



Beware the Child Protectors

When Salt Lake City police and caseworkers from the state Division of Child and Family Services (DCFS) surrounded the home of Janet Adolf on June 4, they were not responding to an accusation of child abuse or neglect. The armed raid had been staged to seize Adolf's eight-year-old daughter, who wasn't at home — although her three terrified siblings were. According to Adolf's attorney Michael Humiston, the order had been issued because he had advised caseworkers of his intention to monitor their visits to Adolf's home in order "to protect Janet's rights."

As the case is described by Humiston, Adolf's problems began when her eight-year-old daughter was "intimidated" into making allegations of sexual abuse. Although the family's original caseworker, Kirk Soderquist, "tried to tell the court that there was no basis to the allegations," the youngster was removed from her home and temporarily placed in foster care; Soderquist was removed from the case and replaced with another caseworker.

"What Rights?"

After a month in a foster home, the child was returned to Adolf and a second caseworker was assigned to make regular home visits. Humiston left a message with DCFS announcing his intention to "coordinate" the visits, so that he could be present to protect "the family's Fourth and Fifth Amendment rights." According to Humiston, when this was explained to Judge Sharon McCully of Utah's Third District Juvenile Court — who issued the order that led to the June 4 raid — she exclaimed, "What rights?"

Humiston, an attorney from Heber City, Utah, contends that the State of Utah has conducted "a systematic reign of terror." "By law, parents can be anonymously accused, and never get to face their accusers," observes Humiston. "There's no right to a jury, no right to remain silent, and no presumption of innocence. Worst of all, all proceedings are conducted in secret. The State regularly terminates parents' rights without ever showing that the parents are unfit."

In early March, Humiston filed a \$500 million class-action suit against Utah Attorney General Janet Graham and several other state officials on behalf of five families whose children had been seized by the DCFS. According to Humiston, the amount of damages sought in the lawsuit is equivalent to the amount of child welfare subsidies received by the state of Utah since 1994.

The situation described by Humiston is by no means unique to Utah. Across the United States, thousands of families have been ripped apart by child "protection" bureaucracies. Parents in such circumstances find that if they have been "hot-lined" — that is, reported anonymously by a dutiful citizen, teacher, or acquaintance — they enjoy none of the rights and immunities associated with due process. Acting in the "best interests of the child," social workers can terminate parental rights on a whim, and order police agencies to enforce those whimsical decisions at gunpoint.

Even more ominously, child "protection" agencies across the nation, following a totalitarian blueprint and fueled with taxpayer dollars, are seeking to create a compulsory "home visitation" system, through which agents of the state will be able to subject parents to regular scrutiny — and determine whether or not children, as "state property," will be permitted to remain with questionable parents. Supporters of this concept have worked stealthily for nearly a quarter of a century to create a national home visitation network. Should they succeed, armed raids similar to the one mounted against the home of Janet Adolf may become quite common.



“Village” Takeover

During her recent “listening tour” of central New York State, Hillary Rodham Clinton had scheduled a visit to Elmira to call attention to that city’s “early childhood intervention program” — the Pre-natal and Early Infancy Project (PEIP). Christopher Caldwell of the neo-conservative Weekly Standard, who covered the First Lady’s Senate campaign swing, explained that PEIP is a child abuse program that “involves sending social workers on regularly scheduled pre-emptive visits into the homes of children whose parents are deemed to put them ‘at risk’ of wrong parenting.”

In her ghostwritten manifesto *It Takes a Village*, Clinton gushes, “I cannot say enough in support of home visits” by government social workers. After all, she declares, “Keeping children healthy in body and mind is the family’s and the village’s first obligation,” and in those “terrible times when no adequate parenting is available ... the village itself must act in place of parents. It accepts those responsibilities in all our names through the authority we vest in government....”

Insisting that in matters of suspected abuse or neglect of children, “a child’s safety must take precedence over the preservation of a family that has allowed abuse to occur,” Clinton contends that “social workers and courts should make decisions about terminating parental rights of abusive parents more quickly, rather than removing and returning abused children time and again.” Government-authorized “home visitors” of the type extolled by the First Lady are authorized to pass judgment on the “adequacy” of parents, and to summon child protection workers should it be decided that the “village” must now “act in place” of inadequate parents.

