroom in Los Angeles County. Spacious and spotless, the room was so quiet Neal whispered to us what was about to occur. He had a stack of court briefs in hand and used these documents to reference the court hearings we spent the afternoon observing. Only a single court clerk was present, seated off the side at an unusually small desk, with very little paperwork behind a computer. Representatives for all the parties are present, and the bailiff's desk was also situated just in front of the visitors seating area, similarly as in Los Angeles County. Neal is a regular at hearings, and therefore, multiple attorneys come over and visited with us in between proceedings, visibly less stressed then their counterparts in Los Angeles County. No one walked in and out of courtroom while hearings took place, and the room was very bland, with no alterations or decorations of any kind. The only adornment was a giant shiny gold seal of the State of California, displayed above the expansive judge's bench. The room was so much larger than those I had previous observed; it was at times difficult to hear comments being made, only because the room absorbed sound so effectively.

Also present if necessary was a Spanish-speaking court interpreter, equipped with handheld microphone and a set of headsets for those requiring her services. Unlike interpreters in Los Angeles County that would sit immediately next to the parties requiring translation, this court interpreter would actually pace around the room, speaking directly into the microphone, in front of the bar. At any given time the interpreter would be nowhere near her audience and

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[96] Unlike the court order in Los Angeles County, I was not given a copy of this confidential form.

whispering so quietly into her microphone that at no point, could I ever hear her voice. Sonically, the courtroom was drastically different than in my Los Angeles County observations.

Peter, the bailiff in this courtroom was eager to talk with me, like Jack, about graduate school. "I'm thinking of going back to get a higher degree in psychology," he shared with me rather casually, "You would think folks in our line of work would be more into criminal justice, but actually these hearings are all about social behavior and a lot about psychology." Given his intimidating physical appearance and carrying arms like a pistol, I was not expecting him to even start such a friendly conversation with me. San Mateo County bailiffs are dressed in all black paramilitary clothing – cargo pants, tucked into black combat boots. Despite also wearing a gun and other protective equipment, they are not dressed in a police or sheriffs uniform. This is in stark contrast to the bailiffs in Los Angeles County that work directly on behalf of the Los Angeles County Sheriff's Department (LASD). LASD bailiffs wear two-toned olive green uniforms (short sleeved button down shirt and slacks), with black work boots.

But Peter, much like Jack of Los Angeles County, was clearly also very social and easily interacted with people,

> "You have to be in this business. I'll be up for retirement in eight years and I definitely want to go back to school for another degree, try something different and use my experiences here to start a different career path."

Also, in a similar fashion to Jack, he had a clipboard and was charged with keeping the court proceedings on schedule and escorting parties in and out of hearings. Within the courtroom I noticed the microphone he used to summon the next hearing participants from the waiting area. He would only call out in the waiting area the name of parties due for a hearing if enough time had passed and their absence warranted this follow up. Unlike the busier and heavily burdened Los Angeles County courtrooms, the San Mateo County courtrooms did not have any displayed

hearing schedules posted (as in white dry erase boards), and while Peter likely did not possess

the sole schedule for that courtroom, his clipboard was the only visible schedule.

Unlike the less active and participatory clerks in Los Angeles County, the single clerk I

observed in this courtroom was very active. As Neal explained to me, she was a former

representative from the San Mateo County's Children and Family Services and therefore served

as resident authority on required policies and legal procedures for specific case decisions and

court as well as state interventions. In this context, a hybridization of clerical work with

representation from the state seemed appropriate given the rather small caseload volume for this

county's Dependency Court.

Like the ACR, dependency court hearings require the case record as representative of a

unique child welfare case and by extension, the foster youth, upon which such proceedings

unfold. Yet, as all,

> "representations exist as things and acts in the world … A medium of representation [like the case file] is not only something that stands 'between' those things [and people] it mediates, it is also a 'thing' in its own right" (Keane 1997, 8).

In this way, the information contained within an official case history simultaneously

functions as the referential point and object of courtroom speech but also is susceptible and

vulnerable to the decision-making that the adjudication exists for. Reciprocally, such documents

shape and are shaped by, their participation in these contexts. In the final and third example of a

different context of case file use, I describe and examine another way that this graphic artifact

represents not only individual cases and the social actors it documents, but also how this dossier

is treated as a representation of organizational compliance and accountability. Using my

participation in two IDCFS audits of case file sets, I illustrate how Williams Treatment Center

displays their agency's ability to conform to state mandates regarding policy and procedure. In

turn, by executing these agency-wide reviews, the state itself demonstrates its active participation in not only enforcing fiscal accountability to the public, but also the surveillance of case management through recordkeeping.

Chapter Seven

Audits and Reviews

"For years, data reporting at the Department of Children and Family Services has been severely hampered by woefully out-of-date technology. We have decades-old data systems (some on the main frame technology) and well over one hundred databases, each holding a fragment of data about one aspect or another of our work. To report meaningful detail on any aspect of our system requires us to draw on multiple resources….then requiring multiple manual steps for assembly. While some may suspect that we are hiding data and information, instead we were struggling to untangle and re-build a way to produce a better report. Not only do we believe that the public deserves accurate and timely information, we at DCFS need that as well" (Office of IDCFS Acting Director Beverly Walker 2018).

Child welfare systems have their own "meta-level" of analysis when it comes to evaluating the services they provide using their own paperwork and recordkeeping processes for these assessments. In Chapter Five I discussed the role of the ACR in using case files as a way to evaluate specific case management and case progress with the goal of making recommendations for future placement, treatment, or discharge of foster youth. This includes the use of certain documents like the case service plan that are further referenced in the upcoming court hearing. In Chapter Six I explored the ways in which the case service plan prepared for and generated through the ACR is used to inform the court brief that serves as the reference point for the bi-annual administrative case hearing in dependency court proceedings. Here again, family cases are legally reviewed by the state in court hearings. In addition to these routine perfunctory case reviews, the court brief may also be prepared and used in episodic and less common, trial hearings that are also generated from the case file record. In both of these contexts, individual case records serve as the principle artifact and actant in these reviews.

Through these processes, documents based upon recorded case information are used to evaluate and determine the effectiveness of case management *vis-à-vis* the materialized case

service plan. Officials responsible for case management - social workers, case managers, attorneys – are held accountable to whether or not the adjudicated plan was executed, but so also are youth and parents, who also are legally charged with abiding by the predetermined case service plan. Ultimately, the performance or activities of both officials and nonofficials that have been documented and authenticated into the foster care case file and legal case file, administratively serve to show that case management has been regulated and evaluated.

In this chapter, I examine another example of this audit culture (Strathern 2000) of the foster care system, and how case files are used as the primary objects and subjects of these reviews. Unlike the ACR or court hearings, the examples discussed in this chapter show how case records are also used to assess organizational compliance. Using two standardized reviews – the IDCFS Post Payment Review (PPR) and the IDCFS Medicaid Recertification Review or "Medicaid Review" as it is known by staff – I show how sets of case records are randomly sampled and concurrently examined as representative data of a service provider's adherence to recordkeeping mandates.

One provocative example that I discuss here is the privileged importance of gaining documented authoritative consent in everyday decision making processes of case management. Focusing on one state official – the IDCFS Guardian Administrator – I provide examples of how and why this single administrator's name was signed on every case document requiring parental/legal guardian permission. I then use this signature to outline and describe how the state audits mental health providers that are contracted by the IDCFS for the provision of child welfare services, both in everyday case management but also annually in agency-wide reviews of case records.

First, I explain and unpack the internal and external monitoring technologies generated

and executed largely through state determined assessment rubrics. I locate these tangible and measurable recordkeeping procedures on the local, state, and federal levels which are informed in large part by federal policies, but enacted in different ways by state departments like the IDCFS, and in service settings. I then discuss how one service provider – Williams Treatment Center – has responded to and developed their own internal audit process in accordance with these existing policy mandates, but also in preparation for the external reviews described here by the state.

Closer attention to these reviews also reveals the ways in which post-review reports are generated to further document the quantifiable evaluation of foster care agencies, despite the highly qualitative nature of these service delivery contexts. What is clear through these audits in Illinois, are financial relationships between the state and care providers which are constantly mediated through files, contents, and documentation of recordkeeping compliance.

Therefore with this data, my study contributes the growing public attention regarding supervision and safety of youth in care, specifically the recording patterns of officials. Combined, these examples illustrate the regulatory practices designed and intended to prevent child abuse and neglect both in and out of foster care. Along with the ACR and court hearings, the audits described and analyzed in this chapter, provide additional examples of how the case file is used to plan, implement, and evaluate programs and policies at various levels of state intervention.

While the delivery of public services continues to be outsourced to contracted private agencies, many of these programs simultaneously develop into public-private hybrid models of state care. With each increase in administrative labor and organizational hierarchy comes additional proceduralism through paperwork. In what ways do the case file audits like the

Medicaid Review and PPR examined here, provide administrative cover for the bureaucracies and bureaucrats that are empowered to keep foster youth safe and thriving while in the child welfare system? As with all forms of case review in this dissertation, what are the consequences of these records for the individuals and organizations that these audits require and regulate?

Certifying State Agencies and Certification Certificates

As outlined in Chapter Three, the Title IV of the *Social Security Act* provides, "grants to states for aid and services to needy families with children and for child welfare services." This federal legislation includes Parts B (Child and Family Services) and E (Federal Payments for Foster Care and Adoption), which authorize The Federal Foster Care Program, managed by the DHHS and administered by the Administration for Public Services', Office of Human Development Services. As wards of the state, foster youth are dependent upon both this and the Medicaid Program[97] or "Medicaid" - a joint federal and state program authorized by Title XIX of the *Social Security Act* providing, "grants to states for medical assistance programs," including mental health services. Eligibility is determined largely by income and a child may be eligible for Medicaid regardless of the eligibility status of their parents. This includes youth who live with someone other than a parent like in a foster home, group home, or RTC.

Unlike the Federal Foster Care Program that allocates funds to all child welfare systems, the national public health policy Medicaid, requires states provide up to half of the funding for their local Medicaid programs. In some states, counties also contribute funds. Locally, the IDHFS is the state agency designated to administer Medicaid services in conjunction with the

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[97] Medicare is the national public health insurance program for Americans aged sixty-five and older who have worked and paid into the system through the payroll tax. It also provides health insurance to younger people with some disability status as determined by the Social Security Administration, which some foster youth may also quality for. This means youth can be deemed dual eligible to receive services through both the Medicare and Medicaid Program.

Illinois Department of Human Services (IDHS) that provides a wider variety of social services,

and the IDCFS. The Medicaid State plan defines and authorizes the Community Mental Health

Services in accordance with requirements stipulated in Rule 132.

Williams Treatment Center is simultaneously a child welfare care provider through on-

site residential and case management services as well as mental health provider. This means the

facility under their larger organization Families for Kids, receives funding from both the Federal

Foster Care Program (through the IDCFS) and Medicaid (from IDHFS and IDHS). It also means

that the services they provide are monitored administratively through different state

documentation procedures, depending on the client and type of care delivered. Unlike the ACR

and court hearings which use the case file to monitor child welfare administration, the two state

reviews in this chapter – the PPR and Medicaid Review – use the case file to monitor the

delivery and documentation of mental health services. And while the ACR and court hearing

used specific case files to assess individual or family child welfare cases, the PPR and Medicaid

Review used randomly selected case files to evaluate a service provider agency or organization.

As in foster care, becoming a state mental health provider requires licensure and certification,

> "Any entity having a contract with a State agency for the provision of mental health services, other than hospital inpatient or hospital outpatient psychiatric services, with DCFS for the provision of child welfare services, with DCFS or DHS for the provision of youth services, or with DOC for the provision of youth treatment, rehabilitative or transitional services may apply for certification as a Provider. Applicants who meet the requirements of this Part will be certified to provide Medicaid community mental health services by one of the State agencies and enrolled as a Provider in the Illinois medical assistance program by HFS pursuant to 89 Ill. Adm. Code 140.11. Providers will be certified by, and subject to, Medicaid certification review by only one State agency" (Ill. Admin. Code 59 § 132.30).

This certification process involves submission of a completed *Application for*

Certification of Medicaid Community Mental Health Services Programs, with all of the

accompanying components as required like supplemental information about the provider and

documentation of certain facility clearances as such from the fire department and the health

department. Depending on the provider and the populations they serve, applications are sent to

the Certifying State Agency that it intends to contract with for Part 132 services. The IDHS

administers the Bureau of Accreditation, Licensure and Certification whereas the IDCFS

administers the Office of Medicaid Certification. For comprehensive service providers like

Williams Treatment Center, they must coordinate with both state agencies, alongside with the

IDHFS that administers the PPR and Medicaid Review.

If in compliance and approved, the Certifying State Agency issues a *Certification*

Certificate for the Medicaid Community Mental Health Services Program to the provider after

thirty days of receiving the application. This *Certification Certificate* is in effect for three years.

As part of the recertification process, providers must participate in provider Site and Medical

Record-Keeping Practice Reviews like the Medicaid Review:

> "Providers are required to maintain compliance with certain standards for safety,
> confidentiality, and record keeping practices in their practices. Health Plans[98]
> assess the quality, safety and accessibility of office sites where care is delivered.
>
> This includes an assessment of:
> - Physical accessibility
> - Physical appearance
> - Adequacy of waiting- and examining-room space
> - Availability of appointments
> - Adequacy of medical/treatment record keeping
>
> During the Provider site-visit, Health Plans review office documentation practices
> with the practitioner or practitioner's staff. This discussion includes a review of

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[98] Defined as, "A Health Maintenance Organization or a Managed Care Community Network that provides or arranges to provide covered primary, secondary, and tertiary managed health care services for Medicaid Participants under contract with the Illinois Department of Healthcare and Family Services" (305 ILCS § 5/5-11).

the forms and methods used to keep the medical record information in a consistent manner and include how the practice ensures confidentiality of records" (IDHFS Managed Care Manual for Medicaid Provers 2016, 27-28).

