



# Conditions of Children in or at Risk of Foster Care in Illinois

FY2021 MONITORING REPORT  
OF THE *B.H.* CONSENT DECREE

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**I ILLINOIS**

Children & Family Research Center

SCHOOL OF SOCIAL WORK





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A REPORT BY THE

**I ILLINOIS**

Children & Family Research Center  
SCHOOL OF SOCIAL WORK

Tamara Fuller, Ph.D.  
Martin Nieto, M.A.  
Kyle A. Adams III, M.S.  
Yu-Ling Chiu, Ph.D.  
Theodore P. Cross, Ph.D.  
Cady Landa, Ph.D.  
Laura Lee, Ph.D.  
Steve Tran, Ph.D.  
Satomi Wakita, Ph.D.  
Shufen Wang, Ph.D.

With the assistance of  
Aaron Burnett, Heidi Meyer, and Soonhyung Kwon

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**For questions about the content of the report contact:**

Tamara Fuller at (217) 333-5837 or [t-fuller@illinois.edu](mailto:t-fuller@illinois.edu)

*This report is available on our website: <http://www.cfcc.illinois.edu/>*

**For copies of this report contact:**

*Children and Family Research Center*  
School of Social Work  
University of Illinois at Urbana-Champaign  
1010 West Nevada Street Suite 2080  
Urbana, IL 61801  
(217) 333-5837  
(800) 638-3877 (toll-free)  
[ccfc@illinois.edu](mailto:cfcc@illinois.edu)

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## Executive Summary

Since its inception in 1996, the Children and Family Research Center (CFRC) has produced an annual report that monitors the performance of the Illinois child welfare system in achieving its stated goals of child safety, permanency, and well-being. The FY2021 monitoring report uses child welfare administrative data through December 31, 2020 to describe the conditions of children in or at risk of foster care in Illinois. Following an introductory chapter, the results are presented in five chapters that examine critical child welfare outcomes:

- The first chapter on **Child Safety** examines if children are kept safe from additional maltreatment after they have been involved in a child protective services (CPS) investigation. Rates of maltreatment are examined among several different groups of children: 1) all children with substantiated reports during the fiscal year, 2) children served in intact family cases, 3) children who do not receive post-investigation services, and 4) children in substitute care.
- The second chapter, **Family Continuity, Placement Stability, and Length of Time in Care**, examines the experiences of children from the time they enter substitute care until the time they exit the child welfare system. Once removed from their homes, the public child welfare system and its private agency partners have a responsibility to provide children with living arrangements that maintain connections with their family members (including other siblings in care) and community and provide stability. In addition, substitute care should be a temporary solution and children should live in substitute care settings for the shortest period necessary. This chapter examines how well the Illinois Department of Children and Family Services performs in providing substitute care living arrangements that meet these standards. It is organized into three sections: 1) Family Continuity, 2) Placement Stability, and 3) Length of Time in Substitute Care.
- The third chapter examines **Legal Permanence: Reunification, Adoption and Guardianship** with in-depth analyses of each of these three exit types. The chapter examines the likelihood that a child will exit substitute care to reunification, adoption,

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or guardianship within 12 months (reunification only), 24 months, and 36 months of entry. For those children who achieve permanence, the stability of their permanent living arrangement at one year (reunification only), two years, five years, and ten years after exiting the child welfare system is also assessed. This chapter also examines the population of children that remain in care longer than three years, as well as those who exit substitute care without achieving a legally permanent family (e.g., running away from their placement, incarceration, aging out of the substitute care system). In addition, this chapter includes the CFSR permanency indicators, which examine the combined percentages of children who exit to all types of permanence and those that re-enter substitute care within 12 months of exiting care.

- The fourth chapter contains an analysis of **Racial and Ethnic Disproportionality** in the Illinois child welfare system. Racial/ethnic disproportionality refers to the over- or under-representation of a racial or ethnic group in the child welfare system compared to their representation in a base population and is often calculated as a Racial Disproportionality Index (RDI). To gain a better understanding of racial/ethnic disproportionality in the Illinois child welfare system, analyses examine the RDIs for White (Non-Hispanic), Black (Non-Hispanic), and Hispanic (any race) children at six child welfare decision points: investigated reports, protective custodies, indicated reports, substitute care entries, intact family case openings, and substitute care exits. Each analysis is done for the state as a whole and by DCFS administrative region so that regional differences can be observed.
- The fifth chapter, **Child Well-Being**, analyzed data from the 2017 Illinois Child Well-Being Study combined with data from the Illinois Integrated Assessments (IA) conducted when children entered substitute care. When the IA identified a child emotional or behavioral need at entry into substitute care, children were substantially more likely to have an emotional or behavioral need during their stay in substitute care, even when they had been in substitute care for years. The results of the study speak to the importance of the Integrated Assessment as well as the chronic nature of these children's emotional and behavioral health needs during their stay in substitute care.

The first three chapters in this report begin with a summary of the indicators used to measure the Illinois child welfare system's progress toward achieving positive outcomes for children and families, as well as a metric that we have developed that measures the amount of change that has occurred on that indicator between the most recent two years of data that are available. The metric used is the "percent change" and is calculated by subtracting the older value of the indicator from the newer value of the indicator (to find the relative difference), dividing the resulting number by the old value, and then multiplying by 100. If the result is positive, it is a percentage increase and if negative, it is a percentage decrease. In this report, changes of 5% or more are noted as significant. Changes of this magnitude are pictured with an upward or downward arrow, while changes less than 5% are denoted with an equal sign. The following sections highlight the changes in each indicator included in the first three chapters. For additional details, please refer to the full chapters and appendices.

## Changes in Child Safety at a Glance

### Maltreatment Recurrence Among Children with Substantiated Reports (CFSR)

↑ Of all children with a substantiated report, the percentage that had another substantiated report within 12 months increased from 13.0% in 2018 to 13.8% in 2019 (+6% change).

### Maltreatment Among Children Served in Intact Family Cases

↑ Of all children served in intact family cases, the percentage that had a substantiated report within 12 months increased from 16.2% in 2018 to 18.0% in 2019 (+11% change).

### Maltreatment Recurrence Among Substantiated Children Who Do Not Receive Services

↑ Of all children with substantiated reports who did not receive services, the percentage that had another substantiated report within 12 months increased from 10.9% in 2018 to 12.1% in 2019 (+11% change).

### Rate of Victimization Per 100,000 Days Among Children in Substitute Care (CFSR)

↑ Of all children in substitute care during the year, the rate of substantiated maltreatment per 100,000 days in substitute care increased from 17.8 in 2019 to 19.3 in 2020 (+8% change).

## Changes in Continuity and Stability in Care at a Glance

### Restrictiveness of Initial Placement Settings

↔ Of all children entering substitute care, the percentage initially placed in the home of parents remained stable and was 3.2% in 2020.

↔ Of all children entering substitute care, the percentage initially placed in a kinship foster home remained stable and was 73.1% in 2020.

↓ Of all children entering substitute care, the percentage initially placed in a traditional foster home decreased from 20.7% in 2019 to 18.1% in 2020 (-13% change).

↓ Of all children entering substitute care, the percentage initially placed in a specialized foster home decreased from 1.5% in 2019 to 0.8% in 2020 (-47% change).

↑ Of all children entering substitute care, the percentage initially placed in an emergency shelter or emergency foster home increased from 0.8% in 2019 to 1.1% in 2020 (+38% change).

↑ Of all children entering substitute care, the percentage initially placed in an institution or group home increased from 2.9% in 2019 to 3.7% in 2020 (+28% change).

### Restrictiveness of End of Year Placement Settings

↔ Of all children in substitute care at the end of the year, the percentage placed in the home of parents remained stable and was 5.4% in 2020.

↑ Of all children in substitute care at the end of the year, the percentage placed in a kinship foster home increased from 53.4% in 2019 to 57.1% in 2020 (+7% change).

↓ Of all children in substitute care at the end of the year, the percentage placed in a traditional foster home decreased from 22.3% in 2019 to 20.9% in 2020 (-6% change).

↓ Of all children in substitute care at the end of the year, the percentage placed in a specialized foster home decreased from 12.8% in 2019 to 11.7% in 2020 (-9% change).

↔ Of all children in substitute care at the end of the year, the percentage placed in an emergency shelter or emergency foster home remained stable and was 0.2% in 2020.

↓ Of all children in substitute care at the end of the year, the percentage placed in an institution or group home decreased from 5.6% in 2019 to 4.7% in 2020 (-16% change).

### Placement with Siblings

*Of all children entering substitute care and placed in a kinship or traditional foster home, the percentage that was initially placed in the same foster home with all their siblings in care:*

#### For children with one or two siblings in care:

↔ remained stable for children initially placed in kinship foster homes and was 80.3% in 2020.

↓ decreased for children initially placed in traditional foster homes from 64.9% in 2019 to 51.5% in 2020 (-21% change).

#### For children with three or more siblings in care:

↓ decreased for children initially placed in kinship foster homes from 57.2% in 2019 to 51.4% in 2020 (-10% change).

↓ decreased for children initially placed in traditional foster homes from 11.3% in 2019 to 9.4% in 2020 (-17% change).

*Of all children living in kinship or traditional foster homes at the end of the year, the percentage that was placed in the same foster home with all their siblings in care:*

#### For children with one or two siblings in care:

↔ remained stable for children in kinship foster homes and was 70.0% in 2020.

↔ remained stable for children in traditional foster homes and was 57.5% in 2020.

#### **For children with three or more siblings in care:**

↑ increased for children in kinship foster homes from 33.4% in 2019 to 38.5% in 2020 (+15% change).

↔ remained stable for children in traditional foster homes and was 11.2% in 2020.

#### **Placement Stability (CFSR)**

↓ Of all children entering substitute care during the year, the rate of placement moves per 1,000 days in care decreased from 3.7 in 2019 to 3.1 in 2020 (-16% change).

#### **Children Who Run Away From Substitute Care**

↓ Of all children entering substitute care between the age of 12 and 17 years, the percentage that ran away from a placement within one year of entry decreased from 16.9% in 2018 to 14.1% in 2019 (-17% change).

#### **Length of Stay In Substitute Care**

↔ Of all children entering substitute care, the median length of stay remained stable and was 32 months for children who entered care in 2017.

### **Changes in Permanence at a Glance**

#### **Children Achieving Permanence (CFSR)**

↔ Of all children who entered substitute care during the year, the percentage that achieved permanence within 12 months remained stable and was 14.3% of children who entered care in 2019.

↓ Of all children who had been in care between 12 and 23 months on the first day of the fiscal year, the percentage that achieved permanence within 12 months decreased from 28.2% in 2019 to 24.2% in 2020 (-14% change).

↓ Of all children who had been in care 24 months or more on the first day of the fiscal year, the percentage that achieved permanence within 12 months decreased from 23.3% in 2019 to 19.0% in 2020 (-18% change).

↓ Of all children who achieved permanence within 12 months, the percentage that re-entered substitute care within 12 months of discharge decreased from 12.6% of children who exited care in 2017 to 10.0% of children who exited care in 2018 (-21% change).

↑ Of all children who achieved permanence after living in substitute care between 12 and 23 months, the percentage that re-entered substitute care within 12 months of discharge

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increased from 2.8% of children who exited care in 2018 to 4.6% of children who exited care in 2019 (+64% change).

↑ Of all children who achieved permanence after living in substitute care 24 months or more, the percentage that re-entered substitute care within 12 months of discharge increased from 1.3% of children who exited care in 2018 to 1.9% of children who exited care in 2019 (+46% change).

### Children Achieving Reunification

↔ Of all children who entered substitute care during the year, the percentage that was reunified with their parents within 12 months remained stable and was 14.7% of children who entered care in 2019.

↑ Of all children who entered substitute care during the year, the percentage that was reunified with their parents within 24 months increased from 27.1% of children who entered care in 2017 to 29.8% of children who entered care in 2018 (+10%).

↓ Of all children who entered substitute care during the year, the percentage that was reunified with their parents within 36 months decreased from 36.1% in 2016 to 34.1% in 2017 (-6%).

↔ Of all children who were reunified during the year, the percentage living with their family at 1 year post-reunification remained stable and was 91.4% of children who were reunified in 2019.

↔ Of all children who were reunified during the year, the percentage living with their family at 2 years post-reunification remained stable and was 88.4% of children who were reunified in 2018.

↔ Of all children who were reunified during the year, the percentage living with their family at 5 years post-reunification remained stable and was 87.1% of children who were reunified in 2015.

↔ Of all children who were reunified during the year, the percentage living with their family at 10 years post-reunification remained stable and was 85.1% of children who were reunified in 2010.

### Children Achieving Adoption

↓ Of all children who entered substitute care during the year, the percentage that was adopted within 24 months decreased from 5.6% of children who entered care in 2017 to 4.2% of children who entered care in 2018 (-25% change).



↑ Of all children who entered substitute care during the year, the percentage that was adopted within 36 months increased from 15.0% of children who entered care in 2016 to 16.8% of children who entered care in 2017 (+12% change).

↔ Of all children who were adopted during the year, the percentage living with their family at 2 years post-adoption remained stable and was 98.2% of children who were adopted in 2018.

↔ Of all children who were adopted during the year, the percentage living with their family at 5 years post-adoption remained stable and was 95.9% of children who were adopted in 2015.

↔ Of all children who were adopted during the year, the percentage living with their family at 10 years post-adoption remained stable and was 92.2% of children who were adopted in 2010.

### Children Achieving Guardianship

↓ Of all children who entered substitute care during the year, the percentage that attained guardianship within 24 months decreased from 0.7% of children who entered care in 2017 to 0.6% of children who entered care in 2018 (-14% change).

↓ Of all children who entered substitute care during the year, the percentage that attained guardianship within 36 months decreased from 2.6% of children who entered care in 2016 to 2.1% of children who entered care in 2017 (-19% change).

↔ Of all children who attained guardianship during the year, the percentage living with their family at 2 years post-guardianship remained stable and was 95.5% of children who attained guardianship in 2018.

↔ Of all children who attained guardianship during the year, the percentage living with their family at 5 years post-guardianship remained stable and was 89.5% of children who attained guardianship in 2015.

↔ Of all children who attained guardianship during the year, the percentage living with their family at 10 years post-guardianship remained stable and was 83.0% of children who attained guardianship in 2010.

### Racial and Ethnic Disproportionality

This chapter uses two indices for measuring racial and ethnic disproportionality. The first is the absolute RDI, which is calculated by dividing a racial or ethnic group's representation at a specific child welfare decision point by that group's representation in the general child population. The second measure, the relative RDI, divides a racial or ethnic group's representation at a child welfare decision point by that group's representation at a prior child welfare decision point. The relative RDI allows us to examine how disproportionate



## EXECUTIVE SUMMARY

representation may increase or decrease at subsequent decision points, which is not possible with the absolute RDI. For both absolute and relative RDIs, values less than 1.0 indicate under-representation, values equal or close to 1.0 indicate no disproportionality, and values greater than 1.0 indicate over-representation. Chapter 4 examines racial and ethnic disproportionality at six child welfare decision points over the past 7 years (2014–2020): investigated maltreatment reports, protective custodies, indicated maltreatment reports, substitute care entries, intact family case openings, and timely substitute care exits.

**Investigated Reports.** At the state level, White children are proportionally represented compared to their representation in the general population (RDI = 0.9), Black children are over-represented (RDI = 2.0), and Hispanic children are under-represented (RDIs = 0.6-0.7). There was noticeable regional variation in the disproportionality indices. Black children in the Northern region have an RDI of 2.9, greater than any other region and the state as a whole. This regional pattern for Black children has been consistent over time.

**Protective Custodies.** At the state level, Black children are over-represented at rates 2.3 to 2.7 times their proportion in the Illinois child population, and Hispanic children are under-represented (RDIs range from 0.3 to 0.5). When the absolute RDIs for protective custodies were examined by region, there are striking differences for Black children; the Northern region has the highest RDI (4.1), followed by Cook (2.6), Central (2.5), and Southern (1.4) in 2020. The relative RDI at the state level showed that Black children are more likely to be taken into protective custody compared to the rate at which they are investigated (relative RDIs between 1.2 and 1.4), Hispanic children are less likely to be taken into protective custody compared to their investigation rates (relative RDIs between 0.4 and 0.7), and the representation of White children is proportional to their representation among investigated reports.

