



School of Social Work

UNIVERSITY OF ILLINOIS URBANA-CHAMPAIGN

January 2023



Exploring the Role of Guardianship in Effective and Equitable Permanency

Key Findings from Permanency Professionals

CHILDREN AND FAMILY RESEARCH CENTER
TRANSLATIONAL RESEARCH - OFFICE OF RESEARCH AND CHILD WELL-BEING

Exploring the Role of Guardianship in Effective and Equitable Permanency

Key Findings from Permanency Professionals

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When children are removed from their homes because of maltreatment, the goal of the Illinois Department of Children and Family Services (DCFS) is to return them to a loving, safe, stable, and permanent home as soon as possible. Ideally, children are reunified with their birthparents, but when this cannot be done safely, DCFS seeks to place children and youth in other permanent homes. Unfortunately, the most recent statistics show that 47.3% of children and youth who entered substitute care from DCFS in 2018 were not placed in a permanent home within three years.¹ Some never find permanent homes: in 2020, 598 Illinois youth aged out of substitute care without ever returning to a permanent home during their childhood.²

The difficulty of placing children in permanent homes is worse for Black children and youth in substitute care. While a majority of White children entering substitute care with DCFS in 2019 reached a permanent home within three years (56.0%), less than half of Black children did (45.0%).³ This rate has consistently been higher for White children for a number of years. Adoption has traditionally been the preferred permanency option for children who cannot be reunified, but it can be difficult to achieve, and adoption rates after three years have been lower for Black than for White children. In 2018, 8.6% of Black children in substitute care in Illinois were adopted within three years versus 15.0% of White children.⁴

This brief reports on research on one rarely used permanency option: guardianship. With guardianship, a caregiver becomes the permanent caregiver of the child but does not adopt the child. Usually the guardian receives a subsidy from DCFS to support the care of the child, which is referred to as subsidized guardianship. Typically, the guardian is kin to the child, such as their aunt/uncle, grandparent, or older sibling. Fictive kin (non-family members with a relationship to the child, such as a teacher, neighbor, etc.) may also take on this role and associated responsibilities. At the time that guardianship is awarded, the guardian has already been providing stable and loving foster care for the child. As one review described it, guardianship in Black families is consistent with “the value placed on extended family and taking care of one’s own,” and draws on deeply rooted traditions of kinship networks in African cultures and in African American communities.⁵ With guardianship, birthparents’ rights do not need to be terminated, so typically one or both of the birthparents will retain some parental rights, including the right to visitation. Birthparents can also, at a later time, petition the court to regain custody of their children. Many kin caregivers are committed and able to provide children permanent homes, but they do not want to terminate the parental rights of the birthparent, who is often a close relative such as their son, daughter, or sibling. More effective use of guardianship may help increase the number of children and youth in substitute care who reach a permanent home.

Part of the context of this study is a longstanding debate about the value of adoption versus guardianship. Some experts have claimed that adoption represents a greater commitment and is more stable,⁶ and a preference for adoption has been codified in both Federal and Illinois law,⁷ as well as the guidelines of the National Council of Juvenile and Family Court Judges.⁸ But recent research, discussed below, finds no difference in stability between adoption and guardianship. Moreover, a number of experts argue that the preference for adoption can obstruct stable guardianships with kin caregivers who can provide children with permanent homes within their extended family.⁹

In our study, we gathered data about stakeholder experiences with and opinions about guardianship, in order to learn more about how and when to implement it effectively.¹⁰ Stakeholders included both professionals working on permanency cases and caregivers who had either been granted permanent care of a child or were designated by DCFS as having the goal of becoming the permanent caregiver. This brief highlights findings from interviews with and a survey of professionals working on permanency. We interviewed 40 professionals across

five stakeholder groups (11 permanency caseworkers, 13 permanency casework supervisors, 6 DCFS attorneys, 5 guardians ad litem, and 5 judges). Utilizing what was learned from the interviews, we then gathered survey data from 267 permanency caseworkers and supervisors. We sought to understand:

- The options for achieving permanency, with a particular focus on guardianship.
- How stakeholders have experienced different permanency options and how they perceive them now.
- Stakeholders' perceptions of what contributes to racial disparities in permanency planning and outcomes.

This research brief presents highlights from this research. We are also preparing more comprehensive reports that discuss the research methods and present complete results and implications. Below we present a brief description of 10 key findings from the research with permanency professionals.