Like the Medicaid Review which serves to recertify mental health providers as compliant to Part 132, the PPR determines billing amounts subject to recoupment as a result of non-compliance:

"Recoupment is the process by which the Department recovers funds from a provider based on billings for Rule 132 services submitted for reimbursement to DCFS that are unsubstantiated (i.e., a service was either not properly authorized or not properly documented in compliance with Rule 132 requirements applicable to a specific service)" (IDCFS 2017, 1).

In accordance with the *Confidentiality Act*, all records must be made available to the IHFS or their respective agents, on request for payment of services delivered through the PPR and,

"shall compare billed services to those listed on the Admission Note, Healthy Kids screen[99], MHA or ITP in effect at the time service was provided. [IHFS] will determine that a billing will be unsubstantiated for any of the following:

1) Billings for services without a completed Admission Note, Healthy Kids screen, MHA or ITP being in effect, except for mental health assessment; ITP development, review and modification; crisis intervention; case management transition linkage and aftercare; or mental health case management pursuant to Section 132.165(a)(1);
2) Billings for services that the Provider is not certified to provide;
3) Billings for services not listed on the currently effective Admission Note, Healthy Kids screen, MHA or ITP being in effect, except for mental health assessment; ITP development, review and modification; crisis intervention; case management transition linkage and aftercare; or mental health case management pursuant to Section 132.165(a)(1); or
4) Billings that do not comply with the requirements in this Part (IDCFS 2017).

As with other services that the IDCFS is responsible for administering like case management, even the PPR is outsourced to private organization, the Infant-Parent Institute (IPI). Through advice and assistance regarding monitoring and certification,

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[99] Annual physical health exam.

"The Infant-Parent Institute Consulting Division specializes in behavioral health and human services consulting. We provide technical assistance, program monitoring, compliance monitoring, quality improvement, and program evaluation for behavioral and human services organizations nationwide. The Consulting Division includes thinkers from clinical, developmental and experimental psychology, social work, criminal justice and related fields, all eager to turn their attention to significant new issues in mental health, treatment outcomes, compliance, and program evaluation.

The Consulting Division has significant expertise in compliance monitoring activities, providing Medicaid systems support, conducting trainings and performing program evaluation. We have extensive knowledge of HIPAA, quality assurance, confidentiality requirements, clinical services and supervision, billing practices and documentation standards" (Infant-Parent Institute 2015).

This means that the in-person case file auditors of the PPR are outsourced IPI staff who are actually referred to as "PPR staff" according to the IDCFS, and not themselves service providers or state officials, *However, the Department retains the sole responsibility and authority for Post Payment Review procedures, findings, and recoupment*" (IDCFS 2017, 1, emphasis in original). The staff leading the PPR must be either a Licensed Practitioner of the Healing Arts (LPHA) or Qualified Mental Health Professional (QMHP), but the overall responsibility to ensure continuity of review standards for PPRs rests with IPI's Associate Director for Operations and Post Payment Review Coordinator. This provides yet another example of social actors – contracted IPI officials – that will interact with and use case records. It is also shows the mediation that case files perform between service providers, contracted compliance assessors, and the state (IDCFS, IDHS, IDHFS).

I now turn to the causational effects of case records, and the subsequent records about case records. In addition to case files and records about these files, as well as the individuals that are required to perform these kinds of documentary audits, formal meetings surface again as the

contexts in which people and documents converge in order to review and reconcile case management in foster care administration.

Proliferation of Documentation

One example of this perpetual recordkeeping is the entirely internal system of case recordkeeping centered on client three-ring binders at Williams Treatment Center described in Chapter Four. Such binders serve as the agency's own case data for each youth[100], but can amass into multiple binders per client, when necessary. These binders almost never leave the RTC, but contain hard copies of a wide range of documents, some of which are routinely referenced in reports that are eventually sent and submitted to the IDCFS, like routine requests for the legal guardian signature discussed in this chapter, as well as for use in an ACR or court hearing. If randomly selected for review as I now turn to, the complete binder or series of binders may be flipped through, examined, and assessed by state representatives, while conducting these on-site case file audits.

As described in Chapter Four, the contents of such a binder range from a number of initial intake and guardian consent forms, granting permission for youth clients to reside and participate in treatment or recreational activities at the center, all of the required case management records like the *Mental Health Assessment* (MHA), *Individual Treatment Plan* (ITP), *Individual Behavior and Crisis Management Plan* (IBCMP) and a multitude of on-site clinical records like a log of administered medications to youth and clinical services delivered like therapy sessions or other interventions as needed. As RTCs like this facility provide almost all of the youth treatment services in-house, this includes a range of therapists, an internal nurse and clinical staff, as well as an outside psychiatrist that frequently visits clients. All of these staff

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[100] It is less common, but there are occasionally clients at Williams Treatment Center that are not foster youth. Therefore, such binders are not limited to only record foster youth activity and state-mandated care.

have their own paperwork to process, a combination of which are state forms and reports, as well as paperwork specific to Williams Treatment Center or their parent company, Families for Kids.

I eventually discovered while assisting with submission of certain state forms to the IDCFS, additional documentation is generated in order to prove that submission or receipt of said paperwork was attempted. As the IDCFS accepts much of their guardian consent requests via a shared fax line, it is quite common for paperwork to either never be received, or at least, claimed not to be by state officials. Williams Treatment Center staff thus developed their own supplemental documentation procedures, in order to establish and record such efforts. Stapling and filing fax cover sheets for each such attempt to send paperwork like permission slips, case management updates, or changes in services has now become routine. This adaptation to fax issues is just one illustration of how contracted agencies negotiate and create their own extra-documentary practices, in order to meet the paperwork expectations enforced by the state.

Closer examination of these existing and changing processes and procedures highlights the constant negotiation between confidentiality and transparency in state and private organizational settings. A frequent issue cited by the case managers at Williams Treatment Center was that while there exists the SACWIS but it is only accessible to state employees. As staff of a contracted private agency, they were technically not employees of the IDCFS, and therefore not given login access to these records. Rather, in order to receive or contribute to the IDCFS record system, they had to depend upon and coordinate with the designated state social worker for each case. Many of the case management staff questioned openly the real utility of such a state monitored and controlled data system, if the actual case management staff responsible for the majority of recordkeeping, were systematically excluded from this information or administrative resource.

As already articulated, the meaning and value of case file contents varies and depends greatly on the contexts of use. Here, I share observations from my own participation in case file audits to illustrate that even within a given space of use, meaning-making and evaluation depends upon who is examining and referencing case records, and why. Through the audit process, client case file conditions were assessed first internally by, Williams Treatment Center, in preparation for external state reviews of these same sets of case records. Of the utmost importance, these ethnographic examples of the audit process demonstrate how state agents read client case file content and conditions to determine and assess agency compliance regarding mandated recordkeeping practices.

I focus on two annual reviews that I helped prepare for over the span of 2011-2016. Both reviews center around the flipping through of loose-leaf paperwork of case records in binders or filing boxes, alongside digital spreadsheets on laptop computers, to assess, measure, and document recordkeeping compliance. The Medicaid Review evaluates agency compliance with the formal guardian consent process and the PPR audits billing records submitted through the Medicaid Billing System. These reviews work in tandem to monitor recordkeeping of providers through the case file record and are required for any contracted organization to continue receiving reimbursements for services delivered to clients, and sustain accreditation. Purportedly, this process is part of a larger objective to oversee the delivery and effectiveness of services provided to clients. However, given the sheer volume of paperwork, it became apparent that the IDCFS assessment rubric prioritized certain documents over others, including perhaps the same document, but only particular versions of a given form.

The following ethnographic vignettes illustrate that recorded case contents and forms are indexical – that is, they semiotically represent and point to - the circumstances of documentary

production of not only 'wards of the court', but also officials like private service providers or

state social workers. However, as with other administrative settings that involve case files like

the ACR and court hearings, the PPR and Medicaid Review also are contexts that generate

additional paperwork, that serve to document that case records were audited. One obvious

example of this indexicality of case records, is how these administrative artifacts require

'authorized agents' to autographically represent legal guardianship, and by extension, the state,

through signing or providing a signature, on behalf of the IDCFS Guardian Administrator.

Viewed through the lens of intake and clinical treatment forms, I draw attention to how

staff and administrators negotiate processes characteristic of the broader post-institutional model

of case management (Brodwin 2010) - as bureaucratic division of labor, appropriation of

responsibility (Hull 2012a) and accountability (Strathern 2000), and the creation, development,

as well as performance and maintenance of economic relationships.

Billable Language and Billable Units of Time

"My job is to translate the services we provide to our clients into billable language,

measured into billable units of time for reimbursement from the state," remarked Stella, one of

the unit case managers I accompanied in the ACR discussed in Chapter Five. The clinical billing

reports that she was referring to were part of the collection of large, and often quite unwieldy,

paper case files that she and fellow staff were responsible for. As described in Chapter Four, this

unusual modern day variety of brick and mortar institution provides around-the-clock

supervision and care for youth in crisis, overwhelmingly older children, usually tweens and

teens. The facility provides a milieu of rehabilitation for their clients who exhibit extreme

psychological and emotional difficulties requiring psychotropic mediation[101] combined with extensive behavioral and psychiatric treatment.

At any given time at Williams Treatment Center, approximately 45-50 clients ages 6-13 have their treatment subsidized through the Individual Care Grant or "ICG", a source of funding[102] that provides state intervention and financial assistance to parents or guardians for children and youth with, "serious, chronic, mental health conditions, and symptoms of psychosis," or a Serious Emotional Disturbance (SED) requiring psychiatric hospitalization or long term treatment (IDHFS 2017). In an overwhelming number of cases, these young people are currently wards of the state – or soon will be. A small percentage of clients remain with their families of origin legally, often resulting from prior adoptions of the youth out of foster care previously.

What this means is that for some youth, their current participation in state care is not their first time and their current families have decided that it is in their best interest to put them back in state care at a facility such as Williams Treatment Center, in order for them to receive the comprehensive supervision and treatment that their mental, psychological, and emotional conditions require. In these circumstances, it is more likely for the youth clients to go home to their families (which many are adoptive, not biological) on weekends, with RTC functioning somewhat more like an intensive boarding school. For most – who are foster youth – they remain at the facility full time, with only the occasional "home visit" to either prior foster homes or with actual natal kin that they are still in contact with.

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101 Psychotropic medication alters chemical levels in the brain which impacts mood and behavior.
102 The ICG program was established by *Public Act 76-1943* in 1969. The administration and operation of the ICG program is governed by Ill. Admin. Code 59 § 135, commonly referred to as Rule 135.

While another staff member Reuben clarified that "we're not here to address everything going on with these kids – just what counts as a mental health issue," he and the rest of the staff conveyed to me that it is very rare to encounter clients have come from what would be considered by most as "normal family" contexts. Because of this complicated and complex dynamic inherent to this kind of treatment center, in all actuality, the staff and youth clients negotiate daily much more than simply mental health related challenges.

I now return back to Gal's (2013) semiotic concept of qualia, to analyze and interpret the relationship between billable language and graphic technologies of documenting service provision. Because qualia are pragmatic signs that semiotically materialize into sensuous qualities, the artifact-dependent communicative processes described here emphasize the significance of billable language to typify and quantify social life into billable units of time. In addition, this same (paper)work can be completed collaboratively across service providers, to meet different administrative ends with the same case management plan. These interactional modalities are further enacted, reenacted, or altered in not only the creation and circulation of these case records, but also in the variety of meetings and other professional encounters in which they are utilized and referenced.

The examples of case records - their contents and utility - are not only symbolic of broader programmatic organizational processes of contemporary social work, but this material culture, like all things, also function as semiotic signs that "graphically mediate semiosis" (Hull 2003, 293). However given the shambolic nature of the foster care environment, there may occur other events involving these artifacts that provide "the vicissitudes to which material signs are prone" (Keane 1997, 31). As the meaning of all signs are situationally dependent – I argue that the case record via the so-called 'file' offers an underappreciated vantage point to ascertain how

this nonhuman entity not only represents case management, but also influences social actions of its human counterparts (Latour 1992, 163). As has been demonstrated, attention to qualia enables ethnographic consideration as to what is continuous semiotically across and within experiential practices - from communication to embodiment.

Similar to other objects used as instruments of surveillance (Brodwin 2013; Carr 2011; Hull 2012), case files operate as artifacts of social service activity, but also tools of anticipated clinical treatment milieu (Garfinkel 1967). In this way, case records have power to characterize and establish how a client is adjusting to their present environment such as a residential setting or through a therapeutic schedule. But these same objects also are devices by which to prescribe substantial changes in a client's immediate life circumstance, in ways that may or may not enhance the effectiveness of other forms of environment or therapy.

These uses can range from determining when, where, and with whom youth reside, whether they can go on a class fieldtrip, to changes in psychotropic medication or case service plan. Through discursive materialization, graphic signs such as these are depicted and communicated through orthographic and autographic conventions (signatures, approval, granting consent), as well as digital and paper-based means of transmission and circulation (fax, e-mail, web based record management). This hybridity of document physicality holds in it an implicit understanding that written artifacts above all serve to secure the organizational fixity and institutionally, establish legitimacy. But increasingly these objects are text based, with fewer documents requiring no more actual handwriting than providing a signature. However, regardless of existing digital informative technologies, which have largely been embraced by similar contexts of case management such as the medical and legal professions, case files in this organizational setting remain overwhelmingly in their purest form – on paper. Every e-mail or

fax transmitted on behalf of a client or case will eventually be printed and compiled in the corpus of case records. While the majority of case records are in fact created and updated on computers, often stored on password protected organizational servers, they are typically considered complete and final only when they are printed and filed.