**Indicated Reports.** The absolute RDIs show that Black children are consistently over-represented among children with indicated reports, Hispanic children are under-represented, and for most years, White children are proportionately represented, compared to their representations in the Illinois child population. The Northern region has the highest over-representation of Black children in indicated reports (RDI = 3.1) in 2020, followed by the Central (RDI = 2.4), Cook (RDI = 2.2), and Southern regions (RDI = 1.4). The relative RDIs at the indicated investigation decision were at or near 1.0 at both state and regional levels, suggesting the degree of disproportionality did not increase or decrease from the prior decision point (screened-in investigations).

**Substitute Care Entries.** At the state level, Black children are placed into substitute care at rates about 2.5 times that of their percentage within the Illinois child population and Hispanic children are under-represented compared to their percentage in the Illinois child population (RDI = 0.4 or 0.3). At the regional level, the Northern region has had absolute RDIs for Black children in substitute care entries that are significantly higher than the other regions for each of the last seven years (RDI = 4.7 in 2020). The relative RDIs show that the removal rate of Black children was higher than their indication rate (RDI = 1.2 or 1.3) and the removal rate of Hispanic children was lower than their indication rate (RDI = 0.4 - 0.6). White children entered substitute care at rates proportional to their representation among indicated reports.

**Intact Family Services.** The pattern of the absolute RDI is similar to other decision points, with Black children over-represented, Hispanic children under-represented, and White children proportionately represented. The relative RDIs show that unlike White and Hispanic children, Black children were under-represented among those receiving intact family services relative to those with indicated maltreatment reports. The data on the regional relative RDI show that this under-representation for Black children occurs primarily in the Cook and Southern regions of the state.

**Substitute Care Exits.** The absolute RDIs for children remaining in care longer than 36 months at the state level show that Black children are over-represented, with RDIs around 3.0., while both White (RDIs = 0.7) and Hispanic (RDIs = 0.4) children are under-represented. This disproportionality for Black children is highest in the Northern region, where the proportion of children in care for longer than 36 months is five and a half times their proportion in the general population (RDI = 5.5). Compared with their representation among children who entered substitute care, Black children are disproportionately over-represented among the children who stayed in care for longer than 36 months (the relative RDI = 1.2 for children who entered care in 2017). White children are under-represented (relative RDI = 0.8 for children who entered care in 2017), and Hispanic children are proportionally represented (relative RDI = 1.1) at this decision point.

## Child Well-Being

When children enter substitute care in Illinois, they receive a comprehensive Integrated Assessment (IA) of their needs that includes the use of the Child and Adolescent Needs and Strengths (CANS) instrument. The CFRC examined the relationship between children's emotional and behavioral health needs when they enter substitute care, using information collected during their Integrated Assessments, and their later behavioral and emotional needs and mental health services, using data collected from their foster care providers in the 2017 Illinois Child Well-Being Study.

**Behavioral and Emotional Needs at Entry into Substitute Care.** Only a small percentage of children (2.2%) had a CANS score of 3 indicating a need for immediate/intensive action, but 26.9% had a CANS score of 2 indicating a need for action, though somewhat less urgent. Almost half of the sample (44.7%) had a CANS score of 1, indicating a need for "watchful waiting" and effort to prevent more serious problems.

**Behavioral and Emotional Needs While in Substitute Care.** On a measure of child behavior problems, 41.5% of the children scored in the clinical or borderline clinical range, which indicates a likely need for treatment. More than half of caregivers (62.3%) reported their child had at least one emotional/behavioral problem and about the same percentage (60.0%) were receiving a behavioral health service. Over a fifth (20.7%) of children and youth were taking psychiatric medication for emotional and behavioral problems.



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**Relationships Between Needs at Entry and Needs While in Care.** The IA CANS was significantly associated with whether caregivers reported that their child had one or more behavioral or emotional problems while they were in care: 55.6% of children with IA CANS of 1 and 75.8% of children with IA CANS of 2 or 3 had a behavioral or emotional problem identified by a caregiver while in care. The IA CANS also was significantly associated with whether a child or youth later received behavioral health services and whether they later received psychiatric medication.

**Relationship Between Need at Entry and During Substitute Care by Length of Time in Care.**

The results of a logistic regression analysis showed that there was a statistically significant relationship between the IA CANS Behavioral-Emotional Needs Score and the likelihood that a caregiver would identify a child behavioral or emotional problem ( $p < .001$ ). However, there was not a significant interaction effect of the IA CANS Behavioral-Emotional Needs Score by time in care, which means that the relationship between the IA CANS and later behavioral or emotional needs was not significantly affected by the length of time in care. When we looked at children who had been in substitute care for the median of 1.7 years or longer, 56.5% of these children with IA CANS of 1 and 81.3% of children with IA CANS of 2 or 3 had a behavioral or emotional problem identified by a caregiver while in care.



## Introduction

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# The Evolution of Child Welfare Monitoring in Illinois

Since its inception in 1996, the Children and Family Research Center (CFRC, the Center; see Box I.1) has been responsible for the annual report that monitors the performance of the Illinois Department of Children and Family Services (DCFS, the Department) in achieving its stated goals of child safety, permanency, and well-being. The *Monitoring Report of the B.H. Consent Decree* (the *B.H.* report) is the culmination of the Center's efforts to provide clear and comprehensive data to a variety of stakeholders who are concerned with the outcomes of abused and neglected children in Illinois. This report is not an evaluation of the Department, the juvenile courts, private providers and community-based partners, or other human service systems responsible for child protection and welfare. Rather, it is a monitoring report that examines specific performance indicators and identifies trends on selected outcomes of interest to the federal court, the Department, members of the *B.H.* class, and their attorneys. It is our hope that this report will be used as a catalyst for dialogue between child welfare stakeholders at the state and local levels about the meanings behind these reported numbers and the strategies needed for quality improvement.

## The Children and Family Research Center

### BOX I.1

The Children and Family Research Center is dedicated to supporting and conducting “research with a purpose” to improve outcomes for children who are either currently involved in the child welfare system or at high risk for future involvement. The Center was created in 1996 through a cooperative agreement between the University of Illinois at Urbana-Champaign School of Social Work and the Illinois Department of Children and Family Services. The mission of the Center has been to conduct research that was responsive to the needs and responsibilities of the Department and contribute to scientific knowledge about child safety, permanency, and child and family well-being. In the two decades since its creation, the Center has emerged as a national leader in conducting research that informs child welfare policy and improves child welfare practice. Center activities are organized around four core areas: 1) outcome monitoring and needs assessment; 2) program evaluation and data analysis; 3) training and technical assistance to advance best practice; and 4) knowledge dissemination.

#### ***Outcome monitoring and needs assessment***

The Center was created, in part, to monitor the performance of the Illinois child welfare system pursuant to the **B.H. Consent Decree**. Each year since 1997, the Center has compiled a comprehensive report that describes over 40 child welfare indicators related to child safety and permanence. The *B.H.* report is widely distributed to child welfare administrators, researchers, and policy makers throughout Illinois and the nation.

#### ***Program evaluation and data analysis***

One of the key elements of the success of the child welfare reforms in Illinois and other states has been the ability of child welfare administrators to rely on scientifically rigorous research that demonstrates the effectiveness of the program innovations being implemented. The Children and Family Research Center engages in rigorously-designed experimental and quasi-experimental evaluations of innovative child welfare demonstration projects which have national implication and scope. For instance, the CFRC served as the evaluator for three of the Illinois Department of Children and Family Services **Title IV-E waiver demonstration projects** and in 2013, the Center began a partnership with the State of Wisconsin Department of Children and Families (DCF) as the evaluator of its Title IV-E Waiver Demonstration Project. The Wisconsin waiver evaluation, which ended in 2019, tested the effectiveness of a post-reunification support program, known as the P.S. Program, by comparing the rates of maltreatment recurrence and re-entry into substitute care of children who receive P.S. Program services compared to those who did not. In addition to the outcome evaluation, a process evaluation documented the implementation process using the

National Implementation Research Network (NIRN) framework, and a cost analysis will compare the costs and savings associated with the program.

The Children and Family Research Center, in partnership with DCFS, applied for and received funding from the National Quality Improvement Center on Differential Response (QIC-DR) to implement and evaluate a **Differential Response (DR)** program in Illinois. This comprehensive, 4-year evaluation consisted of a randomized controlled trial that compared outcomes for families randomly assigned to either a traditional child protective services investigation (control group) or non-investigative child protective services response known as a family assessment (treatment group). The evaluation also documented the implementation process so that other states considering Differential Response can learn from the Illinois experience. Finally, a cost evaluation compared the short-term and long-term costs associated with the two CPS responses.

The CFRC was also selected to design and conduct an evaluation of the **Oregon Differential Response Initiative** that included process, outcome, and cost evaluations. Mixed-methods data collection strategies were utilized to gather data from CPS caseworkers, supervisors, administrators, screeners, coaches, service providers, community partners, and parents involved in the child protection system to answer a comprehensive list of research questions related to the effectiveness of the implementation strategies used and the impact of DR on child and family outcomes.

CFRC researchers also have expertise in **predictive analytics**. As part of our work on the Wisconsin waiver demonstration evaluation, CFRC researchers developed a predictive model that identified which families were at highest risk of having a child re-enter substitute care within 12 months of reunification. The model, known as the Re-entry Prevention Model, was integrated into the Wisconsin SACWIS and generates a score that corresponds to a family's risk of re-entry. Families whose scores fall above a threshold are eligible to enroll in a post-reunification support program that provides case management and supportive services. Following the success of this predictive tool, the CFRC developed a second predictive model for the Wisconsin Department of Children and Families that will identify which children are at highest risk for being re-referred to child protective services.

#### ***Training and technical assistance to advance best practice***

For over 20 years, the CFRC's Foster Care Utilization Review Program (FCURP) has worked with DCFS to prepare for, conduct, and respond to the federal Child and Family Services Review (CFSR). The CFSR is the means by which the federal government ensures state compliance with federal mandates. Using a continuous quality improvement process, FCURP has played a vital role in supporting ongoing efforts to enhance child welfare outcomes in Illinois. FCURP supports DCFS and its



private sector partners by 1) monitoring and reporting Illinois' progress toward meeting the safety, permanency, and well-being outcomes outlined in the Federal Child and Family Services Review; 2) providing training and education to help child welfare practitioners translate federal regulations and state policies into quality practice; and 3) providing technical assistance to promote system reform.

More recently, the CFRC has collaborated with the Illinois Department of Children and Family Services to provide Quality Service Reviews (QSR) in the four immersion sites throughout the state. QSRs employ a case-based practice improvement approach to assess outcomes and system performance by gathering information from a random sample of case files as well as interviews with children, families, and service team members. The Illinois QSR review instrument will examine the Family-centered, Trauma-focused, Strength-based (FTS) model of practice, which includes utilization of Child and Family Team meetings.

### ***Knowledge dissemination***

CFRC disseminates its research findings widely to multiple audiences within Illinois and throughout the country. Using a variety of information-sharing strategies, the Center's researchers strive to put knowledge into the hands of both policy makers and practitioners. CFRC's dissemination includes:

- The Children and Family Research Center website, through which the public can access and download all research and technical reports, research briefs on specific topics, and presentations given at state and national conferences.
- The CFRC Data Center, which provides tables of DCFS performance data on child safety, stability, continuity, and family permanence. Each indicator in the *B.H.* report (with the exception of the well-being indicators) can be examined by child demographics (age, race/ethnicity, and gender) and geographic area (Illinois total, DCFS region, DCFS sub-region, and county). Outcome data for each indicator are displayed over a seven-year period, so that changes in performance can be tracked over time. In addition to the outcome indicator data, the Data Center also provides information on the number of child reports, family reports, and substantiation rates for the entire state and each county.
- Data summits and forums on topics of interest to DCFS and the child welfare community. Previous summits have focused on the nexus between juvenile justice and child welfare, effective early childhood and child abuse prevention programs, and the use of risk adjustment in performance outcomes for children's residential centers. The most recent summit, which gathered experts on the use of predictive analytics in child welfare, occurred in May 2019. Presentation from the predictive analytics forum can be found here: <https://pa2019.cfr Illinois.edu/index.php>
- Publication of research findings in peer-reviewed academic journals and presentations at state and national professional conferences.

## The Origin and Purpose of Child Welfare Outcome Monitoring in Illinois

The foundation of this report can be traced directly to the *B.H.* consent decree, which was approved by United States District Judge John Grady on December 20, 1991, and required extensive reforms of the Illinois Department of Children and Family Services over the subsequent two and a half years.<sup>1</sup> According to the Decree:

“It is the purpose of this Decree to assure that DCFS provides children with at least minimally adequate care. Defendant agrees that, for the purposes of this Decree, DCFS’s responsibility to provide such care for plaintiffs includes an obligation to create and maintain a system which assures children are treated in conformity with the following standards of care:

- a. Children shall be free from foreseeable and preventable physical harm.
- b. Children shall receive at least minimally adequate food, shelter, and clothing.
- c. Children shall receive at least minimally adequate health care.
- d. Children shall receive mental health care adequate to address their serious mental health needs.
- e. Children shall be free from unreasonable and unnecessary intrusions by DCFS upon their emotional and psychological well-being.
- f. Children shall receive at least minimally adequate training, education, and services to enable them to secure their physical safety, freedom from emotional harm, and minimally adequate food, clothing, shelter, health and mental health care.

In order to meet this standard of care, it shall be necessary for DCFS to create and maintain a system which:

- a. Provides that children will be timely and stably placed in safe and appropriate living arrangements;
- b. Provides that reasonable efforts, as determined based on individual circumstances (including consideration of whether no efforts would be reasonable) shall be made to prevent removal of children from their homes and

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<sup>1</sup> *B.H. et al. v. Suter*, No. 88-cv-5599 (N.D. Ill., 1991). It should be noted that the name of the Defendant changes over time to reflect the name of the DCFS Director appointed at the time of the entry of a specific order. Susan Suter was the appointed Director at the time of the entry of the original consent decree in this case.

## INTRODUCTION

to reunite children with their parents, where appropriate and consistent with the best interests of the child;

- c. Provides that if children are not to be reunited with their parents, DCFS shall promptly identify and take the steps within its power to achieve permanency for the child in the least restrictive setting possible;
- d. Provides for the prompt identification of the medical, mental health and developmental needs of children;
- e. Provides timely access to adequate medical, mental health and developmental services;
- f. Provides that while in DCFS custody children receive a public education of a kind and quality comparable to other children not in DCFS custody;
- g. Provides that while in DCFS custody children receive such services and training as necessary to permit them to function in the least restrictive and most homelike setting possible; and
- h. Provides that children receive adequate services to assist in the transition to adulthood.”

Under the terms of the *B.H.* Consent Decree, implementation of the required reforms was anticipated to occur by July 1, 1994. However, it became clear to the Court and to both parties that this ambitious goal would not be achieved in the two and a half years specified in the agreement. Consultation with a panel of child welfare and organizational reform experts led to the recommendation, among other things, to shift the focus of the monitoring from technical compliance (process) to the desired outcomes the parties hoped to achieve.<sup>2</sup> Both the plaintiffs and the defendants were in favor of a more results-oriented monitoring process, and together decided on three outcome categories: permanency, well-being, and safety.<sup>3</sup> The two sides jointly moved to modify the decree in July 1996,<sup>4</sup> outlining a series of new strategies based on measurable outcomes:

“The parties have agreed on outcome goals for the operation of the child welfare system covering the three areas of child safety, child and family well-being, and permanency of family relations.

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<sup>2</sup> Mezey, S.G. (1998). Systemic reform litigation and child welfare policy: The case of Illinois. *Law & Policy*, 20, 203-230.

<sup>3</sup> Puckett, K.L. (2008). *Dynamics of organizational change under external duress: A case study of DCFS's responses to the 1991 consent decree mandating permanency outcomes for wards of the state*. Unpublished doctoral dissertation, University of Chicago.

<sup>4</sup> *B.H. et al. v. McDonald* (1996). Joint Memorandum in Support of Agreed Supplemental Order, No 88-C-5599 (N.D. Ill 1996).

