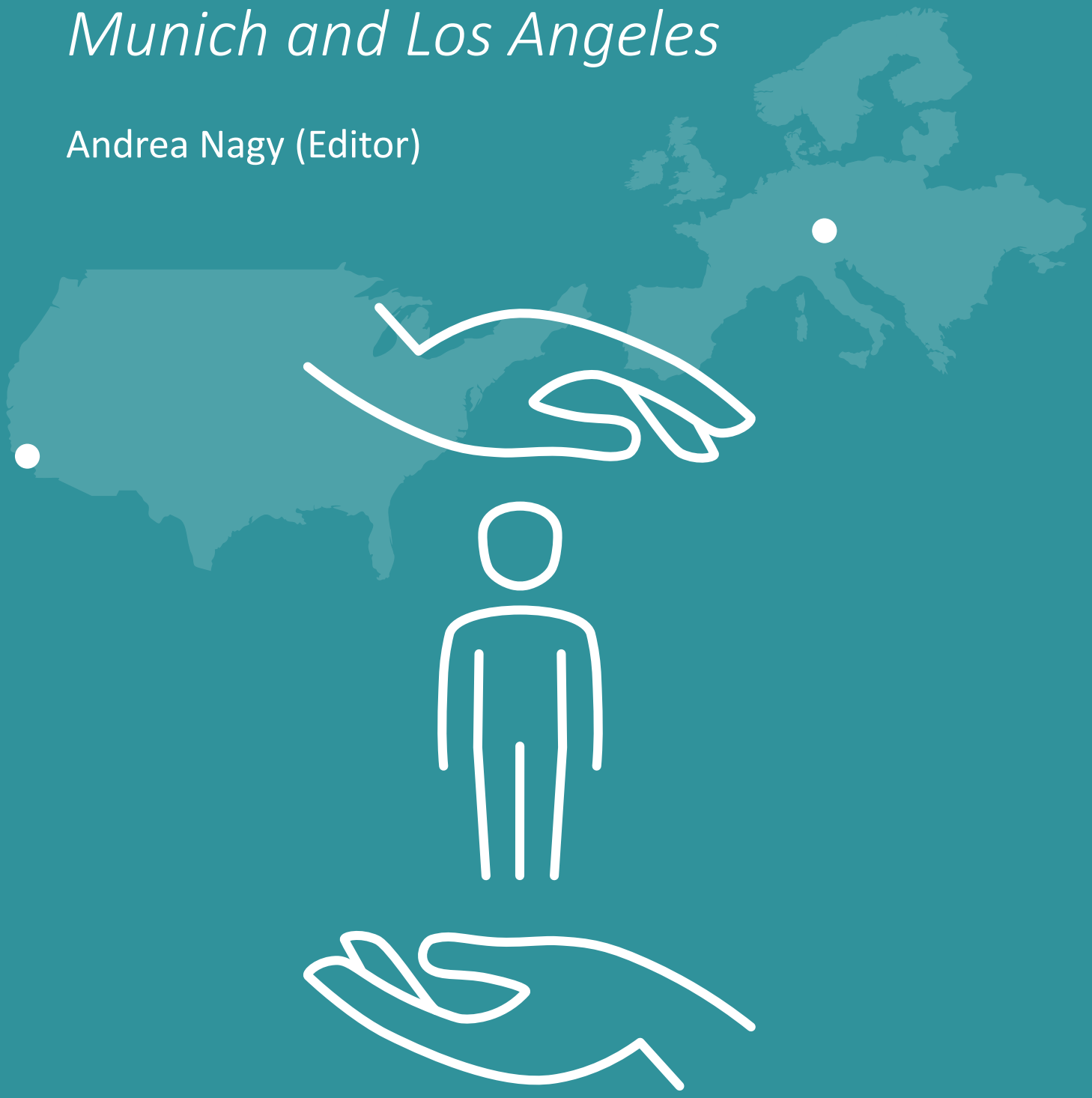
COIL – COLLABORATIVE ONLINE INTERNATIONAL LEARNING

Contemporary Issues in Child and Youth Welfare: A Cross-National Collaboration *Munich and Los Angeles*

Andrea Nagy (Editor)



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Contemporary Issues in Child and Youth Welfare:
A Cross-National Collaboration Munich and Los Angeles

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Report on a COIL-Lecture

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Foreword

This report documents the outcomes of a Collaborative Online International Learning (COIL) module jointly developed and facilitated by James David Simon, Associate Professor at the School of Social Work at California State University, Los Angeles, and Andrea Nagy, Professor for Child and Youth Welfare at the Faculty of Applied Social Sciences at Munich University of Applied Sciences. The module, entitled Contemporary Issues in Child and Youth Welfare: A Cross-National Collaboration, brought together undergraduate students in their last year from Munich and graduate students in their first year from Los Angeles during the winter semester of 2025.

This collaboration was inspired by both personal commitment and pedagogical purpose. Both instructors share a long-standing commitment to internationalizing the classroom experience and have previously collaborated on a joint short-term immersion program in South Tyrol, Italy. COIL presented itself as a natural next step: a format that enables sustained, structured intercultural exchange without requiring students to travel across borders. In a field such as social work, where professional practice is inextricably bound to the cultural, legal, and institutional contexts in which it unfolds, the value of such an exchange can hardly be overstated.

Over six synchronous sessions held on Thursdays between October 9 and November 13, 2025, students from both institutions explored the child welfare systems of their respective cities and countries side by side. Working in small international teams—students from each institution — they investigated the legal frameworks, intervention methods, key terminology, socio-political underpinnings, and equity dimensions of a specific field within child and youth welfare. The collaborative project culminated in a joint presentation.

The module was designed with a dual focus: disciplinary depth and intercultural growth. Students were expected not only to compare child welfare policies and practices across two national contexts, but to do so as members of an international team, navigating differences in language, professional culture, academic tradition, and lived experience. To support them, both instructors drew on learner-centred pedagogical approaches — engaging students' existing knowledge and practical experience, building in structured reflection at multiple points, and scaffolding intercultural communication through the twelve guidelines for cross-cultural collaboration and the NASW Standards for Cultural Competence in Social Work Practice.

The learning outcomes targeted by the module — comparing child welfare systems, identifying relevant policies, analyzing intervention strategies, and working effectively in international teams — align directly with the Sustainable Development Goals, in particular SDG 1 (No Poverty), SDG 3 (Good Health and Well-being), SDG 10 (Reduced Inequalities), and SDG 16 (Peace, Justice, and Strong Institutions). It is our conviction that social work education has a responsibility to equip future practitioners with global awareness and intercultural competence, and that collaborative international learning is one of the most effective means of cultivating both.

This report documents that effort and was inspired by the Munich students' post-lecture reflections, which were compiled and finalized by Andrea Nagy.

We hope it will serve as a resource for colleagues who are interested in collaborative online international learning, and as a foundation for future inquiry. We intend to continue and deepen this partnership, and we are grateful to all the students whose engagement, creativity, and openness made this module what it became.

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Big Thanks as well to the working teams composed of California State University students, Munich University of Applied Sciences students and incoming students at the Munich University of Applied Sciences. Especially to the following CSULA students: Will Park, Alex Morse, Grace Wilkim, Maddy Hermandez, John Morse, Kalisha James, Sorendi Saldana, Charlie Anderson, Geselle Segura, Aileen Martinez, Jennifer Candela, Sergio Sanchez, Alina Carmona, Vincent Torres, Itzel Macedo, Veronica Martinez Peralta, Bianca Acuna, Ana Barillas, Aileen Dominguez, Adriana Vazquez.

Andrea Nagy
Professor for Child and Youth Care, Faculty of Applied Social Sciences
Munich University of Applied Sciences

James David Simon
Associate Professor, School of Social Work
California State University, Los Angeles

Los Angeles & Munich, 2026

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1. Contemporary Issues: Poverty and Mental Health in Child Welfare

Maddy Hermandez
John Morse

Johanna Stark
Willi Schumacher
Aina Comes

1. Contemporary Issues: Poverty and Mental Health in Child Welfare

Johanna Stark, Willi Schumacher, Aina Comes, Andrea Nagy

1.1 Introduction

Child welfare is a key field within social work that focuses on protecting children's safety, rights, and overall quality of life. In today's societies, child poverty and mental health are among the most pressing challenges facing child welfare systems worldwide. These two issues are closely interconnected and profoundly influence children's development, future opportunities, and long-term well-being.

Child poverty continues to be a major global concern. According to UNICEF (2023), approximately one in six children worldwide grows up in poverty. This means that many children lack regular access to basic necessities such as adequate food, stable housing, healthcare, and education. Children living under these conditions frequently face family instability, chronic stress, and emotional difficulties, and they are disproportionately likely to come into contact with child welfare services. Poverty places sustained pressure on families and can seriously undermine parents' capacity to provide a stable and nurturing environment (World Bank, 2023).

Research provides strong evidence that poverty does not merely correlate with poor outcomes — it causally contributes to them. A rapid evidence review commissioned by the New Zealand Welfare Expert Advisory Group found that children and adolescents who experience poverty have worse cognitive, social-behavioral, and health outcomes, in part as a direct result of lower family income, and not solely because low income is associated with other household characteristics (Ministry of Social Development New Zealand, 2018). The strongest evidence relates to cognitive development and school achievement, followed by social and behavioral development. Importantly, poverty affects multiple domains of children's lives simultaneously, and its negative effects are compounded the longer a child is exposed to it (Ministry of Social Development New Zealand, 2018).

Two conceptual frameworks help explain the mechanisms through which poverty shapes children's outcomes. The Resource and Investment Model suggests that income enables parents to purchase goods, services, and opportunities — such as nutritious food, quality housing, and educational materials — that support children's positive development. The Family Stress Model highlights how poverty increases parental stress, depression, and relationship conflict, which in turn negatively affects parenting behavior and the overall home environment (Cooper & Stewart, 2013, as cited in Ministry of Social Development New Zealand, 2018). Both pathways underscore that the consequences of poverty are not limited to material deprivation but extend into the emotional and relational dimensions of family life.

Mental health is another critical concern within child welfare. The World Health Organization (2022) estimates that approximately one in seven children and adolescents worldwide experiences a mental health disorder. Children involved in child welfare systems typically show even higher rates of anxiety, depression, and trauma-related difficulties, frequently linked to experiences of abuse, neglect, or prolonged poverty. This picture is consistent across diverse national contexts. A global commentary by Kaku et al. (2022), drawing on perspectives from eleven countries including Nigeria, India, Chile, France, and Singapore, confirmed that poverty and social inequality are among the most significant risk factors for child and adolescent mental health problems worldwide. Poverty often leads to

malnutrition, educational deprivation, and poor parental mental health, all of which increase children's vulnerability to mental health difficulties (Kaku et al., 2022).

The relationship between poverty and mental health is further reinforced by neurobiological evidence. Chronic exposure to poverty-related stress has been shown to disrupt brain development and impair executive functioning — the cognitive capacities that underpin self-regulation and adaptive behavior (Ministry of Social Development New Zealand, 2018). These effects can be long-lasting: childhood poverty has been linked to poorer adult outcomes in education, employment, income, and health, suggesting that early intervention is not only beneficial but essential (Ministry of Social Development New Zealand, 2018).

Evidence also points clearly to the value of prevention and early support. Increases in family income through cash transfers have been shown to positively affect outcomes for both children and adults (Ministry of Social Development New Zealand, 2018). Similarly, Kaku et al. (2022) emphasize the importance of community-level interventions, school-based programs, and task-sharing between mental health professionals and community health workers as effective strategies, particularly in low- and middle-income countries where specialist resources are scarce. Family support programs, access to education, and community-based services play an essential role in protecting and promoting children's mental health.

In conclusion, the link between poverty and mental health in child welfare is well-established and multidimensional. Children growing up in poverty are exposed to higher levels of stress, insecurity, and sometimes violence — all of which can have lasting negative effects on their emotional and psychological development. For social workers and child welfare practitioners, addressing these deeply intertwined issues is essential in order to protect children, strengthen resilience, and support their well-being in the long term.

1.2 Data from Munich and Los Angeles of Child Poverty and Related Issues

At the state level, Bavaria has the lowest child poverty risk rate among all German federal states, at 13.4% in 2023 (Statistische Ämter des Bundes und der Länder, 2024, as cited in Statista, 2024), though Munich as a high-cost city presents a notably higher local burden. Around 18% of children in Munich are dependent on state financial support — nearly one in five — and this figure rose by 8% within a single year (Abendzeitung München, 2023). Around 38% of children and adolescents up to age 15 in Munich have been dependent on SGB II benefits (Bürgergeld / basic income support) for more than four years (Caritas Region München, 2024). Approximately 11,000 people in Munich are homeless or without stable housing as of May 2024 (Caritas Region München, 2024). Specific figures for homeless children are not consistently tracked at the city level. Children from single-parent households are particularly affected — their poverty rate recently reached 27% (Freie Wohlfahrtspflege Bayern, 2025).

Only 28% of students in the most disadvantaged neighborhoods attend a Gymnasium (academic secondary school), compared to 77% of students in privileged neighborhoods (Caritas Region München, 2024).Munich's primary welfare support comes through the Job center München and the Sozialreferat, which coordinate Bürgergeld, housing assistance, childcare subsidies, and family services — broadly comparable in function to Los Angeles's Department of Public Social Services (DPSS).

Both cities show strikingly similar child poverty rates (~18%), but the underlying structures differ. Los Angeles sees the sharpest disparities along ethnic and racial lines, while Munich's vulnerability is more strongly associated with family structure (single-parent households) and neighborhood segregation.

Munich's welfare system is more universally accessible through federal entitlement programs, whereas Los Angeles relies more heavily on a patchwork of state and county programs with varying eligibility thresholds (Compare also chapter 2.8 Related Laws in Munich and Los Angeles).

Side-by-Side Comparison: Los Angeles vs. Munich

Category	Los Angeles	Munich
Child poverty rate	~18.1% (Federal Poverty Threshold)	~18% dependent on state support; Bavaria at 13.4% at-risk rate
Most at-risk groups	Black, Hispanic, AI/AN children (21–27%)	Children from single-parent households (~27%)
Families receiving benefits	~26% (CalFresh, CalWORKS, Medi-Cal etc.)	~38% of children dependent on SGB II for 4+ years
Homeless population	~68,000 total; 1,500–1,800 children	~11,000 total; child figures not systematically reported
Educational inequality	Concentrated in minority communities	Segregation by neighbourhood: 28% vs. 77% Gymnasium access
Key support system	DPSS (healthcare, nutrition, job & cash assistance)	Jobcenter München & Sozialreferat (Bürgergeld, housing, family services)

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1.3 A Munich Social Work Organization That Deals With These Issues

Lichtblick Hasenbergl (Lichtblick Hasenbergl, n.d.a.) is a long-term support and education project for children, teenagers, and young adults from socially disadvantaged families in the Hasenbergl North district of Munich. Many children there grow up in a large social housing estate under precarious financial conditions, with low levels of education and dependence on support systems. The aim of the organization is to break the cycle of social disadvantage, enable healthy growth and secure educational and training opportunities. The program accompanies young people from early childhood to young adulthood. It begins with mother-child groups and kindergarten, where basic social, emotional,

and sensorimotor skills as well as school readiness are promoted. In the subsequent age-graded social therapy groups (basic, advanced, and youth), learning techniques, willingness to work hard, personal responsibility, independence, and social skills are systematically developed. A special element is vocational training from around the age of ten, which lowers the threshold to training and work at an early stage. In its training support program for 17- to 25-year-olds, Lichtblick Hasenbergl assists young adults with school requirements, family conflicts, and problems in training, including through tutoring, counseling, and outreach work. A total of around 200 care places are available for children and young people, and around 120 adults also use the affiliated family center. The project thus has an impact on the individual development of children and young people as well as on their families and social participation in the neighborhood (Lichtblick Hasenbergl n.d..a).

The Lichtblick Hasenbergl Family Center aims to empower families in different life situations and offer them guidance, education, and concrete support. The focus is on promoting family skills in the areas of children's health and education. Parents are supported in accompanying their children in their school learning and on their way to training or a career. In addition, they receive advice and guidance on personal and professional development. Another key task of the center is to assist families in crisis and stressful situations, support them in securing their economic livelihood, and provide quick, unbureaucratic help when needed. The center's diverse programs reflect this holistic approach. Among the most important offerings are German language courses that focus on everyday communication skills, thereby enabling social participation. In the computer workshop, participants acquire basic digital skills, learn how to use the internet, and receive support in writing job applications. The employment promotion program offers practical training and internships in the field of housekeeping to facilitate professional integration. The promotion of exercise and social cohesion also plays an important role: social interaction is actively encouraged through sports and community activities such as gymnastics, swimming, excursions, and intercultural festivals (Lichtblick Hasenbergl n.d.b).

The family boutique is a special low-threshold contact point. It offers used clothing, school supplies, and toys at affordable prices. Children can earn points there through helpful behavior or academic success, which they can exchange for goods. The concept promotes fairness, motivation, and personal responsibility, while also serving as an open entry point to the center's counseling and support services. All activities at Lichtblick Hasenbergl are based on the fundamental principles of inclusion, empowerment, and community – with the aim of strengthening families and promoting social participation in the long term (Lichtblick Hasenbergl n.d.b).

An example of this approach can be found in the project “A Wild Kid and Youth project” which takes place regularly in the Lichtblick garden under the motto “Soccer instead of television – team spirit instead of shooter games.” The project combines sports promotion with socio-educational goals: children and young people improve their technical and physical abilities, train their concentration and stamina, and at the same time learn to work together as a team. Through sporting competition, they learn to deal with success and defeat fairly. In a district like Hasenbergl, where many families live with social and economic constraints, this project takes on special significance: here, soccer becomes a space for integration, belonging, and personal development (Lichtblick Hasenbergl n.d.c).

Creative education is at the heart of the “Culture Crossover” project, in which children and young people work artistically with various materials such as photography, paint, paper, wood, or wire. Inspiration comes from museums, exhibitions, the internet, or everyday life. The aim of the project is to awaken creativity and imagination, to convey the joy of creative expression, and to open up new possibilities for self-perception and self-expression. Through the artistic process, participants strengthen their self-efficacy, self-confidence, and individual expressiveness. Under the guiding principle of “art as empowerment,” art is understood here as a tool that promotes self-expression, reflection, and community. It creates spaces where young people can express themselves, exchange ideas, and grow together (Lichtblick Hasenbergl n.d.d). There are also several other projects within this agency.

The Lichtblick Hasenbergl agency thus exemplifies how among other things social work, education, sports, and art can intertwine to promote inclusion, participation, and individual development opportunities in a socially disadvantaged neighbourhood in a sustainable manner.

A lived client-experience from Munich

Otto Steiner Jr. – Key Points (Lichtblick Hasenbergl). He grew up in Hasenbergl, Munich, youngest of 8 children, his father was a pastor, actively involved in social initiatives in the neighborhood. His childhood was shaped by family values, community, and responsibility. Today he is CEO of Constantin Entertainment and board member of TSV 1860 Munich. He sees education as key to societal participation and personal development, not just formal schooling – also about confidence, perspective, and self-efficacy. Highlights need for supportive structures (schools, mentors, social institutions). He feels a responsibility to give back to the community and praises organizations like Lichtblick Hasenbergl for providing guidance and opportunities to youth and families. He emphasizes connection between personal success and community engagement. Growing Up in Hasenbergl his neighborhood had social challenges, but also strong community bonds. He believes origin is not destiny; opportunities are shaped by support and resources. Early learning according to him means setting goals, taking responsibility, and using available support systems. His key message is that education, community, and responsibility are interconnected. A focus on potential, not deficits, in youth institutions like Lichtblick are crucial for equal opportunities and empowerment. (Lichtblick Hasenbergl, 2015)

1.4 A Los Angeles Social Work Organization That Deals With These Issues

Provided by Maddy Hermandez and John Morse

United American Indian Involvement (UAII) is a nonprofit organization based in Los Angeles that has been supporting indigenous communities in urban areas since 1974. It was founded by two indigenous women, Marian Zucco (Paiute) and Babba Cooper (Lakota), as a grassroots project to provide for Native Americans living in Skid Row, the homeless district in downtown Los Angeles. In the context of the consequences of the Indian Relocation Acts, which forced many indigenous people into urban centers, UAII developed services to address social, health, and economic disadvantages (United American Indian Involvement, Inc. 2025).