The range of potentially billable services Stella was referring to can be separated into direct, everyday living arrangements such as housing, feeding, and daily life or specific clinical services through routine therapeutic encounters, psychiatric medication administration, other prescribed treatment milieu, or episodic interventions such as when a youth client is undergoing some sort of momentary "crisis." Such an array of services, while typical for an intensive RTC such as this total institution, are somewhat atypical for the average foster youth. However, the semiotic ideologies present at this provider site are characteristic of the overwhelmingly clinical approach towards contemporary social work, even involving foster care cases that may not require any medical intervention or therapeutic treatment. Following this diagnostic logic, the translation and interpretation of service delivery into billable language described by Stella is evident in the ways in which staff interact with different paperwork, in different modalities – hard copy or digital – or converge with fellow service staff when trying to access the same billing record online.

One of the shared responsibilities of the therapy team at this facility was facilitating "groups", which were weekly joint therapy sessions typically focused on a discussion theme or activity for a set of youth. For the staff that facilitate these therapeutic services, part of this responsibility was to complete a *Group Cheater Note* by hand and then later type and submit these notes onto an internal agency web server for eventual billing directly to the state through the online Medicaid Billing System.

This process of transcribing a talk based "group" session for each of the 6-9 participants, and then transferring this data into digital billing software, also involved the translation of these notes into billable language, just as Stella had described. On the initial *Group Cheater Note*, it asks for descriptions of affect/body language, general attitude, any needed staff interventions, and responses to any discussion questions that rose. Each client is also numerically self-evaluated on a scale of 1-10, an attempt to encourage self-accountability and empowerment with the youth to account for their own psychological condition (Carr 2006), however minimal it may end up serving in the context of 'group' and later into the translated billing report, much like the client consent signatures described later in this chapter.

In the online format however Stella showed me, these observations and evaluations are limited to exclusively specific words that she explained to be "objectively clinical" state approved mental health clinical terminology. For example, observations are categorized into PRESENTATION, MOOD (agitated, angry, anxious, calm, elevated, happy, restless, sad, tearful, withdrawn), EYE CONTACT (avoidant or intense), VOICE TONE/SPEECH (loud, quiet, pressured, rapid, slow), and THOUGHT (confused, disorganized, flights of ideas, paranoid, tangential), as are staff interventions. Youth self-evaluation of their individual participation measured on an available scale of Fully Engaged, Mixed, Slight, Negative, Disruptive, and None. According to Stella, this last option of "None" is represents no client participation which according to her, "means we should not bill." She went on to clarify that this does not mean the youth was not in the group session, but it does mean that they were not engaged and therefore did not receive a service and therefore indicates nothing to charge the state for. Similarly, client success in the treatment setting was rated as Full Success, Mixed Success, Very Limited Success, and No Success.

In addition to use of the billable language register as mentioned earlier, Stella further explained that these translated services and client observations must be "measured into billable units of time" (7 ½-15 minutes, per unit). What is also evident is that many staff provide an array of services to youth clients, often blurring the lines of their own job description. As noted by Reuben, an employee of the facility for quite some time, "I kind of do everything, because I've practically HAD to do everything. At some point over the thirty some odd years I've been here, it seems like I've been in just about every staff position." He shared that he started right after college as a unit floor staff or "counselor" as they are called, "in the OLD building, mind you!"[103]

These "floor" staff supervise the youth at all times, before and after school, with homework, recreational activities, meal times, and transport them to off-site appointments for treatment or occasional visits with their families, if any. While some of these floor staff have educational or professional experience in social work or psychology, as entry level employees they are required to have no formal training in in these areas, yet they interact with the youth more than anyone else. However, the majority of the reimbursable services that are translated into billable language into billable units of time are for mental health services, none of which are formally executed by these care staff. Formally, the IDHS and IDCFS provides the state definitions of what a billable service is, and who is eligible to bill for that service once provided. However according to Stella, the total billable units "should reflect service time, documentation time, and travel time,"

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[103] Williams Treatment Center operates out of a second building that was constructed after the former building was demolished on the same site.

> "The rationale is that the total time is divided by the number of clients. So if you had an hour group of six kids and spent 10 minutes on each of their notes, all of your notes would indicate: 2 hours 0 minutes. The computer will then take 120 minutes divided by six and bill each client 20 minutes."

In the event that two or more approved mental health staff are present for a single service, both staff are to bill for each of their times. But as was the case when Williams Treatment Center debuted their own internal online billing system in an attempt to create more consistency with processing documentation collaboratively, only so many characters can be entered for a given data field (using the approved billable language) and just a single service could be entered for any time period. This results in situations where a case manager and a therapist intervened to assist a client in crisis, they could not report that they simultaneously provided this service:

> "So what you now get are some of us having to say we treated a client at all hours of the night, just to get reimbursed for the service. Even though it's pretty unlikely that I counseled a 10 year old at 4:00 a.m."

Charlie another unit case manager went on to explain that this new data management program, while the intention was promising has proven to be more of a logistical hassle, "Now if I'm completing a report as the case manager, and the therapist logs in to complete their portion of this joint report, I get kicked off the system." So we see yet another example of attempts at technological innovations and the ever present need for adaptation.

Documenting Client-Provider Technologies of Participatory Treatment

Stella's earlier remark about her responsibilities as a case manager and having to learn and use billable language, was in response to some questions about my duty conducting internal case file audits to assess the condition of client case files for the upcoming mandatory Medicaid Review and PPR. In my supportive role, I was responsible for verifying that intake and consent forms, along with clinical documents like the MHA and various treatment plans, possessed the

necessary signatures from staff, parent[104] or guardian, and client, if they are at least twelve years old.

For clients, this perfunctory administrative gesture is supposed to begin involving youth deemed of appropriate age and competence to contribute towards the treatment plan development, which according to Illinois state policy is when a youth reaches the age of twelve. According to staff, this usually involves verbally explaining the proposed plan to the youth, and then having them sign their name acknowledging their active participation in their treatment plan. As participatory as this may seem, as was explained to me, youth may decline to sign in which case staff simply write "client refused to sign." Or, in crisis situations, should a client be away for more extreme psychiatric treatment, staff note on this same signature line, that "client is currently hospitalized."

Over the span of my time supporting preparation for these reviews, in most of the case files internal signatures from staff and clients were present but quite often, given that most of the clients were wards of the court, the required state guardian signature was either missing or altered from document to document. Overtime, I began to notice however that when given, the same *name* but not always the same *signature* was provided as guardian consent for a wide array of requests concerning youth. Stella remarked frankly that regardless of autographic materiality, "Without that signature, these documents mean nothing."

Documenting the Guardian Consent Process

As seen in Chapter Four, unlike child welfare systems across the nation that allocate legal guardianship of foster youth to a presiding judge or court committee, in Illinois this important

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[104] For youth who are not wards of the state, their custodial parents are only required to sign the intake forms, authorizing the agency to make treatment decisions on their child's behalf. These clients tend to have less paperwork in their case files as a result. Of this small number of clients, I found no missing parent signatures.

authority is given to one public official – the IDCFS Guardian Administrator. This condensed

model of supervision and administration exists in no other state-level child welfare system.

Therefore, all minors committed to custody of this state department, have had the same

individual administrator's name signed on every legal document and if necessary, clinical

records – of which originals or copies of are contained in the case file. From 1996-2013, this was

D. Jean Ortega-Piron.[105] In this capacity, this official has legally 'handled' some of the most vital

as well as mundane decisions in youth lives ranging from whether to prescribe psychotropic

medication, take youth off of life support, allow ears to be pierced, or attend a school field trip.

And as discussed in my three-year long IRB process, this same administrator was also head of

the IDCFS IRB, prior to her retirement from the agency. Thus, her name also appears on

documents involved in that process.

What became most evident as I moved through the pages of consent and clinical

paperwork was that not only was this same name surfacing repeatedly, but it often appeared

rather different depending on when the 'signature' was acquired. Most notably, almost all

signatures were faxed copies, all sent from the IDCFS Consent Unit, using the "Consent Line."

This is actually a series of fax numbers at regional county offices that receive guardian signature

requests continuously, from service providers throughout Illinois. These same fax lines also send

out granted guardian consents and, when the required signature is given, it is quite common for

responses from the guardian consent line to take anywhere from a matter of days to months after

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[105] At the beginning of fieldwork, the IDCFS Guardian Administrator was D. Jean Ortega-Piron, who retired in May 2013 as now works as a "consultant" to the agency. Since her resignation, Debra Dyer-Webster was appointed by then Governor Pat Quinn. Despite the change in the guardian role, the same practice of providing the relevant IDCFS administrators name in a variety of forms still continues.

the initial request.[106] If necessary information or documentation is required from the Consent

Unit, then these fax lines send back such requests, in order to grant and provide written guardian

consent.

As summarized by Stella, "If we always waited for that signature, we couldn't do our

job." Her comment reinforces the reality that because agencies and facilities like her's provide

and coordinate a plethora of services for youth clients and in some cases, their current or future

families (kin or foster), the typical delays in receipt of documented autographic guardian consent

from the IDCFS disables any ability for case managers or care providers to depend on and

anticipate when to process or begin the treatment-related decisions the signature both

theoretically and legally authorizes.

Althea, the staff member who oversaw the consent fax transmissions to and from the

Consent Unit, remarked that in particular the Cook County consent line office located in

downtown Chicago should really be called, "fax heaven – where faxes go to die." According to

staff and noted on some of the guardian consent required documents, the actual actors behind

these handful of consent lines are "authorized agents" of the Consent Unit, that operate as

bureaucratic and legal extensions of not only the state guardian but also the government

apparatus. Stella reported that these agents are IDCFS employees who receive and provide the

necessary guardian consent on a variety of forms full-time. By examining these consent records,

it is clear the individuals that fulfill, assess, and determine these requests, are not the actual

IDCFS Guardian Administrator,

> "Within the Office of the DCFS Guardian, designated DCFS staff shall be
> appointed as "Authorized Agents" of the DCFS Guardian. Each Authorized Agent

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[106] The longest period in between a faxed request to and documented guardian signature received from the Consent
Line I noted was a span of five months.

shall undergo training regarding the duties of the DCFS Guardian, and the role and responsibilities of an Authorized Agent" (IDCFS 2018, 5),

"Authorized Agent" means *"Designee"... Department staff who have been appointed by the Director and authorized by the Guardianship Administrator and have been given formal authority to authorize and consent to matters concerning children for whom the Department has legal responsibility*. The consent authority of an Authorized Agent may be broad or limited in scope depending on the individual agent's job functions as set out in Department Rules and Procedures," (IDCFS 2018, 6 emphasis in original).

When provided, the depiction of the IDCFS Guardian Administrator signature varied considerably. Sometimes the guardian name was written in a way that attempted to mimic this administrator's actual autograph, often followed with "by so and so" to convey that the guardian herself had not actually signed the documents. Other times, rubber stamps were used with the guardian's signature (not simply name and title) already printed with an official seal such as "Office of the Guardian" listed below the signature or name.

It therefore is understandable and necessary that the "names of Authorized Agents of the DCFS Guardian are also registered with the Illinois Secretary of State," in accordance with this guardian consent process (IDCFS 2018). Most commonly these authorized agents sign the guardian name in their own handwriting, noting their own name or position title after. Regardless of the appearance or materiality, as it was explained to me by staff and as was evident in the external PPR and Medicaid Reviews - any version of this official autographic seal of approval sufficed when it came to acquiring the required 'parental/guardian' signature. The actual autograph was less important than the state guardian consent is textually represented on paper.

This unusual and relatively recent supervisory model is unique not only in the ability for one individual administrator to legally consent for perhaps mundane but also rather important changes in youth lives solely through various significant paperwork, but also in this ability to

withold permissions concerning specific young people. At the time of my reseach, this was the only such administrator in the U.S. and considered among some public officials as historically possessing the most jurisdiction over children and youth nationwide.[107] Using the orthographic icon – that is, the conceived similarity of the physical representation - of the guardian signatures within these case files over time, offers another example of the mediatory role of case records within case management. Each signature, through its iconicity – its resemblance, even if only by name - demonstrates the ability of this visual and textual representation to signify what it stands for – guardian consent. In other words, some type of signature, almost always handwritten, and quite often faxed copies, stand in for legal authorization from and on behalf of, the state.

However, legally speaking, another document can serve in leiu of the IDCFS Guardian Administrator signature. One of the first tasks Althea was charged with when she started at Williams Treatment Center, alongside me in January of 2011, was an improvement and reorganization of this unreliable and unpredictable process of getting guardian consent. As she and I discovered over time, there was no apparent rhyme or reason as to when or if, the guardian consent signatures would be faxed back to service providers or case managers. Like Stella, Althea soon realized that such requests are often never responded to on the first attempt. And while case managers at Williams Treatment Center are organizationally responsible for generating, submitted, and filing such documented requests, Althea is the front office support staff in charge of the only fax machine. Therefore, as part of her administrative duties, she also

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[107] Despite staffing changes, the current IDCFS Guardian Administrator also possesses this same tremendous legal responsibility.

ensures that faxes are sent successfully by case managers and other staff,[108] and the

dissemination of any incoming transmissions as well.