- a) The outcome goals agreed upon by the parties include the following:
- i) Protection: Promptly and accurately determine whether the family care of children reported to DCFS is at or above a threshold of safety and child and family well-being, and if it exceeds that threshold, do not coercively interfere with the family.
  - ii) Preservation: When the family care of the child falls short of the threshold, and when consistent with the safety of the child, raise the level of care to that threshold in a timely manner.
  - iii) Substitute care: If the family care of the child cannot be raised to that threshold within a reasonable time or without undue risk to the child, place the child in a substitute care setting that meets the child’s physical, emotional, and developmental needs.
  - iv) Reunification: When the child is placed in substitute care, promptly enable the family to meet the child needs for safety and care and promptly return the child to the family when consistent with the safety of the child.
  - v) Permanency: If the family is unable to resume care of the child within a reasonable time, promptly arrange for an alternative, permanent living situation that meets the child’s physical, emotional, and developmental needs.”<sup>5</sup>

In addition to specifying the outcomes of interest, the Joint Memorandum outlined the creation of a Children and Family Research Center “responsible for evaluating and issuing public reports on the performance of the child welfare service system operated by DCFS and its agents. The Research Center shall be independent of DCFS and shall be within an entity independent of DCFS.”<sup>6</sup> The independence of the CFRC was seen as an essential component of the settlement, and locating the CFRC within a research university helped ensure that the Department would be held accountable. The CFRC was tasked with the development of outcome indicators in consultation with the Department and the plaintiff’s counsel that provide quantitative measures of progress toward meeting the goals set forth in the consent decree: “The Research Center will develop technologies and methods for collecting data to accurately report and analyze these outcome indicators. The Research Center may revise these outcome indicators after consultation with the Department and counsel for the plaintiff class to the extent

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<sup>5</sup> Ibid, p. 2-4

<sup>6</sup> Joint Memorandum, p. 2

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necessary to improve the Center's ability to measure progress toward meeting the outcome goals."<sup>7</sup>

The Joint Memorandum also specified the process through which the results of the outcomes monitoring would be disseminated: "The Research Center shall also provide to the parties and file with this Court an annual report summarizing the progress toward achieving the outcome goals and analyzing reasons for the success or failure in making such progress. The Center's analysis of the reasons for the success or failure of DCFS to make reasonable progress toward the outcome goals shall include an analysis of the performance of DCFS (including both DCFS operations and the operations of private agencies), and any other relevant issues, including, where and to the extent appropriate, changes in or the general conditions of the children and families or any other aspects of the child welfare system external to DCFS that affect the capacity of the Department to achieve its goals, and changes in the conditions and status of children and plaintiffs' counsel as the outcome indicators and data collection methods are developed..."<sup>8</sup>

### **The Evolution of Outcome Monitoring in Illinois**

#### ***Safety, Stability, and Permanence***

The *B.H.* parties agreed to give discretion to the Center to develop the specific indicators used to measure progress in achieving the agreed upon outcome goals. The parties also recognized the importance of exploring the systemic and contextual factors that influence outcomes, as well as the need for outcome indicators to change over time as data technology grows more sophisticated and additional performance issues emerge. The first *B.H.* monitoring report was filed with the Court in FY1998 and included information on outcomes for children in the custody of the Department through FY1997. The indicators in the first monitoring report were simple, and included safety indicators of 1) maltreatment recurrence among intact family cases at 30, 180, and 300 days, and 2) maltreatment reports on children in substitute care (overall rate and rates by living arrangement, region, child age, child race, and perpetrator). The indicators for permanence in the first report included: 1) rate of children who entered substitute care from intact cases; 2) percentage of children returned home from substitute care within 6, 12, 18, and 24 months; 3) percentage of reunified children who re-enter foster care; 4) percentage of children adopted from substitute care and median length of time to adoption; 5) adoption disruptions; and 6) percentage of children moved to legal guardianship from substitute care.

The indicators included in the *B.H.* monitoring report were significantly expanded and the overall organization of the report was given a major overhaul in FY2005. Indicators were added that examined placement stability in substitute care, running away from placement, placements with kin, placements in group homes and institutions (both within Illinois and

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<sup>7</sup> Joint Memorandum, p. 4

<sup>8</sup> Joint Memorandum, p. 4

outside of Illinois), placement with siblings, and placement close to home. In FY2010, the indicator that examined the placements outside of Illinois was eliminated from the report because the number of children placed outside the state had been negligible for several years. Information on this indicator was included in the FY2020 and FY2021 reports because the number of children placed in residential placements outside of Illinois had increased to the point where it was once again a concern.<sup>9</sup>

Following the major updates in FY2005, only minor changes were made to the indicators in the *B.H.* monitoring report through FY2017. Careful thought goes into the selection of the indicators that are used to monitor system performance in the report, and we strive to keep the indicators as consistent as possible from year to year so that any changes in the results reported in the chapters and appendices signify actual changes in performance. However, occasionally it is necessary to make changes to how certain indicators are measured, either because the administrative data used in the analysis has changed, because the Department's policies or procedures have changed, or because of special requests made by the plaintiff or defendant attorneys or the court. When deciding whether to modify, add, or eliminate indicators in the *B.H.* monitoring report, the benefits of the change are weighed against the loss of continuity and potential for confusion in interpreting the results.

The most notable change in recent years occurred in FY2018, when the Department asked the CFRC to include the Round 3 CFSR statewide data indicators in the *B.H.* monitoring report. CFRC accommodated this request by:

1. replacing our existing measure of maltreatment recurrence with the Round 3 CFSR measure of maltreatment recurrence;
2. replacing our existing measure of maltreatment in care with the Round 3 CFSR measure of maltreatment in care;
3. replacing our existing measure of placement stability with the Round 3 CFSR measure of placement stability;
4. adding the three Round 3 CFSR measures of permanence to our existing measures of permanence;
5. adding the Round 3 CFSR measure of re-entry into substitute care to our existing measures of stability of permanence; and
6. adding two additional measures of re-entry into substitute care based on a request from the *B.H.* Expert Panel.

Another recent change was to add "home of parent" as a type of placement. Children were included in a home of parent placement if they were placed in the home of their parent(s) but legal custody was placed with the Department. In previous years, children placed in home of parent placements were not included in the population of children in substitute care.

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<sup>9</sup> Jackson, D., & Eldeib, D. (March 12, 2020). Hurt instead of helped: Foster children victimized in out-of-state facilities where oversight is lacking. *Chicago Tribune*.

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Another change that occurred in FY2021 was the definition of children who were maltreated in substitute care. Prior to FY2021, the CFRC used case open date and case close date or legal exit date<sup>10</sup> to identify children in care and the time they spent in care during a given year and maltreatment incident dates occurring outside of the this period were excluded from the count, even if the report dates occurred during the period. In FY2021, we changed the definition in order to use the same definition as the Department. Now, the legal entry and exit dates are used to identify children in care and define the time they spent in care during each year; and maltreatment reports are counted if they occur between legal entry and legal exit dates. In addition, maltreatment reports that occur during the first 7 days after legal entry are excluded, as are reports with missing finding date even if the finding was indicated. Please see Appendix A for more information about the definition of the indicators in this report.

### ***Child Well-Being***

The measurement of child well-being has experienced a dramatic evolution since the publication of the first *B.H.* report. The earliest reports contained no information about child well-being at all, because the child welfare administrative data systems did not contain information on child physical and mental health, development, and education. In 2001, the Department was court-ordered to fund a comprehensive study that examined the well-being of children in substitute care. Three rounds of data were collected for the *Illinois Child Well-Being Studies*, conducted by the Children and Family Research Center in 2001, 2003, and 2005. This comprehensive study collected interview data from caseworkers, caregivers, and the children themselves, in addition to data collection from school records and child welfare case files. Information was collected on a variety of well-being domains, including development, mental health, physical health, and education. The results of the Illinois Child Well-Being Studies were included in the *B.H.* monitoring reports published in FY2005–FY2009.

In 2009, data collection began on a new study called the *Illinois Survey of Child and Adolescent Well-Being (ISCAW)*. ISCAW was a component of the second cohort of the National Survey of Child and Adolescent Well-Being (NSCAW), a longitudinal probability study of well-being and service delivery of children involved with the child welfare system. The sample for ISCAW included 818 children sampled to be representative of the entire population of Illinois children involved in substantiated investigations. Two waves of data were collected on the children in the ISCAW sample—baseline data were collected approximately 4 months following the substantiated investigation and follow-up data were collected approximately 18 months later. During both waves of data collection, data were collected from several informants on a variety of well-being domains. Caregivers (biological parents or foster parents) completed measures of child health, development, social skills, and behavior. School-aged children completed measures of depression, anxiety, relationships with peers and adults, substance use, sexual activity, extra-curricular activities, and future expectations. Teachers completed measures of

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<sup>10</sup> Legal exit was used for exits to reunification to avoid counting children as reunified when the department retained legal custody.



academic progress and behavior in school. The results of the ISCAW data collection were included in the *B.H.* monitoring reports published in FY2010–FY2014.

In October 2015, Judge Jorge Alonso ordered the Department to “restore funding for the Illinois Survey of Child and Adolescent Wellbeing that uses standardized instruments and assessment scales modeled after the National Survey of Child and Adolescent Wellbeing to monitor and evaluate changes in the safety, permanence, and well-being of children for a representative sample of DCFS-involved children and their caregivers.”<sup>11</sup> This order followed the recommendation of a panel of child welfare experts that was convened after the *B.H.* plaintiff attorneys filed an emergency motion to enforce the Consent Decree in February 2015 (for more information on the recent court activity involving the *B.H.* Consent Decree, see Box I.2). Data collection for the 2017 Illinois Study of Child Well-Being concluded in September 2018 and a final report is available on the CFRC website.<sup>12</sup> In addition to the Illinois Child Well-Being final evaluation report, the CFRC has produced a series of 14 research briefs based on the findings of the evaluation. These research briefs, which are all available on the CFRC website, focus on specific topics such as child safety, child development, resilience, physical health, education, relationships with birth parents, relationships with foster caregivers, and contacts with siblings.

### ***B.H.* Consent Decree Implementation Plan**

#### **BOX I.2**

In February 2015, the plaintiffs’ attorneys for the *B.H.* Consent Decree filed an emergency motion with the Court in order to require DCFS to comply with the terms of the Consent Decree, alleging that DCFS was in “gross violation of numerous, critically important provisions of the Decree.”<sup>13</sup> More specifically, the plaintiffs’ attorneys claimed that “severe shortages of necessary services and placements for children have risen to crisis proportions” and that children were being placed in “dangerously inadequate residential treatment facilities,” “warehoused in temporary shelters, psychiatric hospitals and correctional facilities for extended periods of time,” and “waiting months and even years to receive the essential mental health services and specialized placements that DCFS itself has determined they need.” In the motion, the plaintiffs asked that DCFS take specific actions to address these problems, including the retention of child welfare experts to make additional recommendations and the use of independent clinicians to monitor the adequacy of services and conditions at residential treatment facilities.

<sup>11</sup> Testa, M.F., Naylor, M.W., Vincent, P., & White, M. (2015). *Report of the Expert Panel: B.H. vs. Sheldon Consent Decree*.

<sup>12</sup> Cross, T.P., Tran, S.P., Hernandez, A., & Rhodes, E. (2019). *The 2017 Illinois Child Well-Being Study Final Report*. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign.

<sup>13</sup> *B.H. et al. vs. Tate*. (February 23, 2015). *Plaintiffs’ Emergency Order to Enforce Consent Decree*, No. 88-cv-5599 (N.D. Ill 2015), p.1.

On April 10, 2015, Judge Jorge L. Alonso appointed a panel of four experts to make recommendations to assist the Court in determining how to improve the placements and services provided to children in the *B.H.* Consent Decree plaintiff class.<sup>14</sup> After reviewing data and interviewing stakeholders, the expert panel made several recommendations for reforms:

1. Initiate a children’s system of care demonstration program that permits child welfare agencies and DCFS sub-regions to waive selected policy and funding restrictions on a trial basis in order to reduce the use of residential treatment and help children and youth succeed in living in the least restrictive, most family-like setting.
2. Engage in a staged immersion process of retraining and coaching front-line staff in a cohesive model of practice that provides children and their families with access to a comprehensive array of services, including intensive home-based services, designed to enable children to live with their families or to achieve timely permanence with adoptive parents or legal guardians.
3. Fund a set of permanency planning initiatives to improve permanency outcomes for adolescents who enter state custody at age 12 or older either by transitioning youth to permanent homes or preparing them for reconnecting with their birth families.
4. Retain an organizational consultant to aid the Department in rebooting a number of stalled initiatives that are intended to address the needs of children and youth with psychological, behavioral, or emotional challenges.
5. Restore funding to the Illinois Survey of Child and Adolescent Well-Being that uses standardized instruments and assessment scales modeled after the National Survey of Child and Adolescent Well-Being to monitor and evaluate changes in the safety, permanence, and well-being of children for a representative sample of DCFS-involved children and their caregivers.

The Court approved these recommendations, either in part or in whole, on October 20, 2015.<sup>15</sup> It also extended the role of the expert panel to provide assistance to the Department in the development of an implementation plan for reform and assess the Department’s progress in making the required reforms. The Department was ordered to develop an enforceable implementation plan that identifies the tasks, responsibilities, and timeframes necessary to accomplish the objectives of the Consent Decree as addressed in the expert panel’s findings and recommendations. The Department submitted its *B.H. Implementation Plan* to the Court on February 23, 2016.<sup>16</sup> The plan outlines the Department’s strategies to address each of the expert panel recommendations.

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<sup>14</sup> Testa, M.F., Naylor, M.W., Vincent, P., & White, M. (2015). *Report of the Expert Panel: B.H. vs. Sheldon Consent Decree*.

<sup>15</sup> *B.H., et al. vs. Sheldon*. (October 20, 2015). *Order*, No. 88-cv-5599 (N.D. Ill 2015).

<sup>16</sup> *B.H., et al. vs. Sheldon*. (2016). *DCFS B.H. Implementation Plan*. No. 88-cv-5599 (N.D. Ill 2015).

## The Current Monitoring Report of the *B.H.* Consent Decree

The FY2020 *B.H.* monitoring report<sup>17</sup> is organized into five chapters. **Child Safety** is the first chapter. A child's first contact with the child welfare system is typically through a Child Protective Services (CPS) investigation. Investigators make several decisions related to child safety, including whether the child is in immediate danger, whether there is credible evidence that maltreatment has occurred, whether to remove the child from the home and take the child into protective custody, and whether the family's needs indicate that they would benefit from ongoing child welfare services. Regardless of whether additional child welfare services are provided, the child welfare system has a responsibility to keep children from additional maltreatment once they have been investigated. The first chapter of the report examines the Department's performance in fulfilling this obligation by examining indicators related to maltreatment that occurs *after* a screened-in and investigated report of maltreatment. It is organized into four sections: 1) Maltreatment Recurrence Among Children with Substantiated Reports, 2) Maltreatment Among Children in Intact Family Cases, 3) Maltreatment Recurrence Among Children Who Do Not Receive Services, and 4) Maltreatment in Substitute Care.

The second chapter, **Family Continuity, Placement Stability, and Length of Time in Care**, examines the experiences of children from the time they enter substitute care until the time they exit the child welfare system. Once removed from their homes, the public child welfare system and its private agency partners have a responsibility to provide children with living arrangements that maintain connections with their family members (including other siblings in care) and community and provide stability. In addition, substitute care should be a temporary solution and children should live in substitute care settings for the shortest period necessary. This chapter examines how well the Illinois Department of Children and Family Services performs in providing substitute care living arrangements that meet these standards. It is organized into three sections: 1) Family Continuity, 2) Placement Stability, and 3) Length of Time in Substitute Care.

The third chapter examines **Legal Permanence: Reunification, Adoption, and Guardianship** with in-depth analyses of each of these three exit types. The chapter examines the likelihood that a child will exit substitute care to reunification, adoption, or guardianship within 12 months (reunification only), 24 months, and 36 months of entering care. For those children who achieve permanence, the stability of their permanent living arrangement at one year (reunification only), two years, five years, and ten years after exiting the child welfare system is also assessed. This chapter also examines the population of children that remain in care longer than three years, as well as those who exit substitute care without achieving a legally permanent family (e.g., running away from their placement, incarceration, aging out of the substitute care system). This chapter also examines the CFSR permanency and re-entry indicators.

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<sup>17</sup> There is typically a one year lag time between the most recent administrative data used for the *B.H.* monitoring report and the publication date. For instance, this year's report, published in FY2021, monitors outcomes through the end of FY2020.

## INTRODUCTION

The fourth chapter contains an analysis of **Racial and Ethnic Disproportionality** in the Illinois child welfare system. Racial/ethnic disproportionality refers to the over- or under-representation of a racial or ethnic group in the child welfare system compared to their representation in a base population and is often calculated as a Racial Disproportionality Index or RDI. To gain a better understanding of racial/ethnic disproportionality in the Illinois child welfare system, analyses examine the RDIs for White (Non-Hispanic), Black (Non-Hispanic), and Hispanic (any race) children at six child welfare decision points: investigated reports, protective custodies, indicated reports, substitute care entries, intact family case openings, and substitute care exits. Each analysis is done for the state as a whole and by DCFS administrative region so that regional differences can be observed. In addition, RDIs are calculated for the past seven years so that changes over time can be identified.

