A photograph of a woman and a young child lying on their stomachs in a field of tall grass. The woman is on the right, smiling broadly with her eyes closed. The child is on the left, laughing with their mouth open and hands clasped near their face. The scene is bathed in warm, golden light, suggesting late afternoon or early morning.

Achieving Permanency for Children in Care: Barriers and Future Directions

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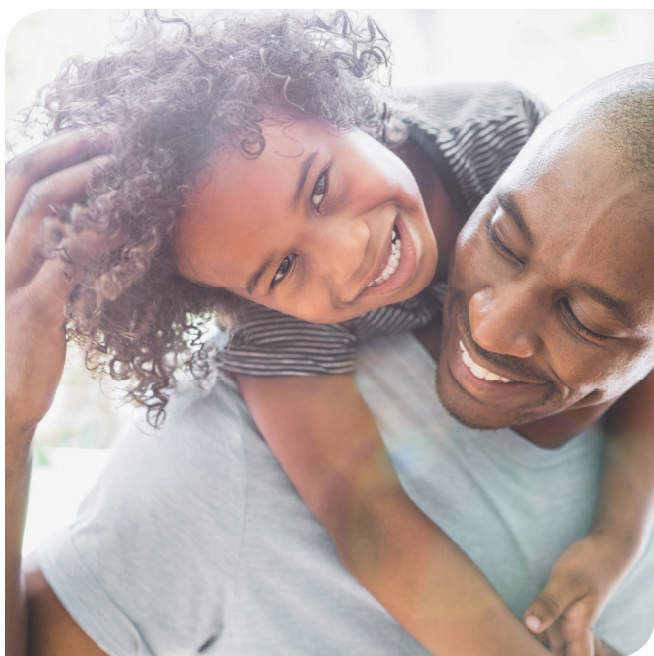
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Executive Summary

While permanency is a federally legislated goal for children in out-of-home care, many children do not achieve a permanent placement in a timely manner, if at all. A multitude of factors impact the likelihood that a permanent placement will be attained for a child in care.

- **System-level factors** that act as a barrier to permanency include problems in recruiting and retaining prospective foster and adoptive families, high caseloads and turnover among child welfare workers, inadequate resources to assist families, and an overcrowded court system.
- **Case-level factors** that may inhibit a child's likelihood of obtaining a permanent home are prior removal history, placement stability, initial placement, and reason for removal.
- **Child and family level factors** that impact permanency outcomes include demographic characteristics (e.g., gender, age, race/ethnicity), physical and mental disabilities, and parental substance use and mental health.

This paper reviews these factors in greater depth, as well as several programs and initiatives implemented to support positive permanency outcomes.



Introduction

One of the primary goals of the child welfare system, codified in and guided by the Adoption and Safe Families Act of 1997 (ASFA), is for children in care to attain a safe and stable permanent placement. A permanent home can help children foster healthy relationships with their caregivers, which translates into an increased likelihood of forming attachments as an adult. Furthermore, the absence of a committed and loving caregiver can undermine a child's self-worth and their subsequent ability to trust others. A permanent home also provides children with stability and structure that promotes their sense of security as they mature and learn to navigate their social environment. Children who lack a permanent home are often painfully aware of the tentative nature of their situation. Having a permanent family and home provides children with the stability that they crave and promotes a sense of belonging.

When case planning for children in care, permanency planning calls for "a legal, permanent *family* living arrangement" (U.S. Department of Health and Human Services [USDHHS], 2005, p. 2) to be established. Permanency can be achieved through a variety of

placement options. Per the Adoption and Safe Families Act of 1997, when possible, the preferred permanency plan for children in care is reunification with their parents. When reunification is not feasible, other acceptable options, in decreasing order of legislative preference, are adoption, legal guardianship, permanent placement with a relative, and another permanent living plan.

Although permanency planning has been a mandated goal of the public child welfare system for the last two decades, agencies continue to struggle to achieve permanency for children in a timely manner. According to the most recent figures available, the U.S. Children's Bureau estimates 427,910 children in the United States were in out-of-home care in Fiscal Year (FY) 2015 (USDHHS, 2016). Of the children who exited out-of-home care, the mean length of time in care was 19 months. Additionally, in FY 2015, the number of children legally free for adoption through termination of parental rights (n=62,378) exceeded the number adopted through the child welfare system (n=53,549), thus further contributing to the growing pool of children in care awaiting adoption (111,820) (USDHHS, 2016).