In the event that guardian consent is not received from the Consent Line on the first

submission, Althea developed a method to record and keep track of these requests. Upon

sending, she attached a preformatted fax cover sheet, that would include the date, time, and

reason for the request – usually noting by hand, the attached documents in question like various

intake or consent forms as "INTAKE/CONSENT", or clinical documents in their abbreviated

acronyms like "MHA, ITP, IBCMP" or for the *Invidual Treatment Plan Quaterly Review*, simply

"QUARTERLY." These fax cover sheets were used to confirm the transmission went through,

but also as a record often repeated requests sent to the Consent Line for review and approval.

After submission, the faxed forms and cover sheet are paperclipped together (not stapled), and

stacked in a file basket next to the fax machine labled "Pending Requests." These documents will

sit here dormant until guardian consent is received or if additional documentation is requested

via fax from the Consent Unit. After a period of time, or "when they've been sitting there a

while," case managers may check in with her to see about the status of their requests. As there is

no fixed timeline, it is a perpetual yet inexact process.

Eventually, if no response is received from the other end of this fax equation, she

resubmits the requests to the Consent Line. On these subsequent fax cover sheets, she updates

the information, always noting how many prior attempts were made to acquire the necessary

signature, hand writing "THIRD REQUEST", sometimes underlined for additional emphasis.

These additional cover sheets are stacked and paperclipped on top of the previous ones, further

documenting that attempts were made to receive guardian consent. She explained that eventually,

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[108] Since facsimile transmissions are less common now with the presence of electronic mail, most faxes sent or received concern the Consent Line.

"I usually stop after the fourth time, since by then, the stack can get pretty big, especially when we get a lot of new clients"[109] after which, the entire unit of single sheets of paper for a specific request will be stapled, three-hole punched, and entered into the case binder.

Not only does this fax-dependent process provide another example of how case records are used in another administrative capacity, but also how additional paperwork like fax cover sheets are generated and eventually added to the growing case file. While certain documents like the preformatted intake and consent forms are single-sided individual sheets, other documents like the MHA, ITP, IBCMP, and "QUARTERLY" are multiple pages each, sometimes quite long, depending on how much information is included in them. These clinical reports are also preformatted, but are drafted with client specific information on staff computers, and saved on the shared company server.

Regardless of document length, each time a request is sent to the Consent Line, the entire document, plus cover sheet are sent. And if received, the Consent Unit may send back just the pages of the documents that have the guardian signature, or the entire approved document. The same goes for requests that may require additional documentation. This means that additional copies – and copies of copies – of this paperwork were frequently produced. Not only is this reproduction arguably unnecessary, but it also meant that prior to Althea's hiring, many of these documents and their duplications, were taking up considerable space in case binders, resulting in the need for additional binders for the same youth. And, as she and I quickly noticed, many of these lengthy documents were entered into binders unstapled and out of order, resulting in disorderly paperwork or in her words "a total nightmare." One of the other adaptations that she

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[109] Youth enter or leave Williams Treatment Center on a rolling basis, but staff reported to me that the busiest times are usually the beginning (early fall) or end of the school year (late spring/early summer). This is due in large part, to avoid disrupting a youth's academic year, by relocating them to another residential placement.

made to address this excessive paperwork, is that for multi-page documents, only the faxed copy of the guardian signature would be attached, stapled, and entered in chronological order alongside the rest of the case binder.

If state mandated documents like the aforementioned intake or clinical treatment forms were submitted to the Consent Line through multiple attempts, but never acknowledged or responded to, time-stamped fax cover sheets kept in the client binder by Williams Treatment Center staff sufficed instead of an actual signature by an "authorized agent" of the IDCFS Consent Unit on the other end of the fax number. While the objective is to receive a response and usually – an authorizing signature – for such faxed requests, from my participant observation, this is not always realized. And, somewhat ironically the state accepts fax cover sheets as evidence that a provider attempted to get the IDCFS Guardian Administrator 'signature' despite never receiving legal consent on behalf of youth in state custody. Rather, these accompanying cover sheets, documented that the necessary procedures were followed and the agency acted in compliance.

Documenting Medical Record-Keeping Practice Reviews

As almost all of these youth clients receive funding directly from the state through the ICG, regardless of status as a ward of the court or not, it is reasonable to assume that the recordkeeping audits play an important role in everyday operations. From my experience in preparing for such reviews, these processes require tremendous administrative coordination, but also attention to certain details. However, which details within a case file review that matter, depends upon who is performing the evaluation and why.

For each PPR and Medicaid Review, staff asked me to locate and survey the list of client records that would be potentially selected. Partnering social service agencies are given a set of

dates from which the state can request records for any client served during this date range. This auditable time usually spans over a year or so in length, and due to the legal maximum stay of two years for clients at a RTC such as Williams Treatment Center, these collective case file reviews often involve active as well as discharged clients. On a given year there can be significant turnover of youth clientele during the prior year, widening the pool of potential client records under audit. Of the five internal file audits that I assisted with, the most recent one involved the greatest percentage of potentially discharged clients.

If any documentation is missing from a discharged client's now 'deactivated' file[110], it likely is more difficult to locate or reproduce. Active files like the respective clients they represent, constantly change and grow, but may be repaired if documentation is missing. These records cannot be altered and at best, can be rearranged or organized. Occasionally there are additional copies of certain documents that may exist either in hard copy or virtually with case managers or other clinical and administrative staff, but certain documents and especially guardian signatures cannot be reproduced. For the purposes of the upcoming external audit, such as the PPR, the amount of time it could potentially take to request or receive a replacement guardian signature makes the process nearly unachievable.

Two business days prior to an audit, providers are notified of which case files will be used in a review. In one PPR, Williams Treatment Center was informed that nine (out of a pool of sixty-five) case files would be potentially reviewed. Six of these pertained to discharged clients whose case records were archived with the rest of the discharged client records and were less easily accessible as active files, which are housed in the main office filing room. Discharged

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[110] While it is certainly possible, I only came across one client that was discharged from the facility and later readmitted. In this case, all prior and current documents were contained in the case file. Certain documents, that are usually only produced and processed once, such as the intake and consent forms, have to be recreated and updated, while filed alongside the older, and now, defunct same forms.

client documents are kept on site, but are often located in different boxes from one another, in several locked storage locations throughout the facility campus, in sometimes no apparent order. Once clients are formally discharged, their case records are removed from their binders, and compiled into cardboard bankers filing boxes. Binders are then relabeled and repurposed for future clients.

Sometimes discharged records may be first placed into large manila envelopes, which are then placed alongside one another into these boxes. Both the individual envelopes and boxes are then labeled by hand, by client last name and IDCFS case number. Over my time at this institution, most staff exhibited a concerted effort of keeping client records as organized as possible, even when discharged, but understandably priorities rest in maintaining active client files first and foremost. Again, Althea took on this role of managing these archived records, and during our time together, I supported her in reorganizing these records. One additional contribution she made to this expanding corpus of inactive case records, was determining which files would no longer be potentially audited, and eventual the relocation of these older records to an off-site private third party data management storage facility.

In this particular PPR, of the three active clients to have their records reviewed, one is for a youth that was missing all of the ten intake/consent forms in their binder. This client was recently admitted and without those forms, the file appeared rather empty, as the other clinical documentation (MHA, ITP, IBCMP, "QUARTERLY") had not yet been completed, let alone filed as these take a reasonable amount of time to process and review. While advanced notice is given to providers as to when these annual reviews will occur[111], including the range of auditable treatment dates that are susceptible to these external investigations, the specific clients that may

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[111] Usually every winter or early spring for this facility.

have their records examined are deliberately given on short notice. For this PPR, the list of case records to be reviewed at this juncture was received on Friday, which only left Monday for administrative staff to locate the missing paperwork, before the scheduled Tuesday review. And because this client was a ward, there was no time to resubmit these intake forms to the Consent Line, which likely would not have provided the necessary guardian signature with a quick enough turnaround. As the occasional client may still remain under legal parental custody and is therefore not a ward, acquiring the necessary consent signatures would be easier, although I am unaware of any custodial parent consent signatures ever having to be collected after the initial intake to the facility.

While Williams Treatment Center is in operation over the weekend as a residential facility, administrative staff that manage the case records usually only work Monday through Friday, during standard business hours of 8 a.m.-5 p.m. Likewise, the "authorized agents" of the Consent Unit working on the other end of the Consent Line work similar hours. As Althea observed, this fax line is frequently so burdened during high traffic times at the end of the work week (usually Friday later afternoon), she often would get busy signals on the fax telephone line, and was unable to submit the guardian consent signature requests as result.

Althea also traveled nearly two hours each way on public transportation to get to and from work each day. "I like to read," she reassured me when she first told me her lengthy commute, "so the time flies on the trains and buses." Delia, the case manager of this particular client in question, was higher up the institutional echelon at the facility, and subsequently required, like all case managers, to have a personal automobile to transport clients and necessary case records to off-site meetings. Regardless, there is not much staff can do to acquire new guardian consent signatures for this client over the weekend as the nearby Consent Line – as with

all regional consent offices – does not receive or grant consent requests during evenings or weekends.

I spent the rest of my time on Friday trying to locate these missing intake forms. "They have to be here somewhere, they just have to," Althea said in her usual even-keeled way. As the day went on, Delia appeared frustrated and I tried to offer her some encouragement that this single case file was not representative of how good the condition of the other case files are under her supervision. Delia was not only one of five unit case managers, but was also the supervisor of the other four case managers (like Stella and Rose), and a low performance in this PPR could reflect poorly not only on her leadership but her staff's documentary procedural compliance overall. She shrugged her shoulders apologetically, "Well, it's my fault, I did the intake."

Delia as the lead case manager screened and interviewed potential clients to evaluate if they would be best served at this intensive residential treatment center. According to her and most staff, this facility takes "the worst of the worst" youth that require extensive psychiatric and behavioral services. Regardless of emotional, psychological, or educational development, clients must be evaluated to be above at least a seventy intelligence quotient (IQ). Once assessed, documented, and approved for admission, Delia then administered the required intake documentation, which includes a series of forms that require written parental/guardian consent. Once complete, this paperwork is then filed into the new case binder. As I left at the end of Friday, Althea and Delia showed no signs of departing anytime soon. Althea just smiled as I left and reassured her and me that "It'll all work out."

The day of the review the following Tuesday, four auditors from the contracted IPI or "PPR staff" arrived first thing at 8:30 a.m. to begin the day's work. Each nestled in between laptop screens full of spreadsheets and boxes of case file contents, the auditors over the course of

the day flipped through single sheets of intake and clinical documents. As Stella explained to me, what auditors are looking for are necessary guardian consent signatures and the corresponding clinical documents that record "billable services", quantified into billable units of time, properly labeled into categories of service (such as individual treatment versus group therapy). According to the most recent IDHS annual report for 2013, the mean rate of costs per recipient of the Individual Care Grant for residential service providers is $296.06 daily and $108,062.00 annually (IDHS 2014). As noted in Chapter Four, in these congregate care settings, operational costs are quite high, and are subsidized through this state mental health grant funding.

After the auditors had the records they required, I was relieved to hear from Althea that a therapist found duplicate copies of the missing signed consent forms late Friday evening, "I just knew they had to be somewhere," she said with a smile. Because most consent for client treatment at this care facility must come from the IDCFS, a majority of these signed documents are not originals. Given the fax-dependent system of requesting and then acquiring consent from the Consent Line, it therefore it does not matter if a duplication of a faxed copy is supplied in the case record binder. During my time assisting with the audit process, I came across only two of what I believe to be original ink signatures on behalf of the IDCFS Guardian Administrator – presumably not of course, the actual signature of this administrator but that of an authorized agent from the Consent Unit.

Despite this good news, Althea expressed some level of regret that the original documents were never found. "I just don't know what happened," conveying a sense of disappointment with her previous three years of hard work to get this cat-and-mouse game of acquiring the state guardian consent signature under some kind of internal order. I did my best to assure her that even with all of the new procedures she has put in place, no process is ever fool

proof and really all that mattered was that copies of all the missing documents were found, and presented to the auditors just in time. She admitted, "I was worried I would need to come in over the weekend and pull this office apart." Even though she left work late on Friday knowing the forms had been recovered, "I took me until well into Sunday to finally calm down about it. I just don't know what happened. Those kind of things upset me."

Althea's dismay and self-blame, not unlike that of Delia's, highlights the emotional labor involved for many employees in this kind of social service delivery setting. While I would not encourage these feelings, they are understandable. I offer one interpretation of them as indexical – semiotically representative, of the individual responsibility these staff hold themselves accountable to. From my observations and my own tenure in as a foster youth, these outward expressions of internalized personal responsibility are not only atypical, but frequently discouraged amongst colleagues that view their system of work – in conjunction with partnering social service delivery systems, as inherently broken and systemically dysfunctional. While I agree that much of the bureaucratic inefficiencies and logics create the conditions that do all but support a healthy and productive work environment, it is well understood that staff and administrators can develop coping mechanisms that "desensitize" them to their everyday professional challenges, and in turn, impact their willingness to accept personal responsibility when they do make mistakes (which happen, just like in any kind of work setting).

In another example of missing paperwork, this time involving the last Medicaid Review I helped prepare for, clinical billing records are called into question to determine whether or not the state was correctly charged for mental health services. From the outset, this audit seemed to be going rather smoothly, as over the course of the four years leading up to this point, Althea and I worked in concert to improve and sustain more case file organization and cohesion. Our tedious

work was paying off, with each PPR or Medicaid Review getting easier to prepare for, as case file binders were in better shape overall, and we had put considerable effort into keeping discharged client records into their correct order, anticipating their possible review for such audits.