The fifth chapter presents results from a study that uses data from the 2017 Illinois Study of **Child Well-Being**, which provides an overview of the development, physical health, emotional and behavioral health, education, safety, and resilience of children in substitute care in Illinois. The study combines data from the Child Well-Being Study with data from the Illinois Integrated Assessment (IA) to examine the relationship between children's emotional and behavioral needs assessed at entry into care (from the IA) and their emotional and behavioral needs later during their stay in substitute care as measured by foster parent provider perceptions. The results of the study speak to the importance of the Integrated Assessment as well as the chronic nature of these children's emotional and behavioral health needs during their stay in substitute care.

Chapters 1 through 4 contain figures that allow the reader to easily visualize Illinois' performance on the indicators over time. Readers interested in examining the results more closely will find additional information in the appendices to this report. Appendix A contains detailed **Indicator and Variable Definitions** for each of the indicators included in Chapters 1 through 3 as well as the definition of race/ethnicity used in this report. Appendix B contains the **Outcome Data** for the indicators over the past seven years for the state, along with breakdowns by child age, race/ethnicity, gender, and geographical region. Appendix C provides **Racial/Ethnic Disproportionality Data** for the analyses included in Chapter 4. The data provided in Appendix B are also available online via the CFRC Data Center (<https://cfrc.illinois.edu/outcome-indicator-tables.php>).

Chapters 1 through 3 also contain a summary of the indicators used to track the Department's progress in achieving positive outcomes for children and families, and the amount of change that has occurred on each indicator between the two most recent years that data are available. These summaries, titled **Changes at a Glance**, are presented near the beginning of each chapter and list each outcome indicator in that chapter and an icon that denotes whether the indicator has significantly increased, decreased, or remained stable during the most recent monitoring period. To create these summaries, two decisions were made: 1) What time period is of *most* interest to policy-makers and other child welfare stakeholders? 2) How large must a change be to be a "significant" change?

Improvements in administrative data now allow us to track outcomes over long periods of time—some data can be traced back decades. Many of the figures in the chapters present outcome data over a 15-year period to show long-term trends. However, when trying to determine which child welfare outcomes may be starting to improve or decline, a more recent time frame is informative. Therefore, the summaries focus on the amount of change that has occurred during the *most recent 12 month period* for which data are available on a particular indicator. Significant changes (defined below) in either direction may indicate the beginning of a new trend or may be random fluctuation, but either way it is worthy of attention.

To measure the change in each indicator, we calculated the “percentage change” in the following manner: the older value of the indicator was subtracted from the more recent value of the indicator (to find the relative difference), divided by the older value, and then multiplied by 100 to determine the percentage change. To illustrate this process, if the percentage of children who achieve reunification within 12 months was 16% in 2016 and 24% in 2017, the percentage change would be:

$$\frac{\text{new value} - \text{old value}}{\text{old value}} \times 100 \quad \text{OR} \quad \frac{24 - 16}{16} \times 100 = 50\%$$

If the result is positive, it is a percentage increase; if negative, it is a percentage decrease. In this fictional example, the change from 2016 to 2017 represents a 50% increase in the percentage of children reunified within 12 months. Looking at the percentage difference ( $a - b / a$ ) rather than the actual difference ( $a - b$ ) allows us to compare indicators of different “sizes” using a common metric, so that differences in indicators with very small values (such as the percentage of children maltreated in substitute care) are given the same attention as those of larger magnitude.

Determining what counts as a “significant” amount of change in one year is subjective. In the current report, increases or decreases of *5% or more* were noted as significant. Changes of this magnitude are pictured with an upward or downward arrow, while changes of *less than 5%* are pictured with an equal sign and described with the term “remained stable.” Please note that the phrase “remained stable” does not mean that the indicator did not change at all, only that the percent change was less than 5% in either direction. In addition, though the word “significant” is used to describe the percentage changes, this does not mean that tests of statistical significance were completed; it merely suggests that the amount of change is noteworthy.



### The Continued Importance of the *B.H.* Monitoring Report in Illinois

In 1991, the *B.H.* consent decree required extensive reforms of the Illinois Department of Children and Family Services in order to create and maintain a child welfare system that provides children with safe and appropriate living arrangements; reasonable efforts to reunite them with their families; timely permanence through other means if reunification is not possible; timely access to adequate medical, mental health, and developmental services; public education that is of similar quality to other children not in DCFS custody; and services and training to permit them to function in the least restrictive and most homelike setting possible. After several years of efforts failed to produce any appreciable changes in the Department's performance, the *B.H.* parties agreed to a more results-oriented monitoring process as well as the creation of a Children and Family Research Center that would be "responsible for evaluating and issuing public reports on the performance of the child welfare service system operated by DCFS and its agents."<sup>18</sup> The independence of the Research Center from the Department was seen as a critical component of its mission to analyze data and produce an unbiased "annual report summarizing the Department's progress toward achieving the outcome goals and analyzing the reasons for the success or failure in making such progress."<sup>19</sup>

The *B.H.* consent decree and the establishment of an independent research center laid the foundation for a results-oriented process for reform in Illinois. The results of the Department's data-driven approach to reform were impressive. By implementing and rigorously evaluating innovative reforms such as subsidized guardianship, performance-based contracting, and structured safety assessment, Illinois safely and effectively reduced the number of children in care from over 50,000 in FY1997 to around 15,000 through much of the 2010s. This was accomplished by both reducing the number of children who were taken into substitute care and by increasing the number of children who exited the system to reunification, adoption, and subsidized guardianship. The transformation of the Illinois child welfare system from one of the worst in the country to one considered to be the "gold standard" was held as a model for other states' efforts to improve performance.<sup>20</sup>

Unfortunately, the Department's successes in the late 1990s and early 2000s in moving children to safe and permanent homes have not been sustained in more recent years. Rates of reunification, which were not as strongly impacted by the permanency initiatives implemented in the late 1990s, lag far behind the national average. Following their peak in the late 1990s, rates of adoption within 24 months fell to around 3% among children who entered substitute care in 2012. Since that low point, however, the percentage of children adopted within 24 months has increased and was 4.2% of the children who entered care in 2018. The use of subsidized guardianship, which was promoted as a form of legal permanence and an alternative to long-term foster care, has dwindled in the past decade and is now rarely used—only 32 of

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<sup>18</sup> Joint Memorandum, p. 2

<sup>19</sup> Joint Memorandum, p. 4

<sup>20</sup> Price, T. (2005). Child welfare reform. *The CQ Researcher*, 11, 345-367.

the 5,728 children who entered substitute care in 2018 (0.6%) exited to guardianship within 2 years (see Appendix B, Indicator 3.E.1).

In addition to the gradual erosion of progress in moving children to permanent homes, the annual *B.H.* monitoring reports have highlighted several areas of serious concern regarding child safety. One ongoing and significant concern first noted by the CFRC in the FY2015 monitoring report is the increase in substantiated maltreatment among children in intact family cases. This concern has been raised in each monitoring report since FY2015, and last year's report noted that "even more worrisome is the age of the children at highest risk: 20.0% of children ages 0 to 2 years who were being served in an intact family case in 2018 experienced a substantiated maltreatment report within one year of their case open date" (p. 1-17).<sup>21</sup> Based in part on the CFRC's recommendation for additional study of the factors related to maltreatment in intact families, Chapin Hall at the University of Chicago conducted a review of critical incidents that occurred in intact family cases in order to identify the structural, procedures, and cultural factors that contributed to them and prioritize key areas for improvement.<sup>22</sup> The review and resulting recommendations were important first steps in developing a plan to reverse the increase in maltreatment rates among intact family cases. Additional actions to implement some or all of the recommendations and evaluate their impact are vitally important as well.

Recent *B.H.* monitoring reports have also highlighted concerns about the rates of maltreatment in substitute care, which have been increasing each year for the past several years and reached their highest level in 15 years in 2020 (see Appendix B, Indicator 1.D). In 2015, the Department asked the CFRC to conduct a special study that examined the factors that increased a child's risk of maltreatment in substitute care. The results found that younger children, Black children, children with mental health diagnoses, children in unlicensed kinship foster homes, children with prior indicated reports, and children that did not have any contact with their caseworkers within the past 60 days were at higher risk for maltreatment in care.<sup>23</sup> In 2019, the Department asked CFRC to update the analyses using more recent data. The results of this updated study found that the strongest predictors of increased risk of maltreatment in care were: no caseworker contact with the child in the prior 30 days, no caseworker contact with the foster care provider within the prior 30 days, child mental health needs, and placement in an unlicensed foster home or the home of a parent.

The *B.H.* monitoring report can also highlight when a worrisome trend is reversed. Several years ago, the CFRC noted an increased use of congregate care settings as initial placements when children first enter substitute care. Additional analyses that separated group homes, institutions, and emergency shelters revealed that the use of all three placement types

<sup>21</sup> Children and Family Research Center. (2020). *Conditions of Children in or at Risk of Foster Care in Illinois: FY2020 Monitoring Report of the B.H. Consent Decree*. Urbana, IL: Author.

<sup>22</sup> Weiner, D., & Cull, M. (2019). *Systemic review of critical incidents in intact family services*. Chicago, IL: Chapin Hall at the University of Chicago.

<sup>23</sup> Nieto, M., Lei, X., & Fuller, T. (2015). *Predicting maltreatment in substitute care*. Urbana, IL: Children and Family Research Center.



## INTRODUCTION

increased in the early part of the 2010 decade. The percentage of children initially placed in emergency shelters peaked at 11.7% in FY2012 and the percentage initially placed in group homes and institutions peaked at 8.6% in FY2015. Following the publication of these findings, the Department instituted several initiatives and procedural changes that were aimed at reducing the use of emergency shelters and congregate care settings as initial placements. Continued monitoring provided in the *B.H.* reports has shown that the percentage of children placed in emergency shelters has fallen to 1.1% of those who entered care in FY2020 (see Appendix B, Indicator 2.A.5) and the percentage initially placed in group homes and institutions has decreased to 3.7% in FY2020 (see Appendix B, Indicator 2.A.6). However, it will be important to keep a close eye on the use of these placement types as the number of children entering substitute care in Illinois continues to climb.

As these examples demonstrate, the importance of the annual *B.H.* monitoring report in identifying worrisome trends in child welfare outcomes cannot be overstated. By examining the a set of indicators that has been developed specifically for the Illinois child welfare system, and monitoring them at frequent intervals over long periods of time, we are able to identify trends as they emerge, track them over time, and highlight areas that need additional scrutiny. Our hope is that the *B.H.* report both serves its intended purpose of informing the *B.H.* parties on the performance of the Illinois Department of Children and Family Services, and that also it provides other child welfare stakeholders within the State with information that is useful to them and encourages further discussion on how to improve outcomes for children and families. We welcome feedback on the report, as well as suggestions for additional areas of study.<sup>24</sup>

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<sup>24</sup> Contact information for the Children and Family Research Center can be found on the Acknowledgements page.





## Chapter 1

# Child Safety

Child safety is the paramount concern of the child protection system. According to the most recent federal child welfare outcome monitoring report, “Public child welfare agencies are responsible for ensuring that children who have been found to be victims of abuse or neglect are protected from further harm. Whether the child is placed in out-of-home care or maintained in the home, the child welfare agency’s first concern must be to ensure the safety of the child” (p. 16).<sup>1</sup> Once a child becomes involved in a substantiated report of child abuse or neglect, the child welfare system must act to protect the child from additional abuse or neglect.

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### Measuring Child Safety

In some ways, child safety is the most straightforward of all child welfare outcomes—safety is the *absence* of child maltreatment. Even so, there are many different ways to measure child safety which can lead to inconsistencies in results and confusion when comparing or interpreting them. With that in mind, it is important to specify how child safety is measured in this chapter (see Appendix A for detailed definitions of the indicators used in this report).

Maltreatment recurrence is the most common indicator used to assess child safety within the context of public child welfare. Typically, a recurrence is defined as a substantiated<sup>2</sup> maltreatment report following a prior substantiated report that involves the same child or family. Other measures of child safety, called re-referrals or re-reports, take a broader view and include *all* subsequent reports following an initial report, regardless of whether the subsequent

<sup>1</sup> U.S. Department of Health and Human Services, Administration on Children and Families, Children’s Bureau. (2019). *Child Welfare Outcomes 2016: Report to Congress*. Washington, DC: Child Welfare Information Gateway.

<sup>2</sup> In Illinois, maltreatment reports are indicated or unfounded, rather than substantiated or unsubstantiated. The current report uses the more widely used term “substantiated” instead of “indicated” and “unsubstantiated” instead of “unfounded.”

report was substantiated. Although recognizing the importance of all future contacts with child welfare, the current chapter uses the definition of maltreatment recurrence used in the Child and Family Services Reviews (CFSRs), which includes additional substantiated maltreatment reports that occur within 12 months of an initial substantiated maltreatment report.

### Changes in Child Safety at a Glance

#### **Maltreatment Recurrence Among Children with Substantiated Reports (CFSR)**

↑ Of all children with a substantiated report, the percentage that had another substantiated report within 12 months increased from 13.0% in 2018 to 13.8% in 2019 (+6% change).

#### **Maltreatment Among Children Served in Intact Family Cases**

↑ Of all children served in intact family cases, the percentage that had a substantiated report within 12 months increased from 16.2% in 2018 to 18.0% in 2019 (+11% change).

#### **Maltreatment Recurrence Among Substantiated Children Who Do Not Receive Services**

↑ Of all children with substantiated reports who did not receive services, the percentage that had another substantiated report within 12 months increased from 10.9% in 2018 to 12.1% in 2019 (+11% change).

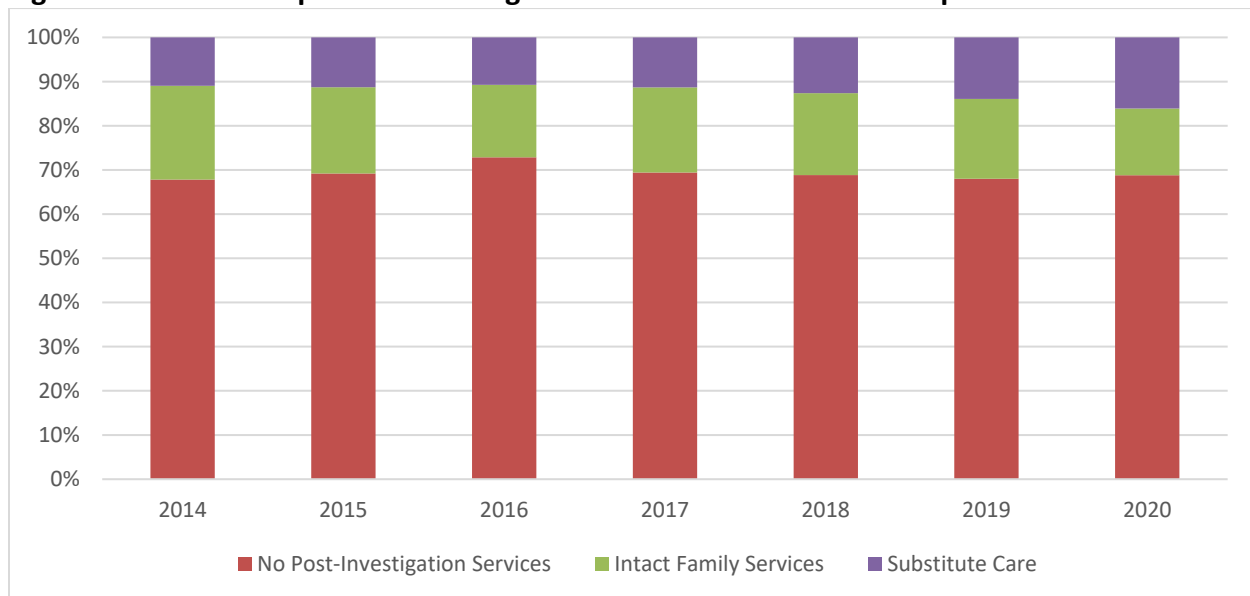
#### **Rate of Victimization Per 100,000 Days Among Children in Substitute Care (CFSR)**

↑ Of all children in substitute care during the year, the rate of substantiated maltreatment per 100,000 days in substitute care increased from 17.8 in 2019 to 19.3 in 2020 (+8% change).