Factors That Influence Permanency

A number of factors influence the likelihood of obtaining a permanent placement for a child. These factors range from systemic issues to case factors to child and family characteristics, representing a complex and multifaceted challenge for child welfare advocates and professionals seeking to improve permanency outcomes.

System-Level Factors

Recurrent barriers within child welfare systems decrease the likelihood and overall timeliness of permanent placements for children in care. Challenges include the recruitment and retention of a sufficient number of foster, adoptive, and kinship homes to meet the needs of children in care, the provision of adequate training and preparation for these homes, and limited child welfare staff dedicated to address and mitigate challenges experienced by foster, adoptive, and kinship families (Sullivan, Collins-Camargo, and Murphy, 2014). Foster, adoptive, and kinship homes that lack adequate preparation and/or those

lacking the necessary services and supports to ensure the success of the placement can have a negative impact on permanency outcomes because of the decreased quality of care and the increased number of placements children experience when the placement fails.

Frequent staff turnover, high caseloads, and insufficient resources have also been shown to impede the child welfare system's ability to support reunification and other permanent placement options. Employee turnover in the child welfare systems results in children being shuffled from one caseworker to another, reducing the likelihood they will achieve permanency or that it will occur in a timely manner (Flower, McDonald, & Sumski, 2005). Turnover also reduces the responsiveness of agency staff, which in turn delays the process for prospective adoptive families. These delays often negatively impact the willingness of prospective adoptive families to move forward with the adoption process (Kamarck, Hansen, Wilson, & Katz, 2012; McRoy, 2007). Additionally, high caseloads and insufficient

Factors That Influence Permanency (cont'd)

resources have also been found to be a problem within court systems, resulting in delayed hearings that further impede permanency for children (McRoy, 2007).

Case-level Factors

Research suggests that case characteristics may also impact permanency rates. In general, the more disruptive or frequent contact a child has with the child welfare system, the less likely they are to experience a permanent placement. Decreased placement stability (i.e., increased number of foster placements experienced by a child) has a negative effect on children achieving certain forms of permanency (Carnochan, Lee and Austin, 2013; McDonald, Poertner, & Jennings, 2007; Hayward & DePanfilis, 2007), as do cases where there is a history of prior family involvement with child protective services (Akin, 2011; Hayward & DePanfilis, 2007). The type of initial placement that a child experiences, such as being placed in family foster care or congregate care, also has a significant, though variable, impact on the type of permanency outcome, if any, a child attains (Akin, 2011; Connell, Katz, Saunders, & Tebes, 2006). Reason for removal (i.e., the type of child maltreatment reported in the case file)

is commonly cited as a factor in permanency outcome research (c.f., Akin, 2011; Connell et al., 2006; McDonald et al., 2007); however, the literature is inconsistent regarding how specific causes of removal (e.g., neglect, sexual abuse) actually impact permanency outcomes.

Child and Family-Level Factors

Characteristics of children and families have also been found to play a role in permanency outcomes. Research has shown that a child's gender, race, and age may impact their likelihood of achieving permanency. For example, the time to permanency is longer for older children and children of color (Aguiniga, Madden, & Hawley, 2015; Carnochan et al., 2013). In addition, children with mental or physical disabilities (Carnochan et al., 2013; Choi, Huang, & Ryan, 2012) or mental health issues (Akin, Bryson, McDonald, & Walker, 2012) are less likely to reunify with their parents. For parents who experience issues with substance abuse or mental health concerns, research has also found a decreased likelihood they will be reunified with their children (Aguiniga et al., 2015; Choi et al., 2012).

Promoting Permanency

Extensive efforts have been made at the federal, state, and local levels to address the growing number of children in care. Public child welfare agencies, private foundations, and local public and mental health agencies dedicated to child welfare issues have forged a number of initiatives and practice models designed to promote permanency for children in care. A sample of program initiatives and practice models is provided below.