Like most advocates of home visitation programs, Clinton invokes the tragedy of child abuse to justify state intervention within the home. However, as the Physicians Resource Council (PRC), an affiliate of the Alabama Family Alliance, documents in a new study entitled *The Parent Trainers*, “most advocates of home visitation ... clearly state that their goal is to institutionalize home visitation services for all new parents.” Deborah Daro, a former research director for Prevent Child Abuse America (PCAA), candidly explained that the objective “is to bring home visitation services to all new parents.” The U.S. Advisory Board on Child Abuse and Neglect, which was empanelled by George Bush in 1991, reached the same conclusion, calling for “the sequential implementation of a universal voluntary neo-natal home visitation system” (which by strict definition could not be at once “universal” and “voluntary”).

Home visitors — who are also called Family Support Workers (FSW) — serve three missions, according to the PCAA. First, “being a teacher is central” to the FSW’s mission. Second, “the home visitor is also a friend, adviser, and advocate for parents,” and is responsible for helping forge links between the family and local “community service” agencies. “Finally,” states the PCAA, “the home visitor is a monitor” who is expected to develop a “collaborative relationship” with the local Child Protective Services (CPS) agency, and in that capacity she is expected to “set up regular consultation sessions with CPS to review ‘high risk’ cases” and to take “appropriate actions ... when abuse or neglect or imminent harm are suspected.” One FSW explains that “because so many of our families are at risk of child abuse and neglect, our watchful eye can see the potential for danger before it becomes a real problem and do something about it.”

In other words, home visitors/FSWs are the designated “watchful eyes” of the state within the home, empowered to “teach” parents, shepherd them into the suffocating embrace of the welfare state, and arrange for the seizure of children from parents deemed unsuitable. Furthermore, since enrollment in most home visitation programs begins with the birth of the child (and in some, enrollment begins before birth), the clear purpose is to make the state, by way of the home visitor, the custodian of first resort for



the children involved.

“We must remove the children from the crude influence of families,” Soviet Communist Party educators were instructed at a conference in 1918. “We must take them over and, to speak frankly, nationalize them.” Dr. C. Henry Kempe, the most influential American advocate of home visitation programs, subscribed wholeheartedly to that concept.

Dr. Kempe was co-author of the ground-breaking 1968 book *The Battered Child*, which inaugurated the contemporary “war on child abuse.” Kempe’s work was cited as authoritative by the U.S. Advisory Board on Child Abuse and Neglect, and by the American Academy of Pediatrics when it recommended in 1998 that pediatricians should “advocate at the local, state, and national levels for the funding ... of quality home-visitation programs.” Not surprisingly, Kempe also earned favorable mention in Hillary Clinton’s *It Takes a Village*. What makes Kempe’s influence troubling is the fact that he was an unabashed proponent of the totalitarian view that children are “state property,” and that home visitation should be “a compulsory, universal service” imposed on American families. In a June 9, 1975 lecture to the Ambulatory Pediatric Association in Toronto, Dr. Kempe set forth his vision of a system intended to enforce “children’s rights” within the home — a vision remarkably similar to the one expressed by Hillary Clinton in her law journal writings and in *It Takes a Village*.

“A free society does not want to interfere with the rights of parents to ... raise their children in any way they desire,” observed Kempe. “But, far too often, children are considered the property or chattel of their parents, many of whom think that they are entitled to dispose of them at will.” Invoking the common-law maxim, “A man’s home is his castle,” Kempe insisted that “all too often the child is a prisoner in its dungeon. It is a dungeon of constant anger, dislike, aggression, or even hatred.”

While most people would acknowledge that such dismal, tragic circumstances do characterize the plight of a relatively small number of children in our country, Kempe insisted that the conditions he described were normative rather than exceptional, and thus justified a “limited intrusion into family privacy by society” in the form of “health visitors.” Such visitors would be regarded as “fully capable of determining which children are at risk, whether they are thriving adequately or not doing well,” and help to “form a bridge between these families and the health care system.” Regular intervention in the home would continue until the child reached school age, at which time “many of the health visitor’s duties will be taken over by the teacher, the school nurse, or the school nurse practitioner.”

Kempe emphasized that the regime he described would not be limited to troubled families; rather, participation in the home “health visitor” program would be compulsory for all, “similar to the concept of compulsory, universal schooling”: “It seems incomprehensible that we have compulsory education, with truancy laws to enforce attendance and, I might add, imprisonment of parents who deny their child an education, and yet we do not establish similar safeguards for the child’s very survival between birth and age 6.”