An additional consideration when selecting indicators of child safety is the population to be monitored. In Illinois, the mandate for ensuring child safety extends to all children investigated by the Department, regardless of whether post-investigation services are offered. Not all families—even those in which maltreatment is substantiated—receive post-investigation services. Figure 1.1 shows the service dispositions of children with substantiated reports each year from 2014 to 2020. The majority of children with substantiated reports do not receive any post-investigation services, and this percentage has ranged between a low of 67.8% in 2014 to a high of 72.9% in 2016; in 2020, it was 68.8%. The percentage of children served at home in intact family cases (i.e., children remain at home while the family receives supportive services rather than being placed into substitute care) has decreased in recent years, reaching a new low of 15.1% in 2020.<sup>3</sup> Conversely, the percentage of children with a substantiated report who are placed in substitute care has increased 49% over the past four years, from 10.8% in 2016 to 16.1% in 2020.<sup>4</sup>

<sup>3</sup> This percentage includes children with substantiated reports that occurred while the child was already being served in an intact family case as well as children served in an intact family case within 60 days of the initial substantiated report.

<sup>4</sup> This percentage includes those children with substantiated reports that occurred while the child was in substitute care as well as children placed in substitute care within 60 days of a substantiated report.

**Figure 1.1 Service Dispositions Among Children with Substantiated Reports**

The relationship between post-investigation service provision and risk of maltreatment recurrence is complex. Many studies have found that families who receive child welfare services are at a higher risk of maltreatment recurrence than those who are not provided with services. This may seem counter-intuitive, since services are provided to reduce family risk factors and decrease future maltreatment. The relationship between child welfare service provision and increased recurrence has been attributed to both increased surveillance by caseworkers and the fact that families who receive services typically have more risk factors than families not recommended for services.<sup>5</sup> Monitoring child safety without regard to service disposition ignores the fact that children served in one setting may be more or less safe than those served in another. Therefore, in this chapter, separate indicators examine child safety among: 1) all children with substantiated reports; 2) children served in intact family cases; 3) children who do not receive any post-investigation services; and 4) children removed from the home and placed into substitute care (see Appendix A for technical definitions of these indicators).

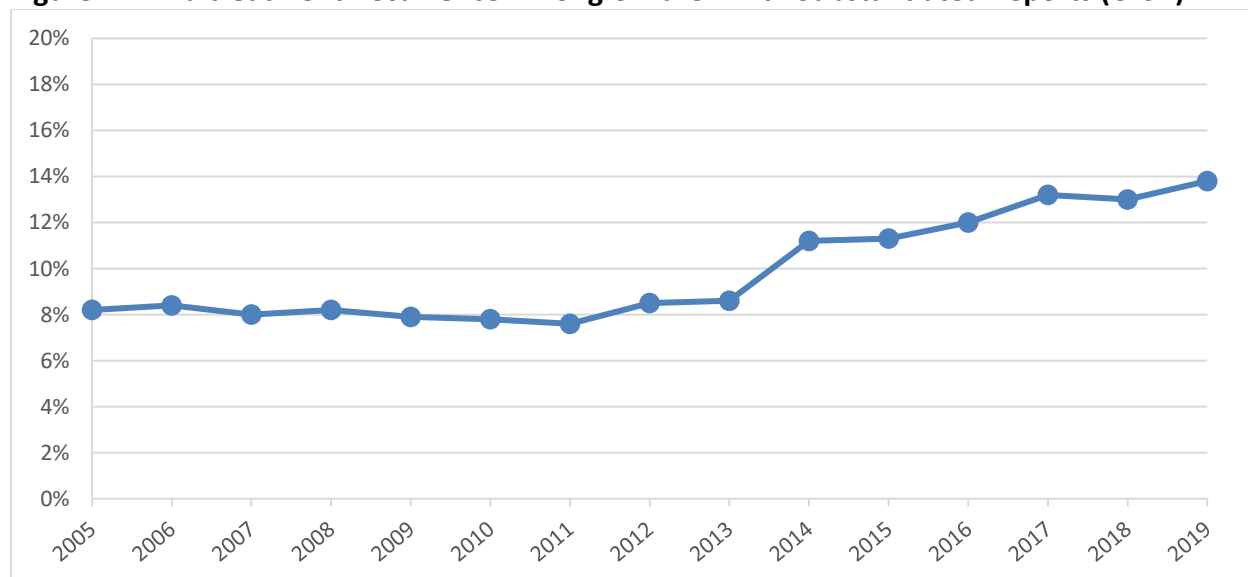
1

<sup>5</sup> Fuller, T., & Nieto, M. (2014). Child welfare services and risk of child maltreatment re-reports: Do services ameliorate initial risk? *Children and Youth Services Review*, 47, 46-54.

## Maltreatment Recurrence Among Children with Substantiated Reports (CFSR)

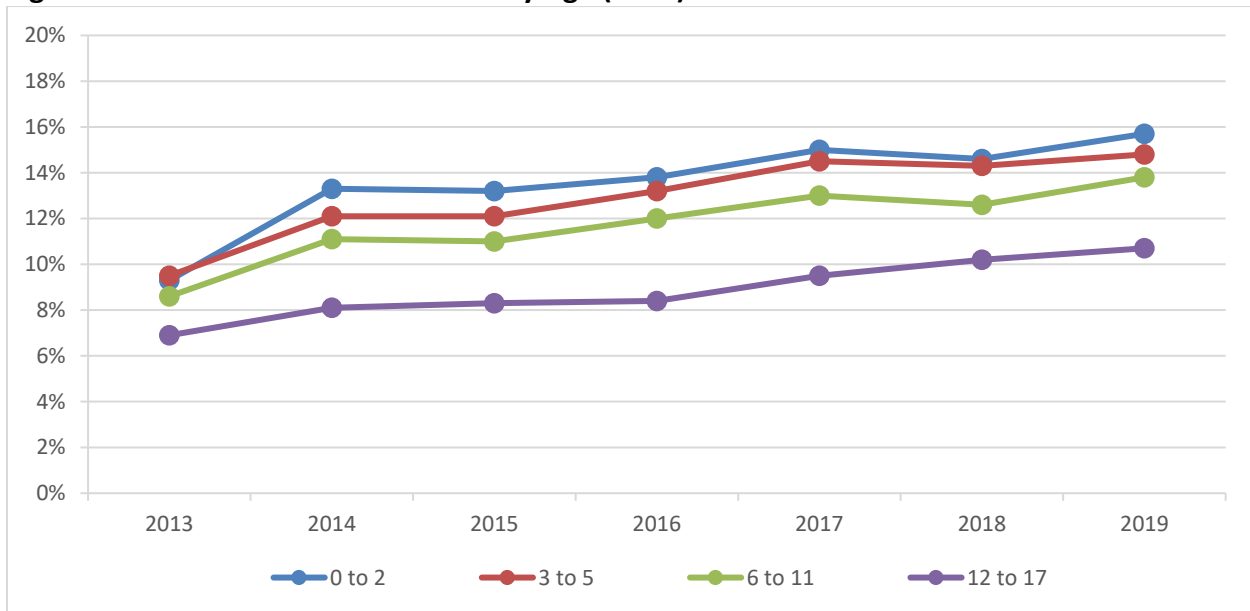
Figure 1.2 displays the 12-month maltreatment recurrence rate for all children with a substantiated maltreatment report over the past 15 years (see Appendix B, Indicator 1.A). The recurrence rate was at its lowest in 2011 (7.6%) and has steadily increased since then, reaching a new high rate of 13.8% in the most recent year. The continued increase in maltreatment recurrence over the past 8 years is a worrisome trend.

**Figure 1.2 Maltreatment Recurrence Among Children with Substantiated Reports (CFSR)**



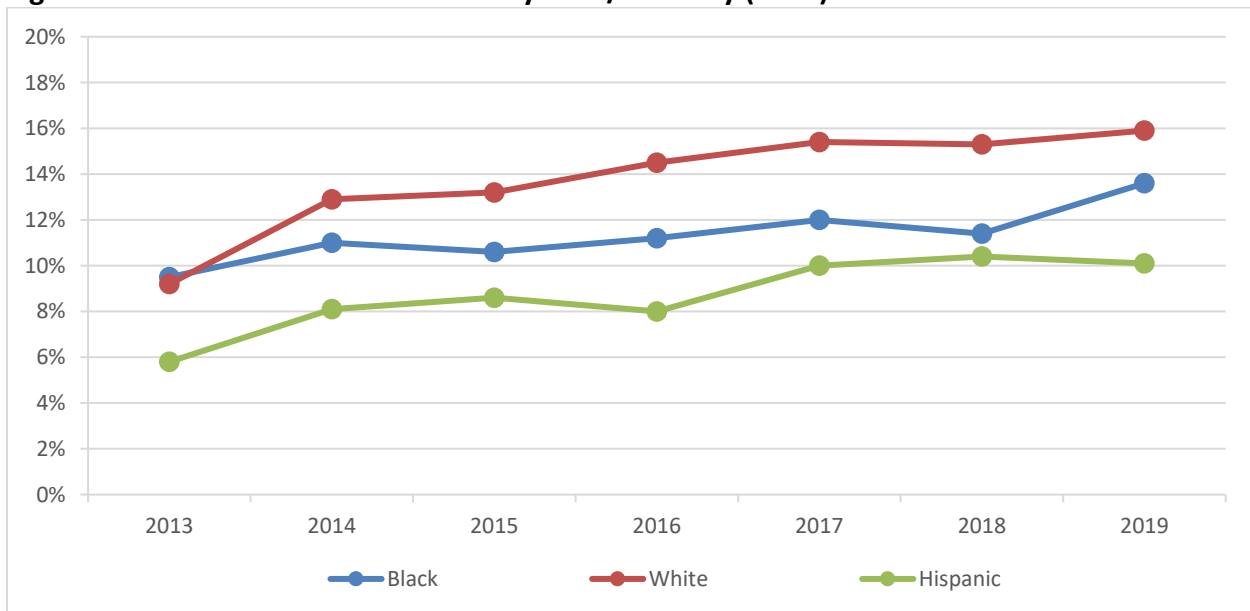
Past research has found that younger children are more likely to experience maltreatment recurrence than older children,<sup>6</sup> a finding that holds true in Illinois. Of children with a substantiated report in 2019, 15.7% of children 0 to 2 years old and 14.8% of children 3 to 5 years old had an additional substantiated report within 12 months, compared to 10.7% of those 12 to 17 years old (see Figure 1.3 and Appendix B, Indicator 1.A). Maltreatment recurrence has increased among all age groups over the past several years.

<sup>6</sup> Bae, H., Solomon, P.L., & Gelles, R.J. (2009). Multiple child maltreatment recurrence relative to single recurrence and no recurrence. *Children and Youth Services Review, 31*, 617-624. Connell, C.M., Bergeron, N., Katz, K.H., Saunders, L., & Tebes, J.K. (2007). Re-referral to child protective services: The influence of child, family, and case characteristics on risk status. *Child Abuse & Neglect, 31*, 573-588. Kahn, J.M., & Schwalbe, C. (2010). The timing to and risk factors associated with child welfare system recidivism at two decision-making points. *Children and Youth Services Review, 32*, 1035-1044. Fluke, J.D., Shusterman, G.R., Hollinshead, D.M., & Yuan, Y.T. (2008). Longitudinal analysis of repeated child abuse reporting and victimization: Multistate analysis of associated factors. *Child Maltreatment, 13*, 76-88.

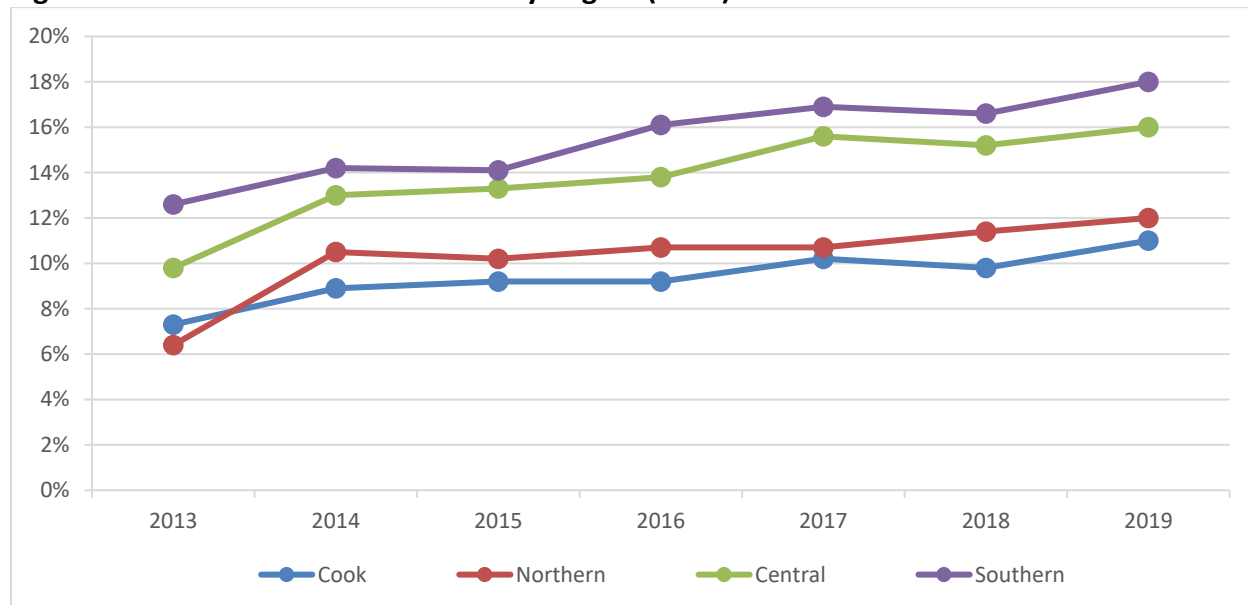
**Figure 1.3 Maltreatment Recurrence by Age (CFSR)**

When recurrence rates are examined by child race and ethnicity, White children have higher rates of maltreatment recurrence than Black children and Hispanic children, and rates for all groups have increased over time (see Figure 1.4 and Appendix B, Indicator 1.A).

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**Figure 1.4 Maltreatment Recurrence by Race/Ethnicity (CFSR)**

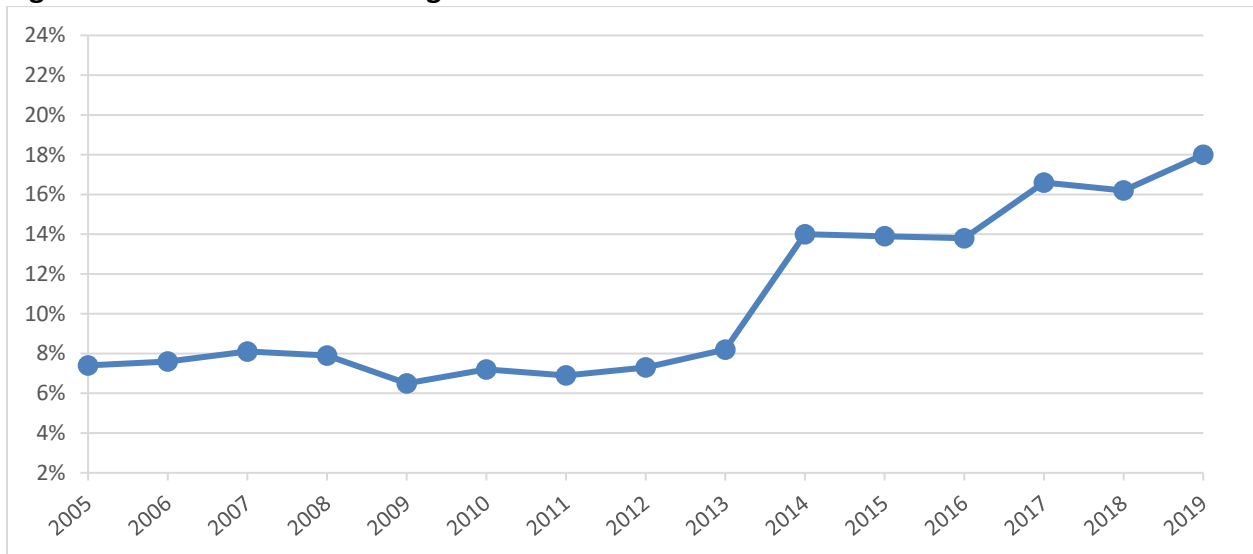
Recurrence rates among children with substantiated reports in 2019 were higher in the Southern (18.0%) and the Central regions (16.0%) compared to the Northern (12.0%) and Cook regions (11.0%), a pattern that has persisted for many years (see Figure 1.5 and Appendix B, Indicator 1.A).

