

**Testimony in Support of an Ombudsman for independent Review of CPS Cases,  
2021 H.B. 4 as amended - Testimony of Dr. Margaret Egbert**

**Introduction to Witness:** My name is Dr. Margaret Ann Egbert. I am here today to support the creation of an ombudsman and an independent review process for CPS cases. I have attached my resume to this testimony so that legislators can assess my experience and expertise for testifying on this matter. I would have appeared in person but am recovering from surgery on my right (dominate) wrist and am currently disabled from driving. Even producing written testimony has been difficult as I cannot use my right had to type. I ask this Committee to forgive my typos. I have done the best I am able to at this time with my current physical disability.

**Credentials summary for Dr. Margaret Ann Egbert:**

- PhD in Educational Foundation, Juris Doctorate, Master of Education in Counseling & Guidance, Master of Fine Arts (Theater/Costume Design), Licensed Insurance Agent, Licensed Financial Advisor, Fair Housing Certification (FHC). Tax Credit Housing Management Specialist, and previously credentialed in Long-term Care Insurance
- Hawaii licensed attorney (currently inactive status)
- 5 years of practice in family law in Hawaii that included working as a court appointed GAL, court appointed counsel for parents and/or disabled adults
- Served for 6 months as a law clerk for a Hawaii Family Court judge
- Qualified as an expert witness in family court in the area of child abuse and neglect, and domestic violence
- Law Review, Richardson School of Law
- National Award in Remedies
- Foster parent to 4 children (2 teenager juvenile delinquent cases, 1 case with 5- and 9-year-old where the white mother was suffering from untreated bi-polar, and CPS supported the father paying for an attorney as they did not want to open a case)
- Single mother (post-divorce) to 1 child
- Served 10 years as the Second VP of the Stark County NAACP with 10 of those months stepping up as the Interim President.
- Served 10 years as Chair of Stark County NAACP Legal Redress Committee
- Dissertation: The Intergenerational Learning of Family Violence (see attached abstract) which involved 14 years of research in the area of violence, power & abuse, and the science of human behavior

**Reason for Needing an Ombudsman:**

- **Ohio's current CPS system is broken.** As currently functioning this results in real harm to many of those it is mandated to protect.
- **Needed changes will never happen because under the current system there is no accountability** for incorrect and /or wrongful acts by CPS staff.
- CPS supervisors should hold case workers to account, but most do not. Instead, they protect the caseworker.

- Discrimination complaints are investigated within ODJFS, and the investigators do not hold DJFS accountable. This system is near to being useless. **ODJFs should not be investigating itself.**
- GALs are appointed but have a financial stake in keeping cases coming. They are not equal in competence or quality. In the case that came through the Stark County NAACP, GALs for the children are largely ineffective and give the appearance of siding with ODJFS, the department that pays them.
- While the magistrates and judges should be upholding the rights of children and families, too often this is not the case. Too many go along with whatever the case worker wants, regardless of state and federal law. DJFS is not held to the proper burden of proof when constitutional issues are involved. I have had more than one attorney tell me that that case workers get caught in lies on the stand and there is no accountability for perjury. The result is that CPS cases are run virtually by the caseworkers with too many supervisors, magistrates and judges rubberstamping the requests of the case worker.
- Parents are barred from bringing civil actions against CPS under the guise that once custody is removed from the parents, the parents lose standing to speak for their children.
- There is no recognition of failed and failing polices. At the same time there is a lot of money being made off the failed and failing policies. Why would the Ohio foster care system change when there is a high economic incentive to continue as is, and there is little to no accountability for incompetence, failure, or wrongful activity?

**The creation if the Ombudsman will make the system and its players accountable.**

- Without accountability there will be no changes by those who benefit from the current system. This is succinctly explained by famed behaviorist B.F Skinner (Behind Freedom and Dignity). Without counter controls, those doing the controlling will not change their behavior. Without counter controls, those engaging in abuse of position and power are reinforced to continue in the wrongful conduct as it provides a direct benefit to the wrong doer. Behavior does not change without a shift in the cost-benefit ratio (Dr. Margaret Egbert).
- The reviewer must be independent of ODJFS and not subject to the influence of the wrongdoer.
- The Ombudsman would make ODJF workers and supervisors accountable for understanding their behaviors as well as accountable for learning the differences in types of harm and proper standards for assessing harm (actual or potential).
- The Ombudsman would make ODJF workers and supervisors accountable for upholding constitutional rights, nondiscriminatory behavior, getting necessary training, and how to balance competing interests of parent and child under federal and state law.
- Removal of children in dependency cases should trigger an automatic, outside of ODJFS, independent review. One of the reasons this should be an immediate trigger is that case workers do not appear to understand the differing degrees of need for CPS intervention which in turn

