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SPECIAL REPORT

Foster Care: Safety, Permanence, And The Need To Address Children's Development

Recent federal initiatives are applying greater pressure on caseworkers and judges alike to more quickly place the nation's foster children in safe, permanent homes. However, much more needs to be done to improve the outcomes of this vulnerable population, according to two major reports on the child welfare system released this year by The Pew Commission on Children in Foster Care and by The David and Lucille Packard Foundation

Nearly 300,000 American children are removed from their homes and placed in foster care every year to protect them from abuse or neglect. In 2001, more than 800,000 spent some time in foster care and more than 530,000 were in foster care at any one time.

These young victims of maltreatment face numerous risks to their development. Like all children, they fare best when given a safe, stable, nurturing home. Unfortunately, foster care does not offer all dependent children such experiences. For too many, inadequate care in foster homes or being frequently moved from one temporary home to the next are facts of life.

While recent federal initiatives have focused on improving safety and shortening the length of time foster children spend in out-of-home placement, tending to their developmental needs remains a serious shortcoming of the child welfare system – one that must be addressed to ensure the well-being of the children it is charged with protecting.

The Problem

Foster care is intended to be a temporary refuge for

children identified as victims of neglect, or physical, sexual, emotional or psychological abuse. For too many, however, temporary shelter from maltreatment becomes a long-term saga.

Almost half of the foster children spend at least two years in care. About 32% of children stay in the system longer than three years. Almost 20% spend five or more years in foster care waiting to be placed in permanent homes. Some are frequently moved from one temporary home to the other. Many spend these years without what all children should have: loving parents, a stable home life, brothers and sisters nearby, and neighborhoods and schools that are familiar to them.

When children languish in care, even the most dedicated caseworkers are able to provide the attention and support children need. Caseworkers burn out quickly and the annual turnover rate, which drains the child welfare system of experienced workers, is high – 20% for public agencies and 40% for private agencies.

The David and Lucille Packard Foundation's 2004 *The Future of Children* report, *Children, Families, and Foster Care*, describes a foster care system that is an inefficient, uncoordinated patchwork of overlapping agencies – one that fails to provide adequate services to many and poorly tracks how well it attends to the educational, health, and mental health needs of foster children.

None of the states that have completed Child and Family Service Reviews (CFSR) required by federal law – including Pennsylvania – have met all of the performance measures, which include standards for the stability of

children's foster care placement, goals for finding them permanent homes, and for meeting their educational needs.

Most children enter the child welfare system due to neglect, according to the National Survey of Child and Adolescent Well-Being (NSCAW), the only large-scale national study of foster children. Children who have been physically abused are the next largest group. A smaller number of foster children have been sexually abused. Half of abused or neglected children in the child welfare system have experienced more than one type of maltreatment.

Such abuse and neglect leave them vulnerable to many factors that threaten development.

Risk Factors

Nearly all foster children are at risk of serious developmental setbacks before they enter the child welfare system. The neglect and physical, emotional, and sexual abuse they endure is associated with poor outcomes in health, brain development, cognitive and language skills, and social-emotional functioning.¹

Developmental problems associated with neglect include cognitive, language and academic delays, anxiety, depression, and aggression. A physically abused child risks bodily injury and may experience cognitive delays, aggressive behavior, problems with peers, and post traumatic stress disorder. Sexual abuse may lead to low academic performance, depression, inappropriate sexual behavior, and other high-risk behaviors. Lower cognitive and academic functioning and behavioral problems are associated with emotional abuse.

Abused children often have trouble bonding with caregivers. Attachment disorders can contribute to poor outcomes that can last a lifetime, including poor peer relationships, behavioral problems, and mental health problems. Children are more likely to have attachment problems when they are raised by caregivers who are inconsistent or use inadequate parenting practices.²

Abused children also risk changes in healthy brain development that leave them susceptible to heightened arousal and makes it more difficult for them to appropriately regulate emotions – problems that make it difficult for them to exercise self control and impair their ability to focus, remember, and learn.³

On the other hand, some children overcome such risks and avoid developmental setbacks. Characteristics of maltreated, yet resilient, children include high cognitive competence, self-esteem, and persistence.⁴ Other factors

associated with resilience include IQ, health, a warm relationship with a parent, being engaged in school, and support outside the family.