**Figure 1.5 Maltreatment Recurrence by Region (CFSR)**

### Maltreatment Among Children in Intact Family Cases

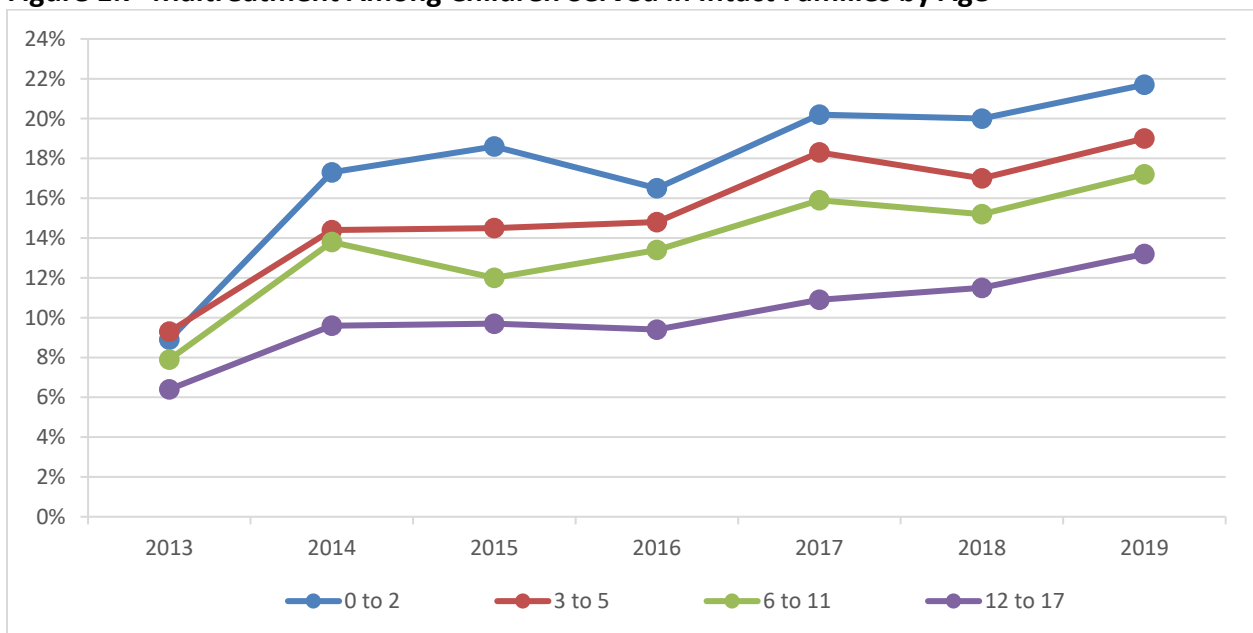
In some instances, the Department will substantiate child maltreatment in a family but decide that it is in the best interest of the child(ren) to remain at home while the family receives supportive services rather than place the child(ren) into substitute care. These families are of special interest to the Department because their history of substantiated maltreatment places them at increased risk of repeat maltreatment compared to families with no history of maltreatment.<sup>7</sup> Figure 1.6 displays the percentage of children served in intact family cases that experienced a substantiated maltreatment report within 12 months of their case open date (see Appendix B, Indicator 1.B). Maltreatment rates among children served in intact family cases increased sharply in 2014 (from 8.2% of children in intact family cases in 2013 to 14.0% of children in 2014) and then remained at that level for three years. Since 2016, the maltreatment rate has increased from 13.8% to 18.0% in 2019, which is the highest rate observed in the past 15 years.

<sup>7</sup> Horwitz, S.M., Hurlburt, M.S., Cohen, S.D., Zhang, J., & Landsverk, J. (2011). Predictors of placement for children who initially remained in their homes after an investigation for abuse or neglect. *Child Abuse & Neglect*, 3, 188-199.

**Figure 1.6 Maltreatment Among Children Served in Intact Families**

Younger children served in intact family cases are more likely to be maltreated compared to older children (see Figure 1.7 and Appendix B, Indicator 1.B). In 2019, 21.7% of children age 0 to 2 had a substantiated report within 12 months of their case opening, compared to 19.0%, 17.2%, and 13.2% of children ages 3 to 5, 6 to 11, and 12 to 17, respectively. Maltreatment has increased among all age groups, with the largest overall increase occurring among children age 0 to 2 years. Rates of maltreatment in all age groups have at least doubled since 2013.

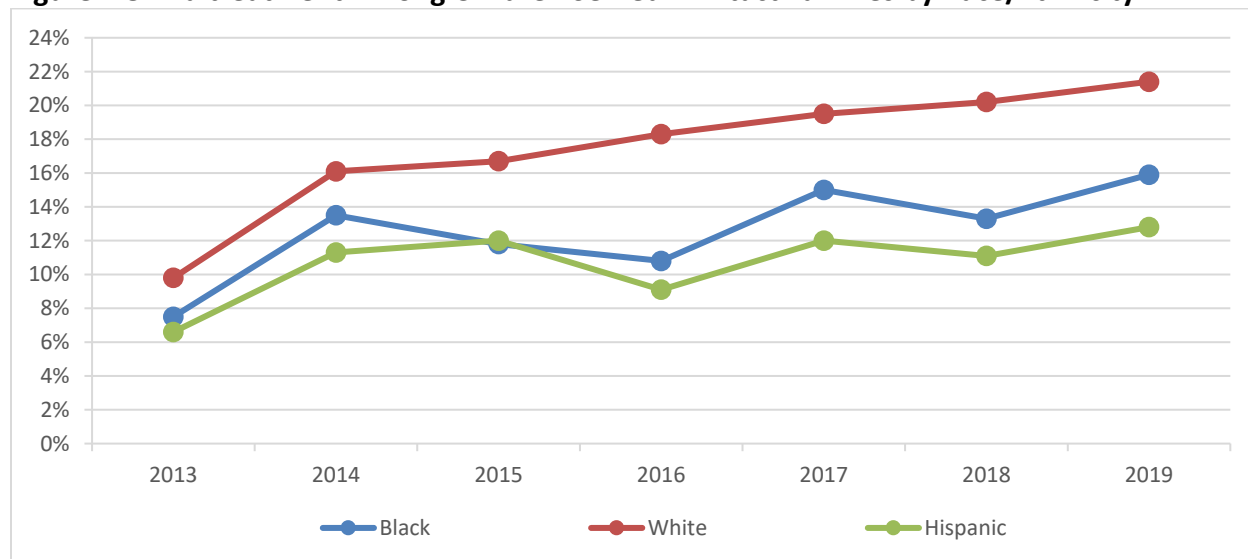
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**Figure 1.7 Maltreatment Among Children Served in Intact Families by Age**

## CHILD SAFETY

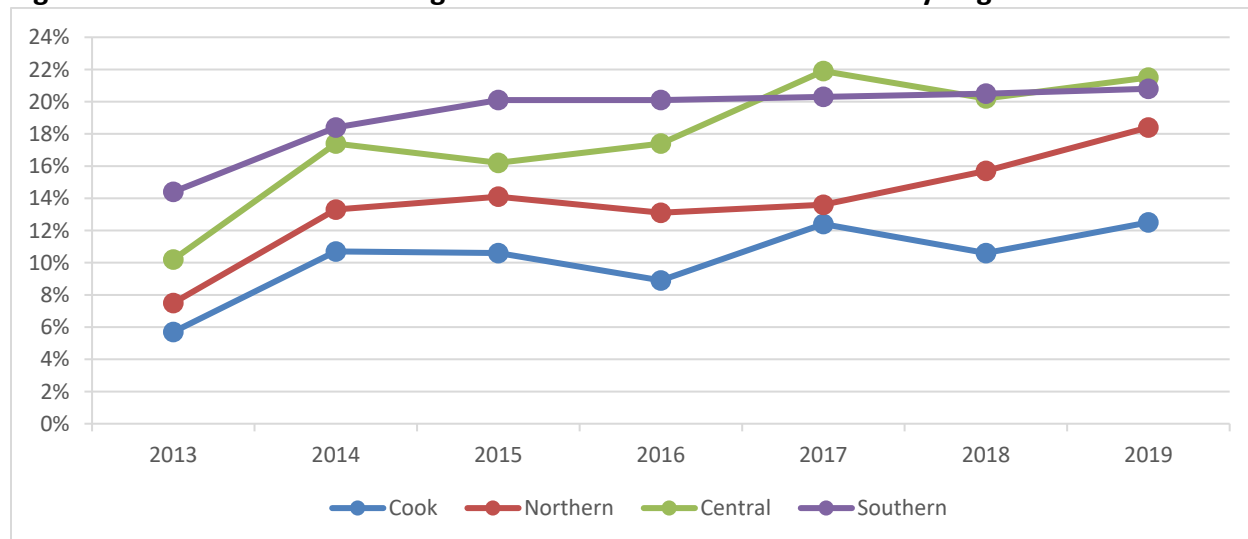
Figure 1.8 displays the maltreatment rates among children served in intact families by racial/ethnic group. White children served in intact families are consistently more likely to experience maltreatment than Black and Hispanic children (see Appendix B, Indicator 1.B). Although maltreatment among all three groups has increased over the past seven years, the largest increase has occurred among White children.

**Figure 1.8 Maltreatment Among Children Served in Intact Families by Race/Ethnicity**



Maltreatment rates among children served in intact family cases have been consistently higher in the Southern and Central regions compared to those in the Cook and Northern regions; rates in the Southern region are approximately double those in the Cook region (see Figure 1.9 and Appendix B, Indicator 1.B). Maltreatment rates have been relative stable for the past three years, except in the Northern region, where they have increased from 13.6% to 18.4%

**Figure 1.9 Maltreatment Among Children Served in Intact Families by Region**

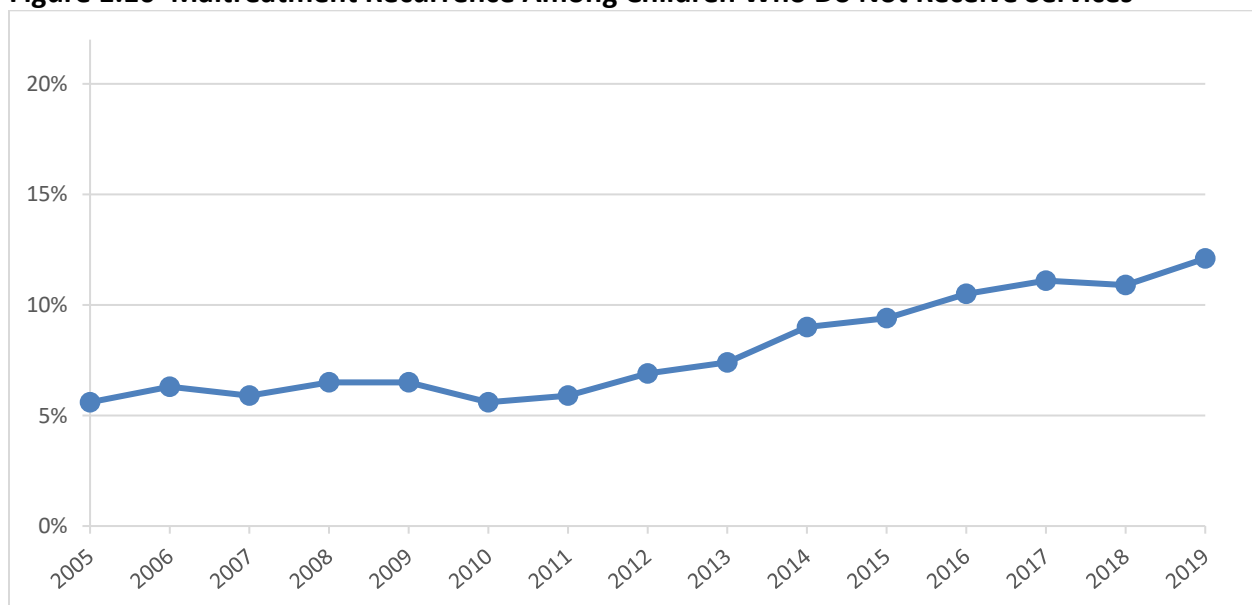




## Maltreatment Recurrence Among Children Who Do Not Receive Services

Almost three quarters (68.0%) of children that had substantiated reports of maltreatment in 2019 did not receive any post-investigation child welfare services (see Figure 1.1). Figure 1.10 displays the 12-month maltreatment recurrence rates for children with a substantiated report who did not receive services (either intact family services or substitute care) following the investigation (i.e. the case was substantiated and closed; see Appendix B, Indicator 1.C). When observing data from the past 15 years, we see that rates have been consistently increasing since 2010. Examination of recurrence rates by subgroup reveals that, similar to the other safety indicators, rates are highest among children 0 to 2 years, White children, and children living in the Southern and Central region of the state (see Appendix B, Indicator 1.C).

**Figure 1.10 Maltreatment Recurrence Among Children Who Do Not Receive Services**



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## Maltreatment in Substitute Care (CFSR)

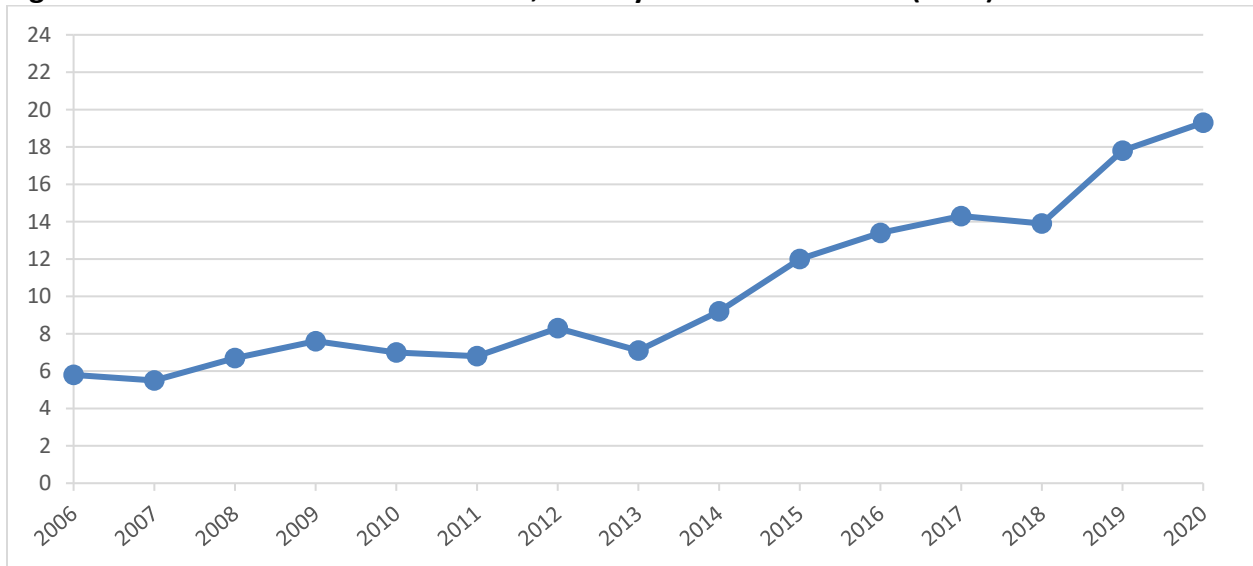
Children should only be removed from their parents' care and placed into substitute care when it is necessary to protect their well-being and safety, and it is essential that children are safe while they are in state care. In order to assess child safety in substitute care, this report uses the measure that has been developed for Round 3 of the Child and Family Service Reviews (CFSR).<sup>8</sup> This measure looks at the children in substitute care during the fiscal year and calculates the total number of days these children were in substitute care. Then, the total number of substantiated reports of maltreatment for these children within this period is determined. In order to make the results easier to interpret, the results are multiplied by

<sup>8</sup> Children's Bureau (2019). CFSR Round 3 Statewide Data Indicator Series: Maltreatment in Foster Care. Retrieved on March 21, 2021 from <https://capacity.childwelfare.gov/pubPDFs/cbc/maltreatment-foster-care-cfsr3-cp-00003.pdf>