At just around 4:00 p.m. the auditors began to wind down their rigorous examination of records, and I came to check in with Althea on how the audit was going. Looking exhausted and overwhelmed, with a sigh of relief, she quickly asked me to help locate some additional missing paperwork that the auditors requested. As I was given a list of client names and corresponding clinical billing records of treatment, through a bureaucratic gesture of support Althea offered me with her characteristic smile, "Do you want a rubber finger?"[112]

Alongside the four auditors and several Williams Treatment Center staff members, I began to briskly skim through heaping stacks of case records. "The clock starts now," remarked one of the auditors, conveying the sense of immediacy regarding finding this outstanding paperwork as according to Rule 132 procedure,

> "Provider staff will be given until one hour after the last client record has been reviewed to locate the missing service documentation. If the documentation cannot be located within one hour of the completion of the last client record, the PPR staff will indicate that specific billing entry as unsubstantiated due to missing supporting documentation" (IDCFS 2017, 5).

We were collectively searching for original single sheets of paper that were listed on the billing records digital spreadsheets, but missing from the hard clinical case records. Since most of the client files in this particular audit were discharged, all had been removed from the case binders and had been transferred into either manila envelopes or simply stacked in thematic and

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[112] The thimblette - also known as rubber finger, rubber thimble, or finger cone – are soft thimbles made predominantly of rubber, used primarily for leafing through or counting documents or forms.

chronological order in cardboard filing boxes. As was explained to me by Jane, the staff member in charge of sending clinical billing reports to the state for reimbursement via the Medicaid Billing System, if a form is filled out incorrectly, it voids the service charged, even if it is documented in some way. The paperwork must be completed so that it absolutely justifies recorded expenses in accordance to the *Community Mental Health Services Service Definition and Reimbursement Guide*.

Up until 2016, payments to service providers made through the ICG program were provided retroactively after the necessary billing paperwork was submitted by agencies and facilities through the online Medicaid Billing System. This process has now changed to where documentation of delivered client services are still provided after the service occurs, but only to reconcile for payments received – no longer for reimbursement. Both of these billing procedures involve the same necessary supporting forms, staff, and administrators – and may also endure the same auditing process. Ultimately, what the state is looking for through the Medicaid Review is whether billed services to clients were overcharged. And if so, will retroactively demand refunded payments from providers as necessary.

Meta-documentation – Documenting Recordkeeping Activity

What my observations and the case records overwhelmingly revealed is the increasing dependence upon 'meta-documentation' practices, that is 'documenting recordkeeping activity', in order to supervise social service providers of foster care, but also a means of the state materializing their supervision of these providers and care settings. This often involves a variety of meta-documents as well:

1) paperwork that documents recordkeeping procedures like manuals or guidelines,
2) paperwork that documents the review or audit of records and recordkeeping.

The external client record compliance audits described in this chapter not only reinforce the centrality of case records in how the state monitors service provider agencies, but also offers another example of how additional documents may be generated, and the potential material consequences of recordkeeping error. These audits are also a means by which the state identifies and documents evaluations of an agency's adherence to established documentary compliance.

In the Medicaid Review, the Medicaid Community Mental Health Services Program, *Guidelines, Instructions and Checklist* serves as the document that structures the case file audit, but also as the bureaucratic state record of this audit activity. In this way, this document records 1) collective information about individual case files reviewed, 2) an evaluation of the provider's recordkeeping compliance, and 3) materializes the Certifying State Agency's execution of the review itself. This review checklist documents evaluations of an agency regarding the following areas of compliance:

- Personnel and Administrative Recordkeeping
- Individual Clinical Records
- Fiscal Records
- Evaluation and Planning – records of case management plan and review
- Clients' Rights – records of confidentiality and participation in treatment plan (IDCFS 2013).

And, this report uses a coding system that tallies the net points from the review into a numerical evaluation of state documentary compliance, a score understood to be indexical – representative - of an agency's social service performance and institutional standing.

- Level 1 = 90-100% Compliant
- Level 2 = 75-89% Substantial Compliance
- Level 3 = 50-74% Minimal Compliance
- Level 4 = below 50% Unsatisfactory compliance (IDCFS 2013, 59).

In the PPR, two forms act as the evaluation rubrics for this audit of clinical billing records. Unlike the Medicaid Review, the forms used in the PPR facilitate staff to identify and document the reasons for unsubstantiated billings (for example, service not recommended on the ITP, provider not certified to provide service as billed, ITP not in effect on the date the serve was provided or billed for).

The *Client Record Review Face Sheet* records relevant client record information including:

> • Medicaid services for which the provider is certified;
> • Completion date of and Medicaid services listed on the ITP;
> • Completion date of and Medicaid services listed on the ITP Review(s),
>   if applicable;
> • Completion date of and Medicaid services listed on the Admission Note,
>   if applicable; and
> • Completion date of and Medicaid services listed on the Mental Health Assessment,
>   if applicable (IDCFS 2017, 4).

The *Service Documentation Worksheet* records if billings are fully compliant with the requirements of Rule 132 applicable to the service being reviewed or, conversely, are unsubstantiated. The following requirements are evaluated for each service note reviewed:

> • Provider certified for service
> • Service authorized/medical necessity established by Admission Note, MHA and/or ITP.
> • Legibility of service note
> • Corresponding note in the client record
> • Date of service
> • Start time of service
> • Duration of service
> • Staff signature
> • Staff credential
> • Specific on/off site location
> • Service definition
> • Dollar amount of service submitted to Web-based Medicaid Billing System
> (IDCFS 2017, 4-5).

Based upon the results of the *Service Documentation Worksheet*, any findings of non-compliance

with the aforementioned requirements will also be included on this same form:

> "After completing the review of all records and billings, PPR staff will develop a
> preliminary list of findings, including a preliminary dollar amount related to
> unsubstantiated billings that may be eligible for recoupment by the Department"
> (IDCFS 2017, 5).

If unsubstantiated billings have been identified by IPI/PPR Staff auditors, they are

included in the *Notice of Unsubstantiated Billings* (NUB), which must be issued within 30 days

after the PPR. The NUB must also include a cover sheet with necessary information about the

review (provider name, address, date of review, review participants) as well as:

> 1) a brief explanation of the review conducted,
> 2) an explanation of the reason a service or services were unsubstantiated,
> 3) the total dollar amount of unsubstantiated billing identified in the review that will
> be recouped by the IDCFS.

In both the PPR and Medicaid review, if enough case records are missing or incorrect,

additional documentation may be enacted into these audit procedures. If unsubstantiated billings

are found in the PPR, within 30 days a mutually agreed upon *Performance Improvement Plan*

(PIP) must be completed by the provider and sent to the IDCFS to reconcile and correct these

documents in question, as well as prevent these kinds of documentary incongruences from

occurring in the future. Should the PIP not adequately address the unsubstantiated areas, the PIP

will be sent back to the provider for revision.

If either audit reveals extreme recordkeeping deficits such as if a provider receives a

Level 4 score for the Medicaid Review or if more than 50% of the units of service are found to

be unsubstantiated for the PPR, they risk losing their contract with the IDCFS, and potentially

their licensure as a mental health provider. For the PPR, the provider will receive a *Notice of*

Suspension from Billing (NOSB) within thirty days after the audit, which requires the provider to

immediately cease billing and has 60 days to correct the documentation processes that are not compliant. Should this occur, then a series of notifications in writing are exchanged between the provider and the IDCFS:

> "When the necessary corrections have been made the provider will notify DCFS in writing. The Performance Improvement Plan may be used to document corrections that have been implemented. DCFS will have 14 days to review the corrections for compliance.
>
> If corrections have been made, DCFS will notify the provider in writing that the suspension will be lifted, and the provider will be allowed to bill for compliant services provided during the suspension period.
>
> If the provider does not adequately address changes made to its documentation processes, further documentation of corrections will be requested. If corrections are not made within 60 days, DCFS shall revoke the provider's certification," (IDCFS 2017, 7).

Providers may appeal the findings of the PPR, through a written request for a hearing to the DCFS within 20 days after receipt of the written NUB, which is then forwarded to the IDHFS Vendor Hearings Section within 5 days. An administrative law judge appointed by IDFS conducts the hearing. A preliminary recommended decision is then mailed to all parties, after which the final administrative decision is issued, which is ultimately subject to judicial review. Should this adjudication uphold the unsubstantiated billing or billings in question – then the provider is liable for reimbursement of these charges.

After this appeal process, then "all unsubstantiated billings must be VOIDED or ADJUSTED in the Web-based Medicaid Billing System," by the provider, otherwise these billings "become the sole responsibility of the provider," (IDCFS 2017, 7, emphasis in original). This entire residual effect after the PPR, illustrates again, the series of unpredictable consequences that the case file can enact. Something as simple a typo or miscalculation of

billable services or billable units of time entered into the Medicaid Billing System, or a misplaced clinical record, has the potential to influence the documents under review and how they are assessed to evaluate a provider's policy compliance. And like the clerical errors on court records described in the prior chapter, these inaccuracies on case billing records have bureaucratic consequences such as the series of additional documents that may be activated into and through this documentary exchange, including a special administrative meeting like the vendor hearing. Financially, if such findings are extreme enough and the NOSB is issued, then a provider's fiscal condition and subsequent delivery of services may also be impacted.

Should an agency score anywhere below a Level 3 or fewer than 74% compliance, a follow-up Focused Review occurs, to determine implementation of a *Plan of Correction*, as was the case for the final Medicaid Review I observed The PPR is performed annually and the Medicaid Review occurs every three years, and therefore, as was mentioned by Clementine, a senior staff member of Families for Kids to several of the ITI auditors, "You won't yet see all of our hard work to fix these problems."

Earlier reviews warranted Williams Treatment Center (and consequently, Families for Kids) to develop and pilot new administrative procedures to increase consistency and accuracy with some of the case records in accordance with their *Plan of Correction*. Unlike the PPR's PIP, the Medicaid Review's *Plan of Correction* is a longitudinal outline, identifying and articulating the precise administrative changes that a provider intends to implement at their agency to improve paperwork processes. Clementine's comment brought to the auditors' attention the delay and backlog that yearly reviews must account for in order to accurately measure systematic improvements over time.

In my five years at this fieldsite, staff turnover was noticeably lower than other agencies I had observed in foster care, but that does not mean that positions do not change, or that individuals may relocate to other child welfare organizations. Staff did change positions whether shifting from one unit to another in the same role, or leaving Williams Treatment Center to take on another position in the Families for Kids agency. So even as this service provider enacted and enforced new policies and procedures to better monitor their recordkeeping practices, changes in their own organizational labor force are inevitable and most likely. It is worth noting again that Althea, the staff member in charge of acquiring guardian consent signatures was hired at the same time when I began my time at the agency in 2011, providing noticeable improvement and continuity with this specific documentation across the case file records. This coincidentally also empirically demonstrated the significance of a single bureaucrat to alter and modify existing recordkeeping practices over time, to successfully accommodate the documentation requirements enforced by the state.

However, in this most recent Medicaid Review, the missing documents that I was asked to help find – clinical billing records - are produced and compiled by both case managers and other clinical staff (psychiatrists, psychologists, and other therapy team members). While Althea was responsible for guardian consent requests from the IDCFS, the only documents that she created and contributed to the case file binders were the faxed cover sheets, materializing her efforts to meet the state mandates. Whereas the administrative and clinical staff like unit case managers or therapists, co-author the case specific records like the MHA, ITP, IBCMP, or "QUARTERLY" and must coordinate their collective paper *work* through these compilations of clinical records that are created on a daily, even hourly basis.

In addition, these clinical documents that record billable services provided to clients are monitored, quantified, and submitted by Jane, another non-clinical administrative support staff member. It is her coordination of these reports which are articulated through billable language, quantified into billable units of time, and valued differently in terms of cost of service, that produces the digital assemblage of accounting records that the auditors scrolled through to reconcile social and mental health services rendered. Given this network of clinical and administrative labor it is easy for accountability to be the blurred when a document is missing, incomplete, and or inaccurate.

Most paradoxically though, given that most of the client recipients of the ICG fund are wards of the state, this audit can also be understood as a device by which the State of Illinois, through the DHS to monitor the IDCFS as well. In a sense, this meta-documentary procedure further legitimates the expenses and social value of this state-sponsored mental health care assistance program, jointly administered for foster youth by the DHS and IDCFS. Since as it appears, the state, while supplying the matching funds to the federal subsidies that enable the ICG program, is also simultaneously the largest recipient of these public funds, as the overseer of the DHS and IDCFS. A portion of these funds are eventually funneled down to organizations such as Williams Treatment Center.

As a discourse mediator then, an entity that determines and multiplies difference, the case file remains in a liminal position between government and populace, social networks, and political economies of human service professionals. Through these complex series of transactions of and through documents, whether in case staffings, clinical meetings, court hearings, treatment settings, recording an intervention during a client crisis, or state billing, procedures, people, things, and resources are intimately connected in the network of

organizations that comprise the contemporary foster care system. In the case of attending to the very qualia of the case records, the internal real-world complexities of paper and digital forms suddenly appear relevant, and are seen as actively constructing the semiotic ideologies which they once merely reflected. This experiential dimension of this documentation dependent upon the material qualities and aesthetics of this recordkeeping, determines and informs the ways in which social actors, interact with and embody the meta-documentation that the foster care system demands. As policies and procedures require increasing amounts of paperwork that will eventually exist as hard copies of case records, this directly impacts the extent to which administrators, case managers, and other staff can take hold and command of, the case history recorded in the file.

One neglected aspect of this meta-documentation and copious volume of paper-based records are the additional efforts and resources required to organize and store these files during an active case or later when the case is deactivated and closed. In my own efforts to get my complete case record from the LADCFS, it was clear that attention and care for this future use of the case file, was in fact, not anticipated as I had originally assumed. From my participation in this rabbit hole of e-mails, phone calls, repeated visits to several LADCFS offices, Children's Court, and the Los Angeles County Hall of Records, it seems that little attention is given to potential use of the case file for foster youth themselves later in life. Rather, beyond suspension in archival storage, the case file's anticipated potential uses after youth exit the care system are:

- *Reactivation* – if youth re-enter the system as wards of the court,
- *Extension* – if youth enroll in after-care services after aging out of the system,
- *Mitigation* – application of case history to contextualize or interpret youth behavior as adults involving the criminal justice system or foster care system.