Lethal Guardians

It is important to recognize that Kempe, in well-established totalitarian fashion, assumes that parents are more dangerous to children than strangers acting as officers of the state, which is, after all, the most powerful instrument of organized coercion and lethal violence. Once again, Kempe’s priorities are in harmony with instructions given in 1918 to Soviet educators, who were told: “From the first days of their lives [Soviet children] will be under the healthy influence of Communist children’s nurseries and schools. There they will grow up to be real Communists.”



Written by [Alias](#) on August 30, 1999

Kempe also emphasized that a stealthy, incremental approach would be necessary in order to construct a nationwide home visitation system. The program could begin in “any state, or any of our 3,362 counties,” he told his audience in Toronto. Furthermore, he admonished advocates to be flexible enough to adjust their proposals to meet local conditions. “If it should turn out that local or state health departments are not very interested or are unwilling to undertake the health visitor program, there may be other approaches for its implementation,” he observed. Pointing out that the state of Michigan had “placed the charge on the [state] Department of Education to assure that everyone is ‘educable,’” Kempe explained that this mandate “gives the Department the right to provide screening procedures and comprehensive health care to make every child school-ready.”

This same approach has been used by the federal government in recent years to justify intervention in the home at ever-earlier stages in the life of a child. The Clinton administration’s Goals 2000 — which was an outgrowth of a national education agenda created by the Bush administration in 1989 — provides millions of dollars in federal subsidies for state early-intervention programs, all of which are justified by the supposed need to ensure that children arrive at the doorstep of government schools “ready to learn.”

State Property

According to Kempe, “those of us who are qualified to assess and correct the problems that produce child abuse and ‘failure to thrive’ should have the authority to intervene effectively for the good of the suffering child.” The range of interventions anticipated by Kempe is limitless, given that he explicitly described the child as the property of the state.

During the 1992 presidential campaign, Hillary Clinton provoked widespread criticism for her suggestion that children should have the right to “divorce” their parents — but, once again, she was merely building upon Dr. Kempe’s work. “When marriages fail, we have an institution called divorce, but between parent and child, divorce is not yet socially sanctioned,” Kempe commented during his 1975 lecture. For parents deemed unsuitable by the state, “voluntary relinquishment [of parental rights] should be put forth as a desirable social act — to be encouraged for many of these families,” Kempe declared. “When that fails, legal termination of parental rights should be attempted.”

From Kempe’s perspective, parents exercise authority over their children only by the grace of the state, and the state has the right to revoke parental authority at any time: “Where the state is supreme, the particular problem is easily managed; in a dictatorship each child belongs to the state and you may not damage state property. The really first-rate attention paid to the health of all children in less free societies makes you wonder whether one of our cherished democratic freedoms is the right to maim our own children.”

Of course, it is nonsense on stilts to say that children who live in “less free societies” have been the beneficiaries of “first-rate attention.” When Kempe offered this paean to totalitarianism, the world had not yet beheld the horrifying spectacle of the state-run orphanages in Communist Romania, in which thousands of children lived and died in unimaginable filth and squalor. Nicolae Ceausescu, the Transylvanian despot who ruled Romania until he was murdered by his outraged subjects in 1989, articulated a statist philosophy of childcare nearly identical to Kempe’s, insisting that the individual Romanian child “is the socialist property of the whole society.”

Communist China’s childcare policies are also in harmony with Kempe’s vision of the child as “state property.” A Chinese population control commissar explained in 1979: “China is a socialist country. This



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means that the interests of the individual must be subordinated to the interests of the state.... Socialism should make it possible to regulate the reproduction of human beings so that population growth keeps in step with the growth of material production." Since children are "state property" in Red China, those conceived without authorization by the state are either killed in the womb, murdered through infanticide, or confined in state-run orphanages.

Steven W. Mosher, one of the world's leading experts on Red China's "one-child" policy, describes that nation's government-run orphanages as "killing fields." Human Rights Watch-Asia reported in 1989 that Chinese orphanages have a mortality rate of at least 72 percent, with medical neglect and malnutrition the leading causes of death. Most of the children consigned to this hell are girls; an account recently smuggled out of China described a case in which a starving girl child, desperately seeking surcease from starvation, attempted to eat the flesh from her own arm.

Such is the fate of children blessed by the "first-rate attention" provided by the "less free societies" extolled by Kempe as models for an American childcare regime.

Foot in the Door

Dr. Kempe was the founding director of the Kempe National Center for the Prevention and Treatment of Child Abuse and Neglect at the University of Colorado. Kempe's successor, Dr. Richard Krugman, served as chairman of President Bush's U.S. Advisory Board on Child Abuse and Neglect, which recommended "the sequential implementation of a universal voluntary" home visitation system.