## CHILD SAFETY

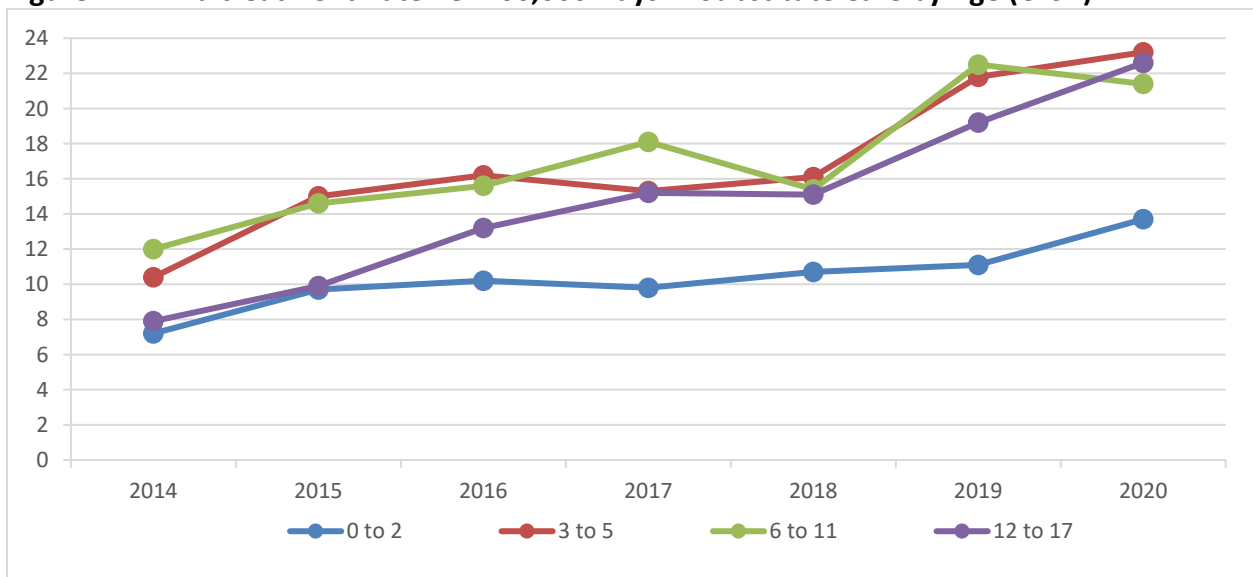
100,000 and are described as the rate of maltreatment per 100,000 days of substitute care (see Appendix A for the technical definition). Figure 1.11 shows the rate of substantiated reports per 100,000 days in care over the past 15 years. Maltreatment rates were lowest in 2007 (5.5) and have increased almost every year since 2013, reaching a new high of 19.3 in 2020. The continued increase in maltreatment in substitute care over the past several years is a serious concern.

**Figure 1.11 Maltreatment Rate Per 100,000 Days in Substitute Care (CFSR)**



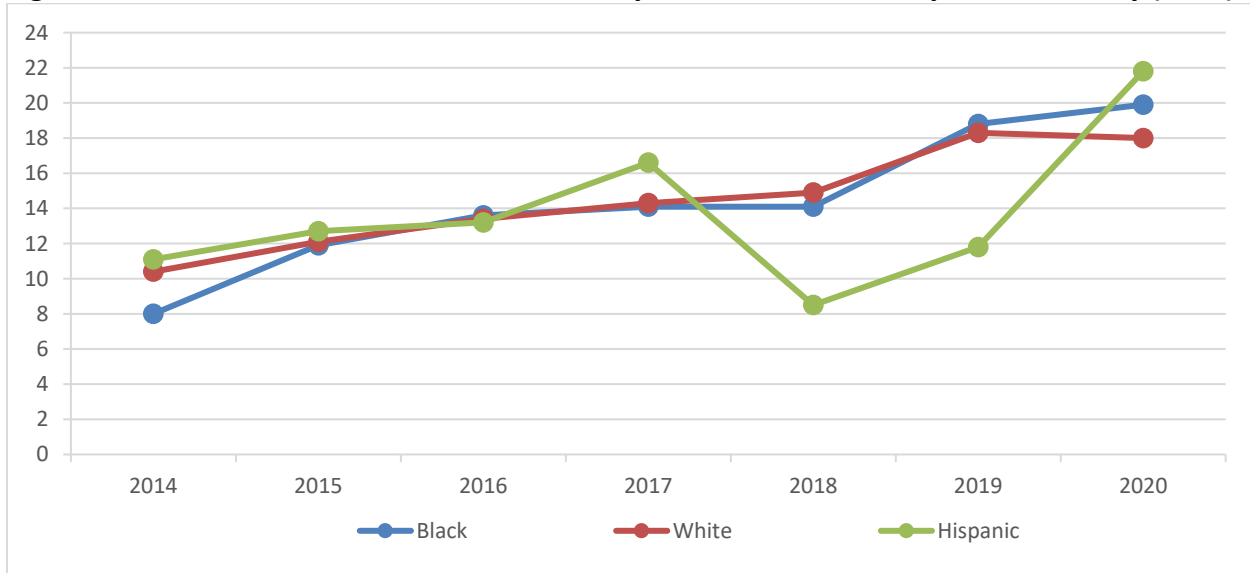
Unlike other indicators of safety, children ages 0 to 2 years are less likely to experience maltreatment in substitute care than those in other age groups (see Figure 1.12 and Appendix B, Indicator 1.D).

**Figure 1.12 Maltreatment Rate Per 100,000 Days in Substitute Care by Age (CFSR)**



Rates of maltreatment in care have increased markedly over the past three years for all racial/ethnic groups (see Figure 1.13 and Appendix B, Indicator 1.D), with Hispanic children seeing the biggest increase.

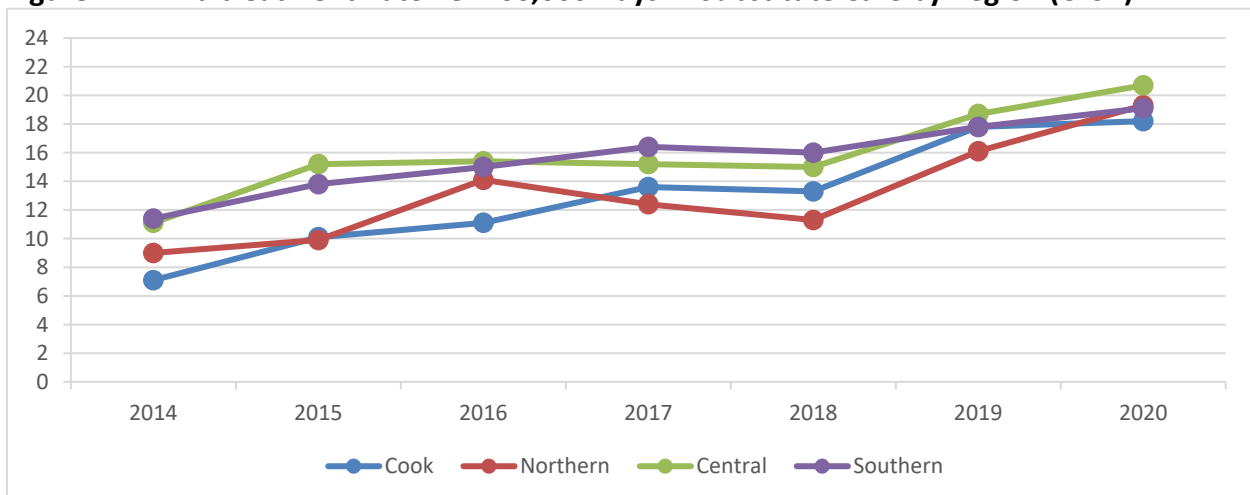
**Figure 1.13 Maltreatment Rate Per 100,000 Days in Substitute Care by Race/Ethnicity (CFSR)**



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Unlike other child safety indicators, there were no large regional differences in rates of maltreatment in care in 2020 (see Figure 1.14 and Appendix B, Indicator 1.D). Rates have been increasing over the past several years, and all regions saw a notable increase in the past two years.

**Figure 1.14 Maltreatment Rate Per 100,000 Days in Substitute Care by Region (CFSR)**



## Maltreatment Investigations and Substantiation During the COVID-19 Pandemic

### BOX 1.1

In March 2020, Illinois Governor J.B. Pritzker issued a “stay-at-home” order due to the COVID-19 pandemic, which included the cessation of in-person schooling.<sup>9</sup> Prior to the pandemic, teachers and other school employees had frequent and close contact with school-aged children, which put them in a unique position for detecting and reporting maltreatment.<sup>10</sup> Following the stay-at-home order, there was concern that teachers and other school personnel would be less likely to observe and report suspected child maltreatment, which would cause children to be less safe.<sup>11</sup> In order to examine the impact of the pandemic on maltreatment reporting, the CFRC analyzed patterns of maltreatment reports and rates of substantiation in Illinois from the beginning of the 2018 calendar year to September of 2020, and the data were retrieved December 31<sup>st</sup>, 2020.<sup>12</sup>

### Impact on the Number of Maltreatment Investigations

Figure 1.15 shows the number of investigations during calendar years 2018, 2019, and 2020, by month. Prior to the pandemic, there is a seasonal pattern to the number of investigations; the numbers are smallest during the summer months of June, July and August when most children are not in school. Figure 1.15 shows there was a notable drop in the number of investigations in April and May 2020, following the stay-at-home order and the cessation of in-person schooling. The number of investigations in April 2020 was about 59% of those in April 2019, and the number of investigations in May 2020 was about 61% of those in May 2019.

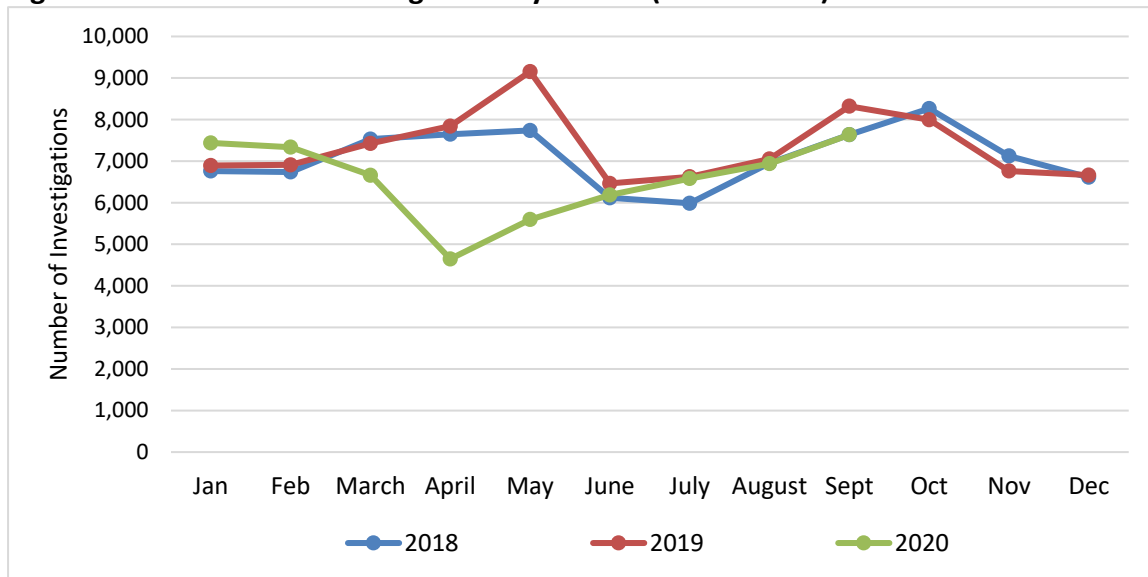
<sup>9</sup> Pritzker, J.B. (2020). Executive order in response to COVID-19. No. 8. Springfield, IL.

<sup>10</sup> Illinois school personnel is one of the mandatory reporter groups required to report child maltreatment by calling the CPS hotline number or filling out the online form as defined in Illinois Abused and Neglected Child Reporting Act 325 ILCS 5/4 (2019).

<sup>11</sup> Fiese, B., Fuller, T., Goulet, B., & Wilson, R. F. (2020). *Children at risk: ensuring child safety during the pandemic*. Institute of Government and Public Affairs at University of Illinois System. Retrieved from <https://igpa.uillinois.edu/page/igpa-covid-19-pandemic-task-force>.

<sup>12</sup> Data were retrieved from IL SACWIS on December 31, 2020. The unit of analysis was the investigation. If the same child appears in multiple investigations, we counted all of them.

**Figure 1.15 Number of Investigations by Month (2018 – 2020)**



Next, the number of investigations by nine reporter groups in FY2018 through FY2020 was examined. We focused on the 4<sup>th</sup> quarter (April, May, June) for each year because of the previously observed irregularities during these months in 2020. As seen in Figure 1.16, the number of investigations from school personnel during this quarter dropped significantly in 2020. There were 5,964 investigations from the reports made by school personnel in Q4 of 2019, but only 674 in Q4 of 2020 (a relative decrease of 89%). Many of the other reporter groups also had a decrease in investigations during this period, but none as notable as the decrease in investigations stemming from the reports made by school personnel.

**Figure 1.16 Investigations by Reporter Group During the 4th Quarter FY2018 – FY2020**

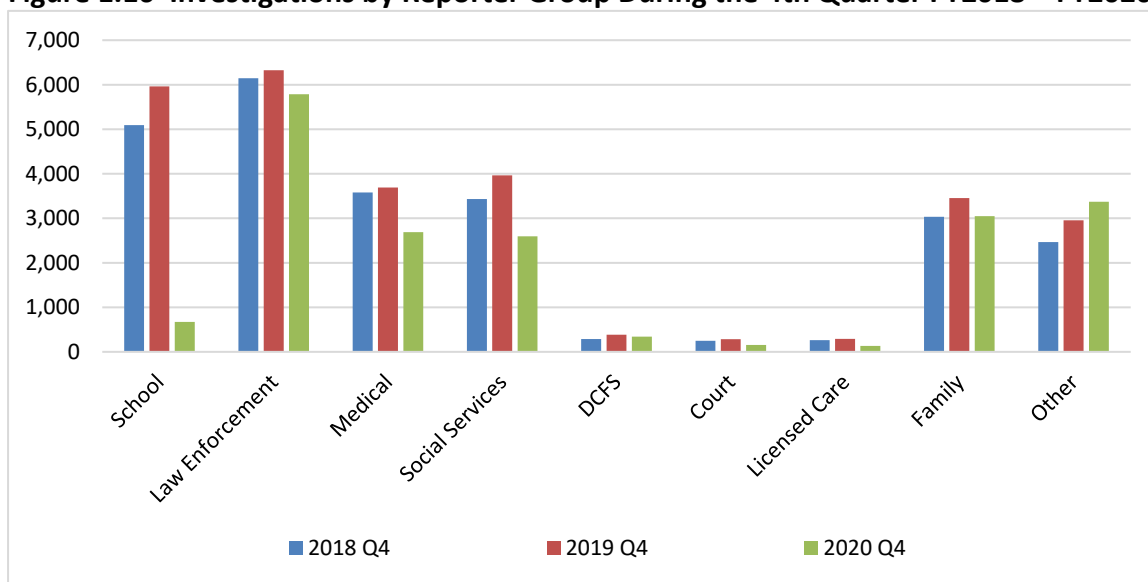
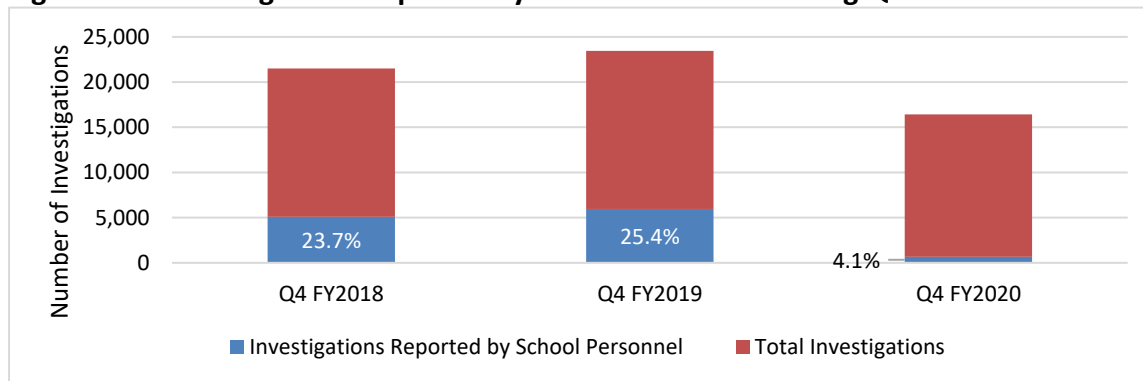


Figure 1.17 shows the percentages of investigations resulting from reports by school personnel in the 4<sup>th</sup> quarter of FY2018, FY2019, and FY2020. In Q4 of 2018 and 2019, about one-in-four investigations resulted from reports made by school personnel. However, this percentage dropped to 4.1% in Q4 of 2020. These data support the conclusion that the decrease in the number of investigations during Q4 of 2020 resulted from decreased reports from school personnel while “stay-at-home” orders due to COVID-19 were in effect.