Risks To Foster Children

Foster children are more likely to face multiple risks, including poverty, abuse, neglect, an unstable home life, health problems, and parents who struggle with substance abuse. As a result, their developmental outcomes tend to be more compromised than those of children who do not experience out-of-home placement.⁵ For example:

- Foster children are more likely to have perinatal experiences that threaten their development, particularly fetal exposure to drugs and alcohol, which is increasingly being seen in children entering foster care.⁶
- Attachment disorders are a major concern. Studies of orphanages and large-group foster care programs suggest that children with multiple caregivers are more likely to develop insecure attachments and show indiscriminate friendliness.⁷
- Foster children are also more likely to have growth abnormalities and untreated health problems.⁸
- Higher rates of mental health problems are reported among foster children, including depression, lower adaptive functioning, aggression, impulsivity, and poor social skills.⁹
- Learning is a concern. Although the NSCAW reports most foster children score in normal cognitive and academic ranges, a higher proportion than would be expected show delayed cognitive development and compromised academic functioning. Half of the Child Protection Sample, for example, fell in the delayed range on a developmental screener.¹⁰

Placement and Risk

Studies suggest that the disruption and uncertainty of being shifted from one home to the next leads put foster children at greater risk of negative developmental outcomes.

- In the NSCAW study, foster children placed in multiple homes had more compromised outcomes across several

domains than children who enjoyed more stable placements.

- In another study, the number of placements children experienced predicted behavioral problems.¹¹
- Emotion problems, including aggression, coping difficulties, and low self-concept, are also associated with placement instability.¹²

Some 58% of children in foster care for one year are placed in nonrelative care. Kinship care, however, is a growing trend, with more than 32% of foster children being placed in the temporary custody of relatives. About 9% of children are in group homes or residential care.

How the trend toward kinship care will affect developmental outcomes is unclear. In one study, children in kinship care had higher functioning than those in the care of non-relative foster parents.¹³ In another study, adults who as children spent longer periods of time in kinship care had poorer outcomes than those who were cared for by unrelated foster parents.¹⁴ Children who are placed in group home care tend to have the poorest developmental outcomes.

Intervention

Growing up in a safe and stable home is critical to the healthy development of children.

Characteristics of stable families include parents who are not compromised by mental health problems, a stable relationship between children and caregivers, and appropriate, consistent and positive parenting. Stable homes offer warmth, emotional availability, stimulation, and a cohesive family.

A stable family and home life increases the chances of children accomplishing important developmental milestones. Family stability helps infants and toddlers form healthy attachments with parents or other caregivers and facilitates the development of language and emotional expression. Children of preschool age are better able to master self-regulation and reach other milestones when they are raised in a stable family. Older children do better in school, are better able to regulate their behavior, form identities, and plan for the future.

Children raised in stable families are more likely to have positive health behaviors and experience lower levels of illness.¹⁵ They receive well-child care and necessary im-

munizations. They do better academically and are less likely to be held back a grade or drop out of school.¹⁶ Stability at home also increases the likelihood they will enjoy healthy relationships with peers, develop better social skills, and avoid behavioral and mental health problems.¹⁷

Studies suggest creating more stable foster care experiences will enhance the development of dependent children. More stable, developmentally-sensitive foster home environments can be promoted several ways. For example:

- Understanding child development, the risks faced by foster children, and a child's individual developmental needs is a key step toward creating a healthier home life.
- Foster parents and agency caseworkers need to be able to work together toward making sure the child's individual needs are met. Foster parents who see themselves as part of an agency team tend to have more successful placements.¹⁸
- Foster families who empathize with children's needs and experiences, such as early exposure to trauma, increase the likelihood of children experiencing better social-emotional outcomes.
- Foster parents need to recognize and respect the fact that most foster children have many family ties and often feel connected to their birth parents, even when they have been abused or neglected. Kinship foster parents, who studies report are more accepting of family ties, report better relationships with foster children than nonrelated foster parents.
- Awareness and acceptance of racial or ethnic heritage also help children avoid stress and developmental setbacks while in foster care.

Innovative Approaches

Promising models of foster care are emerging that recognize the importance of relationships and community in the development of dependent children. These include:

- Family to Family foster care, first introduced in Pennsylvania and four other states, recruits foster parents from the child's community to not only care for the dependent child, but to also develop a mentoring relationship with the child's family. The idea is to make separation less

traumatic, help birth parents become better parents, and work as a team with social workers, community liaisons and others to mend troubled families.

- Shared Family care offers planned out-of-home care to parents and their children. Parents and host caregivers share in the caring of children and work toward improving the birth parents' parenting abilities so that they are able to provide a safe, stable and nurturing home. These arrangements tend to work best for parents making progress in substance abuse recovery, those with developmental disabilities, and socially isolated parents.

Policy

Recent federal reform is focused on the safety of children in care and more quickly placing them in a permanent home.

Among the most significant changes to the child welfare system in recent years has been the 1997 Adoption and Safe Families Act, which set federal goals for the safety and well-being of children in care, but emphasized permanence, by setting strict timetable for finding dependent children a permanent home, whether it means returning them to rehabilitated parents, finding them adopted parents, or finding them some other permanent living arrangement.