guides different types of intervention. This continuum goes from active abuse which usually requires removal of children due to immediate or on-going threat of harm, to neglect for potential of harm (discretion of the judge), to dependency which raises a concern of maybe there might be some kind of harm at some undefined point in the future. Dependency **should not result in immediate removal of the children**. If there is area threat of imminent harm, then CPS should be obligated to elevate the case to abuse or neglect and prove the case with clear evidence, not opinion.

- Caseworkers use boiled plate service plans with vague nonobjective standards for assessing service success. The Ombudsman can review service plans. Every case plan goal should be directly tied to specific behaviors (documented by dates and description of activities) that give rise to concerns. Then the service plan should specifically state how the service will address the behaviors that need to change, and what objective measurement will be used to document change or no change in behaviors.
- The ability to have an independent review will put courts and attorneys on notice that stipulations are made in the best interest of the children and parents, not a purpose driven by economics, saving on the costs of a trial. Money saved by good processes could then be put into improving the foster care system for cases where foster care is really needed. Like most states, the foster care system is overburdened and underfunded with too many foster placements offered because of the care givers need to make money not because of competence in caring for children.
- The Ombudsman would bring into plain view the financial motive for adopting children out to obtain income from the Federal government. This behavior has become a big business and is used by ODJFS and non-Ohio CPS state systems as a source of income to support inadequate and underfunded budgets.
- The Ombudsman would be able to assess and expose incompetent or over-reaching persons making judgements about mental health (psychologists are not competent to recommend or prescribe medication). An example of this occurred I was writing this testimony. I received a call from a parent who told me that a visitation observer commented on the mother's lack of progress with her mental health. This was traumatizing and clearing beyond the scope of the observer's duties and area of expertise. This goes on all the time and includes psychologists, nonprofessional observers, parenting teachers, social workers and even some attorneys.
- The Ombudsman could question and challenge DJFS dictates of service plan components and offers services selected by the case worker. Other providers who can offer the same type of services are deemed unacceptable by the case worker. This attitude results in only using ODJFS contractors who have a financial interest in pleasing the caseworker. This position falls into an area of potential violation of constitutional rights when caseworkers attempt to dictate where parents must go for medical and/or mental health care as well as what kind of treatment the parents must undergo. It often results in professional incompetent persons making assessments about mental health condition and recommendations for the use medication whether warranted or

not. I observed this was often the case where there was cultural incompetence with white case workers not understanding the culture and experiences of the black parent whose life experiences include coping with systemic racism in many of its institutions. Cultural incompetence and discrimination are readily apparent with the racist trope of the “angry black women” making black mothers attend anger management. It is normal for a parent to be angry at the loss of the child. That anger will be directed at the person perceived to be the “taker of the children.” I would raise a concern when a parent did not experience anger and grief at the loss of a child. Discrimination also shows up in I.Q. tests where persons of color or disabled persons score lower and are deemed below average intelligence.

- The Ombudsman could assess and protect against violation of civil rights for families and for the right to medical treatment. It could specifically assess areas where there is systemic racism as well as other types of discrimination by case workers. Systematic discrimination is particularly evident in the areas of race and mental health. Failure to address and correct discriminatory practices exposes the state to liability.

### **Harm from the broken system:**

- Destruction of family units. Family units are broken apart and destroyed when CPS removes children from parents. This causes harm to both parents and children. I refer this Committee to the research that already exists, and which was brought back into the spotlight when families were separated at the border. I would be happy to assist in gathering this research if this Committee opts to look more deeply into the true costs of family separation.
- Wrong judgement involving separation of children 5 and under can produce irrevocable negative physical changes to the brain structures of small children. Children ages 5 and younger have documentable negative changes in brain structures when exposed to trauma. Separation from a parent is trauma. I refer this Committee to the works of Dr. Bruce D. Perry one of the USA’s leading MD in the area of trauma and its impact on the brain and psychological functioning.

**Long-term economic costs:** There is no price tag on permanent irrevocable damage to families who are wrongfully separated. There is no price tag on the cost of the emotional harm.