1. Permanency professionals are committed to supporting permanency outcomes in the best interests of the child. They believe that what is best varies with each child's unique circumstances. More professionals emphasized the importance of evaluating each individual case than expressed a general preference for either adoption or guardianship.

Professionals differed in their appraisal of adoption and guardianship, but uniformly they were committed to making a permanency decision that was in the best interest of each child given their unique circumstances. For both adoption and guardianship, most interviewees described different cases in which each was the best permanency choice. When asked in the interviews to compare the impact of adoption and guardianship on stability and child well-being, a number of interviewees saw no difference or said it depended on the case. Others felt that adoption was more stable—see below.

In the survey, we asked permanency caseworkers and supervisors to compare the value of adoption and guardianship on 34 different criteria. On 22 of these criteria, respondents selected the choice “it depends on the case” or “no difference” more often than choices favoring adoption or guardianship. A previous analysis of permanency planning in Illinois talked about “adoption hawks,” and “guardianship doves”.¹¹ Adoption hawks had a strict interpretation of the requirement to rule out adoption before guardianship can be considered, and they gave less credence to family members' concerns about terminating parental rights. Guardianship doves were less strict in interpreting the adoption rule-out, and placed more weight on family preferences. Our data suggest that most professionals are flexible and tailor their services to the individual child and their specific needs. They cannot be divided into such camps because they are looking first and foremost to see what is best for each child.

One caveat is that some professionals we interviewed had little experience with subsidized guardianship, because it was scarcely used in their agency. Some admitted that they had insufficient knowledge to answer our questions about guardianship confidently.

2. Professionals described a wide range of circumstances in which guardianship is the best choice for permanency.

The most common circumstance for preferring guardianship was when the kinship caregiver wanted to remain in the role of the grandparent, aunt/uncle, or sibling, and they reject adopting the child as taking on the role of the child's “parent”. These kin also reject adoption because it means terminating the parental rights of the birthparent, who is their child, sibling, or even their parent. Similarly, children may be loyal to their birthparents and not want their parental rights terminated, even if the children realize their birthparents should not take care of them. Children and youth may favor guardianship because it gives them an opportunity to retain their relationship with their birthparents, even if the birthparents cannot care for them.

A number of survey results conveyed the value of guardianship for supporting relationships in the caregiving family. A majority (62.9%) of survey respondents felt guardianship could be indicated when “An adolescent (age 14 or older) desires an ongoing relationship with their birthparent”; 35.2% felt this was also true for children under age 14. On the survey, guardianship received more endorsements than adoption for:

- Maintaining the child's relationship with their birthparents
- Maintaining the adolescent's relationships with their birthparents
- Responding to families that had longstanding informal kin caregiving before DCFS became involved
- Supporting permanent caregivers' relationship with birthparents
- Maintaining contact with siblings
- Enabling birthparents' visitation with their child
- Helping kin caregivers feel comfortable with the permanency decision
- Getting birthparents to accept a permanency plan

Several participants felt that guardianship should be used mostly or entirely for older youth. They explained that these youth are aware of their situation; have established, longstanding relationships with relatives; know their birthparents; and may not need or accept adoption. One key fact making age important is the rule that allows youth age 14 or older in substitute care to veto any proposed adoption, which then often makes guardianship the preferred permanency option if reunification is not possible. Even if adolescents are not old enough to have veto power over an adoption, their wish to have a relationship with their birthparents and/or maintain their birthparents' rights may influence the court to approve guardianship. Most respondents (88.3%) felt that guardianship was indicated when "An adolescent (age 14 or older) does not want to be adopted", while almost half (49.3%) felt that this was also true for children under age 14. More than three-quarters of professionals (76%) rated an adolescent's wishes as extremely important when deciding on a permanency plan, and nearly half (46%) rated children's wishes as extremely important in this situation.

One challenge in applying a child age criterion to the choice of guardianship is determining the age threshold for a child who would be considered old enough to be a good candidate for guardianship. Our interviewees mentioned teenagers as old enough, and 2 and 3-year-olds as too young, but there was little discussion of the appropriateness of guardianship for children with ages in between. Survey respondents who felt that DCFS or the judges preferred adoption over guardianship when a child is under a certain age were asked to specify what that age threshold was. The ages they provided ranged from 6 to 14 years of age.