In 1985, the state of Hawaii enacted the "Healthy Start" program, a home visitation program that identifies "at risk" families through screening at birth. Healthy Start literature acknowledges that the program "evolved from the work of the Kempe program in Denver."

A recent evaluation of Healthy Start conducted by a panel of Ph.D.s found that for families enrolled in the program, "no overall benefits emerged on child development; the child's home learning environment; parent-child interaction; well-child care; pediatric health use for illness or injury; child maltreatment ... or maternal life skills, mental health, social support, or substance abuse."

However, the program was successful in its chief covert objective: the insinuation of state agents into the private affairs of a majority of Hawaiian families. Healthy Start officials, according to the PRC report *The Parent Trainers*, are now "screening over 52 percent of all new births in the state and provid[ing] services to roughly 20 percent of all newborns and their families."

In 1992, Hawaii's Kempe-inspired Healthy Start program was used as the template for the Healthy Families America (HFA) initiative, which was created by Prevent Child Abuse America (PCAA) in conjunction with the Freddie Mac Corporation and Ronald McDonald Charities. PCAA, it will be recalled, seeks a "universal, voluntary" home visitation program, and the organization boasts that "virtually all 50 states have a public/private sector task force" promoting home visitation services under various program names. "In California," notes the PRC, "programs are called 'Welcome Home Baby,' Georgia's program is known as 'First Steps,' Colorado's 'Bright Beginnings,' Illinois' 'Good Beginnings,' Massachusetts' 'Good Start,' and Arkansas' 'New Beginnings'."

To those state-level examples, a recent report published by the David and Lucille Packard Foundation (a major corporate supporter of home visitation programs) adds Missouri's "Parents as Teachers" program; the "Nurse Home Visitation Program" — based on Elmira, New York's PEIP program — which has been put in place in Memphis, Tennessee, and Denver, Colorado, "and [is] now being replicated nationally"; Arkansas' Home Instruction Program for Preschool Youngsters (HIPPY), "which seeks to



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prepare 3-year to 5-year-olds for kindergarten and first grade”; and the Comprehensive Child Development Program, “a five-year federal demonstration program that worked with poor families in 24 sites to promote children’s development, parents’ ability to parent, and family self-sufficiency.” Irrespective of the program title, all elaborate on C. Henry Kempe’s malignant design of using home visitation programs as an incremental means of nationalizing children as “state property.”

The PCAA reports that “Healthy Family” sites, under various names, are operating in 42 states and the District of Columbia. A recent survey by the organization found that one in five parents with children under the age of one received some type of home visitation service in 1997. Furthermore, the organization’s effort to make home visitation universal received a tremendous boost in the federal budget for fiscal year 1999: The PCAA received \$33 million through the Child Abuse Prevention and Treatment Act, and an additional \$14 million for “research and data collection.” The organization’s 42 state chapters also have access to Children’s Trust Funds, which are financed through surcharges on marriage licenses and birth certificates, fees for vanity license plates, and check-offs on individual state income tax returns.

In addition, the PCAA “was instrumental in the reauthorization of the Family Preservation and Support Services Program (renamed the Safe and Stable Families Program),” points out *The Parent Trainers*. Federal funding for that program, which totaled \$275 million in fiscal year 1999, is projected to increase to \$305 million by 2001 — and a large portion of that amount will be devoted to cultivating and expanding government home visitation efforts.

Testing for Child Abuse

In order to determine which newborn children are “at-risk” and thus qualify for home visitations, observes *The Parent Trainers*, state-based “Healthy Family” groups must “gain access to medical records of women who are pregnant or have just given birth. To complete this phase, HFA programs employ ‘Family Assessment Workers’ (FAWs) who will screen and assess mothers to determine their risk status.” In some cases, an FAW “is designated as a temporary, volunteer employee of the hospital (when she is on hospital grounds) to allow her access to medical records. In other cases, a member of the hospital staff may agree to do the initial record screen and then make referrals to the FAW. Or, the FAW may not have access to medical records, but may be allowed to enter hospital rooms and administer ‘verbal screens’ by asking postpartum mothers directly to answer the questions on the 15-point initial screen.”