As my experience in the process of retrieving my entire case file proved quite difficult and unsuccessful, it seems that the possibility that foster youth may want or solicit their own case history is not anticipated. Therefore, attention to this likelihood is less emphasized and as I interpret it – discouraged as seen through my failed efforts to historicize my own participation in this social service system. As frustrating as this slew of dead end procedures were, they consequently required me to determine what parts of this record I was given, and what remained unaccounted for. This endeavor also led me to my other case record – the legal case file – that I had no idea even existed. From these rather dissimilar efforts involving the LADCFS and the LA Children's Court that I describe in the next autoethnographic chapter, I offer some interpretations from the perspective of a former foster youth turned procedural ethnographer as to what my own participation in these record retrieval processes reveal about the relationship between my own personal history with the state child welfare system and the subsequent case files that structured my interpellated identity.

Chapter Eight

My Case Files

"Paperwork is boring. One can describe the ritual surrounding it. One can observe how people talk about or react to it. But when it comes to the paperwork itself, there just aren't that many interesting things one can say about it … In fact, one could go further. Paperwork is *supposed* to be boring. And it's getting more so all the time" (Graeber 2015, 51, emphasis in original).

One of the primary ambitions of this project is to draw attention to the subjectified experience of foster youth as wards of the state. This subjectivity is both a lived experience as well as a documented one and therefore I argue that status as a dependent youth is also an objectified positionality through the paperwork that records and represents them and their best interests as vulnerable youth. In this autoethnographic chapter, I describe my experiences involving my case records and several ways in which I have been able to piece together the patchwork of historical information that I have had access to. Incomplete, my own knowledge of my near entire childhood in foster care, inherently shapes my sense of self and forms my identity. Despite my intimate relationship with my case file and the lack of information I was given about my time in foster care, it seems that this application of the case record for the documented subject's own knowledge is not a bureaucratic priority.

In an effort to fill in these gaps of time that remain unaccounted for, I turn to some documents from my case history and the efforts I have made to get them. I first describe the final documentation of my time as a foster youth through a visit from my Los Angeles Department of Children and Family Services' Children's Social Worker (CSW) to my college dorm room. Next I discuss reconnecting with my first foster parents and the subsequent case records that they themselves had produced in their own recordkeeping. Next I outline the steps I took to obtain my legal case file and then foster care case file from the LADCFS which provide alternative

examples of partnering state bureaucracies and the stark contrast of their case record request

processes.

I provide this description to illustrate that despite my best intentions, I remain

unsuccessful in obtaining my entire foster care case file and still remain unaware of all of my

placements or circumstances while in state care. For example, a common question I and fellow

foster youth are asked is "How many homes were you in?" or "How many families did you live

with?" Disappointingly, I cannot answer such questions as I entered the foster care system so

young and was moved around frequently during this time. Without this information, I am left to

connect the myriad of dislocated memories that I have regarding where I lived with countless

strangers in their homes and endured repeated abuse, all before starting kindergarten. However,

as the healing reconnection with my first foster parents discussed in this chapter demonstrates – I

also had positive experiences with foster families and it is for that reason that I am encouraged to

continue seeking out my own case history in order to hopefully understand these fostered

conditions and through ongoing therapeutic treatment, resolve the symptoms of PSTD and

Severe Panic Disorder that I still suffer from. To my knowledge, at no point while I was in the

foster care system was I provided with any professional therapeutic support despite my exhibited

symptoms of diurnal enuresis[113] and daily night terrors that only until recently have subsided.

Documenting the Aging Out Process

When I aged out of the foster care system, I had already entered college and was living

independently in my dorm room. With no state involvement in the college application process, in

August of 2001 I moved myself onto campus, thanks to the help of my friend's family. The

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[113] Experts suggest daytime spontaneous incontinence can occur due to stress or trauma through neglect, sexual abuse, unfamiliar social situations, and overwhelming anxiety-causing events (Ramakrishnan 2008).

semester was in full swing when I was notified by the LADCFS that my CSW needed to visit me in order to complete legal emancipation from the foster care system. I sat in my dorm room while I waited for my CSW to arrive. She was the last of a series of people assigned to manage my case. We had never met but corresponded through the mail and spoke on the phone one time.

I turned 18 years old on August 20th, and this was the first and last time I would meet this woman. Even though my case was about to officially close, she explained that I would receive some support services like a MediCal card and $400 rent money during the summers until I turned 21, as long as I was enrolled in college the rest of the year. A new program had just started to offer some new services for aging out foster youth so I would also get a laptop and some money for school. This official would be my final human connection with all the foster families, judges, attorneys, social workers, and other individuals who have shaped every bit of my fostered life. She was the standing gatekeeper to my history and my past. Our encounter lasted no more than five minutes, which involved her quickly reviewing my dorm room and asking me to sign some documents.

In a rather hasty manner, she asked me to sign and date an *Agency-Relative Caregiver Placement Agreement*. With little contextualization, we got down to business and she pointed out where I should sign and said "both lines here". Confused, I asked if she meant the line that read "CHILD SIGNATURE" or "RELATIVE CAREGIVER'S SIGNATURE" and she said both. "How can I sign as both a child *and* my own relative?" I asked. Without explanation she instructed again to just sign and date. I asked her what the date was and she then told me "Oh just put your birthday" despite that my recent birthday had just passed. I brought this to her attention and she informed me that August 20th, 2001 was the date I should put.

She then handed me a gray folder, which according to her had all the documents that I would need, noting "I'm so sorry but this is the only information we have about your family." She was referring to the triplicate *FAMILY HISTORY* form that only listed my birth mother's name, social security number, birth date, age, race, and last known address, and only my birth father's name, birth date, and last known address. I was also given a *History of Child Placements Report* that went back as far as less than a year prior to September 13, 2000. The *DELIVERED SERVICE LOG* recorded my recent physical and dental exams and one visit to the emergency room for a bladder infection, all within the last year. The following records were also included in this folder,

- *Health Care Card*
- *FOSTER CHILD'S NEEDS AND CASE PLAN SUMMARY*
- *PRIMARY LANGUAGE DESIGNATION FORM FOR PARENTS/LEGAL GUARDIANS/CHILDREN*

She quickly handed me an unlabeled gray Medical Record and Educational Passport Folder, that read "CONFIDENTIAL – PROPERTY OF THE Department of Children and Family Services." As I began to review the contents of this folder it was clear that she was not kidding about those forms. Except for the bleak *FAMILY HISTORY*, *History of Child Placements Report* and *DELIVERED SERVICE LOG*, they were entirely blank. According to this documentation, I did not live anywhere between when I was put into foster care as an infant until my senior year of high school. I also must not have gone to school of any kind or seen a doctor from when I was born until when I had my mandatory aging out physical and dental health exams.

The rest of the documents in the folder were informational brochures, none of which she explained to me. The first four of this literature are intended for care providers, leaving only the last three of any use to me,

- *DEPENDENCY COURT INFORMATION*
- *MEDICAL RECORDS PROCEDURES FOR FOSTER CAREGIVERS*
- *ADMINISTRATION OF PSYCHOTROPIC & ANTISEIZURE MEDICATIONS TO DCFS-SUPERVISED CHILDREN*
- *As You Leave Foster Care*
- *A GUIDE TO DEPENDENCY COURT*
- *50 SUGGESTIONS FOR PREPARING FOR INDEPENDENT LIVING*

Upon closer examination of some of the informational brochures it is clear that paperwork and knowledge about paperwork is emphasized. Of the 50 SUGGESTIONS FOR INDEPENDENT LIVING 11 pertain specifically to acquiring or completing certain documents:

- Obtain a certified copy of your birth certificate.
- Obtain a Social Security card (and a wallet to put it in).
- Enroll in a continuing education program.
- Obtain a picture identification card (California I.D. or Driver's License).
- Obtain a Medi-Cal card, when eligible.
- Obtain copies of your medical records.
- Start a "Life Book" and/or file of important papers.
- Complete an Independent Livings Skills workbook.
- Learn to use the library and get a library card.
- Put together a resume and an application fact sheet.
- Learn to do your taxes.

The meta-document includes 11 suggestions that pertain to processes involving documents, documentation procedures, or developing the skills to document,

- Open a bank account.
- Learn how to write and cash a check.
- Learn to look up resources in the phone book.
- Learn to read a map.
- Get information about Driver's License, auto insurance laws/cost, etc.
- Make a list of important phone numbers.
- Learn to use coupons and comparison shop.
- Learn to read a paycheck stub.
- Learn to read and understand a lease/rental agreement.
- Learn to write a letter and mail it.
- Learn to budget your money.

This encounter with my last CSW ended our relationship. After I was assigned an "after care" worker who I only communicated with when I needed documentation for financial aid or the minimal subsidy from the LADCFS for summer housing, usually via phone or mail. I was provided no further support through life skills workshops nor was there follow-up about my independent living as a young adult, such as assistance with applying for financial aid or finding summer housing when the dorms closed each year. While I was self-motivated and resourceful, I interpret this effort of the state to emancipate me from their custodial care as one entirely concerned with documentation. In hindsight, it was clear that this official was likely overburdened with her caseload, and given my apparent self-sufficiency further support was not deemed necessary.

Through the orthographic act of me signing the *Agency-Relative Caregiver Placement Agreement*, I simultaneously legally assumed custody over myself and formally documented my completion of the aging out process. Despite the monumental significance of this legal emancipation, at that time, there was no special form to signify this transformation. Rather, I was asked to complete the standardized form that all 'kinship' care providers also would have signed

at that time. The date that I was instructed to put did not accurately record the date of this administrative activity, but incorrectly indicated that I had legally and knowingly undertook my own custodial care as an adult.

My First Foster Parents and the Recordkeeping Process

In July 2011 a woman claiming to be my first foster sister unexpectedly contacted me through Facebook. Unfortunately, since I still was unable to access my case history, I cautiously communicated with her and was eventually connected with her parents, Bob and Pam Propst, allegedly my first foster family. Unable to confirm this, they provided me with photographs of my time with them, including my second birthday party at McDonalds. These are the earliest known visual images of me and not only provided examples of how I looked in 1985, but also represent the position I held in their family – I was a part of it,

> "The family photo both display the cohesion of the family and is an instrument of its togetherness; it both chronicles family rituals and constitutes a prime objective of those rituals … photography immobilizes the flow of family life into a series of snapshots, it perpetuates familial myths while seeming merely to record actual moments in family history … the family photograph, widely available as a medium of familial self-representation in many cultures and subcultures can reduce the strains of family life by sustaining an imaginary cohesion, even as it exacerbates them by creating images that real families cannot uphold" (Hirsch 1997, 13).

In the summer of 2014 I was able to meet this family again on one of my trips to California to try to get my case file. Emotionally heightened, they explained that while I was only in their care for nine months, we had attached to each other and my sudden removal from their household ruptured their lives. They report that they were intent on adopting me into their large family of five children and were devastated when I was abruptly taken from them and temporally placed back into the care of my birth parents. This also manifested as grief for their younger children who had assumed the role of my siblings and because of that bond were

traumatized and treated through family therapy in my absence as noted in the undergraduate

student paper *Foster Parenting* (1994) that Pam wrote based on her experience as my foster

mother from which the opening quote of this dissertation comes from,

> "On November 4, 1985 I was notified by that Commissioner Mueller had returned the foster child to her parents on a 30 day extended visit. She was to be picked up by her parents in half an hour. This concerned us tremendously since both parents had failed to follow the reunification court orders. Parenting classes were not taken and there was inconsistent visitation.
>
> When her parents came to pick her up, they had been drinking. The grandmother, mother, and father climbed into the front of a two-seater truck with no safety precautions for the child.
>
> At her last checkup, our foster child's vocabulary had up to peer level, her weight was 32 pounds, and her height stabilized at 34 ½ inches.
>
> On November 7, 1985 the mother brought the child by. She was in diapers, although we had toilet trained her. She had not eaten and went straight to the refrigerator and started grunting, using gestures.
>
> The last visit of our foster daughter on November 7, 1985 did not end our involvement with her. We felt it was necessary to become an advocate for this child. A letter was sent to the Commissioner Mueller and the Juvenile Justice Commission by an association of Concerned Citizens of Orange County," (14-15).

A year after I left the Propst's care, they were asked for a recent photograph of me, as I had gone

missing after being conditionally given back to my birth parents,

> "On January 10, 1986 the Police Department of Downey, California contacted us stating that the natural parents were physically fighting over the child and the mother told them to call me. I informed the Downey Police to call the Orange County Department of Social Services as I no longer had custody of the foster child. I immediately contacted social services and waited for information. No information or response was received from social services.
>
> There was never a conclusion to this sad scenario. Nearly a year later, the Police Department of Garden Grove, California came to our home asking for a current picture of our foster daughter. The child and her mother had disappeared. The Police felt that the father may have killed them. This remains an unanswered question!" (Propst 1994, 16).

I would later find out that my birth mother abducted me and we hitchhiked across the country and later she was committed to a mental health facility in Florida, as she was demonstrating extreme psychosis. I would then be taken by an Orange County Social Services (OCSS) caseworker and flown back without my birth mother to Orange County, California and into a multitude of other foster homes. Unfortunately, I have been unable to determine my circulation through these households due to gaps in the case records that I have. According to Pam, after providing a photo of me to the local police department they were never updated as to my whereabouts and in her words, "We thought you were dead." It is for this reason that our reconnection was especially moving but also very painful as it triggered emotions that had been stewing since that time.