Several interviewees mentioned that guardianship was indicated when birthparents were loving and engaged with their children but were judged to be incapable of caring for their children because of the child's special needs or because of birthparents' health or mental health problems or cognitive incapacity. More than half (57.7%) of survey respondents felt that guardianship might be indicated when "Birthparent(s) are complying with the service plans but cannot provide for the safety and well-being of their child."



Several participants saw value in using guardianship when birthparents have the potential to change over the course of years and become capable of providing the nurturance and safety their children need. Participants based their judgment on observations of the birthparents' emotional connection to their children and their participation in services and other efforts to change. Guardianship would make it possible for them to regain custody if they were able to change in this way. More survey respondents preferred guardianship (41.5%) over adoption (10.4%) when birthparents are following a service plan but are not able to care for their children at this time. Another example mentioned involved birthparents combatting substance abuse, which often requires a lengthy period of recovery. More survey respondents (42.7%) favored guardianship over adoption (6.4%) when a birthparent is taking steps to overcome an alcohol or drug problem but needs more time. However, some interviewees felt there was a risk of unnecessarily delaying permanency based on false hopes for birthparents, who may not be able to change enough to regain custody of their children.

3. Many professionals saw no difference in stability between adoption and guardianship. However, the belief that adoption is more stable than guardianship was also common. Professionals appear unaware of the research that shows little difference in stability between the two.

When we asked interviewees to compare the impact of adoption and guardianship on stability, many said they thought adoption was more stable. They pointed to the fact that guardians have the option to terminate the guardianship and return the youth to DCFS care, and that guardianship leaves open the possibility that birthparents could successfully petition the court to regain custody. Some professionals expressed concern that birthparents involved in guardianships would disrupt children's lives. Forty percent of respondents to the professional survey reported they thought that adoption was more likely than guardianship to last until the child reached 18. But several interviewees perceived no difference in stability between adoption and guardianship, or they reported that it all depended on the case. Likewise, almost half of survey respondents (48.7%) felt that there was no difference between adoption and guardianship on stability, or that it depended on the case.

Although we did not specifically ask about their knowledge of research on guardianship, it was striking that no participants shared any knowledge about the low rates of disruption for both adoption and guardianship for Illinois children.¹² Recent research shows no difference in the stability of guardianship and adoption when the researchers controlled for child age differences in these two types of cases and adjusted for the fact that adoption was never a choice in some guardianship cases.¹³

4. For a range of different circumstances and outcomes, the proportion of professionals who favored adoption was much larger than the proportion who favored guardianship.

For the following survey items, the largest proportion of respondents thought adoption was better than guardianship:

- Providing assurance of having a permanent home to children under age 14 (60.0% adoption, 31.1% no difference/depends on the case, 3.4% guardianship)
- A child's sense of being part of the family (59.6% adoption, 31.5% no difference/depends on the case, 3.0% guardianship)
- Protecting the child (under age 14) from abusive birthparents (52.8% adoption, 38.6% no difference/depends on the case, 2.2% guardianship)
- Providing assurance of having a permanent home to children over age 14 (44.2% adoption, 37.8% no difference/depends on the case, 9.0% guardianship)

On other items the proportion favoring adoption was essentially equivalent to those selecting no difference/it depends.

- An adolescent's sense of being part of a family (43.4% adoption, 41.4% no difference/depends on the case, guardianship 7.1%)
- Avoiding relatives allowing birthparents to take children home behind the agency's back after the case is closed (41.6% adoption, 40.4% no difference/depends on the case, guardianship 5.6%)

For many items, even when the largest proportion of professionals completing the survey saw no difference between adoption or guardianship, or felt that it depended on the case, the proportion favoring adoption was still much larger than the proportion favoring guardianship. This was a common pattern: adoption placing second behind no difference/it depends, but far ahead of guardianship. This was true for the following items:

- Likelihood of placement lasting through age 18 without disruption (48.7% no difference/depends on the case, 40.0% adoption, 8.6% guardianship)
- Likelihood that the caregiver would try to "give children back" to DCFS (53.9% no difference/depends on the case, 26.6% adoption, 15.4% guardianship)
- Protecting the adolescent from abusive birthparents (47.2% no difference/depends on the case, 39.7% adoption, 4.4% guardianship)