AdoptUSKids

Perhaps one of the largest federal initiatives, AdoptUSKids, is a project of the U.S. Children's Bureau operated through a cooperative agreement with the Adoption Exchange Association. The project was initiated in 2002 through

Congressional mandate with the purposes of raising public awareness about the need for foster and adoptive families and supporting States, Territories, and Tribes in their efforts to find families for children in foster care (AdoptUSKids, 2015). AdoptUSKids is arguably one of the most targeted and intentional large-scale initiatives implemented in the last two decades to address and promote permanency and reduce the number of children awaiting adoption.

Key Federal Legislation Related to Improving Permanency Outcomes

Since the 1980s, a number of legislative acts have been passed and implemented to guide and promote states' and tribes' permanency efforts. The following legislation provides the framework for the permanency process for children in foster care:

Adoption Assistance and Child Welfare Act of 1980

The first piece of legislation to address the long-term placement in and virtual abandonment of children to the foster care system was the Adoption Assistance and Child Welfare Act (AACWA) (P. L. 96-272). AACWA required all

placement options, including reunification and adoption, to be considered. The Act also required "reasonable efforts" to avoid out-of-home care and support family reunification of children in care.

Multiethnic Placement Act of 1994 and The Interethnic Provisions of 1996

The Multi-ethnic Placement Act (P.L. 103-382), as amended by The Interethnic Provisions of 1996 (104-188), mandated that race and ethnicity could no longer be used in foster care or adoption placement decisions by agencies receiving federal funds. The legislation also required states to make efforts to recruit foster and adoptive families

who reflected the racial and ethnic diversity of children in care. In 1996, The Interethnic Provisions forced foster and adoptive home recruitment efforts and mandated that agencies who received federal funds could not delay or deny foster and adoptive families or make placement decisions based on race, ethnicity, or national origin.

Adoption and Safe Families Act of 1997

The Adoption and Safe Families Act (P. L. 105-89) was enacted to promote the safety, permanency, and wellbeing of children in out-of-home care. Specific guidelines were established to help reduce long-term placements in foster care settings and

promote achievement of permanent homes for children. Key provisions included timeframes for states to initiate termination of parental rights for children in care and exceptions for when states could forego family reunification efforts.

Fostering Connections to Success and Increasing Adoptions Act of 2008

In 1996, the Personal Responsibility and Work Opportunity Reconciliation Act required States to give preference to adult relative caregivers over non-relative caregivers when seeking an out-of-home placement for a child. The Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-135) reinforced the preference for family placements and promoted maintenance of family connections

by mandating timely notification of relatives when a child is placed in care. In addition, the legislation mandated that states must inform relatives about how to become a licensed foster parent. Additionally, the legislation provided stipulated circumstances under which States may waive certain licensing standards for relatives seeking to become licensed foster parents.

Permanency Innovations Initiative

Launched in 2010, the Permanency Innovations Initiative was a 5-year, \$100 million dollar multi-site demonstration project developed to address permanency outcomes for child populations at risk of long-term foster care (e.g., children of color, older children, children with emotional disorders). Six grantees were awarded funding to “develop, implement, and evaluate interventions” during the grant period (USDHHS, 2014). For example, the RISE (Recognize Intervene Support Empower) intervention focusing on LGBTQ children in foster care in Los Angeles found in an early qualitative review that youth described improvements in their relationships with natural and, to a lesser degree, formal supports.

Solution-Based Casework

Solution-based casework (SBC) is a case management practice model based on family life cycle theory, cognitive behavioral theory, and solution-focused family therapy. A partnership approach between the family, caseworker, and service providers allows families to have an active role in case planning, develop prevention skills, and increase their sense of self-efficacy. SBC has been shown to have a positive impact on helping child welfare systems exceed federal permanency goals (Antle, Christensen, van Zyl, & Barbee, 2012; van Zyl, Barbee, Cunningham, Antle, Christensen, & Boamah, 2014). SBC has been deemed a “promising practice model” by the California Evidence-Based Clearinghouse and is currently being used in several states (e.g., Kentucky, Washington) as a model of practice.