Since I do not share in their memories of our time together, meeting and speaking with the Propst's was a special opportunity for me to gain some historical knowledge of an era in my life that up until this point, I had little knowledge about. Materially, the loose leaf paper that she authored meticulously describes her interactions with me, my birth parents, and caseworkers but especially the bureaucracy of the Orange County Social Services (OCSS) that managed my case before it was transferred to the nearby LADCFS.

Through her incredible own recordkeeping,-my first foster mother provided a detailed account of her interactions with system officials and local law enforcement, but also the bureaucratic inefficiencies that still permeate through foster care systems nationwide. For me to find myself interrogating the bureaucracy of child welfare just as Pam had three decades prior is nothing short of a twist of fate. Yet, the sad reality that little has changed to address these administrative shortfalls is precisely why I argue that system-wide reform is long overdue and

necessary. However pragmatically speaking, as I have not been able to retrieve my complete case

history and have no contact with anyone else who was involved in my life during these early

years, her account provides incredible information that I have been unable to access from the

LADCFS or any state officials who were involved in my case,

> "In the fall of 1984, I [my foster mother] worked for the City of Tustin, California's Pre-School Program. The Director of that Program and her husband were *Emergency Shelter Home* Foster Parents. As the months passed, I had seen many little ones come and go in her care. The average time a foster child spends with an *Emergency Shelter Home* mother is a month, which allows the social service system time to make decisions regarding the child.
>
> I made a point to keep emotionally detached from these children. In January of 1985, the Director had three little toddlers her care. One of these little girls was considered a problematic child. She was very obese for her age, 40 pounds at 18 months, and was thought to be retarded. She clung to me and tried to obtain my approval in anything she did. Somehow, though fighting it, we bonded. When it came time for her to be placed, she became *unplaceable*. She was referred to as "God-awful-ugly" by social services and some foster families.
>
> By March 1st, I was told by the Emergency Shelter Home Mother (the Director of my Pre-school Center), that this little toddler girl was going to be sent back to Orangewood (the center for children in the social service system not in foster care), to live in the toddler cabin. I just could not let this happen to this little girl. My husband met her and we decided that we should try to become her foster parents. We had five children at home, with our youngest then being 18 months old.
>
> Our first step was to contact social services to let them know that we were interested in a **specific child**. The Emergency Shelter Home Mother, made arrangements for the child to come and stay at our home on weekend visitations. The Emergency Shelter Social Worker came to our home to investigate and gave us a temporary license until the Licensing Division came out. My husband and I had to have FBI clearance and were fingerprinted, since we had not living in Orange County, California for two or more years. We went to all required classes as stated by Social Services.
>
> By April, 17 we were licensed by Orange County as a specific licensee – our foster child would be the only foster child in our care. She stay with us until November 1, 1985" (1994, 1-3, emphasis in original).

In our visit, Bob characterized my physical condition as one of great concern for them, as it was indexical of my neglect. He reported that one of the first things he noticed as a father of five was how flat the back of my head was. Positional plagiocephaly or flat head syndrome usually happens when a baby sleeps in the same position most of the time or because of problems with the neck muscles. Placing babies in devices where they lie down often during the day (infant car seats, carriers, strollers, swings, bouncy seats) for extended periods of time also adds to this problem. My awareness and embarrassment of having a flat head growing up made his observation all the more salient, as well as Pam's description of when I first arrived in their home,

> "Initially as foster parents, we went through the *honeymoon* period (approximately 10 days), then our foster daughter became very difficult to control. One night for five hours she pinched, hit, and bit me, and eventually she crawled under the dining room table and slept. Since we were attending orientation classes, we found this common behavior.
>
> She had never been immunized and I took her to our pediatrician where she underwent a complete physical. She was classified environmentally retarded. Speech therapy possibly needed. She was obese and large for her age. The possibility of sexual abuse was present. She had a form of malnutrition (she had been fed 18 bottles of milk daily, along with soda crackers). She had lived on the streets with her parents and was asthmatic. Social services was debating whether to put her on as a *Special Needs Child*. After approximately 21 days, she had learned to feed herself with utensils. She really enjoyed her bath. She was very frightened at first because her parents had used a garden hose for bathing purposes," (1994, 12-13, emphasis in original).

In addition to historical information of the processes and procedures required of Pam, she also reflexively articulates her experience in relation to her role as a member of the case management team and offers interpretations of this partnership,

> "My experience with the social service system was a self-educating process. When I became a foster parent, I was unaware and uninformed on how this system worked. Much to the frustration of my family and I, we battled countless inconsistencies throughout the system.

Theoretically based on written laws, the foster care program is well planned and structured according to the system, but in reality this system has its share of problems. The more that I became involved, the more that I became aware of the system's inadequacies and the lack of communication was apparent" (1994, 3).

Like the foster mothers from Wozniak's (2001) study and those I interviewed for this project, she also characterized her interactions with case management as centering around mostly paperwork and dependency upon officials to help navigate this bureaucracy,

"When the foster child is placed a history of the child, including a health history, school history, past living situation and a case plan is presented to the family by social services …

The social worker is the corner stone of the social service system and to understand that *system*, a grasp of the social worker's responsibilities and chain of command is a must" (Propst 1994, 6-7, emphasis in original).

She reports that in the short time that I was with her family, I had four assigned caseworkers and that out of 10 scheduled social service visits over nine months time, three of those resulted in staff absence,

"At the time that I was dealing with the social workers, there was an inconsistency. It made me think that the priority is not the foster child, even though she had been removed from her natural parents due to neglect. I felt the social workers also neglected her and her needs.

I heard from each social worker instances of neglect by her natural parents, but each social worker did not document these.

When it was important for the wellbeing of the child, the communication broke down.

I felt there was a lack of concern for the welfare of my foster daughter. Our social workers did not keep us informed [of] the perilous situation, whereabouts, or wellbeing after she left our care.

I felt that social services attempts to utilize it[s] resources effectively, however, it is encumbered by its bureaucracy and its personnel turmoil.

When entering into the maze of the foster care system, you become acquainted with the various social workers and shelters for foster children. Once a foster parent becomes knowledgeable of the social structure, the needs of their foster child are met more quickly" (1994, 8-9).

It was during this fieldwork trip where I met the Propst's as an adult that I conducted my observations at Children's Court, subsequently realizing that I also had a legal case file in addition to a child welfare case file. After accessing this legal record, I was able to confirm my placement with the Propst family in the available case history.

Discovering My Legal Case File

I first became aware of my legal case record during my observations at Children's Court, where during hearings and trials judges, attorneys, and the DA made reference to the "Department file" and the "court file". Shocked, I went over to the courthouse Records Department and was immediately told by staff, "Of course you can get a copy of your record – it's your legal right." Relieved and excited, I then had to identify my Juvenile Case Record (Dependency) that was also the same as my legal case number J964507. This is because for any foster care case to be opened, the child must first be legally adjudicated as a custodial youth and therefore the number is first assigned by the court and then applied to the LADCFS. The staff at the clerk's office were noticeably friendlier and more eager to assist with records retrieval than those at the LADCFS Records Unit. I was told that my legal file was archived and that I would need to go down to the Los Angeles County Hall of Records to request my file.

Encouraged, I drove downtown to the Los Angeles Hall of Records – Archives and Records Center where the lyrics to Phil Collins' song "In the Air Tonight" played overhead, "I've been waiting for this moment, for all my life, oh Lord." Located in the vast chilly basement, at window "2" I was given a white paper ticket numbered "G14" and placed my white

quarter sheet triplicate form in a wire basket and waited for my number to be called. This is a very large facility that houses all county records, and it was clear that people were requesting access to all different kinds of public records. Upon receipt, requesters could review and examine records on designated tables and if copies were requested, then they would be able to leave with those duplicate records. However, when my name was called, I was notified that because my file was a joint file with my sister, I could not have access to the record. Due to confidentiality, in order for me to review the record I would need to have me sister present so we could request and review the record or present a Death Certificate should she be deceased.

I drove back to the Children's Court and spoke to the Records Department supervisor and explained that my sister lived in Arizona and that I lived in Chicago. Given that I was so close to finally getting access to some of my case history, I impulsively dropped Judge Nash's name and flashed my Court Order granting me observation access to dependency hearings. The clerk conceded that she would request that my file be sent directly to the Children's Court from the Los Angeles Hall of Records – Archives and Records Center. From there, I would be allowed to review the file under supervision and could request copies if desired. She said this process should take 2-3 days.

Since I was conducting fieldwork at the Children's Court daily, I checked in two days later to see if the file had arrived yet, and it had. I then was able to review my entire loose leaf legal record in a designated staff supervised area. Organized in reverse chronological order, I was able to remove the single sheets of holed punched paper from the two large legal classification folders that comprised my combined family case record with my sister. I was then told to attach a paper clip to every single page that I wanted to request copies of, at a rate of $.50 per page. As the file was quite large, I was not in a financial position to purchase copies of each

document, but after closer examination, it was obvious that much of the paperwork was duplicates of rather long legal reports. Not only did this illustrate the unnecessary documentary weight that this container held, but it also made my review of the record more tedious and exhaustive. I also was unable to closely read each document, as there were so many, much of which was either full of legalese and other jargon or depressing accounts from care workers about my sister and I and our case.

I decided to request a sample of the records in order to more closely interrogate them at a later date. I was able to afford what I believe to be approximately half of the net file set of documents, which I think is representative of not only the range of reports, letters, and receipts contained within, but also historically broad enough to cover my entire time as a ward of the court. In order to make this request, I had to submit a *REQUEST FOR COPIES* to the Records Department, along with a typed and printed letter of request, along with a personal check. The supervisor told me to wait for her phone call before I submitted this request. She explained that since my sister's name is throughout the file that she would need to send the requested documents off for redaction and duplication. It was explained to me also that should my sister request the same records, my name would then also be redacted from her copies. Even if we both submitted a joint request, they would still need to produce independent copies of each document and redact our names from each other's copies. She called me the next week, but by that time, I was already back in Chicago. I had to wait until I had enough money to submit my request in the mail on October 16, 2014 and to my shock on October 28, 2014 a cardboard file box arrived with the records as requested, along with a cover letter and receipt of payment.

The Quest for My Foster Care Case File

I had not previously considered the significance of my case file until I reflected on the materiality of this context for a class assignment. Initially it proved challenging for me to realize that all social life is inherently materialized and that material culture enables most activity. From that point forward, I have been trying to get my case record both for this project but also to complete my own history and trace my rapid circulation between foster homes that I vaguely remember. When I am asked about my time in foster care, I can barely articulate anything with certainty before the age four. This is troubling to me because as a young child, I had speech difficulties and emotional issues that are indicative of environmental neglect. If I was removed from my birth parents care so young due to neglect and abuse as I have been told, I have no evidence of how this intervention into my dysfunctional family's life enhanced or improved my own development as a young child. My hope has always been that through a complete historical record of my time in care that I can interpret my experiences through the case management decisions that resulted in my pathologies that as a child were attributed to my own deficiencies and not conceptualized as systematic pitfalls.

When I aged out I was given no further documents or information about my case file from any CSW or the LADCFS. As nearly a decade had passed since that time, I began my search for this record in summer of 2011 first by looking for information available online about the process. At that time, I found no apparent information. I then attempted to reach my last contact at the LADCFS the after care worker who had administered my requests for necessary state documentation to apply for federal financial aid as an undergraduate and for summer housing subsidy during college. I was eventually told over the phone by an agency representative that the after care worker had since left the LADCFS. As this is the largest child welfare agency

in the country, I called repeatedly and left messages, to various administrative offices of the vast

LADCFS to know avail. It was not until 2013 that I became aware of the *DCFS 4389* form

DECLARATION IN SUPPORT OF ACCESS TO AND COPIES OF JUVENILE RECORDS that I

found online, but unfortunately, I could not complete it without my case number and due to

confidentiality, no staff would share that information with me over the phone.

I decided to wait until I could travel in person to process such a request in person which

would not be until summer of 2015 during which time I conducted participant observation of

Children's Court. As I describe later in this chapter, I was easily able to show my identification

and have a court clerk look up my case number J8477665. With this information, I then went to

the LADCFS Headquarters in downtown Los Angeles. I was instructed by the front desk to go to

an office, where I waited for a considerable amount of time to be assisted. Once a staff met with

me, they immediately assumed that I was a CSW, likely because I was dressed in professional

attire for my Children's Court fieldwork. They then began to 'remind' me of the process of

requesting records for a youth, until I stopped them a clarified that the youth in question was me.

They then instructed me to go to the nearby DCFS Records Units/Dependency Division

at the Office of the County Counsel, which handles these records and requests. I drove to that

office and again waited, only to be told that was at the wrong building, and needed to return back

to the DCFS Headquarters. Frustrated, I went back to the headquarters and spoke with a

representative of the LADCFS Public Inquiry Section, who initially told me that my record was

managed by the court. I told them that I already had access to my legal record and that it was

clearly not as complete as I expected the foster care case file to be. As I note in my description of

that file, it only pertains to legal matters and not day to day case management. For example, there

are gaps of time in my legal file that are not accounted for, likely because that records activities

surrounding my biannual administrative case hearings and not every change in residential placement or other non-legal decisions.

Once I explained this, the staff printed the *DCFS 4389* form for me and also said she would send it to me via e-mail, which she did shortly thereafter on August 15, 2015, "Please complete the form and return to the Custodian-of-Records." Unlike the legal file that cost $.50 per page to process, the foster care file records request was free. But it came with a cost – time. I submitted my request via email on October 10, 2015, and when receipt was confirmed by staff, I was provided a Frequently Asked Questions or "FAQ" document that explained the process. As I was told via e-mail, "The FAQs were developed last month, in view of the high volume of requests received by the Dependency Division, and to more quickly process these requests."