Originally, UAII saw itself primarily as an “Indian Health Center,” but has significantly expanded its services over time. Today, through the expansion of services and government contracts, it reaches not only people in Skid Row, but also people throughout Los Angeles County. Its services include health care in the form of health clinics, limited housing, addiction counseling, and individual therapeutic support. People can register as members, and the eligibility requirements are deliberately low-threshold to enable open and inclusive use (United American Indian Involvement, Inc. 2025).

UAII pursues a community-oriented approach that focuses not only on medical or psychosocial assistance, but also on social participation and everyday support. For example, there is a “community store” that functions as a low-threshold supply and meeting place and is open to everyone. The organization is integrated into a network of local, state, and federal support programs, such as those offering livelihood support, employment assistance, health care, and food aid. In this interaction, UAII acts as a contact point, bridge, and support space for indigenous people and increasingly also for other

vulnerable groups in the city of Los Angeles, facilitating access to resources, strengthening cultural ties, and stabilizing living conditions in the long term (United American Indian Involvement, Inc. 2025).

A lived client-experience from Los Angeles

Provided by Maddy Hermandez and John Morse

JC is a 36 year old Hispanic man, living in the backhouse of his brother's home. He has a history of substance use, mainly alcohol and meth. He lived with his partner and her son from a previous relationship for 4 years until she passed away during the birth of their child. The county drug tested him at the hospital and the baby was removed from his care the same day, along with his step-son. He received family reunification services for about 10 months before being referred to family preservation by his social worker. When I was first assigned the case, he had begun to clean the house and attend drug program meetings. Our initial focus centered on creating structure in his daily life and continuing to create a safe environment for his baby. This required financial support because he had no income other general relief. We purchased him cleaning supplies, a new toilet seat, provided food gift cards, and some hygiene products. He began managing his substance use more consistently and practiced meditation in order to address his chronic insomnia. Before I left the case at the end of year, we applied for auxiliary funds to purchase a new dryer, refrigerator, child bed, and sofa. We also facilitated meetings with Department of Public Social Services staff in order to investigate the inconsistency in his general relief payments. Also provided air filter and mask due to the fires in Los Angeles.

1.5 Comparison Of The Organizations

Both Lichtblick Hasenbergl and United American Indian Involvement (UAII) are community-oriented organizations that work with structurally disadvantaged groups and aim to promote social participation, strengthen resources, and break cycles of exclusion. While Lichtblick focuses primarily on children, young people, and their families in a socially disadvantaged urban neighborhood in Munich, UAII addresses Indigenous communities in Los Angeles who are affected by the historical and ongoing consequences of colonization, displacement, and urban poverty (Lichtblick Hasenbergl n.d.a; United American Indian Involvement, Inc. 2025). In both cases, the organizations understand themselves as long-term companions and safe spaces that provide guidance, empowerment, and concrete support in challenging life situations (Lichtblick Hasenbergl n.d.a; United American Indian Involvement, INC 2025).

A central similarity lies in the holistic, low-threshold, and resource-oriented approach. Lichtblick Hasenbergl combines educational support, social-pedagogical group work, family assistance, and creative and sports programs to promote children's development, strengthen families, and enable participation in the neighborhood (Lichtblick Hasenbergl n.d.b; Lichtblick Hasenbergl n.d.c; Lichtblick Hasenbergl n.d.d). UAII similarly integrates medical care, counseling, housing support, addiction treatment, and community-building services such as the "community store" and open membership structures in order to address not only acute crises but also long-term stabilization and community cohesion (United American Indian Involvement, Inc. 2025). Both organizations work explicitly with low barriers to access and see participation, empowerment, and community as guiding principles of their work (Lichtblick Hasenbergl n.d.b United American Indian Involvement, Inc. 2025).

At the same time, there are clear differences in target groups, contexts, and professional focus. Lichtblick Hasenbergl operates in a German welfare state context and is oriented toward the life course of children and young people in one specific neighborhood, with a strong focus on education, school

success, and transition into the labor market. The Family Center, the "family boutique," and projects such as "A Wild Kid and Youth Project" or "Culture Crossover" illustrate this pedagogical and developmental focus (Lichtblick Hasenbergl n.d.b; Lichtblick Hasenbergl n.d.c; Lichtblick Hasenbergl n.d.d). UAII, by contrast, is rooted in the specific history and present of Indigenous communities in the USA and combines health care, mental health support, social services, and cultural community work on a county-wide level, addressing not only children and families but Indigenous people of different ages and increasingly other vulnerable groups (United American Indian Involvement, Inc. 2025).

Another key difference lies in the way identity and culture are addressed. In Lichtblick Hasenbergl, cultural diversity and intercultural festivals are important, but the primary focus is on social disadvantage and educational inequality in a German urban context (Lichtblick Hasenbergl n.d.a). UAII, on the other hand, explicitly works as an Indigenous organization "by and for" Native communities and places particular emphasis on strengthening cultural belonging and resilience in the context of colonization, forced relocation, and discrimination, the organization's origin as a grassroots initiative by Indigenous women in Skid Row underlines this political and cultural dimension (United American Indian Involvement, Inc. 2025).

In summary, both organizations share a holistic, empowering, and community-based orientation and provide long-term support in precarious living conditions, but they differ in their specific target groups, socio-political framework conditions, and the central role of Indigenous identity and health care in the work of UAII compared to the primarily education- and family-centered approach of Lichtblick Hasenbergl.

1.6 Related Laws in Munich and Los Angeles

Legal Basis of Work – Familienzentrum Lichtblick Hasenbergl

a) Federal Law – Social Code Book VIII (SGB VIII: Child and Youth Welfare Act)

§ 1 SGB VIII: Right of young people to education, development, and participation

§ 2 SGB VIII: Tasks of youth welfare (support for young people and families, child protection)

§ 11 SGB VIII: Youth work (open, leisure, cultural activities)

§ 13 SGB VIII: Youth social work (support in education and employment)

§§ 16–18 SGB VIII: Parenting and family support

§§ 27 ff. SGB VIII: Educational assistance in individual cases

§ 8a SGB VIII: Child protection mandate (assessment of child endangerment)

b) Civil and Fiscal Law

§§ 21–79 BGB: Legal form of a registered association (eingetragener Verein)

§ 75 SGB VIII: Recognition as a Träger der freien Jugendhilfe (independent provider)

§§ 51–68 AO: Non-profit and charitable status

c) State and Municipal Law (Bavaria / Munich)

BayKJHG: Bavarian Child and Youth Welfare Act – supplements SGB VIII with state-specific funding and recognition rules

City of Munich Funding Guidelines (RBS): Regulate municipal support for youth and family centers; relevant for institutions like Lichtblick Hasenbergl

d) Additional Legal Frameworks

SGB II / SGB XII: Basic social security and welfare benefits for families

SGB IX: Inclusion and participation of children and youth with disabilities

GDPR & BDSG: Data protection and confidentiality obligations

Related Laws/Policies in Los Angeles

Provided by Maddy Hermandez and John Morse

a.) LOCAL

In Los Angeles, there is a local policy called General Relief which allows for people to receive up to $221 per month for nine out of twelve months in a year. GR is only available to those whose monthly net income is lower than $221.

GAIN, or Greater Avenues for Independence, is a related policy through CalWORKS that provides support to those looking for gainful employment. It provides job trainings and cash assistance, among other supports.

b.) STATE

CalFresh: CalFresh provides food assistance for low-income individuals and families. Households (individuals/families) at 130% of the federal poverty level are eligible.

CalWORKs: CalWORKs is a temporary financial assistance program aimed at employing parents of minor children. Adults can receive cash aid for five years out of their lifetime, though their children may continue to receive benefits. Eligibility criteria include income, the work status of the parents, and wealth.

Medi-Cal: Medi-Cal provides low-income Californians with low-cost health insurance. If a family's income is 138% of the federal poverty level for its size, then the family is eligible for coverage.

c.) FEDERAL

In 1990, the US government passed the Child Care and Development Block Grant Act. This block grant provides discretionary funding for childcare services for children up to 13 years old. Eligibility requirements are relatively lenient, as families can have up to 85% of the median state income and still be eligible. In California, some of this block grant goes to universal preschool (SB120)

The Indian Child Welfare Act (ICWA) was a federal law that changed the way American Indian and Alaskan Native families were treated by social services agencies.

The ongoing federal government shutdown has caused SNAP benefits, which includes CalFresh, to not be issued for the month of November.

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2. Emergency Child Protection – ‘Inobhutnahme’ in Munich and Los Angeles

Kalisha James

Laura Schuster

Anna-Sharon Wittke

2. Emergency Child Protection – 'Inobhutnahme' in Munich and Los Angeles

Laura Schuster, Anna-Sharon Wittke, Andrea Nagy

2.1 Introduction

Emergency child protection — known in Germany as "Inobhutnahme" — is a core field of social work within the child welfare system. It refers to the immediate, temporary removal of children or adolescents from their living environment when their well-being is at acute risk. This protective measure is regulated by § 42 SGB VIII (German Child and Youth Welfare Act) and can be initiated either by the Youth Welfare Office (Jugendamt), by police, or at the child's own request (Zentrum Bayern Familie und Soziales [ZBFS], n.d.a).

The primary goal of an Inobhutnahme is to ensure the child's safety and to create a secure, stable, and supportive temporary environment. This usually involves placing the child in an emergency shelter, a crisis center, or a foster family. During this period, social workers assess the child's situation, provide psychological support, and develop an initial action plan for further steps. The Youth Welfare Office plays a central role, acting both as a protector of children's rights and as a coordinator of support services. Its responsibilities include assessing the urgency of the situation, ensuring the child's safety, making decisions about temporary placements, mediating with parents or guardians, and planning long-term protective measures when necessary (ZBFS, n.d.a).

The guiding principle behind the temporary social-educational intervention measure is both to protect the minor and to clarify their future prospects. Child safety constitutes the highest priority within the framework of an Inobhutnahme, and all decisions taken during this process are guided by the objective of protecting the child from harm. The measure is explicitly temporary in nature and is intended as a crisis intervention rather than a long-term solution, allowing time for comprehensive assessments and the development of appropriate follow-up support (ZBFS, n.d.a).

In contemporary child welfare practice, increasing importance is placed on the participation of children and adolescents, requiring that their perspectives, needs, and expressed wishes are actively considered in decision-making processes. Effective implementation further depends on close interinstitutional cooperation, as Youth Welfare Offices work in collaboration with schools, law enforcement agencies, therapeutic services, and crisis intervention centers. At the same time, a growing number of cases presents significant structural challenges, with many Youth Welfare Offices reporting rising workloads, staff shortages, and a lack of adequate placement options (ZBFS, n.d.b).

The contemporary relevance of emergency child protection is underscored by ongoing debates around professional decision-making under uncertainty, the role of reflective casework, and the challenge of balancing child safety with proportionality and family support. As Kampe (2025) argues, professional practice in social work cannot rely on standardized technocratic knowledge and always requires well-founded, situation-sensitive action. This is particularly true in emergency child protection, where decisions are not only shaped by legal requirements but also by the professional judgment, biographical experiences, and unconscious dynamics of the social workers involved (Kampe, 2025). Reflective methods such as work discussion therefore play an important role in developing the competencies necessary to navigate these complex and high-stakes decisions effectively.

2.2 Data from Munich and Los Angeles

In 2024, youth welfare services in Germany assured care for approximately 69,500 children and young people under § 42 SGB VIII, representing a decline of around 7% compared to the previous year (Destatis, 2025). In Bavaria 23 407 referrals. The most frequent cause of intervention was the unaccompanied entry of children and adolescents from abroad, accounting for 44% of all cases. Situations involving an acute risk to the child's welfare constituted 42% of the total, while cases arising from parental overload represented 25%. Self-reports by minors themselves made up 13%, while physical abuse accounted for 11% and psychological abuse for 8% of all interventions (Destatis, 2025). Risk assessment plays a central role in decisions regarding child protection measures, with standardized survey and assessment instruments applied to support consistency and reliability in evaluating potential risks to the child's well-being (DIJuF, 2025). Many Youth Welfare Offices continue to face significant structural challenges including staff shortages and a lack of adequate placement options (ZBFS, n.d.b).

In 2022, the Los Angeles Department of Children and Family Services (DCFS) received a total of 134,940 referred children through its Emergency Response system across 72,409 referrals. As of December 31, 2022, a total of 27,380 children were receiving child welfare services (County of Los Angeles DCFS, 2023). The most common reason for referral was general neglect, accounting for 34.3% of all referral children, followed by cases where a child was considered at risk due to a sibling's abuse (19.7%), emotional abuse (16.5%), and physical abuse (16.3%) (County of Los Angeles DCFS, 2023). Upon receiving a referral, the DCFS Child Protection Hotline acts as the central point of entry for all reports of suspected child abuse, neglect, or exploitation and assigns a response time according to the assessed level of risk (County of Los Angeles DCFS Policy Institute, n.d.). In emergency cases, a worker will be at the home within the hour; otherwise a social worker will visit within five days to begin the investigation process (County of Los Angeles DCFS, n.d.). Under WIC § 306, social workers are authorized to take a child into temporary custody without a warrant when the child has an immediate need for medical care or is in immediate danger of physical or sexual abuse (California Legislature, 2024). If a child is removed from the home, a detention hearing in accordance with WIC § 319 must be held within 72 hours of the child being taken from the home (California Legislature, 2022).

Side-by-Side Comparison: Los Angeles vs. Munich

Category	Los Angeles (DCFS)	Munich (Jugendamt)
Legal basis	California WIC § 300, § 306, § 319 (California Legislature, 2022, 2024)	§ 42 SGB VIII (ZBFS, n.d.a)
Cases (most recent year)	27,380 children in active caseload; 134,940 referral children in 2022 (County of Los Angeles DCFS, 2023)	~69,500 Inobhutnahmen in 2024 in entire Germany , in Bavaria 23 407 referrals (Destatis, 2025)
Most common reason	General neglect 34.3% (County of Los Angeles DCFS, 2023)	Unaccompanied minors from abroad 44% (Destatis, 2025)
Child self-referral	Not possible	Legally possible under § 42 SGB VIII (ZBFS, n.d.a)
Response timeline	Within the hour (emergency) or within 5 days (County of Los Angeles DCFS, n.d.)	Immediate when acute danger confirmed (Reddel, 2025)
Court involvement	Required within 72 hours of removal (California Legislature, 2022)	Only when parents actively oppose removal (Reddel, 2025)

Removal without warrant	Possible under WIC § 306 (California Legislature, 2024)	Possible for up to 3 working days under § 42 SGB VIII (ZBFS, n.d.a)
Placement preference	Foster families; extended family (County of Los Angeles DCFS, 2023)	Emergency shelters, crisis centers, foster families (ZBFS, n.d.a)
Primary authority	DCFS — reactive, investigation-focused	Jugendamt — preventive and reactive (ZBFS, n.d.b)

Both systems share the fundamental goal of protecting children from harm, but differ significantly in their procedural approach. The German system prioritizes proportionality and the least restrictive intervention, while the American system tends toward a stronger emphasis on legal compliance and risk prevention, sometimes resulting in more rapid removal decisions (County of Los Angeles DCFS, 2023; Reddel, 2025).

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2.3 A Munich Social Work Organization That Deals With These Issues

The Stadtjugendamt München — the Munich City Youth Welfare Office — is the central statutory authority responsible for emergency child protection in Munich. As a department of the Landeshauptstadt München Sozialreferat, it operates as a government institution responsible for child and youth welfare, offering a wide range of services including acting as a central contact point for parents, children, and young people, intervening in urgent cases, and following up on any reports of child endangerment (ZBFS, n.d.a).
Under § 42 SGB VIII, the Jugendamt is authorized to take a child or young person into temporary care when their well-being is acutely endangered, when the child independently requests protection, or when an unaccompanied foreign minor arrives without parents or guardians in Germany. During the period of care, the Youth Welfare Office is authorized to take all legal actions necessary to protect the welfare of the child or adolescent (ZBFS, n.d.a). Risk assessment is a structured and central part of the Jugendamt's work, involving consultation with a team of experts, standardized assessment instruments, and close interinstitutional cooperation with schools, police, therapeutic services, and crisis centers (DIJuF, 2025).
The Jugendamt further assumes responsibility for informing legal guardians immediately and involving them in the risk assessment process. If guardians object to the placement and a risk to the child's welfare persists, the case is referred to the family court, which may impose protective measures under § 1666 BGB (Reddel, 2025). Even after the period of care has ended, the Jugendamt may continue to offer support to ensure long-term stability for the child and family (Reddel, 2025).

A Lived Client-Experience from Munich

A girl aged 15 was sexually abused by her older brother. Even though she told her family members, nobody believed her. They even accused her of lying. Because of § 42 SGB VIII she was able to take herself into care. She reported herself to the Youth Welfare Office and was immediately taken into care. § 42 SGB VIII says: "The youth welfare office is entitled and obliged to take a child or young person into care if the child or young person requests care." The girl did not need anyone else to act on her behalf — the legal framework gave her the agency to protect herself.

2.4 A Los Angeles Social Work Organization That Deals With These Issues

Provided by Kalisha James

The Department of Children and Family Services (DCFS) is the primary child welfare agency in Los Angeles County. It serves as the central authority for child protection, foster care, family support, and emergency response in the region (County of Los Angeles DCFS, 2023). When DCFS receives a referral, the Child Protection Hotline acts as the central point of entry for all reports of suspected abuse, neglect, or exploitation and assigns a response time according to the assessed level of risk (County of Los

Angeles DCFS Policy Institute, n.d.). In emergency cases, a social worker will visit the home within the hour; for lower-risk cases, the visit takes place within five days to begin the investigation process (County of Los Angeles DCFS, n.d.a). Emergency Response social workers conduct home visits, interview all relevant parties, and use standardized state guidelines to make safety assessments. Outcomes following an investigation may include allowing the child to remain at home, offering voluntary family services, or detaining the child under WIC § 306 to ensure protection (California Legislature, 2024). If a child is removed from the home, a detention hearing in accordance with WIC § 319 must be held within 72 hours of the child being taken from the home (California Legislature, 2022b).

A key distinction from the German system is that in the United States, children themselves cannot request to be taken into care. Reports are typically made through a hotline, which determines whether the case is reportable (County of Los Angeles DCFS Policy Institute, n.d.). Child abuse investigations must be completed within 30 calendar days of the initial face-to-face contact (County of Los Angeles DCFS Policy Institute, n.d.b). Following the investigation, cases may be monitored through ongoing follow-up reviews over a period of up to six months or longer depending on the outcome (County of Los Angeles DCFS, n.d.b).

A Lived Client-Experience from Los Angeles

Provided by Kalisha James

A mother had an open case with DCFS due to issues related to substance abuse. She voluntarily transferred temporary custody of her son to his maternal grandmother, as managing her substance use while fulfilling her responsibilities as a mother and dealing with an eviction had become increasingly challenging. The grandmother subsequently contacted a hotline to initiate legal proceedings, resulting in the involvement of DCFS. The son, now 10 years old, had the case open for a year, with proceedings moving toward legal guardianship or adoption. Eleven months later, the mother had achieved sobriety, enrolled in treatment programs, engaged in therapy, and secured stable housing — all independently, without requirements from DCFS. She subsequently gave birth to a second child and remained drug-free. However, a referral was made for a general neglect investigation regarding the newborn, stemming from the ongoing case with the older child. Following a 30-day investigation, the recommendation was made to remove the newborn, who was subsequently placed with the grandmother alongside the older sibling.

2.5 Comparison of the Organizations

The Stadtjugendamt München and the Los Angeles DCFS both fulfil the core mandate of emergency child protection within their respective national contexts, yet they differ significantly in their procedural logic, legal frameworks, and underlying professional philosophy.

A fundamental structural difference lies in the possibility of child self-referral. Under § 42 SGB VIII, children and young people in Germany have the explicit legal right to request to be taken into care independently, without requiring an adult to act on their behalf. This provision empowers minors as active agents in their own protection, as illustrated in the case of the 15-year-old girl who was able to access emergency care without anyone else intervening on her behalf. In the United States, no comparable right exists: reports must be made through a hotline, and children cannot initiate the process themselves.

The investigation and decision-making timelines also differ considerably. In Germany, when acute danger is confirmed, the Jugendamt may take a child into temporary care immediately, holding them for

up to three working days without a court order (Reddel, 2025). Court involvement is triggered only when parents actively oppose the removal. In Los Angeles, by contrast, the investigation process following a referral may extend up to 30 days, with monthly follow-ups permitted over six months. Court involvement is not automatic and may require additional council approval.