PROGRAM SPOTLIGHT: TRAVIS COUNTY CPS REINTEGRATION PROGRAM

The Travis County CPS Reintegration Program is an innovative partnership between Travis County and the Texas Child Protective Services Division (CPS) designed to promote permanency for children with complex mental health needs who are in therapeutic foster care and who have an approved family or kinship caregiver willing to care for the child. The program relies on case managers who partner with families to create child and family teams, access traditional and non-traditional services, and advocate for the child and family within other systems (e.g., school, health, mental health). The program utilizes an intensive wraparound service model to provide home- and community-based services to help children transition from therapeutic foster care to their homes and back into the community. A case manager works with the child’s family to develop a plan of care based on the family’s needs and strengths and assists the family

in problem solving. The case manager provides intensive on-going support to the child and family prior to reunification, as well as after the child is reunified with the caregiver. Post-placement, case managers collaborate with CPS to work with the family for 6 months. Services are then provided for the family for an additional 6–9 months after CPS ceases involvement with the family. Case managers maintain small caseloads of no more than 10–12 children and their families and use a flexible funding pool to purchase services and supports. Additionally, program staff has cultivated a diverse list of providers to address families’ needs, including respite care, therapeutic mentoring, tutoring, parent coaching, behavioral aid, and home-based individual and family therapy. The flexible funding pool also allows case managers to provide occasional supports the children’s families for basic needs (e.g., rent, utilities, clothing, and food).

GAPS IN KNOWLEDGE, GAPS IN CARE

Increased research is needed to identify successful strategies to recruit and retain foster and adoptive families. While agencies have had some success through targeted recruitment initiatives, current efforts have not yielded a sufficient number of foster and adoptive homes to adequately fulfill ongoing placement needs. Reasons for this deficit are known (e.g., poor agency responsiveness to families, inadequate preparation and education of families). However, what is less understood is how to implement and sustain large-scale efforts so that agencies have access to a surplus of families willing to care for children across the age spectrum and with more intensive physical and mental health needs.

Additional research is needed to clarify the role of case-level factors in permanency outcomes. While there is widespread evidence that initial placement, type of placement, placement stability, and reason for removal can affect permanency for children in care, the conflicting evidence over the role of these variables in permanency outcomes necessitates additional exploration.

Similarly, additional research to clarify which programs and practice models are most effective with different

types of cases and populations would be beneficial. While a number of practice models have promising research evidence indicating the overall effectiveness of the approach, it is often unclear which models are best suited to helping different subsets of cases/children (e.g., older children, children with disabilities, or children in large sibling groups) achieve positive permanency outcomes. Addressing the need for a range of approaches, including culturally responsive practice models, would help facilitate quick and stable permanency outcomes for children in out-of-home care.

As the needs of different cases and sub-populations of children in care are better understood, the pervasive problem of limited and intermittent investment by communities, states, and the federal government in child welfare systems must also be addressed. While high investment demonstration programs often yield positive permanency outcomes, many of these programs fail to progress beyond the pilot stage or lose funding after several years. As such, promising approaches to addressing permanency for children in care are often abandoned due to lack of investment and sustainable funding sources.

FUTURE DIRECTIONS

For children who have been placed in out-of-home care, the child welfare system has an obligation to ensure that they have a safe and secure permanent placement where they can develop and thrive. Whether that placement is with their parents, other relatives, or an adoptive family, it is incumbent upon the child welfare system to continue to work towards preventing the entry of children into foster care, reducing the time that children ultimately spend in care, and increasing the likelihood that all children will have a permanent home.

Research has consistently identified factors that serve as barriers to permanency for children; therefore, a primary goal for the child welfare system should be the mitigation and eventual elimination of these factors. Initiatives to promote permanency are crucial to ensuring the overall wellbeing of children in care; however, increased efforts must also be made to address the social

conditions that are associated with abuse and neglect that ultimately lead to out-of-home placement. To that end, there must be a refocused and renewed energy on advocacy efforts to reduce racial and ethnic disparities, address socioeconomic inequality in our communities, and increased access to evidence-based substance abuse and mental health treatment services. Coupled with early prevention and intervention programs for families, a reduction in inequality and increased access to supportive services will lessen the burdens experienced by families and improve their ability to provide a safe and stable home for their children. Moving forward, system-wide efforts to improve permanency outcomes should focus on successful recruitment and retention of foster, adoptive, and kinship families, the retention of a trained and knowledgeable child welfare workforce, and true and sustainable financial investment and commitment to programs that meet children and families' needs.

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