There is a measurable cost in persons 5 years and older exposed to emotional and/or physical trauma which causes changes in brain chemistry which translates to changes in behavior and ability to function. Again, I refer this Committee to the works of Dr. Bruce Perry. Perhaps the most widely recognized result of trauma is PTSD, a condition well documented from aftereffects of being in combat. This can be assessed by costs within medical, health, emergency response, education, and social service systems.

There is a hard and measurable cost to retraumatizing parents who experienced family violence in their own lives. Just as combat many veterans suffer from PTSD, victims of violence, domestic or otherwise also experience PTSD. My experience working with families who lose children to CPS, parents who have PTSD are retraumatized by the actions of these workers, most of whom have no training in trauma

induced care, and too many of whom use a constant threat of termination of parental rights on the traumatized parent. CPS asks the parents to go into therapy to heal from past trauma but fail to understand that a therapist cannot work on past trauma if the parent is constantly being retraumatized in the present.

There will be an enormous long-term cost over generations as there is an intergenerational impact with children recycling into the system as they become parents. This impact is exponentially greater as one child who goes through foster care could have 2 or more children who end then up in foster care, who have children who again end up in foster care. As a society we cannot solve a problem if we create systems that actively exacerbate and grow the problem.

There is a hard economic cost from the emotional and/or biological harm to children and adults who will need medical care including psychiatric care, placements in foster care, involvement of the criminal justice system, and special education needs.

There is a hard economic cost from lost education achievements, and more IEPs, which translates to lost productivity as adults including the ability to work and become economically self-sufficient. These costs are not immediate but should not be ignored. Our children will pay the costs of the current failure of the present system.

**Findings from review of CPS Dependency cases:** The information on these cases came through the Stark County NACCP where parents and grandparents turned for help as there are other resources available to them. Independent of the findings from the Governor's Task Force on Ohio's Foster Care System. Most notably I found that there is systemic discrimination based on race, gender, and disability. There are a disproportionate number of removals from mothers who are black. There are a disproportionate number of removals from persons with a mental health diagnosis where the diagnosed condition does not pose a threat of harm or neglect. The second glaring issue was the lack of culture competence and trauma informed care practices by caseworkers as well as many of the service providers including licensed professionals.

**Case 1:** Dependency (mother is black, stepfather/father is white): Children removed on the grounds that family was homeless even though family signed a lease for permanent housing on the day of the first hearings, and the family had secured safe shelter while obtaining family. The case then morphed into a denial of return of children based on mental health on one parent even though there was no evidence that the minor current mental health diagnosis (which had resulted from mother's childhood abuse and multiple foster care placements as a child), had no threat of abuse or neglect of any kind. More egregious is that of the 3 children, the parents were denied visitation of the then 4 and 5 years. These children have never seen or heard from the parents since their removal in August of 2019 due to CPS violating the federal and state mandated rights of visitation. From a child's perspective this is akin to the death of the parents. After placement, the 4 year was sexually abused for over 2 months by another foster child (who was 13); the 2-year-old was checked for a potential femur fracture, a year later showed up with a cast on his arm, and at another visit with fingerprint bruises on his arm. The 4- and 5-year-old both ended up in therapeutic foster care on medications not approved for use in children. This

case is now set for termination. Overuse of medication of children in foster care is not new in Ohio. While the legislature investigated the issue, this continues to be a significant problem. Legislation without oversight and accountability becomes meaningless.

- If the sexual abuse of the 4-year-old, and the physical injuries had occurred under mother's care, she likely would have faced criminal charges.
- TCDJFS refused to consider out-of-state- relative placements/
- This case is set for termination of parental rights.

**Case 2:** Dependency (mother is black, father is white): Children: This case involves the same family as in case 1 but parents now resided in a different county. The new case was built entirely on the first case including homelessness even though the family was stably housed. In this case the mother called CPS prior to the birth of the new baby to prevent removal of the child. CPS refused to open case. Instead SCDJFS ignored all of mother's documentation, waited until the baby was born, and then with a police presence, in the hospital, made this nursing mother hand over her new baby to a waiting social worker. Initially, at the request of CPS, the hospital lied about taking the baby to see the pediatrician when the intent was to never return the child. Mother suspected this and refused this removal. Mother did file a formal complaint as this was a violation of trust between the patient and medical provider. In addition to building the entire case on the Tuscarawas case with all its errors, SCDJS kept removal based on the wrong representation to the court that mother had a substance abuse problem, which was not found by the substance assessor. The court was not told of the SCDJF error. Even though it was determined that there was no substance abuse issue, mother still had to go through substance abuse services, at state expense.