The underlying intervention philosophy also differs. The German system is guided by the principle of proportionality: before removal is considered, other less intrusive measures must be exhausted, and intervention must be appropriate and proportionate to the identified risk. If intervention is deemed necessary at all, it will often result in socio-educational family assistance under § 31 SGB VIII rather than removal. The U.S. system, as illustrated by the case of the newborn's removal despite the mother's demonstrated recovery, tends to prioritize institutional risk prevention, sometimes resulting in removal decisions that may not reflect the current situation of the family.

Placement options also differ. In the United States, foster homes within the extended family network — such as placement with grandparents — are more prevalent than group homes, which are not specifically tailored to children's needs. In Germany, emergency shelters and crisis facilities specifically designed for children and adolescents are the primary placement options. Both systems, however, share the practice of not necessarily involving police in the process and providing emergency care immediately when required.

Despite these differences, both organizations are clearly oriented toward acting in the best interests of the child. The comparative analysis suggests that neither system is without limitations, but that the German emphasis on proportionality, family support, and child participation might offer important lessons for systems that tend toward more reactive, removal-focused approaches.

2.6 Related Laws in Munich and Los Angeles

Legal Basis of Work – Stadtjugendamt München / German Child Welfare Law

The work of the Stadtjugendamt München in the field of emergency child protection is grounded in several key provisions of the German Social Code, Book VIII (SGB VIII).

§ 1 SGB VIII establishes the overarching mandate of child and youth welfare, affirming every young person's right to support for their development and protection from harm. § 8a SGB VIII specifies the duty of protection, regulating the procedure to be followed when there are serious indications of a possible risk to a child's welfare and describing the steps required for a professional assessment of individual risk (ZBFS, n.d.b). If the assessment reveals a risk to the child's welfare, the Youth Welfare Office is obliged to offer appropriate assistance and to define binding protective measures in cooperation with the legal guardians (ZBFS, n.d.b).

§ 42 SGB VIII is the central legal provision governing Inobhutnahme, authorizing the Youth Welfare Office to take a child into temporary care when their well-being is acutely endangered, when the child independently requests protection, or when an unaccompanied foreign minor arrives in Germany without parents or guardians (ZBFS, n.d.a). § 42a SGB VIII specifically governs the provisional care of unaccompanied foreign minors, requiring the appointment of a legal guardian without delay to ensure proper legal representation (ZBFS, n.d.a).

§ 87 SGB VIII determines which local Youth Welfare Office bears responsibility for a given case, typically the office covering the child's last place of residence prior to the protective measure (Reddel,

2025). § 1666 BGB (German Civil Code) empowers the family court to impose protective measures when a child's welfare is endangered and parents fail to provide adequate protection (Reddel, 2025).

Related Laws / Policies in Los Angeles

Child welfare agencies comply with the California Welfare and Institutions Code (WIC), which encompasses foster care, social services, child protection, and juvenile law, in contrast to penal codes that relate to criminal laws and are primarily applicable to adults (California Legislature, 2022a). WIC § 300 specifically addresses child abuse or neglect, making it the most commonly cited code in child welfare practice. This situation may lead to a child being taken from their home, thereby necessitating the placement of the child in foster care, with relatives, or under the oversight of the court (California Legislature, 2022a). For a child removal WIC § 300 provides the legal basis for detention, defining the circumstances under which a child can be detained because of abuse, neglect, or immediate danger (California Legislature, 2022a). WIC § 306 grants social workers the authority to take a child into temporary custody without a warrant, a measure typically used during emergencies involving physical abuse, severe neglect, or an unsafe home environment (California Legislature, 2024). Within 72 hours after detainment, a detention hearing must be held in accordance with WIC § 319 (California Legislature, 2022b).

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3. Mandatory Reporting of Child Protection Violations

Will Park
Alex Morse
Grace Wilkim

Antonia Lieb
Natalie Perlak
Selina Jahrmatter

3. Mandatory Reporting of Child Protection Violations

Antonia Lieb, Natalie Perlak, Selina Jahrmatter, Andrea Nagy

3.1 Introduction

Mandatory reporting — known in Germany as the *Schutzauftrag bei Kindeswohlgefährdung* — is a central instrument of child protection in both the German and U.S. child welfare systems. It refers to the legal obligation of specific professional groups to report known or reasonably suspected cases of child abuse or neglect to the competent authorities. The purpose of mandatory reporting frameworks is to ensure that children who are at risk of harm are identified as early as possible and that appropriate protective measures can be initiated without delay.

According to Article 6, Paragraphs 2 and 3 of the German Basic Law (*Grundgesetz*, GG), parents have the primary right and duty to raise their children. If parents fail in their duties, the state must intervene. Before addressing the procedure within the responsible authority, various key terms have to be defined. These include children's rights, the best interests of the child, the so-called child's welfare, and endangerment of the child's welfare.

Children have rights and are entitled to those rights from birth. The UN Convention on the Rights of the Child established those rights. Germany and many other states have signed this agreement. There are three important rights to highlight in relation to children's rights. The first refers to children's health. According to Articles 2, 27, and 33 of the UN Convention on the Rights of the Child, children have the right to live healthy lives and to grow up in a clean and safe environment. The second right is found in Articles 5, 9, 18, and 20. It refers to parental care and means that all children have the right to love and parental care, as well as the right to a safe home. Lastly, Articles 11, 19, 32, 34, 35, 36, 37, 39, and 40 can be summarised together. All of them relate to protection from violence. It can be stated that all children have the right to protection from physical, psychological, and sexual abuse, as well as from neglect, exploitation, and other forms of maltreatment.

As a general principle of child welfare, children have the right to grow up safe and happy. The most important responsibility of parents is to ensure the well-being of their children. In order to support good development and safeguard children's welfare, parents must support and protect their children's development and provide for their basic needs – for example, food, clothing, adequate hygiene, housing, protection from danger, and healthcare. The use of any form of violence, whether physical, sexual, or emotional, is prohibited and must be prevented.

If a child's welfare is endangered, it means that the child's physical or psychological well-being is at risk. This may occur through neglect of physical or emotional needs, psychological or physical abuse, sexual abuse, or domestic violence. Not every such situation automatically constitutes endangerment of the child's welfare, which is why it is important to investigate when there is reasonable cause for concern. This investigation is carried out by the Youth Welfare Office (*Jugendamt*).

Every Youth Welfare Office has a General Social Services department (*Allgemeiner Sozialer Dienst*, ASD). The professionals in the ASD provide counselling, coordinate support services, and are responsible for child protection within the Youth Welfare Office. They inform people about the support and

assistance to which they are legally entitled. Together with those seeking advice, they develop a plan to improve difficult situations.

How does the General Social Services (ASD) work in child protection?

Parents are considered experts on their children. According to the German Basic Law, parents have the right to raise their children. If the Youth Welfare Office suspects that children or young people may be at risk, it becomes active, offers help to families, and ensures the protection of the children or young people involved. The Youth Welfare Office is legally required to do so under Book VIII of the German Social Code (*Sozialgesetzbuch*, SGB VIII), Section 8a (SGB VIII § 8a).

The Youth Welfare Office decides in each individual case:

- How serious and immediate is the danger to the child?
- What options exist to protect the child? This may involve support within the family or placement outside the family.
- Is it necessary and justified to act against the parents' wishes?

If the Youth Welfare Office determines that there is a risk to a child's well-being, it contacts the family and the affected child. Staff members of the Youth Welfare Office visit the family at home to assess the child's living and family situation. Together with the parents, they consider what measures are necessary to ensure the child's long-term well-being. If the parents do not accept the offered assistance or are unwilling to cooperate, the Family Court (*Familiengericht*) must be involved. The Family Court can require the parents to accept the Youth Welfare Office's support or make decisions regarding parental custody and the child's future place of residence.

If children are in acute danger, the Youth Welfare Office must take them into temporary protective custody (*Inobhutnahme*) until a decision is made by the Family Court. This is a legal obligation under Book VIII of the German Social Code, Section 42 (vgl. SGB VIII § 42).

Children in distress can also contact the Youth Welfare Office directly. The office can provide them with a temporary safe place to stay. This decision is made by the District Social Work departments in the Social Citizen Houses (*Sozialbürgerhäuser*) after a careful assessment of necessity. If needed, the child or young person is placed in a safe shelter (*Schutzstelle*). There, their situation is assessed to determine whether they should be referred to further support services or – if possible – returned home. Children can also contact a Social Citizen House directly to request protective custody themselves.

During the period of protective custody, an assessment of the child's or young person's needs takes place (for example, regarding therapeutic support, youth welfare services, or other necessary measures). Parents are involved in this process. School attendance remains compulsory during protective custody. Depending on age and individual needs, there are different types of shelters, such as those specifically for girls or young children. In Munich, these responsibilities of the Youth Welfare Office are handled by the District Social Work departments located in the Social Citizen Houses (*Sozialbürgerhäuser*) and the Office for Housing and Migration (Deutsche Gesellschaft für Kinderschutz in der Medizin 2022).

In Germany, the legal framework governing mandatory reporting is embedded primarily in § 8a of the Social Code, Book VIII (SGB VIII), which regulates the duty of protection of Youth Welfare Offices and the operators of child welfare services, and in § 4 of the Act on Cooperation and Information in Child Protection (Gesetz zur Kooperation und Information im Kinderschutz (KKG)), which extends reporting obligations to professionals bound by professional secrecy, such as physicians, teachers, and psychologists (Bundesministerium der Justiz, 2011). In the United States, and specifically in California,

mandatory reporting is governed by the Child Abuse and Neglect Reporting Act (CANRA), codified in California Penal Code § 11165.7, which defines an extensive list of mandated reporters and specifies their obligations (California Legislature, 2023a).

Both systems reflect a shared recognition that the early identification of child endangerment is a societal responsibility that extends beyond the immediate family. At the same time, the two frameworks differ significantly in their scope, the professional groups they include, the mechanisms they use, and the extent to which they have generated debate about over-reporting and disproportionate impacts on marginalized communities (Los Angeles County Board of Supervisors, 2023). In Germany, the tension between professional confidentiality and the duty to report continues to be a subject of ongoing legal and ethical discussion (Kinderschutz in NRW, 2021). These debates reflect a broader challenge facing child welfare systems worldwide: how to balance the imperative of child protection with the rights and dignity of families, and how to ensure that reporting mechanisms serve their intended purpose of safeguarding children rather than inadvertently causing harm.

Reflective professional practice plays a crucial role in this context. As Kampe (2025) argues, professional action in social work cannot rely on standardized technocratic knowledge and always requires situation-sensitive judgment. This is particularly relevant for mandatory reporting, where professionals must navigate complex legal obligations, ethical considerations, and interpersonal dynamics in often ambiguous and high-pressure situations.

3.2 Data from Munich and Los Angeles

In Bavaria specifically, data on child welfare risk assessments is collected by the Bayerisches Landesamt für Statistik (2025), which documents regional trends in the implementation of the § 8a SGB VIII duty of protection.

Under German law, the duty to report rests not with individuals generally, but with specific professional actors. § 8a SGB VIII obliges the Youth Welfare Office itself to act when significant indicators of endangerment become known, conducting risk assessments in collaboration with multiple professionals (ZBFS, n.d.b). § 4 KKG addresses professionals bound by secrecy — such as physicians, midwives, teachers, and psychologists — granting them the right to consult an experienced specialist (Insoweit erfahrene Fachkraft) and, where necessary, to transmit relevant information to the Youth Welfare Office, even where this would normally be prohibited by professional confidentiality (Bundesministerium der Justiz, 2011).

In 2022, DCFS received a total of 134,940 referred children through 72,409 referrals. As of December 31, 2022, 27,380 children were receiving active child welfare services (County of Los Angeles DCFS, 2023). General neglect was the most common allegation, accounting for 34.3% of all referred children (County of Los Angeles DCFS, 2023). Under CANRA, mandated reporters in California include teachers, school administrators, social workers, police officers, physicians, mental health clinicians, and a wide range of other professionals (California Legislature, 2023a). In 2022, educators were the second-largest group of mandated reporters in Los Angeles County, responsible for 23% of all reports — yet only 6% of those reports were subsequently substantiated, the lowest substantiation rate of any reporter group (The Imprint, 2023). Law enforcement accounted for the highest substantiation rate, with 33% of their reports relating to emotional abuse, typically linked to domestic violence exposure (The Imprint, 2023). Mandated reporters in Los Angeles must report both verbally to the Child Protection Hotline and in writing within 36 hours, using the Child Abuse Reporting Electronic System (CARES) (Electronic Mandated Reporter, n.d.; County of Los Angeles DCFS, n.d.c).

Side-by-Side Comparison: Los Angeles vs. Munich

Category	Los Angeles	Munich
Legal basis	CANRA, California Penal Code § 11165.7; § 11166 (California Legislature, 2023a, 2023b)	§ 8a SGB VIII; § 4 KKG (ZBFS, n.d.b; Bundesministerium der Justiz, 2011)
Who must report	Defined list of approx. 50+ professional groups (California Legislature, 2023a)	Youth Welfare Office (§ 8a); professional secrecy holders with consultation right (§ 4 KKG)
General public	May report anonymously; not legally obligated (County of Los Angeles DCFS, n.d.c)	Not legally obligated; encouraged to report (ZBFS, n.d.b)
Confirmed cases (2022/2024)	134,940 referral children (2022) (County of Los Angeles DCFS, 2023)	~72,800 confirmed endangerments in Germany(2024) (Destatis, 2025a)
Most common type	General neglect 34.3% (County of Los Angeles DCFS, 2023)	Neglect and psychological maltreatment (Destatis, 2025a)
Largest reporter group	Law enforcement and educators (The Imprint, 2023)	Police and judiciary 31%; general public 21% (Destatis, 2025a)
Substantiation rate	~1 in 10 overall; educators 6% (Casey Family Programs, 2023)	Not reported as single national figure
Reporting mechanism	Verbal + written within 36 hours via CARES (Electronic Mandated Reporter, n.d.)	Consultation with experienced specialist; referral to Jugendamt (Bundesministerium der Justiz, 2011)
Current reform debate	Over-reporting, racial disproportionality, over-surveillance (Los Angeles County Board of Supervisors, 2023)	Tension between professional secrecy and duty to report (Kinderschutz in NRW, 2021)

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3.3 A Munich Social Work Organization That Deals With These Issues

The Stadtjugendamt München — the Munich City Youth Welfare Office — is the central statutory authority responsible for implementing the mandatory reporting framework in Munich. As a department of the Landeshauptstadt München Sozialreferat, the Jugendamt acts as both the primary recipient of reports of suspected child endangerment and the authority responsible for conducting risk assessments and initiating protective measures (ZBFS, n.d.a).

Under § 8a SGB VIII, whenever the Jugendamt receives significant indicators of a possible endangerment of a child's welfare, it is legally obliged to assess the risk in collaboration with multiple professionals (Zusammenwirken mehrerer Fachkräfte). This multi-professional approach is a defining feature of the German system and distinguishes it from systems that rely primarily on individual reporting obligations. Where necessary, the Jugendamt must obtain a direct impression of the child and their personal environment — for example through a home visit — and must involve the legal guardians and the child in the assessment process, insofar as this does not jeopardize the child's effective protection (ZBFS, n.d.b).

The Jugendamt also plays a crucial role in supporting professionals bound by professional confidentiality — including physicians, psychologists, and teachers — who suspect child endangerment within their work contexts. Under § 4 KKG, these professionals have the right to consult an Insoweit erfahrene Fachkraft (an experienced specialist in child protection) associated with the Jugendamt, and

may transmit relevant pseudonymized data to enable this consultation (Bundesministerium der Justiz, 2011). If, following consultation, the professional believes the endangerment cannot be averted through other means, they are authorized to transmit the information necessary for the Youth Welfare Office to fulfil its duty of protection, even where this would normally be prohibited by professional secrecy (Bundesministerium der Justiz, 2011).

The Jugendamt München collaborates closely with schools, medical professionals, police, crisis centers, and non-statutory providers of child and youth welfare services in implementing the mandatory reporting framework. Binding agreements (Vereinbarungen) between the Jugendamt and service providers ensure that procedural standards for the duty of protection are consistently applied across all institutions working with children and young people (ZBFS, n.d.b).

A Lived Client-Experience from Munich

A teacher at an elementary school in Munich noticed over several weeks that a seven-year-old girl, Lena (name changed), was increasingly withdrawn, frequently arrived at school without breakfast, and showed visible signs of physical neglect. Unsure whether her concerns were sufficient grounds for a formal report, the teacher first consulted the school's designated child protection contact, who then arranged a consultation with the insoweit erfahrene Fachkraft affiliated with the Stadtjugendamt München, as provided for under § 4 KKG (Bundesministerium der Justiz, 2011). Following the consultation, the teacher and the school's social worker jointly transmitted the relevant information to the Jugendamt. The Jugendamt subsequently conducted a home visit, involved a multi-professional team in the risk assessment, and identified a need for support rather than acute endangerment. The family was offered socio-educational family assistance under § 31 SGB VIII, and Lena's situation stabilized over the following months. This case illustrates how the German framework's emphasis on consultation and graduated response can enable protective action while preserving family integrity.

3.4 A Los Angeles Social Work Organization That Deals With These Issues

Provided by Will Park, Alex Morse and Grace Wilkim

In Los Angeles County, the mandatory reporting framework is primarily implemented through the **Department of Children and Family Services (DCFS)** and its Child Protection Hotline, which serves as the central point of entry for all reports of suspected child abuse or neglect (County of Los Angeles DCFS Policy Institute, n.d.a). DCFS receives reports from mandated reporters — a legally defined group of over 50 professional categories including teachers, school administrators, social workers, police officers, physicians, mental health clinicians, and probation officers (California Legislature, 2023a) — as well as from members of the general public.

Upon receiving a report, the DCFS Child Protection Hotline screens the case using Structured Decision Making (SDM) tools to determine whether an in-person investigation is warranted and, if so, assigns a response priority (County of Los Angeles DCFS Policy Institute, n.d.a). Mandated reporters are required to make an immediate verbal report to the hotline and to follow up with a written report within 36 hours, using the Child Abuse Reporting Electronic System (CARES) (Electronic Mandated Reporter, n.d.). Non-mandated reporters may report anonymously and are protected from civil and criminal liability when reporting in good faith (County of Los Angeles DCFS, n.d.c).

In recent years, DCFS has been at the center of a significant reform debate regarding the mandatory reporting system. A motion endorsed by the Los Angeles County Board of Supervisors in 2023 called for a fundamental reassessment of the role of mandated reporters, citing evidence that the current system results in over-surveillance and disproportionate harm to communities of color (Los Angeles County Board of Supervisors, 2023). The motion noted that educators — who accounted for 23% of all reports in 2022 — had a substantiation rate of only 6%, raising serious questions about the accuracy and proportionality of reporting practices (The Imprint, 2023). In response, the county has been developing new training resources and decision-support tools for mandated reporters, as well as alternative reporting pathways designed to connect families with community support services rather than routing all concerns through the child welfare investigation system (Los Angeles County Board of Supervisors, 2023).

A Lived Client-Experience from Los Angeles

Provided by Will Park, Alex Morse and Grace Wilkim

A school counsellor at a Los Angeles public school became concerned about a ten-year-old boy, Marcus (name changed), whose teacher had reported that he frequently came to school hungry, wore dirty clothes, and sometimes fell asleep in class. As a mandated reporter under CANRA, the counsellor was legally required to report reasonable suspicion of child neglect to the DCFS Child Protection Hotline, regardless of whether abuse had been confirmed (California Legislature, 2023b). The counsellor called the hotline, obtained a referral number, and submitted the required written follow-up report via CARES within 36 hours (Electronic Mandated Reporter, n.d.). A DCFS Emergency Response social worker conducted a home visit within five days. The investigation revealed that the family was experiencing severe financial hardship following a period of unemployment, but that no abuse or neglect in the legal sense was present. The case was closed after 30 days without substantiation (County of Los Angeles DCFS, n.d.b). The family was referred to community support services but received no ongoing welfare support. This case illustrates the tension between the legal duty to report and the risk of subjecting families experiencing poverty-related difficulties to child welfare investigations with limited benefit.

3.5 Comparison of the Organizations

The Stadtjugendamt München and DCFS Los Angeles both occupy central roles in their respective mandatory reporting frameworks, yet they differ considerably in their institutional logic, procedural approach, and the way they balance child protection with family support.