The questions in the initial screening deal with the mother’s marital status and history, education, socio-economic status, family background, and the like. A “positive score on any two” of the items, notes a PCAA document, will result in a referral for an “in-person interview” involving the “Kempe Family Stress Checklist” (FSC) — ten open-ended, invasive questions presented to both parents. The FSC is supposedly designed to determine a parent’s propensity toward child abuse. On each question the parent receives a score from 0 (no risk) to 10 (highest risk). According to Hawaii’s Healthy Start training manual (a model for state-level programs nation-wide), “a total score of 25 or above for either parent places a family in the high risk category, eligible for Healthy Start home visitor services.” However, as *The Parent Trainers* points out, “A score of 25 ... is fairly standard. In other words, if either parent is classified as a ‘moderate’ risk on any five of the ten issues listed above, that parent would be considered a high risk and in need of home visitation services.”

Among typical FSC questions can be found inquiries regarding “harsh punishment”; PCAA literature emphasizes that spanking is considered a form of abuse. Having been “suspected of abuse” is another



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risk factor for a parent, as is being “in the midst of multiple crises or stresses,” having “unrealistic expectations of the child’s behavior,” or perceiving a child’s behavior as “difficult or provocative.” Clearly the FSC is designed to define most — if not all — parents as placing their children “at risk.” This is to be expected, given that the objective of “Healthy Start” and its offspring is a universal system — based on voluntary enrollment if possible, but employing coercion if necessary.

The FAWs charged with conducting “screenings” and arranging for home visitations are generally volunteers who may have had only a few days of training. No specialized academic background is required to become a FAW; a high school diploma or its equivalent is sufficient. (One PCAA survey found that one-quarter of all FAWs had no college training.) FAWs are encouraged to lure parents into visitation programs by offering bottles, breast pumps, or other helpful gifts to parents as a pretext for a post-hospital visit. “Comments made at a recent HFA national conference indicate ‘creative outreach’ may also include sending flowers to the reluctant mother on Mother’s Day, or even sending flowers to the mother of the mother, if it appears she is the source of resistance,” observes *The Parent Trainers*. “It may also include taking the reluctant mother out to the beauty parlor if this may gain her confidence and make her feel obligated to participate in the program.”

To illustrate the success of such tactics, an Arizona program reported that “90 percent of mothers offered the program accept HFA services.” Furthermore, PCAA urges FAWs to make “persistent outreach efforts” for several months, if necessary, until reluctant families “have explicitly indicated that they do not want the service.” Recalcitrant parents, according to PCAA, are “often at greatest risk and, therefore, are in greatest need of the service.” Should Kempe’s vision of compulsory home visitation to protect children be consummated, it stands to reason that rebellious parents would be the first to have their children taken from them — as the case of Janet Adolf’s family in Salt Lake City would seem to illustrate.

Levels of Involvement

As is almost always the case with any grand, malevolent scheme, the Kempe-inspired home visitation campaign makes malicious use of the worthy motives of otherwise decent people. Diana Lightfoot, director of the Physician’s Research Council and co-author of *The Parent Trainers*, explained to *The New American*: “There are three levels at which the home visitation scheme is working. At the first, most immediate level, we have the social workers or FAWs themselves, who usually have no agenda beyond doing what they consider to be the right thing — fighting child abuse, helping children get a good start, helping parents who may be overwhelmed. And of course, these are all very commendable motives.”

At the second, intermediate level, continued Lightfoot, “we have the state departments of social services and other government officials who know some part of the larger picture and consciously deceive the public about what’s going on, but they believe that their noble end justifies the unethical means they employ. For a lot of state officials, the chief motivation is money; there is a lot of taxpayer money being thrown at the states by the federal government for these programs. At the top level we have the ideologues — the Hillary Clinton, Janet Reno, and Donna Shalala types — who have an ideological commitment to create a certain type of society, and are willing to use the power of the government to re-structure the traditional family.”

Dr. Sam Watson, Lightfoot’s co-author, remarked to *The New American* that “Kempe, despite his reputation as a great humanitarian, praised totalitarian states and urged that we adopt a totalitarian child care policy. This is also very much the mindset of the current administration, and much of the



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institutionalized anti-child abuse and ‘children’s rights’ movements. The model and demonstration programs that are springing up all over the country are the product of that same mindset as well. In some states, money from the state lottery is underwriting home visitation programs; in others it is money from the tobacco settlement. These sources of revenue have been a real windfall for advocates of home visitation.”

“The seed of Kempe’s vision has been planted, it has been watered with taxpayer money,” Lightfoot stated. “Whether it will grow to fruition depends upon the American public. It is vitally important that we educate families and parents about the dangers of home visitation programs, and the totalitarian nature of the vision behind those programs.”



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