- This case is set for termination of parental rights.
- SCDJFS refuses to consider out-of-state relative placements that are available.
- This case is set for termination of parental rights.

**Case 3:** Dependency (mother is black): Children were removed based on allegation that mother did not provide a specialized wheelchair for the youngest child who had a neurological disability. The reason for the removal of the oldest child was to prevent separation of the siblings. SCDJFS did not provide a wheelchair for almost 9 months. SCDJFS subsequently separated the children putting them in two different foster homes.

This case was rushed to termination and is now on appeal. The reason for the rushed termination was due to noncompliance with service plan which did not consider the loss of counseling services in March through June of 2019 due to COVID, or that the mother had been severely injured in a car accident including a collapsed lung and broken clavicle which further hampered her ability to actively participate

in services while recovering from these severe injuries. Please note that this mother filed a formal complaint against the case worker. The rushing of this case to termination has an appearance of retaliation.

Mother had one criminal issue which was resolved and there was some old history of substance use, but this was also addressed and is no longer an issue.

- SCDJFS refused to consider out-of-state or relative placements even though there were options available.

**Case 4:** Dependency (mother is black): The case was appropriately opened when a young twin suffered a broken arm from another older but young child in the family. Mother was criminally investigated and cleared but SCDJFS continued to take the position that the mother caused the injury. The case morphed into a mental health issue (PTSD from domestic violence where mother left the abuser). Mother has a medical marijuana card with an appropriate use of medical marijuana to treat the PTSD, but SCDJFS is using this treatment against mother asserting that mother has a substance abuse problem.

- This case is set for termination of parental rights.

**Case 5:** Dependency (mother is white, father is back). This was an appropriate case to open as both parents had on-going significant substance abuse issues as well as significant mental health issues (schizophrenia, bipolar disorders). This case was not kept open nor set for determination. Instead, CPS closed the case by placing the child with the elderly white grandmother where the biological mother also resides. Prior to closing the case the black aunt had come forward willing to adopt the child. The aunt was retired military, a licensed social worker, and mother of 2 other children. Her husband was an active member of the military. Placement with the black aunt was never considered. The aunt had to pay for the paternity test to prove familial relationship.

**Conclusion:** Our foster care and CPS systems need immediate review and overhaul. This starts with an outside independent body. The problems in our current system will only grow if not addressed. There is a growing economic cost. There is an even greater moral imperative to make changes to better protect children and families. Children are our future. The families that raise children are the bedrock for creating healthy citizens. We need to act now.

Thank you for this opportunity to address the foster care and CPS system, crisis.

Dr. Margaret Ann Egbert

**ABSTRACT**  
**THE INTERGENERATIONAL LEARNING OF FAMILY VIOLENCE**  
**DR. MARGARET ANN EGBERT**

The book explains the causes of domestic violence using a cross-disciplinary approach, integrating existing models into a unified model that provides a scientific and testable explanation. The sociological model provides rich description of cultural contexts. The psycho-social model provides the theoretical framework for sociological applications. When combined, they provide a complete description of the contexts in which learning by consequences occurs. The model meets the scientific requirements of parsimony, predictability, testability, and is subject to falsification.

The behaviors that constitute “domestic violence” are a repertoire of an individual’s learned behaviors, the product of reinforcement at both the individual and at the cultural level. In any given social situation, there are usually several competing consequences, different rates and intervals of consequences, and fluctuations in individuals’ levels of deprivation and satiation. The model applies a cost-benefit analysis to weigh competing consequences using anthropology’s “emic-etic” model for data analysis. The combined behavioral and cost-benefit analysis provides a powerful vehicle for explaining why and when battered women stay in an abusive situation.

The model examines the role of education, and cultural practices in the transmission of social values, how values may be weakened or lost as children spend less time with adults and more time with peers, and how the child’s learning process changes from vertical to horizontal. Gender is a primary issue in family violence. The model considers how a child learns to be violent and the impact of the differing experiences of girls and boys. Behavioral principles are applied to demonstrate how social practices, and paternalism, serve to sanction or codify the use of domestic violence.

The book sets out a policy approach for developing programs to end family violence. The model demonstrates how to design intentional and effective social policies, including intervention and prevention strategies for dealing with the problem of domestic violence.