A fundamental structural difference lies in the scope of the reporting obligation. Under California's CANRA, a legally defined list of over 50 professional categories is obligated to report known or reasonably suspected child abuse or neglect directly to the Child Protection Hotline (California Legislature, 2023a). This creates a broad, individual-level reporting obligation that generates a high volume of referrals — 134,940 referred children in Los Angeles County alone in 2022 (County of Los Angeles DCFS, 2023). In Germany, by contrast, the duty to report does not rest with individual professionals as such, but primarily with the Youth Welfare Office itself, which is triggered when significant indicators of endangerment become known (ZBFS, n.d.b). Professionals bound by professional secrecy, such as physicians and teachers, have a right — not an obligation — to consult an experienced specialist and, where necessary, to transmit information to the Jugendamt (Bundesministerium der Justiz, 2011). This graduated approach is designed to prevent over-reporting while ensuring that serious cases are escalated.

The difference in substantiation rates reflects this structural contrast. In Los Angeles, approximately one in ten reports is substantiated overall, with educators' reports substantiated at a rate of only 6% (Casey Family Programs, 2023). This has fuelled a significant reform debate about over-reporting, over-surveillance, and the disproportionate impact of mandatory reporting on Black and other marginalized communities (Los Angeles County Board of Supervisors, 2023). The German system, with its emphasis on multi-professional consultation before escalation, tends to produce fewer but more targeted referrals, though comparative substantiation data are not systematically available at the national level.

Both systems share a common challenge: the risk that poverty and material hardship may be misidentified as neglect. In Los Angeles, general neglect — which until 2023 did not explicitly exclude economic disadvantage — was the most common allegation type, accounting for 34.3% of all referred children in 2022 (County of Los Angeles DCFS, 2023). In Germany, neglect (Vernachlässigung) was also the most frequently confirmed form of endangerment in 2024 (Destatis, 2025a). Both systems are therefore confronted with the challenge of distinguishing between child endangerment that requires protective intervention and family situations that require social support rather than child welfare investigation.

3.6 Related Laws in Munich and Los Angeles

Legal Basis of Work — Munich

The mandatory reporting framework in Germany rests on two central legal provisions, both of which are directly relevant to the work of the Stadtjugendamt München.

§ 8a SGB VIII (Schutzauftrag bei Kindeswohlgefährdung) establishes the duty of protection of the Youth Welfare Office. Whenever significant indicators of a child's welfare being at risk become known to the Jugendamt, it is obliged to assess the endangerment risk in collaboration with multiple professionals. Where effective protection requires it, the Jugendamt must obtain a direct impression of the child and their personal environment, and must involve legal guardians and the child in the assessment process. If the assessment reveals a need for support, appropriate assistance must be offered. If acute danger is confirmed and a family court decision cannot be obtained in time, the Jugendamt must take immediate protective action, including Inobhutnahme (ZBFS, n.d.b).

§ 8a SGB VIII also imposes an extended duty of protection on operators of child welfare facilities and services, requiring them to enter into binding agreements (Vereinbarungen) with the Youth Welfare Office that ensure professionals employed by these services follow defined procedures when significant indicators of endangerment are observed (ZBFS, n.d.b).

§ 4 KKG (Gesetz zur Kooperation und Information im Kinderschutz) specifically addresses professionals bound by professional confidentiality — including physicians, dentists, midwives, psychologists, teachers, and social workers outside the public youth welfare system. When such professionals become aware of significant indicators of child endangerment in the course of their work, they are authorized under § 4 KKG to consult an experienced specialist (Insoweit erfahrene Fachkraft) and to transmit pseudonymized data for this purpose, without violating professional secrecy. If, following consultation, they conclude that the endangerment cannot otherwise be averted, they may transmit the information necessary for the Youth Welfare Office to fulfill its duty of protection (Bundesministerium der Justiz, 2011).

Since 2021, Youth Welfare Offices have also been obliged under § 4 (4) KKG to provide feedback to the reporting professional on whether significant indicators of endangerment were confirmed following the risk assessment — a provision designed to strengthen inter-professional cooperation in child protection (Kinderschutz in NRW, 2021).

Related Laws / Policies in Los Angeles

The mandatory reporting framework in California is governed primarily by the Child Abuse and Neglect Reporting Act (CANRA), codified in California Penal Code §§ 11164–11174.3. The central provisions relevant to the Los Angeles context are:

California Penal Code § 11165.7 defines the categories of mandated reporters — an extensive list of over 50 professional groups including teachers, school employees, social workers, police officers, physicians, mental health clinicians, probation officers, and clergy (California Legislature, 2023a). Mandated reporters are required to report known or reasonably suspected child abuse or neglect immediately upon obtaining the information, regardless of whether they have confirmed that abuse has occurred.

California Penal Code § 11166 specifies the duty and procedure for reporting. Mandated reporters must make an immediate verbal report to a child protective agency — in Los Angeles, the DCFS Child Protection Hotline — and must follow up with a written report (SCAR form) within 36 hours (California Legislature, 2023b; Electronic Mandated Reporter, n.d.). Failure to report is a misdemeanor under California law.

Assembly Bill (AB) 2085, which came into effect on January 1, 2023, amended the definition of general neglect to limit reportable neglect to circumstances where the child is at substantial risk of serious physical harm or illness, and explicitly excluded a parent's economic disadvantage from the definition of general neglect (Los Angeles County Board of Supervisors, 2023). This legislative change reflects the reform debate in Los Angeles and across California regarding the disproportionate impact of mandatory reporting on families experiencing poverty.

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4. Child and Youth Welfare in the Context of Parental Mental Illness

Sorendi Saldana
Charlie Anderson
Geselle Segura

Anh Nguyen Nguyen
Doğa Ürer
Iker Faido Pérez

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4.1 Introduction

Parental mental illness is one of the most significant and yet frequently under addressed risk factors in child and youth welfare. Children who grow up with a parent affected by mental illness — internationally referred to as Children of Parents with a Mental Illness (COPMI) — face a considerably elevated risk of developing emotional, behavioural, cognitive, and social difficulties that can have lasting consequences throughout their lives (Frontiers in Psychiatry, 2019). At the same time, the intersection of adult mental health services and child welfare systems presents a persistent structural challenge: both systems are confronted with the needs of these families, yet coordination between them often remains inadequate (Schone & Wagenblass, 2006, as cited in Schone & Wagenblass, 2012).

The scale of the issue is substantial. Globally, approximately one in four children lives with a parent who has a mental illness (Frontiers in Psychiatry, 2019). In Germany, an estimated 25% of children live with a parent affected by mental illness, placing them among the most significant target groups for prevention and early intervention in child welfare (ACAMH, 2026). Research consistently shows that children of parents with a severe mental illness (SMI) face up to a 50% risk of developing a mental illness themselves by the age of 20, with one third at risk of developing an SMI — a risk that is substantially shaped by the quality of the caregiving environment rather than genetic transmission alone (Frontiers in Psychiatry, 2022). Protective factors such as supportive relationships, strong family communication, and adequate socioeconomic resources can significantly moderate these risks (Frontiers in Psychiatry, 2022).

Parental mental illness affects child welfare across multiple dimensions simultaneously. It can impair parenting capacity, reduce parental responsiveness and warmth, increase household instability, and heighten the risk of neglect — particularly when accompanied by poverty, social isolation, or substance use (Kamis, 2021). Research using longitudinal data has found that poor parental mental health was among the strongest predictors of children's quality of life, affecting outcomes ranging from cognitive development to school performance and social functioning (The Imprint, 2022). At the same time, the evidence is clear that parental mental illness does not automatically render a parent unable to care safely for their child, and that with appropriate support, many families can remain together safely (Reedtz, 2023).

From a child welfare perspective, this creates a fundamental professional and ethical challenge: how to accurately assess the risks associated with parental mental illness without stigmatizing affected parents, and how to ensure that children's needs are met while supporting parental recovery and family integrity. This challenge is equally present in Germany and the United States, though the two systems approach it through different legal frameworks, institutional structures, and support philosophies.

As Kaku et al. (2022) note in their global commentary on child and adolescent mental health, poverty often leads to poor parental mental health, which in turn increases children's vulnerability to mental health difficulties. Addressing parental mental illness in child welfare therefore requires a holistic approach that integrates mental health support, family assistance, and child protection within a coherent and coordinated framework. Reflective professional practice — as described by Kampe (2025) in

the context of work discussion — is particularly important here, given the complex relational and emotional dynamics that professional encounters with mentally ill parents and their children invariably generate.

4.2 Data from Munich and Los Angeles

In Germany, an estimated 25% of all children live with at least one parent affected by mental illness (ACAMH, 2026). The BELLA study, a nationally representative population-based survey, identified parental mental health problems in 18.6% of a German sample of families with children aged 11–17, with depressive symptoms being the most frequent presentation (Plass-Christl et al., 2017). Children of parents with mental health problems showed significantly higher rates of mental health difficulties themselves compared to peers without affected parents (Plass-Christl et al., 2017).

Neglect and psychological maltreatment were the most frequently confirmed forms of child endangerment in 2024 in Germany (Destatis, 2025a). In 75% of all confirmed cases, the endangerment originated from a parent (Destatis, 2025a). Parental mental illness and parental overload (elterliche Überforderung) are among the most frequently cited contributing factors in endangerment assessments conducted under § 8a SGB VIII (ZBFS, n.d.b). In Bavaria, the Bayerisches Landesamt für Statistik (2025) documents regional trends in child welfare risk assessments that reflect these national patterns.

Despite the scale of the issue, systemic coordination between adult psychiatry and child and youth welfare services in Germany remains a structural challenge. Research has documented that both systems frequently operate in isolation from one another, limiting their collective capacity to respond adequately to the complexity of affected families (Schone, Wagenblass, 2012). Munich has developed a network of coordinated support services for children of mentally ill parents, including Sozialpsychiatrische Dienste (SPDi), the program SwiM (Sicher wachsen in München) run by Condrobs, and the KinderschutzZentrum München — all of which provide outreach, family support, and inter-institutional coordination (Münchner Hilfenetzwerke, n.d.).

In Los Angeles County, parental mental illness — alongside substance use and domestic violence — is one of the three most prevalent complex needs among families receiving Family Reunification services through DCFS (Cal State University Northridge, 2022). In the DCFS SPA 2 region alone, 21,629 parents experiencing substance abuse, mental illness, and homelessness were participating in family reunification services (Cal State University Northridge, 2022). DCFS uses a Forensic and Parenting Assessment Service (FPAS) — a voluntary assessment tool applied by licensed clinicians — to evaluate parental capacity in cases involving mental health, substance abuse, and domestic violence concerns (County of Los Angeles DCFS Policy Institute, n.d.c).

In 2022, DCFS opened active cases for a total of 27,380 children. Parents experiencing mental illness are disproportionately represented among families involved in the child welfare system, and parental mental health diagnoses have in documented cases been used as grounds for child removal even in the absence of direct evidence of harm to the child (USC Center for Health Journalism, 2023). Black mothers are disproportionately affected, with evidence that mental health diagnoses are more frequently cited in removal decisions involving Black families compared to white families, reflecting broader patterns of racial disproportionality in the Los Angeles child welfare system (USC Center for Health Journalism, 2023).

DCFS offers a range of mental health and family support services for parents with open cases, including the Partnerships for Families (PFF) program for high-risk families with children under five where parents are impacted by mental health issues, substance abuse, or domestic violence (County of Los

Angeles DCFS, n.d.d). Non-profit organizations such as SHIELDS for Families provide complementary community-based mental health and family preservation services specifically for families referred by DCFS (SHIELDS for Families, n.d.a).

Side-by-Side Comparison: Los Angeles vs. Munich

Category	Los Angeles (DCFS)	Munich / Germany (Jugendamt)
Prevalence	Parental Mental Illness (MI) among largest complex need groups in DCFS (Cal State University Northridge, 2022)	~25% of children live with a parent with MI (ACAMH, 2026)
Legal framework	WIC § 300; WIC § 306; CA Welfare & Inst. Code	§ 8a SGB VIII; § 4 KKG; § 27ff SGB VIII
Assessment approach	Voluntary FPAS by licensed clinician (County of Los Angeles DCFS Policy Institute, n.d.c)	Multi-professional risk assessment under § 8a SGB VIII (ZBFS, n.d.b)
Support philosophy	Reactive; family reunification with compliance requirements (USC Center for Health Journalism, 2023)	Proportionality; family support before removal (ZBFS, n.d.b)
Key risk	Racial disproportionality; MI cited in removal decisions (USC Center for Health Journalism, 2023)	Coordination gap between adult psychiatry and child welfare (Springer, 2012)
Removal threshold	Mental health diagnosis can contribute to removal under WIC § 300	Acute endangerment required; support must be offered first (ZBFS, n.d.b)
Support services	PFF program; SHIELDS for Families; DCFS mental health linkage (County of Los Angeles DCFS, n.d.d)	SPDi; SwiM (Condrobs); KinderschutzZentrum München (Münchner Hilfenetzwerke, n.d.)
Inter-system coordination	DCFS partnerships with DMH and DHS (County of Los Angeles, 2024)	Structural challenge; case-by-case cooperation prevails (Springer, 2012)

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4.3 Munich Social Work Organizations That Deals With These Issues

In Munich, the support network for children of mentally ill parents brings together several statutory and non-statutory institutions. A central actor is the Stadtjugendamt München, which, through its Allgemeiner Sozialer Dienst (ASD), coordinates family assessments and the initiation of appropriate support under SGB VIII when parental mental illness is identified as a risk factor for child welfare. The Jugendamt works in conjunction with specialized community psychiatry services (Sozialpsychiatrische Dienste / SPDi) to ensure that both the parent's and the child's needs are addressed within a coordinated framework (Münchner Hilfenetzwerke, n.d.).

A particularly relevant specialized program is SwiM — Sicher wachsen in München, run by the organization Condrobs. SwiM provides outreach-based educational and family support (aufsuchende Erziehungs- und Familienhilfe) specifically for families in which parents are affected by addiction or mental illness, enabling children to grow up safely alongside their affected parents where this is possible and appropriate (Münchner Hilfenetzwerke, n.d.). The program exemplifies the German system's emphasis on supporting family integrity while safeguarding children's development.

Additional relevant actors include the KinderschutzZentrum München, a specialist counselling and support centre for families in high-stress situations involving neglect, abuse, or psychological endangerment, and the Beratungsstellen für Eltern, Kinder und Jugendliche — municipal counselling centres staffed by psychologists, social pedagogues, and child psychiatrists — which provide consultation,

diagnostics, and therapeutic support for families dealing with parental mental health challenges (Landeshauptstadt München, n.d.). The Bavarian Society for Mental Health (Bayerische Gesellschaft für psychische Gesundheit e.V.) further supports parents in developing parenting competencies and promotes healthy child development alongside psychiatric support (Münchner Hilfenetzwerke, n.d.).

A persistent structural challenge documented in the research literature is the coordination gap between adult psychiatry — which treats the affected parent — and child and youth welfare services — which are responsible for the child. Both systems frequently operate within their own institutional logic and communicate primarily on a case-by-case basis rather than through systematic structures (Schone & Wagenblass, 2012). This interface problem (Schnittstellenproblematik) is recognized as a central obstacle to effective support for these families in the German-speaking context.

A Lived Client-Experience from Munich

Maria (name changed), a 34-year-old single mother of two children aged 4 and 7, had been diagnosed with recurrent depressive disorder. Following a severe depressive episode during which she was unable to care for her children for several weeks, a neighbour reported concerns to the Stadtjugendamt München. The ASD conducted a risk assessment under § 8a SGB VIII and determined that while the children were not in acute danger, there was a significant need for support. Rather than initiating an Inobhutnahme, the Jugendamt referred the family to SwiM, which provided outreach family support and coordinated with Maria's psychiatric care team to ensure continuity of care. Maria's elder child was offered a place at a therapeutic after-school program. Over several months, Maria's condition stabilized and her parenting capacity was maintained. The case illustrates how the German system's emphasis on graduated, proportionate support — rather than reactive removal — can protect both children's welfare and parental dignity when adequate resources are available (ZBFS, n.d.b; Münchner Hilfenetzwerke, n.d.).

4.4 Los Angeles Social Work Organizations That Deal With These Issues

SHIELDS for Families is a community-based non-profit organization based in South Los Angeles that serves individuals, children, and families through comprehensive and collaborative social services in the areas of child welfare, mental health, substance abuse treatment, and child and youth development (SHIELDS for Families, n.d.a). Founded in 1992, SHIELDS has been a long-standing partner of DCFS, serving families referred by DCFS and Probation with a focus on preventing child abuse and neglect, achieving permanency through reunification or guardianship, and improving child developmental outcomes (SHIELDS for Families, n.d.a).

In the context of parental mental illness, SHIELDS provides several directly relevant services. Its Family Preservation Assessment Services use licensed clinicians or registered interns and DCFS-approved assessment tools to evaluate parental strengths and challenges in families identified by DCFS as at risk due to mental health, substance abuse, or domestic violence issues. Services include in-home outreach counselling, home management support, and facilitation of Team Decision Making meetings (SHIELDS for Families, n.d.a). The organization's Adult Mental Health program provides behavioural health services to single adults and adult parents, including those participating in other SHIELDS programs as well as walk-in community members (SHIELDS for Families, n.d.b). The HUB Outpatient Mental Health Program specifically provides mental health services to children aged 0–21 and families involved in the Los Angeles County child welfare system, with the mission of ensuring that children and

families receive appropriate mental health services to maintain their family unit, support reunification, or help children adjust to out-of-home care (findhelp.org, n.d.).

SHIELDS additionally runs the Heros & Sheros program for children of parents with substance use disorders, addressing developmental, emotional, and academic challenges that arise in the context of parental addiction and mental illness (SHIELDS for Families, n.d.a). Its culturally sensitive approach — embedded in the South Los Angeles community it serves, where the majority of DCFS-involved families are Black or Hispanic — is a defining organizational strength.

A Lived Client-Experience from Los Angeles

In 2020, a Black mother in Los Angeles tested positive for methamphetamine and alcohol at the time of giving birth. DCFS became involved and — in addition to the substance use findings — cited a childhood bipolar disorder diagnosis as evidence that she was unfit to parent her children. All six of her children were removed from her care. Over the following years, the mother engaged with DCFS-mandated programs, including substance use treatment and mental health services, and was eventually able to reunite with her children. She later described her experience as illustrative of a system that, while ultimately providing resources, simultaneously used her mental health history as grounds for removal in ways that she experienced as disproportionate and stigmatizing. Her case was cited by DCFS itself as an example of the system's potential to force change in families' lives — though the use of mental health diagnoses in removal decisions has since attracted increasing critical scrutiny in the context of racial disproportionality debates in Los Angeles County (USC Center for Health Journalism, 2023; County of Los Angeles DCFS, n.d.d).

4.5 Comparison of the Organizations

Both SwiM/Stadtjugendamt München and SHIELDS for Families/DCFS Los Angeles operate at the interface between adult mental health and child welfare, seeking to support families in which parental mental illness creates risk for children. Despite their shared orientation toward family support and child safety, the two systems differ substantially in their institutional logic, assessment approach, and intervention philosophy.

The German approach, exemplified by the Munich network, is characterized by a graduated response that prioritizes outreach-based family support before any consideration of removal. Services such as SwiM are specifically designed to enable children to remain safely at home with their mentally ill parents wherever possible, with the explicit goal of avoiding family separation while ensuring child safety (Münchner Hilfenetzwerke, n.d.). The legal framework — particularly § 27 SGB VIII and its provisions for educational and family assistance — creates a statutory basis for this preventive, supportive approach. Removal under § 42 SGB VIII is reserved for situations of acute endangerment where less intrusive measures have been exhausted (ZBFS, n.d.b).

In Los Angeles, SHIELDS for Families similarly emphasizes family preservation and culturally sensitive support. However, the broader DCFS system within which it operates is considerably more reactive and legalistic in character. Parental mental illness — when identified by a mandated reporter or during an investigation — may trigger a DCFS case and, in some circumstances, child removal under WIC § 300, even in the absence of a specific incident of abuse or neglect (USC Center for Health Journalism, 2023). The documented use of mental health diagnoses in removal decisions, particularly in cases involving Black mothers, reflects a system in which the line between clinical risk assessment and institutional bias can become blurred (USC Center for Health Journalism, 2023).