- The birthparents have a cognitive or intellectual disability that precludes their ability to safely care for their child (43.8% no difference/depends on the case, 38.6% adoption, 12.3% guardianship)
- Ensuring that the permanent caregiver is the one taking care of the child day-to-day (47.6% no difference/depends on case, 38.2% adoption, 3.0% guardianship)
- Providing permanency when children have complex behavioral and/or medical needs that the birthparent(s) are not equipped to handle (39.7% no difference/depends on the case, 35.2% adoption, 18.4% guardianship)
- Child well-being (56.9% no difference/depends on case, 33.0% adoption, 3.8% guardianship)
- Supporting children after they turn 18 (54.3% no difference/depends on the case, 30.3% adoption, 11.6% guardianship)
- Helping permanent caregivers understand their responsibility to the child (51.3% no difference/depends on the case, 28.1% adoption, 5.2% guardianship)
- Length of time to permanency (56.9% no difference/depends on the case, 24.7% adoption, 14.6% guardianship)
- Adolescent well-being (64.8% no difference/depends on the case, 21.0% adoption, 5.6% guardianship)

5. Many professionals thought that DCFS and/or the courts favored adoption over guardianship.

Almost half of the professionals surveyed and several of the professionals interviewed thought that DCFS favored adoption over guardianship whenever possible. Over one-quarter of survey respondents felt that the courts favored adoption over guardianship whenever possible. One DCFS attorney contrasted their professional opinion as a DCFS representative, which they felt obliged them to favor adoption, with their personal opinion, which saw no difference between adoption and guardianship. One guardian ad litem talked about how it can be frustrating when a family prefers guardianship for a young child, because of challenges they experienced in getting guardianships approved by DCFS.

6. Many professionals lacked awareness of changes in the law governing permanency. When presented information about a recent amendment to the law, many felt it did not change anything.

The Illinois' Juvenile Court Act of 1987 establishes permanency goals that can be set at a permanency hearing; the primary goals are reunification, adoption and guardianship.¹⁴ Until 2021, the act stated that adoption needed to be "ruled out" in order for guardianship to be planned.¹⁵ Although the law did not specify what "ruled out" meant, it was often interpreted to mean that adoption is preferred. Historically, Illinois caseworkers would sometimes withhold information about guardianship from caregivers, and justify it by arguing that the law meant that "they cannot discuss guardianship until they are absolutely confident the family will not accept adoption."¹⁶

An amendment to state law in July 2021¹⁷ establishes updated conditions under which the court can decide on guardianship. One key provision established by the amendment is that guardianship can only be undertaken if adoption is "deemed inappropriate and not in the child's best interests." This text replaces previous text requiring that adoption must first be "ruled out." The intent of the amendment was twofold.¹⁸ One aim was to ensure that kin caregivers who would prefer guardianship are not pressured to adopt under the threat of moving the child from their stable placement to a pre-adoptive home with a stranger. The second aim was to ensure that caregivers are informed that both adoption and guardianship can be options, subject to the court's decision.

Most professionals we interviewed were unfamiliar with the July 2021 amendment. The majority stated that their agency already routinely presented information on adoption and guardianship to caregivers at the same time prior to the amendment. On the other hand, just over half (53%) of survey respondents indicated they were moderately or extremely familiar with the amendment. Just over one-fifth (21%) indicated that they were not familiar with the amendment or only slightly familiar with it. When asked if they thought the amendment was in the child's best interest, 58% chose either "moderately" or

“extremely.” When asked how they felt the changes to the law would affect the use of guardianship, 43% indicated it would have no effect, and 19% indicated it would decrease the use of guardianship. Seventeen percent of professionals (16.9%) surveyed felt the changes to the law would increase the number of guardianships, and 17.4% indicated they did not know what effect it would have.

7. Even with recent changes in its wording, judges may still interpret the law to require that adoption is ruled out before guardianship can be considered.

The 2021 amendment to the Juvenile Court Act removed the words “ruled out.” However, one judge we interviewed discussed how the law appears to retain the sequence of actions giving adoption priority, even without the words “ruled out.” The law states that the court will set one of the following as a permanency goal: returning home, adoption, guardianship, independence (appropriate for some older youth), and continued substitute care (designed for some youth with developmental disabilities or severe psychiatric problems). But it further states that setting a guardianship goal is contingent on returning home and adoption being “deemed inappropriate and not in the child’s best interests.” It is possible that this contingency will, in effect, function as an adoption rule-out requirement for guardianship even though the words “ruled out” have been removed.