As I was aware that extensive redaction of the case file records would result in a delay of processing my request, the only estimated timeframe that I was given was that "the current process time is three (3) months." On March 3, 2016 I called the DCFS Records Unit/Dependency Division to follow up and the staff I spoke with brought to my attention that her office was only given records for me dating back to 2001, which is the year I aged out of the system. She also seemed confused because she said she only sent a disk with only a handful of electronic files, and nothing on paper, like she usually received. I then sent another email to my previous contacts at this office, but received no reply. A month later on April 4, 2016 I sent another email and received this response,

> "We recently hired a copy service to assist us in scanning requests that consist of voluminous records/documents. Your box of case files was one of the boxes we sent to them for scanning last week and your records came in to our office this morning. I will begin working on your request within the next couple of weeks."

I waited until June 24, 2016 to contact this staff again, only to receive this response from her supervisor that this clerk was, "currently working on other assignments. I will handle your request. I will send you a copy of your DCFS case file by Friday July 1st to your address." However, when July 1, 2016 arrived I received an e-mail updating me stating, "I will send you a portion of your DCFS records via regular email on Wednesday, July 6th. The second set of records will follow shortly thereafter."

On July 19, 2016 I finally received my first of three installments of the case file. Unlike the legal records that were dutifully wrapped and sealed, these case records arrived in a stuffed manila envelope that was lying on the floor of my apartment building's foyer with a large diagonal cut across the entire length of it. The tear was so great that it is a wonder the contents did not fall out. More concerning is the absurd difficulty in me receiving these highly privileged records and the little attention that was put towards upholding this confidentiality. I notified my contact of receipt and that the next shipment should be more carefully packed and I received an immediate response that I should expect another delivery in the coming days, and that,

> "I'm working on the last set. The last set of records include court reports which require redactions to remove sibling information. Unfortunately the redacting process is time consuming, and I have to complete other redacting jobs at the same time. I will try to complete this as soon as I can."

The second set of records arrived soon after the following week, this time segmented and separated into three smaller tear-proof white envelopes that displayed no sign of distress. Like the initial shipment, all three of these envelopes were found on my foyer's floor since my mailbox was quite small. Several months had passed and I sent another email and received the following response on October 25, 2016,

"I will look into this, but I recall providing you with your case records in two sets. But my memory may not serve me correctly, there are too many requests and I don't want to mix this case up with another. We keep a copy of the records, so I will look into this. The redacting is not handled by an outside source. Redacting is handled by this office, which is why it is such a challenge to process these requests timely. There are 4 people assigned to redacting for all requests made the Los Angeles County DCFS."

On November 15, 2016, I received an update from the previous e-email, "There is another set of records that will be mailed to you. This will be the final set which includes court reports (approximately 400 pages). The documents will be placed in the mail no later than tomorrow." One week later, the final installment arrived in three tear-proof envelopes.

Content wise, the legal file is very similar to the foster care file, in that they both pertain to a case (or set of cases as in a joint family case). But the legal file only regards and records to legal matters and not the minutiae of case management. It is for this reason that most of the legal record contains court briefs or case summaries that are prepared for the biannual administrative case hearings. This is understandable given the sheer volume of documents involved in case management, but also because child welfare officials like caseworkers and other staff make executive decisions about youth and families all the time without court involvement. The court's role is to determine legal courses of action and remedy issues that arise through adjudication, not administration.

However, the manner in which the legal file is organized and stored is very orderly and systematic. This not only eases the burden of handling these records, but also managing and using them as a recorded archive. Such organizational clarity is also evident in the manner in which one can request such records, which seen from my experience was remarkably streamlined, fast, and logical. For me to learn and complete the process of requesting my legal file in such a short amount of time, and treated with incredible politeness by staff along the way,

shows that such a protocol does not have to be so enigmatic as the LADCFS treats their case file records request process. It is also likely that because the court system's entire function is to document and record legal proceedings and privileges the use of recordkeeping to sustain evidentiary decision-making, it is more conditioned and prepared to produce or reproduce their own records. The foster care system like the LADCFS, while also a documentation machine, performs other duties and its relationship to documents is somewhat different. As for child welfare officials the case file is less about recording facts and textualizing oral declarations in court, but an instrument of authority, accountability, and compliance, to enable case management.

Chapter Nine

Conclusion

"Policies and programs participate in the very violence they seek to respond to and control. Bureaucratic indifference, for example, can deepen and intensify human misery by applying legal, medical, and other technical categories that further burden social and individual experience" (Kleinman 2000, 239).

This dissertation is in essence an exploration of administration through bureaucracy. In many ways it is no different than earlier examinations of collectives like formal organizations whereby proceduralism and protocol typify the bureaucratic life world. My project also supports existing ethnographic literature on government social welfare programs and service provision settings. In this way, my attention to several foster care systems in the U.S. is an extension of these earlier findings and reinforces the significance of such institutions in modern life. From clinics, social service and mental health settings, or state programs that deal with youth and families – I join this body of work in an attempt to give an on the ground vantage point of the child welfare system from the inside the bureaucracy (so to speak).

However, this study departs from the anthropological record and current research on child welfare and social service administration in that I turn away from the individual social actors towards the organizational material culture upon which such state systems depend. Instead of focusing directly on foster youth, families, and officials, I attend to the case file and other kinds of paperwork that serve as the basis for social life in all U.S. foster care systems. Whether taking notes by hand or electronic keyboard, to checking a box, signing on the dotted line, sending an e-mail, fax, or letter, paperwork – the act or artifact – is essential to the practice of social work. As I have shown here, such recordkeeping tracks youth through the system as it records their behavior, diagnoses, medication, and transgressions, but also records the

administrative movement of officials, information, money, and power. Unlike these other

studies, this project is entirely about documents and documentation.

As a public anthropologist my hope is that I provide helpful and constructive analysis on

the intricate array of paperwork that social welfare officials are responsible for, and also

ethnographically describe tangible and material examples of how easy it is for administrative

focus to forget the objective of this state system – protecting children and preserving families. As

I discovered, not all bureaucratic procedures are what they may seem to be - logical, transparent,

and fixed. From filling out or submitting forms and reports to collecting certain signatures or

initials of approval, such documentation are not necessarily straightforward and predictable

activities. As with all social life, paperwork – both as a process as well as a product – is

vulnerable to the material conditions and hierarchical structures that it facilitates. And, despite

the bureaucratic emphasis on efficiency and consistency, child welfare is an inherently chaotic

and unpredictable social service context. Therefore case managers, support staff, and

administrative officials that spend their waking hours within such a work environment must

oscillate between following rules or guidelines and intervening to alleviate circumstances of

social concern regarding youth and families.

Unlike other social welfare programs where service users are adults or parents and legal

guardians of youth such as through food assistance, subsidized housing, or public health care, in

the foster care system case managers and other staff conceptualize youth as the clients or

recipients of state support – regardless of involvement from families of origin or existing foster

families. This is a crucial point, because as of the most recent *AFCARS Report* for fiscal year

2016, 437,465 foster youth resided in government custody, and an estimated additional 523,787

passed through the foster care that year (U.S. DHHS 2017). While these figures show that youth

may be taken in as wards of the state for a range of time and later legally released back with their families or other authorized guardians, these statistics overshadow the reality that many youth spend a significant amount of their childhoods in the child welfare system and never find a forever home with a stable and loving family. As any social worker will tell you – there is always a high demand for foster parents and adoptive families – and there are typically few resources for recruiting and training good candidates for these roles. Understandably, there remains even less support services for families experiencing challenges or involvement with child welfare officials, let alone the available staff time to assist parents with developing the coping skills to negotiate social stressors like poverty, domestic violence, or physical and mental health issues.

The primary contribution that I make in this effort is what I am calling "procedural ethnography" – the investigation of bureaucratic life via organizational protocol. I suggest that such an approach is a hybrid of clinical and organizational ethnography, two similar applications of conducting participant observation and interviews to understand formal institutions and service provision settings. While it may at first seem clear that a bureaucracy like the foster care system will follow suit like all administrative social systems, I argue that through closer attention to the procedures that govern and determine the very act of state fosterage, an outside ethnographer brings new understandings about the paperwork (and meetings about paperwork) that characterize what foster care actually looks and feels like.

As I mentioned before, many of my administrative interlocutors like case managers, therapists, and file clerks had plenty of their own observations and reflections of these bureaucratic processes that they eagerly shared with me. For this reason, I make no claims to possess superior knowledge about recordkeeping. Rather, I argue that we as ethnographers can

use our expertise in participant observation and gathering narratives from our research informants – to reflect and interpret the administrative procedures that we jointly engage in to better understand such bureaucratic contexts and when possible, hopefully influence and improve these processes for all parties involved – youth, families, and staff.

Since much of my examination is about documents and their movement, it is of course also indirectly about the people facilitating this paperwork. What I have attempted to do here is advance intellectual ideas about the anthropology of bureaucracy and social service administration in that way that provides a material, artifactually oriented example of what a procedural ethnography can look like.

I do this by focusing on what the case file does, which is *mediate* social relationships (youth, families, staff), encounters (meetings, hearings, audits), and material resources (money, medicine). In order to understand this mediation, I also describe the physical nature of the case file – what it is made of and how this composition shapes the reciprocal interactions of people with this paperwork through its *materiality*. While every case file must be activated into creation and eventually deactivated in and out of bureaucratic use, much of the life course of this object is spent either waiting in *suspension* for anticipated future uses, or a perpetual state of *manipulation* of this record as the case develops along with the people who circulate within it. A key aspect of these pauses and changes in the case file and its activity is the default *anticipation* of imagined uses or material consequences of the records themselves for those that may engage with them.

I offer a unique perspective on these procedures for several reasons. In the words of one of the case managers at Williams Treatment Center, I must be "bonkers" to want to study case files and filing. A practical reason for my enthusiasm to examine this recordkeeping stems from my own professional background as a legal file clerk and as a middle manager in the non-profit

sector. Due to this experience I understand what is involved in similar administrative procedures but also what adaptations many bureaucrats employ to enforce, explain, and train others in these activities. This knowledge primed me to examine and interrogate these often taken for granted and overlooked processes which as any social worker or case manager will agree – are rather cumbersome and tedious, policies and procedures.

Like many Americans, I am very familiar with having to navigate bureaucratic systems in everyday life professionally and personally, but unlike existing scholarship social service administration, I am a product of the system within which I am now offering some insights on. For these reasons, I represent the elephant in the room – the foster youth who are absent from not only from this project for the most part, but also missing from these processes that I interrogate in this project.

Remarkably, this entire system, the procedures, and those that have to abide by and enforce these paperwork processes are all centered on foster youth as individuals and as a social group. Yet, their perspectives and the effects of the case file and related recordkeeping on their own lives due to the foster care experience remain unexplored. My effort here then offers an indirect addition to existing ethnographies, but like those studies, we do not hear directly from youth themselves. That is a limitation to this analysis but ironically this is coincidentally due for the most part to the copious amount of paperwork involved and additional time required to obtain the legal permission to conduct research with wards of the state like foster youth. This logistical challenge provided me a new opportunity that I likely would not have seen otherwise. I therefore repositioned my interrogation of the care system and its well-known shortcomings to the paperwork that occupies much of this bureaucratized fosterage context.

The ethnographic vignettes provided in this discussion demonstrate how all paperwork is

a form of social action – creating, altering, and reproducing documents. This documentation not only influences assessments and decisions made regarding youth, families, and officials, but determines what other further documentation may be required. In this way, all paperwork is consequential.

However the consequences of these procedures can be direr, as this is a very unique type of human service delivery system as a state agency that raises youth through it. With the exception of custodial care settings like group homes or RTCs like Williams Treatment Center, most foster youth do not live in the brick and mortar orphanages of yesteryear. Because of this, as far as the extent to which cases and the execution of individualized case service plans are overseen and managed by the state, it really remains to the extent that foster youth and case managers are involved in paperwork.

Most strikingly, there are many documented and reported examples of youth who have been in the care system, who allegedly due to a lack of oversight, have endured some form of abuse and neglect – while they were being taking care of by congregate care staff, foster parents, or while on a state approved home visit with families of origin. Youth are clearly just as vulnerable while in state custody and I see no empirical evidence from my study or others to suggest that paperwork supports the alleviation or prevention of this reality.

I argue that the emphasis of the system is on making sure policies and procedures are followed according to public policy, regardless of what is really important and necessary for these youth and families. As most foster youth will easily share feelings of disappointment and disdain for social workers, my young adult interlocutors shared with me that this is in large part because they do not feel properly represented - on or off paper - despite the presence of a sometimes rather extensive case record. In terms of their time and what they are expected to do,

case managers are in actuality going from meeting to meeting and processing paperwork *ad nauseum*. By design, their role in actuality is not to mentor or interact with youth or families they are charged with monitoring, but rather to ensure that the youth's case has been handled in accordance with the law.

From an economic perspective, looking at the national and state budgets for providing interventions and services to youth and families, it seems that not only does paperwork account for much of the organizational budgets, but is also the primary technology by which the state attempts to audit itself, in the name of public transparency, accountability, and compliance. However as it seems, actually very little is allocated on direct care to youth through school, therapy, or enrichment programs. For these support opportunities, measurable outcomes of treatment effectiveness are less emphasized. Rather, in the case of the federal ICG funding for clients at Williams Treatment Center, the state-level IDCFS is in fact the largest recipient of these services as the legal guardian of Illinois foster youth. The state is therefore its own kind of service user of this public program, and also the sole entity that oversees such service provision and its effectiveness.

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