A further key structural difference lies in inter-system coordination. Munich's support network involves formal cooperation between the Jugendamt, SPDi, and non-statutory providers such as SwiM — though the research literature identifies this coordination as an ongoing challenge (Schone, Wagenblass, 2012). In Los Angeles, DCFS has formal partnerships with the Department of Mental Health (DMH) and the Department of Health Services (DHS), and organizations such as SHIELDS serve as critical bridges between the child welfare and mental health systems (County of Los Angeles, 2024). Nevertheless, families affected by parental mental illness in Los Angeles continue to face significant barriers — including financial, logistical, and systemic — to accessing and maintaining the services required for family reunification (Witness LA, 2024).

Both systems would benefit from strengthened inter-institutional coordination and a more consistent application of the principle that parental mental illness, in itself, does not constitute a sufficient grounds for child removal in the absence of demonstrated harm to the child.

4.6 Comparisons of Organizations from Munich and Los Angeles

Munich Social Work Organization: LebensRäume

LebensRäume (Living Spaces) utilizes an innovative hybrid model to support families affected by mental illness. The organization integrates Home-based Therapy (HpT), educational support, and social psychiatric services into a low-threshold offering accessible without a formal application process. Their work focuses on preventing "maladaptive parentification," where children are forced into adult roles due to their parent's illness. They support parents with various conditions, including schizophrenia, affective disorders (depression, bipolar), and personality disorders.

A Lived Client-Experience from Munich

One client, a mother of two children (ages 5 and 11), has been visiting LebensRäume for two years while battling chronic depression that began after her first child's birth. Her illness has strained her relationship with her children and husband. Despite the stigma that prevents her from sharing her treatment with others, she finds emotional security at LebensRäume, where talking to other parents who share similar struggles provides her with the comfort and energy needed to continue her parenting role

A Los Angeles Social Work Organization: UAII

Provided by Sorendi Saldana, Charlie Anderson and Geselle Segura

United American Indian Involvement (UAII), established in 1974, serves the Native American community in Los Angeles and Orange Counties. UAII provides culturally sensitive healthcare by blending traditional Indigenous healing practices with modern behavioral health services. Their "Walking In a New Direction" (WIND) program specifically targets youth aged 12 to 24, focusing on suicide prevention, substance use intervention, and community resilience

A Lived Client-Experience from Los Angeles

Provided by Sorendi Saldana, Charlie Anderson and Geselle Segura

A 37-year-old mother of four, currently residing in a domestic violence shelter, was referred to UAII for therapy and case management. While she receives treatment for PTSD and generalized anxiety, three of her children also attend therapy to address nightmares and sleep issues resulting from witnessing parental violence. To avoid conflicts of interest, each family member is assigned a different therapist, while the family is encouraged to participate in cultural arts and crafts at the office to foster bonding

Comparison of the Organizations

Provided by Sorendi Saldana, Charlie Anderson and Geselle Segura

Approach: LebensRäume focuses on a therapeutic-educational hybrid aimed at structural relief and long-term family stability. UAII emphasizes culturally grounded, trauma-informed care that addresses historical trauma and social inequities alongside clinical needs. LebensRäume offers low-threshold services without formal applications to encourage early prevention. UAII allows for self-referrals but requires insurance and identification, though it also receives referrals from the Department of Family and Child Services. While both support the entire family, LebensRäume places a heavy emphasis on preventing parentification and providing daily structure (like homework supervision). UAII focuses on reconnecting youth to their heritage as a primary tool for mental wellness.

4.7 Related Laws in Munich and Los Angeles

Legal Basis of Work — Munich / Germany

Several provisions of the German Social Code, Book VIII (SGB VIII) are directly relevant to child and youth welfare in the context of parental mental illness.

§ 1 SGB VIII establishes every child's right to support for their development and upbringing, and obliges the state to promote and, where necessary, supplement parental responsibility.

§ 8a SGB VIII governs the duty of protection. When significant indicators of a child's welfare being endangered become known — including indicators associated with parental mental illness — the Youth Welfare Office must assess the risk in collaboration with multiple professionals, involve legal guardians and the child in the assessment, and offer appropriate assistance. Removal is only justified when support measures are insufficient to avert acute endangerment (ZBFS, n.d.b).

§ 27 SGB VIII provides the legal basis for educational assistance (Hilfen zur Erziehung), under which families are entitled to support — including socio-educational family assistance under § 31 SGB VIII and family-oriented residential care — when parenting capacity is impaired and the child's welfare requires intervention. These provisions create the statutory basis for outreach-based support programs such as SwiM.

§ 4 KKG enables professionals bound by confidentiality — including treating psychiatrists — to consult an experienced child protection specialist and, where necessary, transmit information to the Youth

Welfare Office in order to protect a child, even where professional secrecy would normally prohibit this (Bundesministerium der Justiz, 2011).

Related Laws / Policies in Los Angeles

Provided by Sorendi Saldana, Charlie Anderson and Geselle Segura

California Welfare and Institutions Code (WIC) § 300 defines the legal grounds for child dependency, including abuse, neglect, or situations where a parent's mental disability renders them unable to provide regular care. Under this provision, parental mental illness can constitute a basis for dependency proceedings when it is shown to impair parenting capacity and pose a risk to the child (California Legislature, 2022a).

WIC § 306 authorizes social workers to take a child into temporary custody without a warrant in emergency situations, including where the child faces immediate danger that may be linked to a parent's acute mental health crisis (California Legislature, 2024).

WIC § 319 requires a detention hearing within 72 hours of a child being removed from the home (California Legislature, 2022b).

Assembly Bill (AB) 2085 (effective January 1, 2023) narrowed the definition of general neglect to exclude economic disadvantage — a reform that has indirect relevance for families where poverty intersects with parental mental illness and was previously cited as general neglect (Los Angeles County Board of Supervisors, 2023).

Beyond statute, DCFS policy mandates the use of the Forensic and Parenting Assessment Service (FPAS) as a voluntary assessment tool for cases involving parental mental health, substance abuse, or domestic violence, aimed at providing evidence-based evaluation of parenting capacity rather than relying solely on clinical diagnosis (County of Los Angeles DCFS Policy Institute, n.d.c).

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5. Immigration and Child Welfare

Aileen Martinez
Jennifer Candela

Aina Belenguer
Celine Costa Stamer
Elif Sat

5. Immigration and Child Welfare

Aina Belenguer, Celine Costa Stamer, Elif Sat, Andrea Nagy

5.1 Introduction

Immigration and child welfare are deeply intertwined policy fields that reflect a society's commitment to protecting its most vulnerable members. As global displacement continues to rise — with unaccompanied minors accounting for 15.9% of all first-time asylum applicants under 18 in the European Union in 2024 (Eurostat, 2025) — child welfare systems in major receiving cities face growing pressure to respond effectively, equitably, and in accordance with international standards of child protection.

This text examines the intersection of immigration and child welfare in two major metropolitan contexts: Munich, Germany, and Los Angeles, California. Both cities are significant receiving centres for immigrant and refugee populations and both operate complex, institutionalised systems for the care of migrant children. Yet their approaches differ substantially, shaped by distinct national legal traditions, welfare philosophies, and political cultures.

Germany has developed a universalist child welfare framework under Book VIII of the Social Code (SGB VIII), which extends equal rights to all children regardless of nationality or migration status (Bundesamt für Migration und Flüchtlinge [BAMF], 2023). The United States, by contrast, operates a more residual, risk-based system, in which the child welfare and immigration systems intersect primarily through the courts and through specialised units such as the Los Angeles County Department of Children and Family Services Special Immigrant Status Unit (DCFS SISU) (Los Angeles County DCFS, 2019). These structural differences produce divergent experiences for unaccompanied and immigrant children.

Within the academic literature, recent scholarship has advanced understanding of several dimensions of this issue. Winkens et al. (2025) illuminate how unaccompanied refugee adolescents in the Netherlands maintain transnational family relationships across borders, stressing that these relationships are reciprocal, with adolescents not merely receiving care but also taking on active support roles for their families. Kılınç (2025) examines the educational trajectories of second-generation Turkish-German return migrants, showing how children caught between migration systems experience identity conflicts, structural disadvantages, and selective acculturation processes. Together, these studies underscore that the wellbeing of immigrant children cannot be reduced to legal status alone; it depends on social, cultural, and relational dimensions that welfare systems must be equipped to address.

This text is structured as follows. Section 1.2 presents comparative data on immigration and child welfare in Munich and Los Angeles. Section 1.3 introduces a Munich-based social work organisation working in this field, accompanied by a lived client experience. Section 1.4 presents the corresponding Los Angeles organisation and client narrative. Section 1.5 compares the two organisations, and Section 1.6 outlines the legal frameworks governing their work in both contexts.

5.2 Data from Munich and Los Angeles

Side-by-Side Comparison: Los Angeles vs. Munich

The following table provides a comparative overview of key demographic and child welfare indicators in the two cities.

Indicator	Munich / Bavaria / Germany	Los Angeles
Total immigrant population	Approx. 28% foreign-born residents in Munich (München.de, 2025)	Over 3.5 million immigrants – largest immigrant population of any U.S. county (Los Angeles County DCFS, 2019)
Unaccompanied minors in welfare system	~3,429 minors under youth welfare supervision in Bavaria (2024); ~50% unaccompanied refugees (poster data)	Approx. 36,000 undocumented persons under age 16 in LA County; ~80% of unaccompanied U.S. apprehensions are of Latin American origin (poster data)
Preliminary protective measures	5,708 preliminary protective measures in Bavaria in 2024 (poster data)	Thousands of children enter DCFS annually; SISU engages cases requiring court jurisdiction
Legal framework	SGB VIII (universal child welfare); AsylbLG (asylum benefits); BAMF asylum procedures	Federal Immigration and Nationality Act; Juvenile Court Act; SIJS under Immigration Act 1990
Primary responsible agency	Jugendamt (Youth Welfare Office), operated through Just M / YRC	LA County DCFS – Special Immigrant Status Unit (SISU)
Support approach	Universal, rights-based; child welfare precedes immigration classification	Residual, risk-based; court jurisdiction required; immigration-legal focus

Los Angeles Sources

Los Angeles County is home to the largest immigrant population of any county in the United States (Los Angeles County DCFS, 2019). Among children at risk of labour exploitation are immigrant children, including unaccompanied minors. Nationally, almost 80% of unaccompanied children apprehended in the U.S. are of Latin American origin, primarily from Guatemala (42%), Honduras (28%), El Salvador (9%), and Mexico (8%) (poster data). A study cited in the project documentation found that approximately 36,000 undocumented persons in Los Angeles County are under the age of 16 (poster data).

The DCFS SISU was established in 1991 and has since filed more than 3,200 permanent residency applications, achieving a 95% success rate as of October 2019 (Casey Family Programs, 2019). SISU works collaboratively with the U.S. Citizenship and Immigration Services (USCIS) branch of the Department of Homeland Security, but explicitly does not report undocumented children and families to Immigration and Customs Enforcement (ICE) (Los Angeles County DCFS, 2019).

Munich Sources

Germany processed the largest share of first-instance decisions for unaccompanied minors among all EU+ countries in 2023, accounting for 31% of all such decisions, with the main nationalities being Syrian and Afghan young people (European Union Agency for Asylum [EUAA], 2024). In 2022, Germany

recorded 28,600 unaccompanied refugee minors taken into the custody of child and youth services, with 66.2% being between 16 and 18 years of age (Kinder- und Jugendhilfe Information System [KJH-Info], 2023).

At the state level in Bavaria, approximately 3,429 minors were under youth welfare supervision in 2024, with around 50% being unaccompanied refugees (poster data). The City of Munich is obligated under Section 3(2) of the Asylum Distribution Ordinance (DVAsyl) to accommodate 31.6% of all refugees allocated to Upper Bavaria (München.de, 2025). This makes Munich one of the most significant reception points for unaccompanied minors in the German federal system.

A key challenge noted in the German context is that children may remain in the preliminary stage of Inobhutnahme (emergency protective custody) for extended periods — in 2023 it was criticised that children in urban areas can remain in this preliminary stage for up to eight months due to the overburdening of local authorities (Asylum Information Database [AIDA], 2025).

5.3 A Munich Social Work Organisation That Deals With These Issues

The Young Refugee Center (YRC) – Jugendhilfeverbund Just M

The central Munich organisation working at the intersection of immigration and child welfare is the Young Refugee Center (YRC), operated by the Jugendhilfeverbund Just M, a municipal youth welfare organisation within the City of Munich's Department of Social Services (Sozialreferat / Stadtjugendamt). Just M has existed since 1970 (then under the name Jugendheim Pasing) and was restructured and renamed in 2001 to reflect its broader mission as a crisis intervention and flexible youth welfare provider (Jugendhilfeverbund Just M, 2023). The YRC specifically functions as the primary first-reception and assessment facility for newly arrived unaccompanied refugee minors (UMAs) in Munich.

Located at Marsstraße 19, near Munich Central Station, the YRC operates 24 hours a day and has a capacity of approximately 180 places, with an additional 40 places at a satellite site on Theodolindenstraße (poster data). The centre is embedded within the wider Just M network, which also offers a range of residential care settings including fully supervised group homes, semi-independent apartments, and therapeutic placements for children and youth aged 12 to 21 (Jugendhilfeverbund Just M, 2023).

Upon arrival, newly identified unaccompanied minors receive medical examinations, psychological support, age assessments (where identity documents are unavailable), and legal registration on site. A multidisciplinary team of social workers, educators (Sozialpädagogen), and psychologists carries out what is known as the Clearingverfahren — a structured, holistic needs assessment that evaluates the young person's educational background, trauma history, family situation, and potential long-term needs. Stays at the YRC typically last one to six weeks before transfer to long-term youth welfare placements such as group homes, therapeutic residential care, or foster families (BAMF, 2019).

The YRC's approach operationalises the universalist principles of SGB VIII: under §42, the Youth Welfare Office must take every unaccompanied minor into immediate protective custody (Inobhutnahme) upon identification, without requiring a court order or prior risk assessment. Within four weeks, the family court must appoint a legal guardian (Vormund) to represent the child in all legal, asylum, and welfare matters (UNHCR Germany, 2024). Importantly, Just M treats cultural and ethnic diversity as a

social asset and resource, developing its services from the perspective of the young people themselves and involving them in all decisions affecting their lives (Jugendhilfeverbund Just M, 2023).

A Lived Client Experience from Munich

The following composite case illustrates the experience of a client served by the Munich system. A 15-year-old Syrian girl fled her home country following ongoing conflict that resulted in the destruction of her school. Her mother arranged for her to travel to Europe with a group of relatives and other refugees. During the journey through Turkey and the Balkans, she was separated from her aunt, who had been her primary caregiver. She eventually arrived in Munich by train.

Upon arrival, she was identified as an unaccompanied minor and placed under the care of the Jugendamt (Youth Welfare Office) in accordance with §42 SGB VIII. She was transferred to the YRC, where she received medical checks and psychological screening. Over the following two months, she participated in German language classes and shared a residential room with other teenagers in comparable situations. After the Clearingverfahren assessment, she was transferred to a longer-term, semi-independent housing placement. A legal guardian (Vormund) was appointed by the family court and represented her throughout the asylum procedure. She was connected to specialist psychological support to process her trauma and was enrolled in school in accordance with her right to education under German law.

5.4 A Los Angeles Social Work Organization That Deals With These Issues

Provided by Aileen Martinez and Jennifer Candela

Los Angeles County Department of Children and Family Services (DCFS) – Special Immigrant Status Unit (SISU)

In Los Angeles, the primary organisation at the intersection of immigration and child welfare is the Special Immigrant Status Unit (SISU) of the Los Angeles County Department of Children and Family Services (DCFS). DCFS is the largest county child welfare agency in the United States (Los Angeles County DCFS, 2019). SISU was established in 1991 under Section 153 of the Federal Immigration Act of 1990, which created the Special Immigrant Juvenile Status (SIJS) pathway, allowing certain categories of undocumented children to obtain legal permanent residency (Los Angeles County DCFS, 2019).

SISU provides countywide services across all 21 DCFS Regional Offices. Its core function is the identification and processing of SIJS applications for eligible undocumented children who are current dependents of the Juvenile Court, whose reunification with one or both parents is not viable due to abuse, neglect, or abandonment, and whose best interests do not include return to their country of origin (Los Angeles County DCFS, 2019). SISU works collaboratively with USCIS but explicitly does not report families or children to Immigration and Customs Enforcement (ICE).

Beyond SIJS, SISU provides a range of additional immigration-related services, including U Visa referrals and certifications for victims of crime, assistance with green card renewal, U.S. citizenship and naturalisation support, immigration court representation, and connections to pro bono legal services (poster data). The unit functions primarily in a legal advocacy and documentation capacity, coordinating closely with dependency courts, attorneys, and federal immigration authorities.

Unlike the Munich system, entry into SISU's caseload is not automatic. A juvenile court must first grant jurisdiction over the child — typically when the child faces serious risks such as trafficking or abuse that cannot be managed within the federal resettlement system. Most unaccompanied minors in the United States are initially managed by the federal Office of Refugee Resettlement (ORR) (Office of Refugee Resettlement [ORR], 2025). SISU represents a secondary, more specialised safety net for the most vulnerable children who have been identified by the court system as requiring state intervention.

A Lived Client Experience from Los Angeles

The following composite case illustrates a client experience from the Los Angeles context. A Children's Social Worker (CSW) conducted interviews with Noemi (mother) and her two children — 3-year-old Ivan and 6-year-old Irene — following a domestic violence incident involving the mother's boyfriend, Victor. Ivan showed minor injuries consistent with the reported altercation, and Irene disclosed that Victor had hit her brother and her mother. Police and medical reports confirmed the mother's account. Victor was arrested for spousal assault and child abuse. It was noted that Victor held U.S. citizenship status.

Through a referral to SISU, the CSW worked with the unit to establish the family's eligibility for immigration relief. The mother and children, who were undocumented, were supported through the SIJS process, which required documentation of the children's court dependency status, confirmation that reunification with both parents was not viable, and verification that it was in the children's best interests not to return to their country of origin. With the support of a contracted immigration attorney, the family successfully obtained permanent residency and was connected to ongoing social support services.

5.5 Comparison of the Organisations

The YRC/Just M in Munich and DCFS SISU in Los Angeles both serve immigrant and refugee children in major metropolitan areas, yet their approaches reflect fundamentally different welfare philosophies and structural arrangements. The following comparison draws on the available documentation and relevant academic literature.

Dimension	YRC / Just M (Munich)	DCFS SISU (Los Angeles)
System entry	Automatic upon identification of unaccompanied minor (§42 SGB VIII); no court order needed	Court jurisdiction required; most minors enter federal ORR system first
Core mandate	Child welfare, developmental support, integration	Legal immigration relief; risk-based child protection
Assessment model	Clearingverfahren: holistic, multidisciplinary, covers trauma, education, integration	Structured Decision Making (SDM): risk assessment tool; legal-threshold focused
Guardianship	Vormund appointed by family court; single stable adult representative	Multiple actors: judges, caseworkers, attorneys, CASAs, immigration lawyers
Placement philosophy	Long-term stability; group homes, foster families, supervised flats	Foster care, kinship care, short-term residential; may be disrupted by court timelines

Immigration–welfare link	Integrated: asylum support and welfare proceed simultaneously	Largely separate; immigration legal processes independent of welfare case planning
Transition to adulthood	Support to age 21 under §41 SGB VIII; pathway to apprenticeship and residency	Aging out at 18 or 21 can leave youth undocumented without work authorisation
Staff profile	Social pedagogues (Sozialpädagogen); education and development focus	Specialist social workers; legal knowledge and court navigation focus
Cultural orientation	Explicit diversity mandate; cultural diversity as social potential	Case management orientation; cultural competence dependent on individual worker

The most fundamental structural difference is the point of entry into the system. Munich's model treats unaccompanied status as sufficient to trigger full child welfare responsibility. Los Angeles requires court involvement, meaning a significant number of migrant children never enter SISU's caseload at all. This reflects a broader difference identified in the literature: Germany prioritises a universalist, rights-based welfare model, while the United States operates a residual system activated primarily by demonstrable risk (poster data).

The Munich model's strength lies in its holistic orientation. The Clearingverfahren process, the appointment of a stable guardian (Vormund), and the integration of educational, psychological, and legal support within a single residential system all contribute to what the literature describes as more stable and supportive transitions into adulthood (BAMF, 2019; Asylum Information Database [AIDA], 2025). This is consistent with Winkens et al.'s (2025) finding that unaccompanied young refugees' sense of belonging and wellbeing is strongly linked to stable relational support structures — whether transnational family contacts or substitute care arrangements.