8. Professionals reported that time delays are a problem for both guardianship and adoption.

Many participants talked about how much time both adoption and guardianship took to achieve, with substantial negative impact on children and families. Several participants cited examples of permanencies that took years to achieve. Once children are removed from the home, adjudication in court takes time. Ruling out reunification and moving on to either adoption or guardianship can require years. One attorney talked about a case that ended in guardianship after DCFS had fought in court for years in an unsuccessful attempt to terminate parental rights.

Professionals reported that licensing sometimes contributed to the delay in establishing subsidized guardianship. Professionals described how some caregivers were slow in completing the requirements for a license, and some waited months before they were given the license, even after they completed the requirements. Other contributions to delays are the documentation that needs to be assembled, such as birth records, court orders, and therapy reports; and the high rates of caseworker turnover that make it difficult to complete preparation. In addition, a six-month waiting period is required after a caregiver is licensed before the process for a subsidized guardianship to be finalized.

According to several participants we interviewed, huge caseloads and workers’ lack of skills also make it difficult to complete permanency in a timely way. We were told that preparing the agreement on subsidies and obtaining DCFS approval for it can take substantial time in itself. One professional told us about guardians who forego the subsidies just so they get the guardianship completed sooner. Delays can also result from two courts being involved in a case.

9. Licensing standards can make it difficult to achieve subsidies for guardianships, especially for Black families.

Federal guardianship subsidies can pay for non-recurring expenses associated with establishing a guardianship, provide monthly payments for the expense of caring for the child or children, address additional child needs not covered by insurance or public resources, and pay for daycare (including therapeutic daycare). The guardian, however, must be a licensed foster care provider to qualify for a federal guardianship subsidy. Children are also eligible for Medicaid if the guardian is licensed. A state subsidy is available for children 12 and older in homes that are not licensed. However, no subsidy is available for guardianships in homes without a foster care license in which the children are under 12. Children in unlicensed guardian homes are not automatically eligible for Medicaid, though some may qualify if the guardian’s income is limited or through other circumstances.

Many of the professionals we interviewed were unclear about licensing standards for guardianship. But others mentioned that licensing requirements can be an obstacle to achieving subsidized guardianships.

A particular concern is situations over which prospective guardians have little control, such as the criminal background of family members or the physical specifications of their dwelling. Substantial proportions of the professionals surveyed felt that guardianships that are in the child’s best interest were prevented by the requirements that household members not have a criminal record (30.2%), by physical environment requirements (24.3%), and by other licensing requirements (34.2%). A number of respondents also agreed that licensing significantly delays attaining subsidized guardianship (35.6%). Interviewees expressed that caregivers may have difficulty or be slow in completing the training required to be licensed, or may resist the scrutiny or effort that licensing requires.

Almost one-fifth (19.8%) of survey respondents agreed that licensing requirements tend to disadvantage Black families more than White families. One example of this is that screening for licensing includes criminal background checks on every member of the household, and some types of criminal history automatically disqualify a family, even if the criminal history is well in the past, and the individual has no record since. This is particularly a disadvantage for many Black families, because of the long-standing racial disparity in the criminal justice system, particularly with regard to the policing of Black boys and men.¹⁹ Criminal history and other obstacles to licensing can sometimes be waived if the issue preventing licensing does not endanger the child. But the fact that it is being checked can be a deterrent for families to pursuing a license, as family members may be reluctant to subject themselves to the scrutiny of a background check and thus may forego attempting to get licensed. Moreover, we lack data on how often and how quickly waivers are obtained, and whether the issuance of waivers is equitable for Black families.

10 Many Black professionals are aware of racial disparities in permanency work that many White professionals do not see.

While some professionals did not perceive racial issues in permanency, others felt that Black families in child welfare were seen and treated differently from White families. Perhaps the most striking findings on race from our research are the differences among participants in their perception of racial issues in permanency work. This occurred in both the interviews with professionals and the professional survey. Some professionals did not perceive a role of race in the use of guardianship and/or their practice, while others perceived a noticeable effect. This contrast was clearest in the survey results, in which we found substantial differences between the responses from Black and White caseworkers and supervisors. Most of the Black caseworkers and supervisors worked in DCFS’ Cook County region (42.9%) or Northern region (31.4%), while most of the White caseworkers worked in DCFS’ Central region (42.1%) or Southern region (20.1%).



