

Ethical Dilemma

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The dilemma that will be analyzed involves two agencies as well as three individuals. The two agencies involved are the Indiana Department of Children's Services (DCS) and the foster agency, the two individuals are a foster parent and two foster children who are siblings.

A placement request from DCS came across the desk of the person who handles placements at the foster agency. She recognized the name of the children, as well as the name of a foster parent whose care they have been in since April 7th 2017. The children, in this case, was a pair of siblings ages two almost three and one nearly two. After recognizing the parties involved, the social worker at the foster agency contacted the foster parent to see if they gave a 30-day notice. She wanted to verify there was no mistake or to try to retain the family as a foster family. As she was on the phone talking to the foster family, an incoming phone call came from DCS requesting that the foster agency refrain from talking to the foster parent regarding the referral.

The foster family had no idea what was happening, and after conversations with DCS, it was revealed that DCS felt there might have been some false medical claims made by the foster mom. The foster family had these girls in their care since 4/7/2017 so over two years without any incident. Now DCS is acting covertly to pull the children out of the home. To further complicate things, the older of the two girls is in a pre-adoptive state to be adopted by the foster family. Now DCS seeks to change the plan of permanency to reunification.

The placement request lists diagnosis as alleged, but are listed as, Epilepsy, anemia, brain damage, cortical visual impairment, speech delay, and cognitive delay. The only medications the

child is on is Keppra, which is an anti-epileptic drug and iron for the anemia. The request also stated that an independent physician would need to be consulted for examination.

DCS policies define a long-term resource parent (foster parent) as someone who meets one of the following requirements: If they were the resource parent for the child for the last 12 most recent months, they were foster parents for 15 of the most recent 22 months or six months, if the child is less than twelve months of age. This family matches every requirement possible to be classified as a long-term resource parent. With this classification comes more rights to the foster parent. Once a child has been in the same foster home for greater than a year, DCS is required to petition the court for removal of a child from the home. The foster parent has 15 days once the motion is filed to request a hearing (IAC-§ 31-9-2-76.5). The children are still placed with the foster parents as there was no apparent threat to the children at this time.

Matthew 18:15-17 states “This is what you do if one of your brothers or sisters sins against you: go to him, in private, and tell him just what you perceive the wrong to be. If he listens to you, you’ve won a brother. ¹⁶ But sometimes he will not listen. And if he does not listen, go back, taking a friend or two friends with you (for, as we have learned in Deuteronomy, every matter of communal import should be testified to by two or three witnesses).¹⁷ Then, if your brother or sister still refuses to heed, you are to share what you know with the entire church; and if your brother or sister still refuses to listen to the entire church, you are to cast out your unrepentant sibling and consider him no different from outsiders and tax collectors” (Matt. 18:15-17, The Voice).

Doesn’t Jesus own word give us examples on how we should deal with wrongdoings of others? Even though in Jesus’ story, it is assumed that the brother or sister who needs to be

spoken too is guilty of the wrongdoing already. In this case, there is no real proof, just speculation.

There are also several violations of the NASW code of ethics, beginning with the value of dignity and worth of the person. The NASW Code of Ethics states “Social workers treat each person in a caring and respectful fashion, mindful of individual differences and cultural and ethnic diversity” (National Association of Social Workers [NASW], 2017). In this case, DCS is not treating the foster parent in a respectful fashion as DCS is being secretive about what is going on. I do know that is not the full intent of this ethical principle, but I still feel it applies.

“Social workers engage people as partners in the helping process” (NASW, 2017). This ethical principle pertains to the value of the importance of human relationships. In this case, we have someone who has been an exemplary foster parent for numerous years, with some allegations towards them.

Ethical standard 4.04 in the NASW Code of Ethics states “Social workers should not participate in, condone, or be associated with dishonesty, fraud, or deception” (NASW, 2017). A strong case could be made that there is deception going on with this case. Rather that deception is intended or not is another question.

Solving this ethical dilemma is complicated, as we are dealing with their decision making power which is greater than White’s. the foster agency could go to the foster parent and attempt to figure out if the accusations are legitimate, but in doing this could undermine anything that DCS is doing, and would pose an ethical issue in its own.

White's could potentially speak to the supervisor from the DCS office and try to get an understanding as to why things were handled as they were. Ultimately in this situation, there is little that the foster agency could do without presenting its own ethical issues.

Speaking with others many weren't sure what the right solution would be but felt in their opinion that DCS is not handling this properly, and ultimately White's has loyalties to the children. One potential solution did come out of talking to others; that third possible solution has less cons than pros. White's could encourage DCS and work with them as well as the foster parent to get the children examined by an independent physician. The positives in this are that the matter could potentially resolved quickly, the children would not be removed and placed in another foster home, and likely the change of permanency request may not be filed. I see little cons to this solution, that would not have been present in any other solution. Drawbacks such as children removed from the home and the children having to undergo some potentially invasive medical examinations.

The next question I asked myself was who has the responsibility to make a decision? The answer to that is dependent on which responsibility we are talking about. If it is changing how things are handled with the foster family, then that falls on the shoulders of DCS. However, White's could decide to try to persuade DCS into other solutions through advocacy.

In the end, the solution I would use would be to play the role of advocate and advocate not only for the foster mom but for the children as well. By advocating for medical examinations to be completed before decision of removal leads to potentially less trauma inflicted on the foster children.

References

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