The SISU model, by contrast, reflects the legal complexity of the U.S. immigration context. Its strength lies in its specialised legal expertise and its ability to navigate multiple overlapping systems — dependency courts, immigration courts, and federal agencies — simultaneously. However, this very complexity can produce fragmentation, delays, and instability for children. The potential loss of support at age 18 or 21 is particularly acute for youth whose immigration cases remain unresolved, leaving some at risk of becoming undocumented adults without access to labour markets or state benefits (ORR, 2025).

Both systems face shared structural challenges: housing shortages, staff workload pressures, bureaucratic delays, and limited support when youth transition out of formal care. Winkens et al. (2025) highlight that the sense of responsibility refugee adolescents feel for their families abroad — working, saving money, and planning for reunification — adds further psychological and practical burdens that welfare systems are not always structured to address. This dimension of transnational family obligation has yet to be fully integrated into either the Munich or Los Angeles care model.

5.6 Related Laws in Munich and Los Angeles

Legal Basis of Work in Munich

The legal framework governing the care of immigrant and refugee children in Munich operates across several complementary instruments:

Social Code Book VIII (SGB VIII) – Child and Youth Services Act. This is the foundational law of the German child welfare system. Under §42 SGB VIII, the Youth Welfare Office must take every unaccompanied minor into immediate protective custody (Inobhutnahme) upon identification. §42a–f govern the preliminary custody procedure, including the distribution of unaccompanied minors across federal states. §41 provides for continued support up to age 21 for those in need. The Act applies universally to all children residing in Germany, regardless of nationality or migration status (BAMF, 2023). A major reform came with the Kinder- und Jugendstärkungsgesetz (KJSG) of 2021, which strengthened participation rights, child protection, and support for care leavers (European Youth Policy Information System, 2025).

Asylum Seekers' Benefits Act (AsylbLG). This law governs the material benefits provided to asylum seekers, covering housing, food, clothing, and healthcare. For unaccompanied minors, AsylbLG interacts with SGB VIII, though minors under youth welfare care generally receive broader support under the latter (poster data).

BAMF Asylum Procedure Guidelines. Asylum procedures for unaccompanied minors must be child-sensitive and trauma-informed, conducted by the Federal Office for Migration and Refugees (BAMF). Because unaccompanied minors cannot act independently in legal proceedings, all asylum applications must be filed by the appointed guardian or the Youth Welfare Office on the minor's behalf (UNHCR Germany, 2024; BAMF, 2023).

UN Convention on the Rights of the Child (UNCRC). Germany has ratified the UNCRC, and SGB VIII explicitly implements its obligations, including the right to care in accordance with the child's best interests, the right to be heard, and the right to protection from harm (BAMF, 2023).

Asylum Distribution Ordinance (DVAsyl) / Königsteiner Schlüssel. This formula distributes asylum seekers across German states according to tax revenue (two-thirds) and population (one-third). Bavaria receives approximately 15.56% of all asylum seekers nationally, with Munich obligated to house 31.6% of Upper Bavaria's allocation (München.de, 2025).

Related Laws / Policies in Los Angeles

Special Immigrant Juvenile Status (SIJS) – Immigration Act of 1990, Section 153. SIJS is the foundational immigration relief pathway for undocumented children in the welfare system. It allows eligible children to apply for lawful permanent residency if they are court dependents, cannot reunify with a parent due to abuse, neglect, or abandonment, and whose best interests do not include return to their home country. Eligibility was expanded in 2008 to include youth under 21 (Los Angeles County DCFS, 2019; U.S. Citizenship and Immigration Services [USCIS], 2024).

U Nonimmigrant Status (U Visa). A temporary visa allowing undocumented victims of crime to remain in the U.S. legally and apply for permanent residency after three years. It provides work authorisation and access to some public benefits. SISU can provide the necessary law enforcement certification (poster data).

Deferred Action for Childhood Arrivals (DACA). DACA, introduced in 2012, allowed individuals who arrived in the U.S. before age 16 to request deferred deportation action and work authorisation for two-year renewable periods. As of September 2017, the programme was suspended and is no longer accepting new applications, though existing holders continue to renew (poster data). The uncertain legal status of DACA has created ongoing vulnerability for a significant segment of the undocumented young adult population.

EU Reception Conditions Directive (2013/33/EU). While applicable in the European context, this directive is worth noting comparatively. It requires that (re-)establishing contact with family members be treated as a priority for unaccompanied minors, unless detrimental to their wellbeing — a provision that resonates with the findings of Winkens et al. (2025) on the importance of transnational family contact for refugee adolescents' psychological wellbeing (Winkens et al., 2025).

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6. Foster Care Systems

Sergio Sanchez

Zoe M. Lass

Lea Baur

Indira F. Hafner

6. Foster Care Systems

Zoe M. Lass, Lea Baur, Indira F. Hafner, Andrea Nagy

6.1 Introduction

Foster care is one of the most significant forms of alternative care available to children who cannot live safely with their birth families. It provides a family-based environment for children whose well-being is at risk due to abuse, neglect, parental incapacity, or other serious adversities. Rather than placing children in institutional or residential settings, foster care aims to offer continuity, stability, and relational warmth — factors that research consistently identifies as essential to healthy child development (Berridge & Cleaver, 1987; Wolf, 2018).

In Germany, over 200,000 children, adolescents, and young adults were placed outside their family of origin in 2023, in residential care, foster families, or other supervised living arrangements (Deutscher Bundestag, 2025). In the United States, foster care operates on a comparable scale: in Los Angeles County alone, the Department of Children and Family Services (DCFS) oversaw over 10,000 children in out-of-home placements in the fiscal year 2024–2025 (DCFS, 2025).

Despite the shared overarching goal of protecting child welfare, the systems in Germany and the United States reflect deeply different philosophical, legal, and structural approaches. Germany's framework, rooted in the Sozialgesetzbuch VIII (SGB VIII), emphasizes family preservation, parental cooperation, and individualized support. By contrast, the U.S. system prioritizes permanency and legal certainty for the child, often moving more quickly to terminate parental rights and establish adoptive or guardian placements (Adoption and Safe Families Act, 1997).

This report provides a structured comparison of foster care systems in Munich and Los Angeles. It examines statistical data side by side, describes the key organizations in each city, discusses relevant laws and policies, and presents lived client experiences. It draws on the academic literature — in particular Klaus Wolf's (2018) work on interdependency models for understanding foster placement breakdown — as well as official agency data and social work scholarship.

A central scholarly contribution informing this report is Wolf's (2018) argument that foster placement instability cannot be understood through single-factor analysis alone. Rather, breakdowns occur through the complex interplay of individual, relational, organizational, and structural factors across multiple levels. This interdependency perspective enriches both the comparative analysis and the practical implications discussed throughout the report.

6.2 Data from Munich and Los Angeles – Side-by-Side Comparison

The following tables present key statistical data from Los Angeles and Munich, drawn from official agency sources.

Los Angeles (DCFS, FY 2024–2025)	Munich / Germany (Destatis, 2024–2025)
Children in out-of-home placement: 10,088	Children in foster families nationally: ~87,000
Resource (foster) homes: 2,032	Foster families in Munich: ~600–650
Emergency response referrals (total): 53,376 (97,663 children)	Children taken into care (Inobhutnahmen) nationally: ~69,500 (2024)
Foster family placement preferred; kinship care strongly prioritized	Foster care preferred for under-6; residential care more common from age 7
Extended foster care possible until age 21 (AB12)	Foster care typically ends at age 18; extensions possible
Approx. 23% of children return to prior residence after care (DCFS, 2025)	Approx. 23% return to prior residence after Inobhutnahme (Destatis, 2024)
Social workers manage high caseloads in large county agency	Full-time social worker manages ~45 cases (Stadtjugendamt München, 2025)

Los Angeles Sources

Data for Los Angeles County is drawn from the DCFS Fiscal Year 2024–2025 Fact Sheet (DCFS, 2025). As of June 30, 2025, DCFS reported 10,088 children in out-of-home placement. The largest category was relative Resource Family Homes (4,549 children), followed by non-relative Resource Family Homes (2,502). A total of 18,650 children were receiving child welfare services overall, including family maintenance and reunification cases. The ethnicity breakdown shows a majority of Hispanic children (58.8%), reflecting the demographics of Los Angeles County. Approximately 30,998 in-person emergency response investigations were completed in the fiscal year.

Munich Sources

Data for Munich and Germany is drawn from Statistisches Bundesamt (Destatis) press releases from 2024 and 2025, as well as the Stadtjugendamt München (2025). Nationally, approximately 69,500 children were taken into care (Inobhutnahmen) in 2024 — a figure that includes both emergency removals and voluntary placements. Approximately 87,000 children were placed in foster families across Germany, and 128,000 in residential care. Munich specifically has approximately 600–650 active foster families. The Munich Youth Welfare Office notes that after emergency removals, approximately 23% of children return to their previous place of residence, while around 45% are relocated to new placements such as residential homes, group homes, or foster families (Destatis, 2024).

6.3 A Munich Social Work Organization That Deals With These Issues

The central organization responsible for foster care in Munich is the Stadtjugendamt München — the City Youth Welfare Office — which operates within the city's Sozialreferat (Social Department). Within the Stadtjugendamt, the relevant unit is the Foster Care and Adoption Department (Pflege und Adoption, S-II-F/PA), embedded in the division of Familienergänzende Hilfen (family support services).

The department is divided into specialized units, including two teams for Munich-based foster care (Münchner Pflege I and II), a team for external foster care placements, a unit for adoption, a psychological service, and teams for group work and public relations (Stadtjugendamt München, 2025). Each team typically consists of nine professionals and a team leader. A full-time social worker manages approximately 45 cases simultaneously — a workload that underscores the structural pressure on practitioners.

The organization oversees all forms of foster care regulated under SGB VIII: long-term foster care (Vollzeitpflege, §33), short-term foster care (Kurzzeitpflege), and emergency foster care (Bereitschaftspflege). Emergency foster carers in Munich are required to hold a pedagogical qualification or equivalent, reflecting the specialized nature of crisis placements (Stadtjugendamt München, 2025).

A distinctive feature of the Munich system is its structured placement initiation process (Anbahnung). Before a child is placed, a placement team (Vermittlungsteam) convenes and selects a suitable foster family based on the child's needs and the family's capacities. The prospective foster family then meets the birth family, followed by meetings with the emergency carers, before the first encounter with the child. This gradual process culminates in increasing visits before the first overnight stay — an approach designed to minimize traumatic disruption (Landeshauptstadt München, 2008).

The organization also coordinates regular Hilfeplan (help plan) meetings involving the foster family, the child, birth parents, and other professionals, ensuring ongoing review of placement goals and the child's development. This collaborative, multi-perspective approach aligns with what Wolf (2018) describes as the social pedagogical research tradition, which emphasizes that foster placement processes can only be understood through the experiences and perspectives of multiple actors.

A Lived Client Experience from Munich

A two-year-old boy and a four-year-old girl were placed in emergency foster care after being removed from a neglected household characterized by insufficient food, poor hygiene, and hoarding conditions. Following a clearing process, it was determined that reunification with the birth family was not possible. A certified long-term foster family was identified and presented to the placement team. After approval, the foster parents met the birth family, then the children in emergency care. Through a series of gradual meetings, the boy made his first overnight stay in his new home. The social worker provided ongoing support with supervised visits every four weeks, and the foster family received financial assistance for initial furnishings. The boy, now eight years old, has been diagnosed with dyslexia. Annual help-plan meetings are held and support is adjusted accordingly (Stadtjugendamt München, 2025).

6.4 A Los Angeles Social Work Organization That Deals With These Issues

Provided by Sergio Sanchez

The Los Angeles County Department of Children and Family Services (DCFS) is the largest child welfare agency in the United States, responsible for foster care, adoption, and child protection services for the approximately ten million residents of Los Angeles County. Its mission is to protect children and strengthen families, primarily through prevention, family preservation, and permanent placement services (DCFS, 2025).

DCFS employs social workers who carry out regular home visits, case management, and coordination with schools, therapists, and courts. Each child in the system has a case plan developed with input from caregivers and professionals, reviewed regularly to monitor progress. A central practice is Concurrent Planning: social workers simultaneously develop two plans — reunification with the birth family and an alternative permanency plan such as adoption or legal guardianship — with the goal of minimizing the time children spend in temporary care (DCFS, 2025).

Prospective foster parents in Los Angeles undergo the Resource Family Approval (RFA) process, which includes orientation, background checks, pre-placement training, a home environment assessment, and a comprehensive family evaluation. Once approved, caregivers are called Resource Parents. DCFS prioritizes placement with relatives or Non-Related Extended Family Members (such as close family friends) to maintain children's familiar social connections.

Visitation plans between children and birth parents are established by the courts, specifying the frequency and conditions of contact — supervised or unsupervised. DCFS social workers facilitate these visits and monitor their impact on the child's well-being.

From the perspective of Wolf's (2018) interdependency model, the Los Angeles system illustrates how organizational processes — including caseload pressures, staffing continuity, and bureaucratic decision-making — can either support or destabilize foster placements. Wolf found that changes in professional staff were among the most significant destabilizing factors in placement trajectories, a finding directly relevant to a large agency like DCFS.

A Lived Client Experience from Los Angeles

Two siblings aged five and seven were placed into foster care after their mother was arrested and no family member was identified to care for them. Their father had passed away two years earlier. The children were placed in a resource home. Their mother was subsequently sentenced to twenty years in prison, leading to the termination of parental rights. DCFS provided ongoing support and case management throughout the placement, conducting home visits twice per month. The resource family decided to pursue legal guardianship. The children are reported to be doing well and have integrated into the family; they maintain contact with their biological mother (DCFS, 2025).

6.5 Comparison of the Organizations

Although both the Stadtjugendamt München and DCFS share the fundamental goal of safeguarding children's welfare, they differ substantially in their legal logics, social work philosophies, and structural conditions. Three areas of comparison are particularly instructive: the handling of parental rights and

legal custody; the availability, visibility, and financial situation of foster families; and the approach to placement processes and case planning.

Parental Rights and Legal Custody

In Munich, biological parents typically retain full parental custody (elterliche Sorge) even after a child is placed in foster care. The Youth Welfare Office requests a court to limit or withdraw custody only when parents act against the child's best interests or refuse to cooperate. Social workers are expected to continuously support and work with birth parents toward restored parenting capacity (SGB VIII §37). This reflects a philosophy of family preservation embedded in German social law.

In Los Angeles, parental rights are more readily and rapidly curtailed, particularly through the Adoption and Safe Families Act's 15/22 rule: if a child has been in foster care for 15 out of 22 months, the state must petition to terminate parental rights (ASFA, 1997). Once terminated, decision-making authority passes primarily to the state and new caregivers. This represents a fundamentally different balance between child protection and parental rights.

From a social pedagogical perspective, the Munich model's insistence on maintaining parental involvement can be interpreted as keeping the child anchored in their lifeworld — a concept central to lifeworld-oriented social work (Thiersch, 2012). It acknowledges the complexity of children's belonging across multiple relational networks, which Wolf (2018) conceptualizes in his four-level model of foster family integration: legal codes, household membership, relational contact, and family belonging. In Los Angeles, the legal termination of parental rights can sever levels 1 through 4 simultaneously, while in Germany levels 3 and 4 — emotional relationships and family belonging — may be deliberately preserved even as level 1 (the legal basis) ends.

Foster Family Availability and Financial Support

Munich has approximately 600–650 active foster families — a relatively small number given the size of the city and the demand for placements (Kilian, 2019). The shortage is attributed to societal trends including self-optimization culture, housing scarcity, and high living costs. Although foster families receive financial allowances under SGB VIII §39, these payments (approximately €800–1,000 per month depending on the child's age) are not sufficient as a sole income source. Munich has responded with an additional housing allowance, spending over €9.6 million on full-time foster care in one year alone (Kilian, 2019).

Los Angeles County reported 2,032 approved resource homes in FY 2024–2025 (DCFS, 2025). DCFS invests significantly in recruitment campaigns, and foster parents receive comparatively higher financial compensation — for some, an important source of income. This raises ethical questions about motivation and the tension between financial incentive and child-centered care. However, ongoing monitoring and oversight by DCFS provides structural safeguards.

The difference in foster family visibility is also noteworthy: foster care appears to be more widely known and normalized in the United States than in Germany, where adoption tends to be better understood by the general public. Greater public awareness in the U.S. likely contributes to a larger pool of potential foster carers.

Placement Processes and Case Planning

Munich employs a carefully structured Anbahnung (initiation) process in which matching, gradual introductions, and professional guidance minimize the trauma of placement transitions. Emergency foster carers must hold pedagogical qualifications, reflecting awareness of the acute distress experienced by children after crisis removals. This emphasis on diagnostic clarity and relational preparation aligns with attachment theory's concept of providing a secure base during transitions (Bowlby, 1973, as cited in the student report).

DCFS uses Concurrent Planning, which develops two case tracks simultaneously to accelerate permanency. The same resource family may serve as both temporary and long-term placement, potentially reducing the number of moves a child experiences. However, this approach may leave less time for thorough diagnostic assessment and careful matching comparable to Munich's Anbahnung — a concern particularly acute in a large agency operating under high caseload pressure.

Wolf (2018) identifies constructions of meaning and attribution as a critical dynamic in placement stability. When foster parents develop increasingly pathologizing explanations for a child's difficulties — attributing problems to stable, inherited traits — and when social services respond within that same attributional frame, the range of available actions narrows and the risk of breakdown escalates. The quality of professional support and the continuity of social service relationships therefore matter enormously, regardless of which national system a child is placed in.

6.6 Related Laws in Munich and Los Angeles

Legal Basis of Work in Munich (SGB VIII)

§ 27 SGB VIII – Help with Upbringing (Hilfen zur Erziehung): Establishes a legal entitlement to educational assistance when an upbringing consistent with the child's welfare cannot be ensured within the family and support is deemed suitable and necessary. Foster care is one form of this assistance.

§ 33 SGB VIII – Full-time Foster Care (Vollzeitpflege): Defines foster care as a form of help, emphasizing that care must be aligned with the child's age and development. Where possible, existing bonds and life circumstances should be maintained.

§ 37 SGB VIII – Parental Collaboration: Establishes the right of birth parents to receive support and ensures cooperation with the goal of restoring parenting capacity where feasible. Even during placement, the birth family remains a central focus of social work intervention.

§ 39 SGB VIII – Maintenance and Allowance: Ensures that living expenses and upbringing costs are covered through a foster allowance. Supplements depend on the child's age and special needs.

§ 37b SGB VIII – Child Rights and Protection Concepts in Foster Care: Requires the Youth Office to implement complaint mechanisms and a violence-prevention, rights-protection concept for each foster placement.

§§ 1741 ff. BGB – Adoption: Adoption is permitted if it is in the child's best interests and an enduring parent–child relationship is expected.

Related Laws and Policies in Los Angeles

Provided by Sergio Sanchez

Indian Child Welfare Act of 1978 (ICWA): Federal law creating minimum standards for the removal of Native American children from their families, emphasizing the preservation of tribal connections (Indian Child Welfare Act, 1978).

Adoption and Safe Families Act of 1997 (ASFA) – 15/22 Rule: If a child has been in foster care for 15 out of 22 months, the state must petition to terminate parental rights unless specific exceptions apply. Designed to reduce "foster care drift" and promote timely permanency (ASFA, 1997).

Extended Foster Care (AB12): California state law allowing foster youth to remain in care until age 21, supporting the transition to independence.

Welfare and Institutions Code (WIC) Section 309: Mandates immediate investigation of abuse referrals, prioritizes family reunification, and requires placement with relatives whenever possible.

DCFS Policy 0080-507.20: Outlines procedures and requirements for concurrent planning, requiring simultaneous development of a reunification plan and an alternative permanency plan.

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7. Prevention and Early Intervention

Alina Carmona
Vincent Torres
Itzel Macedo
Veronica Martinez Peralta

Jonas Levi

7. Prevention and Early Intervention

Jonas Levi, Andrea Nagy

7.1 Introduction

Prevention and early intervention represent one of the most significant paradigm shifts in modern child and youth welfare. Historically, welfare services were predominantly reactive: they became involved only after harm to a child had already occurred, responding to documented abuse, neglect, or family breakdown. The contemporary field has increasingly moved toward a proactive model that seeks to identify and address risk factors before harm materializes, supporting families at the earliest possible stage of a child's development.