White caseworkers were:

- more than twice as likely as Black caseworkers to respond that there was no difference in permanency planning for Black families compared to White families
- almost four times as likely to perceive no differences in child welfare system supports for Black children and their families compared to White children and their families

Black caseworkers, on the other hand, were:

- almost six times more likely to agree that “Guardianship is pushed more for White than Black caregiving families”
- almost five times more likely to agree that “Children are reunified more quickly in White families than in comparable Black families”
- almost four times more likely to agree that “The courts give Black birth families less time than White families before moving to terminate parental rights.”
- more than twice as likely to agree that “Children are more likely to be reunified in White families than in comparable Black families”
- more than five times as likely to agree that “Adoption is pushed more for Black than for White caregiving families” (though the percentages were small, 14.3% versus 2.6%)



Discussion

Our research suggests that Illinois has the potential to utilize fully both adoption and guardianship to provide permanent homes for Illinois children in foster care. Most professionals could not be divided into adoption or guardianship camps, and were flexible about choosing the permanency option in the best interest of the child. A wide range of child, family, and legal factors suggest the value of guardianship in many cases. Clearly, there are circumstances in which guardianship is needed because adoption is impossible. These factors suggest to us that case circumstances may often indicate the best permanency option for a child. It may be rare for adoption and guardianship to be equally viable in a given case. There may be no general advantage for adoption or guardianship, particularly since the latest research does not show any advantage for either on child stability. Certainly, existing research does not show any benefit of removing a child from a loving kin home in order to place them in a pre-adoptive home for the purpose of achieving adoption rather than guardianship.

At the same time that most participants emphasized making a judgment depending on the specifics of the child and family, many expressed a preference for adoption over guardianship for a range of circumstances and outcomes. Adoption was often endorsed over guardianship for youths’ sense of being a part of the family and their assurance of having a permanent home, for child well-being, and for avoiding the risks of unsafe contact with birthparents or being returned into DCFS care. To the best of our knowledge, there is little or no empirical evidence to support these beliefs, which have been challenged by experts who cite the strengths of extended families.²⁰ The results of our study underline the need for more research comparing adoption and guardianship. They also suggest the value of further conversations that would examine beliefs and consider the situations in which each may or may not be true.

Thorough assessment of the needs and strengths of the child, the birthparents, and the kin family, is clearly necessary in order to make the best permanency decision. We recommend that DCFS adopt a policy that both adoption and subsidized guardianship receive equally thorough assessments and suggest that DCFS and/or its university partners evaluate the adequacy of the assessments conducted in adoption and guardianship cases.

More attention is needed to time delays in achieving permanency and the effect of licensing standards, particularly their potential effect on Black families. We recommend that Illinois DCFS re-examine the licensing requirement for state subsidies for guardianships for children under the age of 12. Given that guardianships are usually awarded when children have been stable and safe in a kin home for an extended period, and should be guided by a careful assessment of children's well-being, it is unclear how licensing adds to child safety and well-being in that context. In theory, waivers can undo unnecessary obstacles created by licensing. But we are not aware of any data on how often waivers are pursued and awarded and whether the issuance of waivers is done equitably. If licensing continues to be required for subsidized guardianship, supports need to be in place to help families acquire their license in a timely manner and earlier in the case, to avoid delaying permanency.

Our findings suggest the value of a statewide education campaign about subsidized guardianship that should include all professional groups and stakeholders. Included in this campaign needs to be clear messaging from DCFS on its position on the use of guardianship as a permanency option. Subsidized guardianship is rarely used in some Illinois regions, and some professionals may not be familiar enough with it to consider it an option. Sixty-five percent of the professionals surveyed indicated that training on guardianship would be moderately or extremely useful. They could benefit from a review of the decision-making process regarding guardianship and best practice in preparing for this permanency option. Some professionals seem to be relying on beliefs without empirical support in making judgments about guardianship and could benefit from an overview of relevant research. Several professionals we interviewed were uncertain about licensing requirements for subsidies, and they could benefit from education about licensing and pursuing waivers as necessary.