The number of children entering the child welfare system appears to be stabilizing – but at a high level. The 534,000 children in foster care in 2002 was almost twice the number in temporary homes in 1980.¹⁹

Research suggests that improving the developmental outcomes of foster children requires that policies go further to embrace strategies for promoting stable families and meeting the specific developmental needs of children.

Financing Foster Care

After nearly four decades, foster care continues to operate under a federal reimbursement system that offers counties much more money for out-of-home placement than it offers for services to help mend families and address children's developmental, educational, health, and mental health needs. The reason is found in how the two major federal child welfare funding sources – Titles IV-E and IV-

B of the Social Security Act – are structured.

- Title IV-E, the largest source of federal funding for child welfare, guarantees that states will be reimbursed for a portion of the cost of maintaining an eligible children in foster care. States may claim a reimbursement for every income-eligible child they place in a licensed foster home or institution. Title IV-E accounts for 40% of federal child welfare spending and expenditures are estimated at \$4.8 billion in fiscal 2004.
- Title IV-B provides states with flexible funds that can be used for a wide range of child welfare services, such as family preservation services, community-based family support, time-limited family reunification services, and adoption promotion and support. Title IV-B, however, accounts for only a small share of federal child welfare spending – \$693 million in 2004 compared to \$4.8 billion in Title IV-E funds.

Among its recommendations, The Pew Commission On Children In Foster Care calls for helping states establish a range of services for children in foster care by creating a flexible, Safe Children, Strong Families Grant from Title IV-B and a share of Title IV-E funds.

Juvenile Courts

Juvenile Court judges oversee the placement and care of dependent children and in that role are highly influential in matters of safety and the child's well-being. But long-standing structural issues in the judicial system interfere with the court's role.

Many courts, for example, do not track and analyze their caseloads, leaving them blind to emerging trends and limiting their ability to address causes of delays and identify children who are languishing in care or entering or reentering foster care at a very high rate. High caseloads and lack of training in child development issues also weaken the courts ability to address the developmental needs of foster children.

Among its recommendations, The Pew Commission On Children In Foster Care calls for adopting court performance measures to ensure that Juvenile Court track and

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analyze their caseloads, providing incentives and requirements for collaboration between courts and child welfare agencies, and giving children and parents a stronger voice in proceedings that deeply affect their lives.

In Allegheny County, reforms begun in 1998 have had a significant impact on what was an overworked dependency court. With private foundation support, the county hired four hearing officers to share the nearly 18,000 shelter, petition, review, termination of parental rights, and adoption hearings scheduled each year in Juvenile Court – a caseload that forced judges to each schedule an average of 63 hearings a day. Judicial caseloads fell to about 20 cases a day by 2000, which allowed more time for critical hearings, gave parents and children greater opportunities to bring matters before the court, and improved the court's ability to track ongoing cases.²⁰

Improving The Quality Of Care

A major challenge to promoting a developmentally-sensitive child welfare system is to broaden the focus from one chiefly concerned about the safety of children in foster care and finding them a permanent home, to one that also strives to optimize child functioning.

Several opportunities to improve the quality and appropriateness of the services and the care that foster children and families receive have been identified.

For example, researchers who report increased rates of health problems, developmental delays, and mental health problems among foster children call for screening and assessment for physical, developmental, and mental health problems at the time children enter foster care and periodically while they are in care.²¹

Quantitatively measuring how well the health and educational needs of foster children are met, including the measures in data systems, and having states invest in system improvements to strengthen the accountability of child welfare systems are among the recommendations published in The David and Lucille Packard Foundation report, *Future of Children* report, *Children, Families, and Foster Care*.

The report also recommends more intensive training for staff and building the skills of parents to improve the stability of the home life foster children experience. These steps include:

- Expanded training for foster parents and other caregivers so they understand their roles in preparing children for permanent families.

- Fiscal incentives for states to develop and implement successful strategies for improving the recruitment and retention of staff.
- Promoting approaches designed to engage families and communities in partnerships with child welfare agencies to develop support networks for children in communities.

In Pennsylvania, the state-supported University of Pittsburgh School of Social Work Child Welfare Education and Research Programs, has helped reduce turnover of child welfare staff and raised the education levels among caseworkers.

The initiative, one of the most comprehensive in the nation, provided 20,000 days of training to agency staff last year, including a program offering graduate-level education for child welfare workers. Some 9,000 foster parents also received training. Program outcomes include a turnover rate of only 3% among workers who have received a master's degree under the program. **(See the article, *Stabilizing The Child Welfare System With Better-Trained Agency Workers*, in this issue of *Developments*).**

These and other measures are examples of the next steps that studies argue are necessary to broaden the approach of the child welfare system to include addressing the developmental needs of foster children to improve their well-being while in temporary care and after they are placed in a safe, permanent home.

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This Special Report, written by Jeffery Fraser, is based on the above-referenced publications. It is not intended to be an original work, but a summary for the convenience of our readers. References noted in the text follow:

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