This shift is not merely pragmatic but also values-driven. It reflects a broader conceptual evolution—from viewing children as objects of protection to recognizing them and their families as rights-bearing subjects entitled to support (United Nations, 1989). Early childhood intervention (ECI) has become a recognized domain at both policy and professional levels across Europe and North America, grounded in international human rights frameworks and in growing empirical evidence about the long-term effects of early experience on child development (European Agency for Development in Special Needs Education [EADSNE], 2005).

Research in neuroscience and developmental psychology has provided compelling evidence that the earliest years of life—from birth through age five or six—are uniquely formative. Positive, stimulating experiences during this period support the development of neural pathways that underpin language acquisition, social competence, and cognitive functioning throughout life (Shonkoff & Phillips, 2000). Conversely, adverse early experiences—including poverty, inadequate stimulation, parental stress, and exposure to violence—can compromise developmental trajectories in lasting ways. As Shonkoff and Phillips (2000, p. 384) note, early pathways establish either a sturdy or fragile stage on which all subsequent development is built.

Prevention and early intervention services are typically categorized into three levels. Primary prevention targets the general population, aiming to reduce the incidence of problems before they arise—for example, through universal parenting support programs or public health campaigns. Secondary prevention focuses on families identified as being at heightened risk, providing targeted services to reduce the likelihood that risk factors translate into harm. Tertiary prevention involves intervention after harm has occurred, seeking to limit the severity of damage and support recovery (Kydd, 2003; Simeonsson, 1994). This chapter focuses primarily on primary and secondary prevention, as these constitute the core of early childhood intervention services in both Munich and Los Angeles.

Two programs serve as the primary organizational examples in this comparative analysis: the Home Instruction for Parents of Preschool Youngsters (HIPPY) program, implemented in Munich, Germany, and the Head Start program, implemented across the United States and specifically examined in Los Angeles, California. Both programs share foundational goals—improving school readiness, reducing educational inequality, and supporting families with young children—while differing considerably in their approach, eligibility criteria, funding structures, and philosophical orientation.

7.2 Data from Munich and Los Angeles: Side-by-Side Comparison

Understanding the social conditions in which early intervention programs operate requires attention to the structural context—particularly patterns of child poverty, linguistic diversity, and educational inequality—that motivate and shape these programs. The following presents key data from both settings.

Los Angeles Sources

Los Angeles County is characterized by pronounced socioeconomic inequality and significant linguistic diversity, both of which shape the conditions for early intervention. In 2024, approximately 229,384 children were enrolled in Early Head Start and 535,313 children in Head Start Preschool programs across the United States (First Five Years Fund [FFYF], 2024). In California alone, 84,195 children were enrolled in Head Start or Early Head Start (FFYF, 2024).

Child poverty rates in Los Angeles are substantially higher than national averages. The United States Census Bureau estimated that approximately 10 percent of the U.S. population fell below the official poverty line in 2024 (Shrider & Bijou, 2025). However, child poverty rates tend to be higher than general poverty rates, and in low-income urban communities such as the neighborhoods served by Head Start in Los Angeles, rates are considerably elevated. The federal poverty threshold for a family of four in 2025 was set at $32,150 annually (U.S. Department of Health and Human Services [HHS], 2025).

The linguistic context of Los Angeles is highly diverse. Large proportions of the school-age population come from households where English is not the primary language. Research on the Head Start Impact Study has found that children with Hispanic and Black parents experienced larger beneficial effects from Head Start participation than children with White parents on social-emotional outcomes (Lee et al., 2021). Furthermore, Head Start has shown particular effectiveness for children who had lower cognitive skills or limited English ability at baseline, precisely because they received services far better than those available to them otherwise (Lee et al., 2021).

A 2025 BrightPoint Research to Policy Brief on Head Start's role in reducing child maltreatment found that participation in Early Head Start between ages two and three led to up to 22 percent reductions in child welfare involvement throughout a child's life (BrightPoint, 2025). Children enrolled in Early Head Start with one substantiated report of maltreatment were nearly three times less likely to experience a second report compared to non-enrolled children (BrightPoint, 2025).

Munich Sources

Munich, and Germany more broadly, faces distinct but structurally comparable challenges to Los Angeles. Both IGLU[1] and PISA[2] data consistently demonstrate that educational inequalities in Germany

[1] The IGLU study (Internationale Grundschul-Lese-Untersuchung) is the German “offshoot” of the international large-scale assessment PIRLS (Progress in International Reading Literacy Study). IGLU/PIRLS Germany aims to survey and examine fourth-grade students´reading skills in an internationally-comparable environment. The study is conducted every five years since 2001 and the next IGLU/PIRLS main survey is scheduled for 2026.

[2] PISA is the OECD's Programme for International Student Assessment. PISA measures 15-year-olds’ ability to use their reading, mathematics and science knowledge and skills to meet real-life challenges.

are closely linked to students' starting abilities when entering school—inequalities that are in turn shaped heavily by family background, socioeconomic status, and linguistic capital.

Germany's approach to child poverty operates within a broader social welfare state framework that includes universal health insurance, the U-Untersuchungen system of developmental screenings (U1–U9) for children from birth, and a legal obligation for municipalities to provide family support services. Nevertheless, child poverty remains a significant concern, with an estimated 2.8 million children in Germany affected by poverty or living in households at risk of poverty (Statistisches Bundesamt, 2023). In Munich specifically, rising housing costs and economic precarity have increased the pressure on lower-income families, including many with migration backgrounds.

The German early intervention landscape is shaped by the Sozialgesetzbuch VIII (SGB VIII), which provides the foundational legal framework for youth welfare in Germany. Relevant paragraph § 1 SGB VIII guarantees every young person the right to support for their development; § 16 SGB VIII obliges youth welfare offices to offer general counselling and support for families. Within this framework, the Kinder- und Jugendstärkungsgesetz (Child and Youth Strengthening Act) has further emphasized prevention and early intervention as guiding principles.

Side-By-Side Comparison

The following table provides a side-by-side comparison of key indicators across both contexts:

Dimension	Los Angeles (Head Start)	Munich (HIPPY)
Program Name	Head Start / Early Head Start	HIPPY (Home Instruction for Parents of Preschool Youngsters)
Target Age	Birth to age 5 (Early HS: 0–3; HS: 3–5)	Ages 4–7 (Munich implementation)
Target Population	Families at or below federal poverty level	All families; priority for multilingual households
Primary Focus	Child-centered learning and school readiness	Parent empowerment as first teachers
Delivery Method	Center-based, family child care homes, home visits	Home visits by trained lay parent-educators
Cost to Family	Free of charge	€80/year (subsidized via Grundsicherung/BUT)
Legal Basis	Economic Opportunity Act of 1964; Head Start Act	SGB VIII §§ 1, 16 (Child and Youth Welfare Law)
Funding Source	Federal government (U.S. Dept. of HHS)	City of Munich (Sozialreferat)
Languages	Bilingual (English/Spanish in LA)	48 languages (Munich implementation)
School Readiness Goal	Yes – explicit program goal	Yes – explicit program goal
Parental Involvement	Parents as primary support systems	Parents as primary teachers

7.3 A Munich Social Work Organization That Deals With These Issues

The Munich implementation of the HIPPY (Home Instruction for Parents of Preschool Youngsters) program represents a prominent example of a secondary prevention and early intervention initiative in the Bavarian capital. HIPPY is an intercultural, early-education initiative targeting families with children aged four to seven years. It is offered by the Sozialreferat of the City of Munich—specifically through the department Angebote für Familien, Frauen und Männer—and is part of the broader early childhood support infrastructure in Munich.

The central philosophy of HIPPY rests on the recognition of parents as their children's first and most important teachers. Rather than directing support primarily at the child, the program works with parents to strengthen their capacity to engage in stimulating, educationally enriching interactions with their children at home. This reflects a family-centered model of intervention consistent with the ecologic-systemic approach that has become dominant in contemporary early childhood intervention theory (EADSNE, 2005; Bronfenbrenner, 1979).

The program's operational structure relies on trained lay parent-educators—often referred to as parent coaches—who are themselves members of the communities they serve and frequently share the cultural and linguistic background of participating families. In Munich, one professional coordinator oversees approximately three parent coaches, each responsible for around 20 families. This model enables the program to reach a relatively large number of families with limited financial resources. Across Munich's four program regions, approximately 250 families can be served simultaneously. A particular strength of the Munich implementation is the availability of support in 48 languages, making the program genuinely accessible to the city's diverse multilingual population.

Participation in HIPPY involves weekly home visits during which parent coaches guide parents through structured, age-appropriate learning materials developed specifically for the program. These materials include picture books, activity booklets, geometric shapes, and art supplies. Parents then spend approximately 20 to 30 minutes each day engaging their child with the materials in a playful and educationally meaningful way. In addition to home visits, group meetings for parents take place every two to four weeks, covering topics related to education, parenting, and community integration.

While all families with children in the relevant age group are in principle eligible to participate, the program is particularly oriented toward families in which German is not the first language at home, reflecting the documented relationship between language of instruction and school readiness outcomes in the German educational system. The annual participation fee of €80 per child is intended to be affordable; for families receiving Grundsicherung (basic income support), financing through the Bildungs- und Teilhabepaket (BUT, the Education and Participation Package) is possible.

HIPPY's effectiveness has been documented across multiple studies. Brown and Lee (2015) evaluated the program when implemented within Head Start contexts in the United States and found that children who participated in both HIPPY and Head Start scored significantly higher on language proficiency assessments than children who only attended Head Start ($\chi^2(1, N=22) = 4.07$, $p = .04$). Further research on HIPPY's impact has documented positive effects on school readiness, academic performance, and parental self-efficacy (Baker et al., 1999; Garcia, 2006).

A Lived Client Experience from Munich

Bahar's story illustrates how HIPPY's low-threshold, community-embedded approach can support families facing multiple intersecting challenges. Bahar was 21 years old when she began participating in the HIPPY program; she already had five children. She and her husband were Yazidis who had recently arrived in Germany, speaking no German at all. Bahar had not attended school in the Kurdish region of Iraq and was illiterate. She was shy and initially reserved about the program.

Through the HIPPY network—and specifically through the connections maintained by the parent coaches and program coordinators in her district—Bahar was supported in accessing a German language course. She progressed rapidly in her oral German acquisition and within a year had gained sufficient confidence and linguistic competence to move around the city independently. After only one year in the program, she applied to join the parents' board at her child's daycare.

Bahar's experience illustrates a core principle of programs like HIPPY: that supporting parents' own integration and capability has profound downstream effects on children's development. When a parent gains confidence, language skills, and community connection, the entire family's trajectory is altered. The HIPPY coordinator who recounted this experience also noted that the backgrounds of participating families in Munich are remarkably diverse—including middle-class families, parents with university degrees, and families with a history of migration—demonstrating that the need for parenting support and early educational guidance is not confined to any single social group.

7.4 A Los Angeles Social Work Organization That Deals With These Issues

Provided by Alina Carmona, Vincent Torres, Itzel Macedo and Veronica Martinez Peralta

Head Start is a federally funded early childhood program administered through the U.S. Department of Health and Human Services. It was launched in 1965 as part of the War on Poverty under President Lyndon B. Johnson, rooted in the Economic Opportunity Act of 1964 (Brown & Lee, 2015). Its foundational purpose was—and continues to be—to prepare children from low-income families for school success by providing comprehensive early education, health, nutrition, and family support services.

In Los Angeles, as nationally, Head Start operates across a range of settings: center-based programs, family child care homes, and home visiting arrangements. The program serves two primary age groups through distinct sub-programs: Early Head Start, which serves infants and toddlers from birth to age three and their families, and Head Start Preschool, which serves children aged three to five. Both programs explicitly encourage parental involvement and position parents as primary support systems throughout the child's participation.

Eligibility for Head Start is determined primarily by income: families must have incomes at or below the federal poverty level as defined by HHS poverty guidelines. For 2025, this threshold was set at $32,150 for a family of four (HHS, 2025). This means that access is limited to the approximately 10 percent of the U.S. population living below the poverty line (Shrider & Bijou, 2025). Additional categories of eligibility include children in foster care and children with disabilities, who may be enrolled regardless of income.

Head Start's funding structure is federal, with allocations made to support school districts, nonprofits, for-profit organizations, faith-based institutions, tribal councils, and other qualified entities. The federal-to-local funding model is designed to allow local leaders to tailor programs to their communities'

needs, while many programs combine federal, state, and local resources to maximize service continuity and quality.

The program's comprehensive service model includes early learning and development activities aligned with the Head Start Early Learning Outcomes Framework; health screenings (including dental, vision, and developmental screenings); nutrition support; mental health services; and case management that connects families with additional community resources. This integrated approach distinguishes Head Start from purely educational programs and positions it as a multidimensional family support intervention.

Research on Head Start's effectiveness documents substantial benefits, particularly for the most disadvantaged populations. Lee et al. (2021) conducted a systematic review of the Head Start Impact Study and found that children with Hispanic and Black parents benefited more from Head Start participation than White children on social-emotional outcomes, and that Head Start parenting activities and involvement effects for Hispanic parents persisted beyond the year of program participation.

A Lived Client Experience from Los Angeles

Maria is a 35-year-old single mother originally from Mexico, living in a low-income neighborhood in Boyle Heights, Los Angeles. She works part-time as a house cleaner and lives with her three-year-old son, Mateo, in a small apartment. Maria did not attend school beyond the ninth grade and has limited English, which has made it difficult to access services or advocate effectively for her child.

When Mateo turned three, a friend from her church told Maria about Head Start. She was initially hesitant, fearing judgment for her broken English or undocumented status. However, the local Head Start program on 4th Street welcomed her and Mateo warmly. Mateo began attending five days a week, receiving healthy meals, engaging in language-development activities, and participating in structured learning that supported his school readiness. His teachers incorporated Spanish into the classroom, which reduced the cultural and linguistic alienation that Maria had feared.

For Maria, Head Start became more than childcare. A family support worker met with her regularly, helping her set personal goals—including enrollment in ESL classes and accessing healthcare for herself and Mateo. She also received help applying for a food assistance program she had not known she was eligible for. Over time, Mateo began talking more in both English and Spanish and looked forward to going to school. Maria reported feeling less isolated and more empowered as a parent, saying that Head Start gave her not just support, but esperanza—hope.

7.5 Comparison of the Organizations

A comparison of HIPPY (Munich) and Head Start (Los Angeles) reveals both significant structural similarities and instructive differences that reflect broader distinctions between the German and American social welfare systems.

Similarities

Both HIPPY and Head Start share foundational commitments to early childhood education and school readiness as a pathway out of disadvantage. Both programs explicitly recognize parents as critical actors in their children's development—not merely passive beneficiaries—and both employ some form

of home-visiting or outreach approach to lower barriers to participation. Both programs serve multilingual populations and invest in culturally sensitive service delivery. Both have demonstrated evidence of effectiveness in improving outcomes for participating children and families (Baker et al., 1999; Brown & Lee, 2015; Lee et al., 2021).

The theoretical orientation of both programs is also broadly compatible. HIPPY's family-centered approach aligns with the ecologic-systemic model that the European Agency for Development in Special Needs Education identifies as the dominant paradigm in contemporary early childhood intervention (EADSNE, 2005). Head Start similarly reflects the influence of ecological models of child development, treating the child's development as embedded in family, community, and institutional contexts (Brown & Lee, 2015).

Differences

The most fundamental difference between the two programs lies in their primary locus of intervention. Head Start is principally child-centered: the program works directly with children in center-based or home-visiting settings, providing structured educational and developmental activities. HIPPY, by contrast, is primarily parent-centered: it works with parents to strengthen their capacity to teach and support their children, with the parent—not the child—as the direct recipient of the program's educational input.

This difference reflects broader distinctions between the German and American approaches to child welfare. Benz and Sidor (2013) note that the provision of universal health care, comprehensive prenatal and postnatal care, and systematic developmental screenings in Germany creates a broad baseline of support for all families, on which targeted secondary prevention programs can be built. The absence of equivalent universal provisions in the United States means that programs like Head Start must serve a broader range of needs for an already highly disadvantaged population, creating stronger pressure toward direct, comprehensive service provision.

The eligibility and accessibility profiles of the two programs also differ significantly. Head Start is income-gated: only families at or below the federal poverty threshold qualify. This creates a sharp boundary between those who can access the program and those who cannot—even if families slightly above the poverty line face comparable risk factors for child maltreatment or educational disadvantage. HIPPY, in contrast, is open in principle to all families with children in the relevant age range, with eligibility not determined by income level. While the annual participation fee of €80 represents a modest financial threshold, the program's reach extends across a wider socioeconomic spectrum.

A further distinction concerns scale and structural integration. Head Start is a federal program with national reach, embedded within a well-established legislative and funding framework. HIPPY's Munich implementation is a city-level program, dependent on municipal funding and the commitment of the Sozialreferat. This difference in institutional embedding has implications for stability, sustainability, and the capacity to respond to budget pressures—an increasingly salient concern as Munich, like many German municipalities, faces fiscal constraints.

The economic argument for early intervention is relevant here. Heckman (2012) has formulated what has become known as the Heckman Equation: the earlier in life investments in skill development and prevention are made, the higher the social and economic return on those investments. Estimates suggest that for every dollar invested in early childhood programs targeting poverty and risk, between seven and twelve dollars are saved in later social costs (McLaughlin et al., 2018). This economic framing has taken on renewed urgency in the current context of social service budget cuts in both Germany and the United States.

7.6 Related Laws in Munich and Los Angeles

Legal Basis of Work in Munich (Germany)

The legal framework governing early intervention and family support in Germany is primarily found in the Sozialgesetzbuch VIII (SGB VIII), the Child and Youth Welfare Act. This legislation provides the foundational basis for all youth welfare services in Germany, including both preventive and interventive measures.

§ 1 SGB VIII establishes the right of every young person to support for their development and education in a healthy environment—a right that is enforceable and forms the basis for the state's obligation to provide services. This provision is fundamental to the legitimacy of early intervention programs: they are not charity or discretionary service, but rather the fulfillment of a statutory entitlement.

§ 16 SGB VIII (Allgemeine Förderung der Erziehung in der Familie) specifically obliges youth welfare offices to offer general support and counselling for families, including parenting education, courses on child development, and advice on family challenges. This paragraph provides the direct legal mandate for programs like HIPPY that work with parents to strengthen family learning environments.

More broadly, the Kinder- und Jugendstärkungsgesetz (KJSG), enacted in 2021, strengthened the emphasis on prevention, family support, and early intervention within the SGB VIII framework. The KJSG introduced new provisions aimed at improving cooperation between youth welfare services, health services, and schools, and at ensuring that support reaches families earlier and more comprehensively. The principle of Hilfe vor Eingriff (support before intervention) runs throughout the SGB VIII architecture: the preference is always for supportive, preventive measures over more intrusive forms of state intervention.

Additionally, the U-Untersuchungen system—a nationally recommended schedule of nine preventive health examinations for children from birth through age six—plays an important role in early detection and referral. In Bavaria and two other German federal states, participation in the U-Untersuchungen is legally required, and missed examinations trigger notifications to youth welfare authorities. This system provides a structural mechanism for identifying children and families who may benefit from additional early intervention support.

Related Laws and Policies in Los Angeles

Provided by Alina Carmona, Vincent Torres, Itzel Macedo and Veronica Martinez Peralta

The legal and policy framework for Head Start in the United States is rooted in the Economic Opportunity Act of 1964, which established the federal government's commitment to addressing child poverty through comprehensive early childhood programs (Brown & Lee, 2015). This Act reflected the broader War on Poverty philosophy: that educational disadvantage resulting from poverty was both preventable and addressable through public investment.

The Head Start Act, most recently reauthorized as part of the Improving Head Start for School Readiness Act of 2007, governs the program's implementation, eligibility criteria, quality standards, and federal oversight mechanisms. The Act requires programs to meet performance standards covering child development and learning, family and community engagement, health promotion, and program

management. It establishes parental involvement not merely as desirable but as a programmatic requirement.

The Individuals with Disabilities Education Act (IDEA), particularly Part C (which covers early intervention services for infants and toddlers with disabilities) and Part B (which covers special education for children aged three and above), provides additional legislative support for early intervention in the United States. Part C requires states to establish systems for identifying, evaluating, and providing services to eligible children from birth to three—creating infrastructure that complements Head Start's broader mandate.

At the California state level, the California Department of Education administers additional early childhood programs and funding streams that interact with federal Head Start allocations. The state's investment in transitional kindergarten and expanded preschool access reflects a recognition that early educational equity is a policy priority. However, advocates have consistently noted that the combination of strict federal income eligibility requirements and limited program slots means that a substantial proportion of children who would benefit from Head Start services remain unserved. This gap between need and availability represents one of the central policy challenges in the Los Angeles context.