Racial Issues in Permanency Work

Our professionals shared their perceptions of the inequities faced by Black children and their families that may affect permanency. Nearly half of the Black permanency staff surveyed indicated that children are more likely to be reunified in White families than in comparable Black families, and 40% indicated that children are reunified more quickly in White families than in comparable Black families. Further, a third of Black permanency staff indicated that the courts give Black birth families less time than White families before moving to terminate parental rights. Many professionals also felt that services and supports available are different across racial groups. Nearly half of respondents felt that not enough services are available in communities or neighborhoods with large proportions of Black families, and a quarter felt that resources are insufficient for Black caregiving families and Black birthparents. A number of both Black and White professionals agree on each of the following items: 1) Black professionals are underrepresented in some professional roles dealing with child permanency, 2) some professionals are less likely to respect the views of Black families about adoption and guardianship, and 3) some professionals are biased against Black families who are seeking guardianship of a child.²¹ Their views provide important insight into factors that likely contribute to the inequities in permanency experienced by Black children. These issues deserve more inquiry through systematic research and conversations across the permanency professional community in Illinois.

The substantial difference between White and Black caseworkers in their perceptions is consistent with a number of studies that show that Black people are aware of racism more frequently than White people are.²² White professionals' lack of experience in working with Black families, Black professionals' personal experience of racism, and White people's higher thresholds for perceiving racism²³ and lack of knowledge about historic and structural racism, likely all play a part.²⁴

DCFS chairs a Child Welfare Advisory Committee (CWAC) on Racial Equity that addresses racial disparities and disproportionality.²⁵ The CWAC on Racial Equity is currently developing an Anti-Racism and Equity Assessment and Race Equity Toolkit for use in practice, and is seeking to collaborate with DCFS' Permanency Enhancement Project.²⁶ Legislation also created the multi-stakeholder Racial Disproportionality in Child Welfare Task Force, which began meeting in the autumn of 2022;²⁷ and the Advisory Commission on Reducing the Disproportionate Representation of African-American Children in Foster Care.²⁸ These groups need to delve further into racial issues in permanency work and collaborate with a wide range of stakeholders to improve policy and practice and undo racial inequities in achieving permanency.

Conclusion

As we gathered the data for this study, we were impressed by the depth of professionals' commitment to provide a permanent home for Illinois children in substitute care and to seek the permanency option that is in the best interest of each child. Increased attention to subsidized guardianship is bound to enhance awareness across stakeholders, challenge unfounded beliefs as appropriate, and increase problem-solving to remove obstacles to achieving permanency for every child in the care of Illinois DCFS. We think Illinois DCFS is poised to initiate a statewide learning process that could lead to tangible improvements in permanency outcomes, including greater racial equity.



Endnotes

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This research brief was produced as a collaboration between the Children and Family Research Center (CFRC) and the Translational Research team. The Translational Research team consists of University of Illinois researchers who provide research and analytical support to the Illinois Department of Children and Family Services (DCFS). They are affiliated with the DCFS Office of Research and Child Well-being at the Illinois DCFS. CFRC is an independent research organization created jointly by the University of Illinois at Urbana-Champaign and DCFS to provide independent evaluation of outcomes for children who are the responsibility of the DCFS. This brief is available on the CFRC website: <http://www.cfr Illinois.edu>. Questions about this brief should be directed to Dr. Theodore P. Cross at (781) 640-4532 or tpcross@illinois.edu.

This research was supported by a grant from the Office of the Vice Chancellor for Diversity, Equity and Inclusion of the University of Illinois at Urbana Champaign, as part of its Call to Action to Address Racism and Social Injustice Research Program. DCFS also contributed the time of the Translational Research team, who are contracted through the University of Illinois at Urbana-Champaign. The views expressed herein should not be construed as representing the policy of the University of Illinois or the DCFS.

Acknowledgments

The research team would like to extend their gratitude to the permanency professionals who participated in interviews and completed the survey. Without their insight and expertise, this study would not have been possible. We are also grateful to the advisory team of administrators and analysts from DCFS who guided and supported the implementation of this research. The advisory team included staff from the DCFS Division of Strategy and Performance Execution, the Office of Research and Child Well-being, the Office of Race Equity Practice, and the Permanency Division.

Suggested Citation

Cross, T. P., Landa, C., Fox, H. L., LaSota, R., Thebaud, M., Hines, D., Parsons, T., Song, E., Hampton-Campbell, S., Kwon, S., & Steiner, M. J. (2023). *Exploring the role of guardianship in effective and equitable permanency*. Research Brief. University of Illinois at Urbana-Champaign.

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