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8. Participation in Open Child and Youth Work

Bianca Acuna
Ana Barillas
Aileen Dominguez
Adriana Vazquez

Fayruz Abu Al Haija
Ismeta Botonjic
Katharina Huber
Ola Kubub

8. Participation in Open Child and Youth Work

Fayruz Abu Al Haija, Ismeta Botonjic, Katharina Huber, Ola Kubub, Andrea Nagy

8.1 Introduction

Youth voice and youth rights describe the principle that children and young people are active agents in their own lives and legitimate participants in the decisions that shape their social environments. Far from being a modern invention, this principle is anchored in international law: Article 12 of the United Nations Convention on the Rights of the Child (UNCRC) obliges all signatory states to guarantee children the right to express their views freely in all matters affecting them, and to ensure those views are given due weight in accordance with the child's age and maturity (Council of Europe, 2023; UNICEF UK, 2024). The UNCRC frames participation not as a privilege extended by benevolent institutions, but as a foundational right inseparable from the broader project of child welfare.

In practice, however, the translation of this universal right into institutional reality varies enormously across national contexts. The gap between normative commitment and lived experience is precisely what makes youth voice and youth rights a pressing contemporary issue in social work. Two cities — Munich, Germany, and Los Angeles, United States — illustrate this variation with particular clarity. Both are large, diverse metropolitan areas embedded in wealthy industrialized nations that have ratified the UNCRC. Both house significant youth populations facing complex social challenges. Yet their approaches to organizing and legally protecting youth participation could hardly be more different.

In Germany, participation rights for young people are not merely aspirational; they are codified in federal law. The Social Code Book VIII (Sozialgesetzbuch VIII, SGB VIII), also known as the Child and Youth Services Act, entered into force in 1991 and has since served as the comprehensive national framework governing all child and youth welfare services. Section 8 of SGB VIII explicitly mandates that children and young people must be involved in decisions made by public youth services that affect them, in line with their level of development (European Youth Wiki, 2025a). Section 11 further specifies that youth work activities must respond to the interests of young people, be designed with their involvement, and enable them to achieve autonomy while exercising social responsibility. In Munich, this legislative architecture supports a dense network of open youth centers — the Offene Kinder- und Jugendarbeit (OKJA) — where participation is not an optional program add-on but a structural principle embedded in daily practice.

Los Angeles presents a contrasting picture. The United States has not ratified the UNCRC, and child welfare policy is organized primarily at the state rather than the federal level, producing significant variation across and within states (California Budget & Policy Center, 2023). In California, the dominant paradigm for youth welfare revolves around the foster care system, which as of 2024 contained 38,490 children statewide — the highest figure of any US state (CAFO, 2026). For young people in or exiting this system, participation rights depend less on statutory entitlement than on the availability of specific advocacy organizations. It is in this space that civil society actors such as the California Youth Connection (CYC) have played a transformative role, elevating youth voice to the level of legislative influence through decades of sustained advocacy.

8.2 Data from Munich and Los Angeles: Side-by-Side Comparison

The following table presents key quantitative and structural indicators across both contexts. The data underlines that while both cities face substantial challenges in the domain of youth welfare, the framing of those challenges — and the systems erected to address them — differs fundamentally.

	Los Angeles / California	Munich / Germany
Population under 18	~1.9 million children in LA County	~260,000 under 18 in Munich
Key concern	Foster care system; 38,490 children in CA foster care (2024)	Open youth work participation; ~8.6 million youth in programs nationally (2019)
Legal framework	State-level; California Welfare and Institutions Code; AB 899; AB 12	Federal: SGB VIII (§8, §11); UN CRC Article 12
Youth participation model	Advocacy-based; youth-led NGOs drive policy change	Legally mandated participation embedded in all youth services
Key organization	California Youth Connection (CYC), founded 1988	Jugendtreff Neuaubing / Open Youth Work (OKJA)
Focus group	Current and former foster youth, ages 14–24	All youth ages 10–18 in the district
Participation mechanism	Legislative advocacy, policy committees, youth conferences	Youth council (Jugendrat), drop-in, gender-specific programs
Strengths	Directly shapes legislation; youth voice in policymaking	Universal access; legally protected; democratic learning
Challenges	Fragmented; dependent on individual organizations; funding cuts	Implementation gaps; staffing shortages; post-pandemic recovery

Los Angeles Sources

Foster care population: California holds the nation's largest foster care population. As of September 30, 2024, 38,490 children were in out-of-home placements statewide (CAFO, 2026). Los Angeles County accounts for approximately 31% of California's total foster care caseload (California Child Welfare Indicators Project [CCWIP], 2025). These figures reflect a system that, by design, intervenes at moments of acute family crisis rather than offering universal preventive services.

Educational outcomes: Educational vulnerability among foster youth is severe. In the 2023–24 school year, only 65.7% of foster youth in California graduated from high school on time, compared to a statewide rate of 86.7% (California Department of Education, cited in Penny Lane Centers, 2025). By their mid-to-late 20s, fewer than 12% of former foster youth hold a two- or four-year college degree (Penny Lane Centers, 2025). These disparities speak directly to the structural barriers that limit meaningful long-term participation in civic and social life.

Housing instability: A 2024 RAND study of nearly 400 transition-age youth in Los Angeles County found that over one-third of those experiencing housing instability had a prior history of foster care involvement (Penny Lane Centers, 2025). Nationally, between 22% and 30% of youth who age out of foster care experience homelessness during their transition to adulthood (CAFO, 2026).

Munich Sources

Youth work participation in Germany: Prior to the COVID-19 pandemic, publicly funded youth work activities in Germany reached over 8.6 million young people, offered through approximately 156,700 programmes delivered by youth organisations, municipalities, churches, and other providers (Statistisches Bundesamt, 2021). The pandemic caused a sharp contraction: by 2021, the number of publicly funded services had dropped by 32% and participation by 49% relative to 2019 figures (Information System Child and Youth Services in Germany, 2023). Recovery remains incomplete; in Hamburg, for instance, participation rates in 2023 were still 20% below pre-pandemic levels, though already 33% higher than in 2021 (European Youth Wiki, 2025b).

Youth mental health: An interministerial German study found that 73% of young people reported feeling psychologically burdened in 2023, a figure that reflects the compounding effects of pandemic disruption, the war in Ukraine, and the rise of online extremism (European Youth Wiki, 2025b). These psychosocial pressures give additional urgency to the role of open youth centers as safe and participatory spaces for recovery and development.

Political participation and extremism: In 2024, the number of politically motivated criminal cases in Germany rose by 73.27% compared to the previous year (Bundeskriminalamt, 2024, as cited in the group paper). Federal programs such as Demokratie leben! were designed precisely to respond to this trend by fostering civic participation at all levels of the state and funding projects in open youth work that counter radicalisation.

8.3 A Munich Social Work Organization That Deals With These Issues

The Jugendtreff Neuaubing is a youth centre operated within the framework of Open Child and Youth Work (Offene Kinder- und Jugendarbeit, OKJA) in the Neuaubing-Westkreuz district of Munich. Like all OKJA facilities in Germany, it operates under the legal mandate of SGB VIII, with its core mission shaped by Sections 8 and 11 of that statute. The center is financed primarily through municipal funds from the City of Munich's Department of Education and Sports (Referat für Bildung und Sport) and is staffed by qualified social workers and youth educators.

The center offers open drop-in activities, sports, creative and media workshops, and gender-specific programmes such as 'Just 4 Girls' and 'Boys Only'. It is explicitly open to all young people between the ages of 10 and 18, regardless of social, cultural, or educational background, thereby embodying the universalist philosophy of German youth work. The defining feature of the center's pedagogical approach is its participation concept, built around four core principles: co-determination (Mitbestimmung), empowerment, voluntariness (Freiwilligkeit), and guidance rather than leadership (Begleitung statt Leitung). These principles do not stand as abstract values; they are operationalized through concrete institutional structures.

Central to the participation architecture is the Jugendrat, or Youth Council. Depending on the number of applications, the council consists of 12 or 16 members drawn from four equal demographic groups: girls aged 10–13, boys aged 10–13, girls aged 14–17, and boys aged 14–17. This design ensures equal representation across age and gender, and prevents older or more dominant voices from marginalizing younger participants. Council members hold clearly defined rights and obligations: they can influence the center's programming, budget allocation, and rules, and are consulted in discussions with local politicians and stakeholders. Over time, members gain additional rights — including independent access to the center's facilities — as they meet their responsibilities, creating a graduated framework

of earned autonomy. Upon turning 18, former members may continue their engagement as volunteers, transforming participants into role models for a younger generation.

Equally significant is the pedagogical orientation of the center's social workers. Rather than directing young people's activities, social workers accompany them — offering a framework of safety and support while leaving space for young people to make their own decisions and learn from their own mistakes. This approach, encapsulated in the phrase Begleitung statt Leitung, is a concrete expression of the empowerment philosophy underpinning OKJA across Germany. As Moser (2010) argues, participation cannot be taught theoretically: it must be experienced through action within democratic structures. The Neuaubing center operationalizes this insight in daily practice (as cited in the group paper).

A Lived Client Experience from Munich

A girl first visited the Jugendtreff Neuaubing when she was ten years old. Over the years, she became a regular and active member of the youth centre, eventually serving as a junior youth council member and later as a senior member. After completing her schooling, she undertook an 18-month federal voluntary service (Bundesfreiwilligendienst), during which she continued to work with young people in her neighborhood. By the time of this account, she had become a known and trusted contact person for an entire generation of local youth across the district and was planning to study social work (BASA). The social workers at the center described her trajectory as representative of what genuine long-term participatory engagement can achieve: the accumulation of civic knowledge, relational skills, and confidence that supports not only individual development but community cohesion. Her story also illustrates how the voluntary and relationship-based nature of the youth centre model creates conditions for sustained engagement that more coercive or crisis-driven interventions cannot replicate.

8.4 A Los Angeles Social Work Organization That Deals With These Issues

Provided by Bianca Acuna, Ana Barillas, Aileen Dominguez and Adriana Vazquez

The California Youth Connection (CYC) was founded in 1988 by a group of foster youth and supportive adults who recognised that the child welfare policies governing their lives had been developed entirely without their input (California Youth Connection, 2025a). Established as an independent non-profit organisation in 1999, CYC has since grown into the principal mechanism through which foster youth in California exercise a collective voice in policy and legislative processes. Today, the organization operates 42 chapters and sub-chapters across California's counties, with a membership of approximately 900 current and former foster youth aged 14 to 24 (California Youth Connection, 2025b).

CYC's model rests on the conviction that those most directly affected by the foster care system must be at the forefront of reforming it. Youth members participate in county-based chapter meetings, statewide conferences, and advocacy training programs, developing the leadership and policy skills needed to engage directly with legislators, commissioners, and public officials. The organization is guided by its youth members at all levels, including its Board of Directors. Staff positions — many of them held by former CYC members — provide continuity and institutional memory while preserving the organization's youth-led character (California Youth Connection, 2025c; California Community Foundation, 2024).

The legislative record of CYC is remarkable for a youth-led organization. Since 1992, when it secured its first piece of legislation making it easier for foster youth to obtain driver's licenses, CYC has

contributed to dozens of laws that have measurably improved outcomes for young people in California's child welfare system. Among the most significant are: Assembly Bill 899 (2001), which established a Foster Youth Bill of Rights and mandated that social workers inform youth of their rights at least every six months; Assembly Bill 12 (2010), which extended foster care support to age 21 and provided housing, education, and employment provisions for transition-age youth; and Assembly Bill 1393 (2009), which created priority campus housing for foster youth at California's public universities and community colleges (Foster Youth Help, 2025). In July 2025, CYC achieved its most recent legislative success with the passage of the Justice Through Foster Children with Families Act, which requires counties to prioritise kinship placements over unrelated caregivers (California Youth Connection, 2025d).

A Lived Client Experience from Los Angeles

Mariah Corder joined CYC when she was 14 years old, at a point when she was being moved between group homes and experiencing profound instability. She had initially come into contact with the organization because her sibling was already a member. In a personal account reproduced in the CYC Annual Report (2024), Corder described how her involvement transformed her from — in her own words — an unheard and angry young person into someone who had developed leadership, drive, and hope. The organization, she indicated, modelled how to use her voice effectively. Her case is not exceptional within CYC's membership; the organization explicitly trains its members to channel lived experience into policy proposals, creating pathways from personal pain to structural change. Corder's trajectory — from marginalized foster youth to active advocate — encapsulates the organization’s theory of change.

8.5 Comparison of the Organizations

The Jugendtreff Neuaubing and the California Youth Connection represent two distinct but internally coherent models of youth participation in social work. Comparing them reveals both the diversity of forms that genuine youth participation can take and the ways in which structural context shapes what is possible and necessary.

Target Population

The most fundamental difference between the two organisations lies in their intended constituencies. The Jugendtreff Neuaubing serves all young people in the Neuaubing district between the ages of 10 and 18, with no precondition of crisis, vulnerability, or system involvement. This universalist approach reflects the philosophy of OKJA: youth work as an entitlement for all, not an intervention for the few (Deinet & Sturzenhecker, 2013, as cited in the group paper). CYC, by contrast, serves current and former foster youth aged 14 to 24 — a population defined by its prior or ongoing involvement in the child welfare system. The CYC model is therefore necessarily more targeted, with participation acting both as a developmental tool and as a form of reparation for young people whose agency has been structurally diminished by state care.

Scope and Level of Participation

The youth council at the Jugendtreff Neuaubing enables young people to shape their immediate environment — the programming, spaces, and norms of their local center. This is meaningful participation in Moser's (2010) sense: it is genuine, binding, and consequential at the institutional level. However, as Sturzenhecker (2013, as cited in the group paper) notes, participation in open youth work settings typically does not extend to broader political structures. Young people influence the world of the youth center; they are less frequently positioned to influence municipal, state, or federal policy.

CYC operates at precisely this higher level of political influence. Its members participate in shaping legislation that governs the lives of tens of thousands of young people across California. This is a form of participation that Checkoway (2011, as cited in the group paper) describes as structural and political: it aims not merely at local empowerment but at systemic transformation. The trade-off is one of reach: CYC serves a relatively small membership of around 900 active youth, while the OKJA network in Germany reached 8.6 million young people nationally before the pandemic (Statistisches Bundesamt, 2021).

Legal and Institutional Foundation

Perhaps the sharpest divergence between the two models concerns their relationship to law and the state. In Germany, youth participation is a legal obligation, not a discretionary programme. SGB VIII requires public youth services to involve young people in decisions that affect them; OKJA facilities that fail to operationalize participation are in breach of their statutory mandate. This legal anchoring gives the German model its structural stability: even when individual youth workers lack enthusiasm for participatory approaches, the legal framework enforces a minimum standard.

CYC, by contrast, exists because the US system does not provide such structural guarantees. The organization emerged precisely to fill the gap left by the absence of legally mandated participation rights in the American child welfare context. Its success is remarkable, but it is also contingent: dependent on continued philanthropic and public funding, on the commitment of individual members and staff, and on the political climate in Sacramento. Recent cuts to federal prevention programs — including a reported 30% reduction in staffing at the Department of Homeland Security's Center for Prevention Programs and Partnerships in March 2025 — underline the vulnerability of US civil society organisations to shifts in political priority (Norris, 2025, as cited in the group paper).

Pedagogical Approach

Both organisations share a deep commitment to the principle that young people learn democratic skills by practicing them, not by being told about them. The Neuaubing center’s emphasis on Begleitung statt Leitung and the Youth Council's graduated framework of responsibilities reflect the same insight as CYC's leadership development curriculum: that confidence, civic capacity, and political knowledge are built through repeated, supported engagement with real decisions that have real consequences. Both organizations also attend to the relational dimension of youth work, recognizing that trust between young people and adult professionals is a prerequisit for genuine participation rather than its simulacrum.

8.6 Related Laws in Munich and Los Angeles

Legal Basis of Work

The normative foundation for youth voice and rights internationally is the United Nations Convention on the Rights of the Child (UNCRC), adopted by the UN General Assembly in 1989. Under Article 12, states parties are required to guarantee children capable of forming their own views the right to express those views freely in all matters affecting them, and to ensure that children's views are given due weight in accordance with their age and maturity (Council of Europe, 2023). Germany ratified the UNCRC in 1992; the United States has signed but not ratified the Convention, making it the only UN member state in this position. This foundational legal asymmetry has consequences that cascade through the two national systems.

Related Laws and Policies in Munich

The dominant legal instrument governing youth participation in Germany is the Social Code Book VIII (Sozialgesetzbuch VIII, SGB VIII), also referred to as the Child and Youth Services Act (Kinder- und Jugendhilfegesetz, KJHG). It came into force on 1 January 1991 and constitutes a comprehensive national framework. The following provisions are most directly relevant to youth voice and rights:

Section 1 SGB VIII: Establishes every young person's right to promote their personal development and to develop into a responsible and socially competent individual.

Section 8 SGB VIII: Mandates that children and young people must be involved in decisions by public-sector youth services that affect them, in line with their level of development. Children and young people are entitled to advice in questions affecting their personal development and living environment.

Section 11 SGB VIII: Defines the scope and mandate of youth work, specifying that activities must respond to the interests of young people, be chosen and designed with their involvement, and enable them to achieve autonomy while exercising social responsibility and citizenship (European Youth Wiki, 2025a).

Section 8a SGB VIII: Governs the protection of children in cases of suspected child welfare endangerment, requiring professionals to conduct risk assessments — with the child's involvement wherever possible.

The 2021 Act to Strengthen Children and Youth (Kinder- und Jugendstärkungsgesetz, KJSG) strengthened the inclusivity mandate of SGB VIII, explicitly requiring that youth work programs be accessible to young people with disabilities and establishing school social work (§13a SGB VIII) on a formal legal footing equal to youth social work (European Youth Wiki, 2025b).

At the constitutional level, Article 6 of the German Basic Law (Grundgesetz) protects the family and parental rights, while simultaneously establishing the state's duty to intervene where parental care endangers the child's welfare. This creates the constitutional grounding for the entire edifice of youth welfare law.

Munich youth centers also operate within the framework of the City of Munich's Department of Education and Sports (Referat für Bildung und Sport), which sets local funding and quality standards consistent with national legal requirements. The UN CRC Article 12 is explicitly incorporated into the

conceptual framework of German open youth work, ensuring that international human rights standards are translated into institutional practice.

Related Laws and Policies in Los Angeles

Provided by Bianca Acuna, Ana Barillas, Aileen Dominguez and Adriana Vazquez

In the United States, child welfare policy is primarily regulated at the state level, with considerable variation across states. California has developed one of the more progressive legislative frameworks for foster youth rights in the country, largely as a result of sustained advocacy by organizations including CYC. Key legislative milestones include:

Assembly Bill 899 (2001) – Foster Youth Bill of Rights: Established a formal list of rights for children in foster care and mandated that social workers inform youth of their rights at least once every six months. The bill was subsequently updated in 2020 to enumerate over 41 distinct rights (Foster Youth Help, 2025).

Assembly Bill 12 (2010) – California Fostering Connections to Success Act: Enabled foster youth to remain voluntarily in care until the age of 21, provided they meet conditions such as attending school or working part-time. The legislation provides housing, education, and employment support to bridge the transition to adulthood.

Assembly Bill 1393 (2009): Required California Community Colleges and California State Universities to provide priority housing to foster youth. The bill was revised in 2015 by AB 1228, which extended the same priority to homeless youth and required CSU and UC campuses to allow foster and homeless youth to remain in housing during academic breaks at no additional charge.

Justice Through Foster Children with Families Act (2025): CYC's most recent legislative achievement, requiring counties to prioritize kinship placements over unrelated caregivers for children entering foster care (California Youth Connection, 2025d).

At the federal level, the Fostering Connections to Success and Increasing Adoptions Act (2008) created financial incentives for states to extend foster care to age 21 — an initiative that California's AB 12 implemented in state law two years later. The federal Family First Prevention Services Act (2018) further shifted emphasis towards preventive services designed to keep families together, a direction consistent with CYC's long-standing advocacy priorities.

It is important to note that participation rights in the US foster care context are considerably less systematically institutionalized than in Germany. Where SGB VIII §8 creates a legally enforceable participation right applicable across all public youth services, equivalent statutory guarantees in California are more fragmented, typically focused on specific procedural rights (such as the right to attend court hearings or participate in placement decisions) rather than on a broader structural mandate for co-determination in service design.

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