**Figure 1.17 Investigations Reported by School Personnel During Q4 FY2018 – FY2020**



**Impact on Substantiation Rates**

Figure 1.18 shows the substantiation rates for all investigations by month from January 2018 to September 2020. The figure shows that the rates of substantiation in April and May 2020 were higher than those in the same months in 2018 and 2019. More specifically, the substantiation rate in April 2020 was 31.1%, compared to 25.5% in 2019 and 23.5% in 2018. Comparable rates for May were 33.5% in 2020, 25.2% in 2019, and 23.1% in 2018. This suggests that although the number of investigations declined in the early months of the pandemic, the percentage of those investigations that were substantiated increased during the same period.

**Figure 1.18 Substantiation Rate by Month (January 2018 – September 2020)**

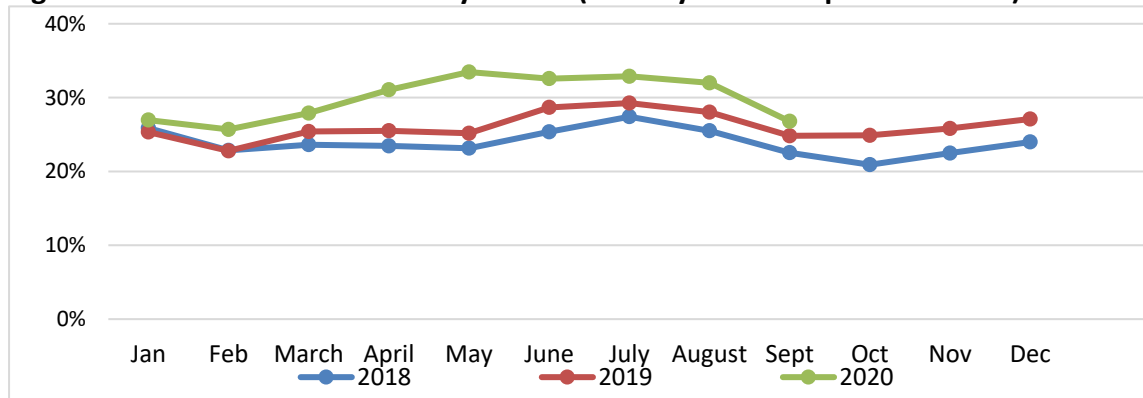
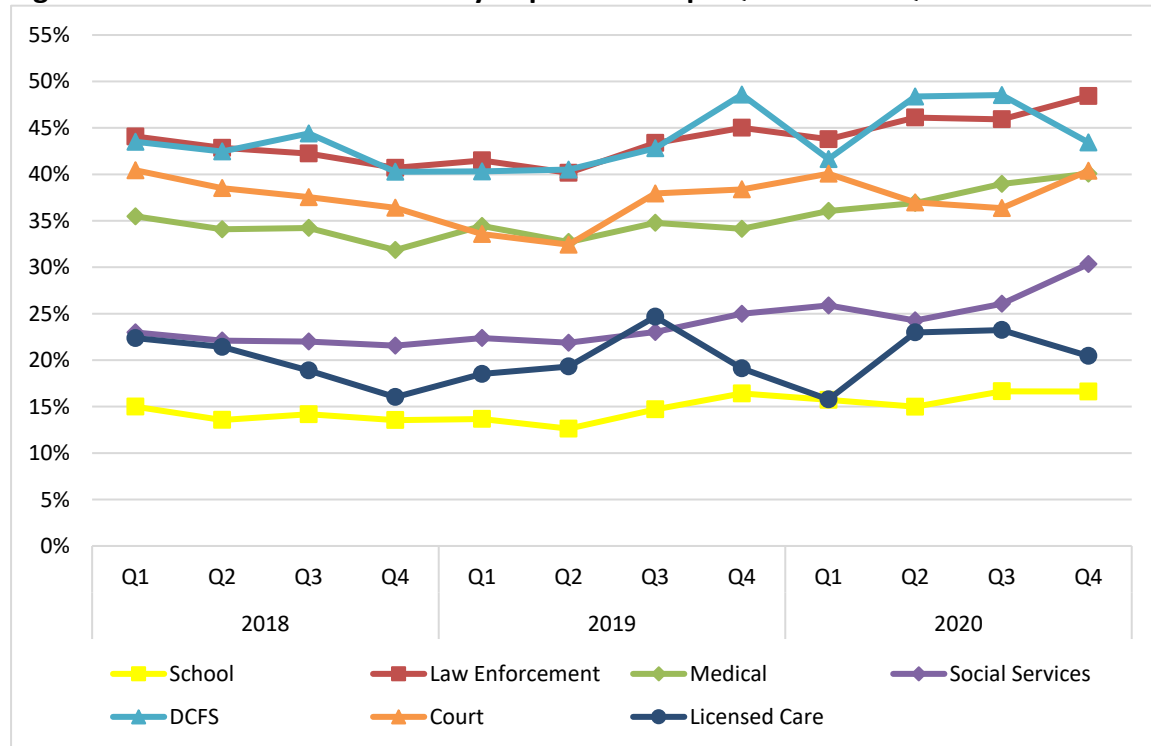


Figure 1.19 presents the substantiation rates of investigations resulting from the reports of mandated reporter groups, by quarter, in FY2018 through FY2020. Overall, there were not any large changes in substantiation rates associated with investigations stemming from the reports of the mandated reporter groups, including school personnel. The results in Figure 1.19 show that in the last three years, investigations resulting from reports made by law enforcement and DCFS had the highest overall substantiation rates among mandated reporter groups (40.1%-48.6%). In contrast, investigations resulting from reports made by school personnel consistently had the lowest substantiation rates (12.6%-16.6%).

**Figure 1.19 Substantiation Rates by Reporter Groups Q1 FY2018 – Q4 FY2020**



These analyses confirm that although there was a sharp decrease in the number of investigations in the two months immediately following the stay-at-home order, there was an increase in the overall substantiation rate during this period. This was the result of the decrease in the number of maltreatment investigations resulting from reports made by school personnel, which tend to have very low substantiation rates.

### Discussion and Conclusions: Child Safety

One of the most important goals of the public child welfare system is to ensure that child maltreatment victims are safe from additional harm. In some cases, this is done by removing children from their homes and placing them into substitute care until it is determined safe for them to return home. In the vast majority of cases, however, children remain in their homes at the conclusion of an investigation, even if they were found to be the victims of maltreatment. Some of these families receive formal child welfare services following the investigation, but in Illinois, most do not.

The results presented in this chapter show unequivocally that fewer children in Illinois experience safety during the 12 months following their initial involvement in a substantiated investigation. On each of the indicators of child safety, the percentage of children who experience additional harm is at the highest level in the past 15 years. Numerous concerns have been identified throughout the chapter, but we are especially concerned with the increasing rates of maltreatment among children in intact family cases and those living in substitute care.

There is a reasonable expectation that intact family services should *reduce* the risk of maltreatment for children. Past *B.H.* monitoring reports have highlighted a concern with the percentage of children in intact family cases who experience maltreatment, and the results of this year's report reinforce this concern. Maltreatment rates among children served in intact family cases have continued to rise; the rate of 18.0% in 2019 is the highest within the last 15 years. Even more worrisome is that the most vulnerable children are at highest risk; 21.7% of children 0 to 2 years being served in an intact family case in 2019 experienced a substantiated maltreatment report within one year of their case open date.

In 2019, Chapin Hall at the University of Chicago conducted a review of critical incidents that occurred in intact family cases in order to identify the structural, procedures, and cultural factors that contributed to them and prioritize key areas for improvement.<sup>13</sup> Although this review focused on critical incidents (death and serious injuries), the systemic issues that were identified apply to all intact family cases. The issues that were identified included supervisory misalignment caused by the “matrix” model of supervision, ineffective checks and balances that lead to inappropriate referrals to intact family services, role ambiguity among investigators, gaps in the information about the family that is provided to intact caseworkers, reluctance by intact caseworkers to request child removal from intact families, and closing intact family cases when they are still at high risk for additional maltreatment. Recommendations to address these issues included the development of a protocol for closing intact family cases; clarification of the expectations for both investigators, intact family caseworkers and their supervisors; utilization of evidence-based approaches to prevention casework; improvement of the quality of supervision; adjustment of the preventive services offered through intact family services; restructuring of the relationships between investigations and intact family services; refinement

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<sup>13</sup> Weiner, D., & Cull, M. (2019). *Systemic review of critical incidents in intact family services*. Chicago, IL: Chapin Hall at the University of Chicago.



of the criteria for child removal in complex and chronic family cases; redesign of the intact family case assessment and intake process; and exploration of the use of predictive models to identify intact family cases at high risk of severe harm. The review and resulting recommendations were important first steps in developing a plan to reverse the increase in maltreatment rates among intact family cases. Additional actions to implement some or all of the recommendations and evaluation of their impact is vitally important as well.

The second major concern identified in this chapter is the continued increase in maltreatment of children living in substitute care. The indicator for this outcome, which takes into account the amount of time that children spend in substitute care, has increased 39% in the past two years and is at its highest rate in the past 15 years. The results of a study completed by the CFRC in 2020 revealed several factors that increased a child's risk of maltreatment in a foster home placement, including no face-to-face visit between the caseworker and child or caseworker and foster parent within the prior 30 days, an identified child mental health need, and placement in an unlicensed kinship foster home or in the home of the parents.<sup>14</sup> The Department should explore ways to adjust practice or policy related to these factors and should evaluate the impact of any interventions on the rate of maltreatment in care. Since the underlying dynamics of the relationship between unlicensed kinship foster homes and child safety are unclear, additional study of this relationship is warranted.

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<sup>14</sup> Nieto, M., Wang, S., Fuller, T., & Adams, K. (2020). *Predicting Maltreatment in Substitute Care*. Urbana, IL: Children and Family Research Center.





## Chapter 2

# Family Continuity, Placement Stability, and Length of Time in Care

Children should only be removed from their parents and placed in substitute care when it is necessary to ensure their safety and well-being. Once removed from their homes, the public child welfare system and its private agency partners have a responsibility to provide children with living arrangements that ensure that they are safe from additional harm, maintain connections with their family members (including other siblings in care) and community, and provide stability. Moreover, substitute care should be a temporary solution and children should live in substitute care settings for the shortest period necessary. Child safety in substitute care living arrangements was examined in the previous chapter. This chapter examines: 1) continuity with family and community, 2) placement stability, and 3) length of time in substitute care. The indicators used to measure the Department’s performance in these areas are described in the chapter sections, and technical definitions are provided in Appendix A.

Two of the indicators in this chapter (placement restrictiveness and placement with siblings) are examined for children’s initial placements in substitute care and their placements at the end of the fiscal year. It is important to keep in mind that the children in these two samples are not the same; initial placements examine the first placement for all children who entered care within a given fiscal year, while end-of-year placements examine the placement types of children in care on the last day of the state fiscal year (June 30). Children who are in care for several years are counted in several “end-of-year” samples, while children who enter after June 30<sup>th</sup> and exit before June 30<sup>th</sup> of the following year are not counted in any end-of-year sample. The other indicators in this chapter (placement stability and length of time in substitute care) do not differentiate between initial and end-of-year placements.

## Changes in Continuity and Stability in Care at a Glance

### Restrictiveness of Initial Placement Settings

- ↔ Of all children entering substitute care, the percentage initially placed in the home of parents remained stable and was 3.2% in 2020.
- ↔ Of all children entering substitute care, the percentage initially placed in a kinship foster home remained stable and was 73.1% in 2020.
- ↓ Of all children entering substitute care, the percentage initially placed in a traditional foster home decreased from 20.7% in 2019 to 18.1% in 2020 (-13% change).
- ↓ Of all children entering substitute care, the percentage initially placed in a specialized foster home decreased from 1.5% in 2019 to 0.8% in 2020 (-47% change).
- ↑ Of all children entering substitute care, the percentage initially placed in an emergency shelter or emergency foster home increased from 0.8% in 2019 to 1.1% in 2020 (+38% change).
- ↑ Of all children entering substitute care, the percentage initially placed in an institution or group home increased from 2.9% in 2019 to 3.7% in 2020 (+28% change).

### Restrictiveness of End of Year Placement Settings

- ↔ Of all children in substitute care at the end of the year, the percentage placed in the home of parents remained stable and was 5.4% in 2020.
- ↑ Of all children in substitute care at the end of the year, the percentage placed in a kinship foster home increased from 53.4% in 2019 to 57.1% in 2020 (+7% change).
- ↓ Of all children in substitute care at the end of the year, the percentage placed in a traditional foster home decreased from 22.3% in 2019 to 20.9% in 2020 (-6% change).
- ↓ Of all children in substitute care at the end of the year, the percentage placed in a specialized foster home decreased from 12.8% in 2019 to 11.7% in 2020 (-9% change).
- ↔ Of all children in substitute care at the end of the year, the percentage placed in an emergency shelter or emergency foster home remained stable and was 0.2% in 2020.
- ↓ Of all children in substitute care at the end of the year, the percentage placed in an institution or group home decreased from 5.6% in 2019 to 4.7% in 2020 (-16% change).

### Placement with Siblings

*Of all children entering substitute care and placed in a kinship or traditional foster home, the percentage that was initially placed in the same foster home with all their siblings in care:*

#### For children with one or two siblings in care:

↔ remained stable for children initially placed in kinship foster homes and was 80.3% in 2020.

↓ decreased for children initially placed in traditional foster homes from 64.9% in 2019 to 51.5% in 2020 (-21% change).

#### For children with three or more siblings in care:

↓ decreased for children initially placed in kinship foster homes from 57.2% in 2019 to 51.4% in 2020 (-10% change).

↓ decreased for children initially placed in traditional foster homes from 11.3% in 2019 to 9.4% in 2020 (-17% change).

*Of all children living in kinship or traditional foster homes at the end of the year, the percentage that was placed in the same foster home with all their siblings in care:*

#### For children with one or two siblings in care:

↔ remained stable for children in kinship foster homes and was 70.0% in 2020.

↔ remained stable for children in traditional foster homes and was 57.5% in 2020.

#### For children with three or more siblings in care:

↑ increased for children in kinship foster homes from 33.4% in 2019 to 38.5% in 2020 (+15% change).

↔ remained stable for children in traditional foster homes and was 11.2% in 2020.

### Placement Stability (CFSR)

↓ Of all children entering substitute care during the year, the rate of placement moves per 1,000 days in care decreased from 3.7 in 2019 to 3.1 in 2020 (-16% change).

### Children Who Run Away From Substitute Care

↓ Of all children entering substitute care between the age of 12 and 17 years, the percentage that ran away from a placement within one year of entry decreased from 16.9% in 2018 to 14.1% in 2019 (-17% change).

### Length of Stay In Substitute Care

↔ Of all children entering substitute care, the median length of stay remained stable and was 32 months for children who entered care in 2017.

## Family Continuity

### *Restrictiveness of Placement Settings*

When it is in the best interest of a child to be placed in substitute care, it is both federal and state policy “to place a child in the least restrictive and most family-like setting that will meet the needs of the child.”<sup>1</sup> In 1996, Congress required states to include in their Title IV-E state plans a provision that indicated the state shall consider giving preference to an adult relative over a non-related caregiver when determining a placement for a child, provided that the relative caregiver meets all relevant child protection standards. In Illinois, Department policy states that “placement in a family home is the least restrictive and thus the preferable placement choice for a child when a family will be able to meet the needs of the child. However, if a child needs treatment which can best be provided in a group home or child care institution, the child need not be placed in a foster family home prior to placement in a treatment setting” (p. 39).<sup>2</sup> Box 2.1 describes the different placement types that are used in Illinois.

### Placement Type Terminology

#### BOX 2.1

**Home of parents** involves placement of children with the non-offending parent or in the home of the parent(s) prior to reunification or termination of child welfare services. When home of parent is used as a placement, DCFS retains legal responsibility for the child.<sup>3</sup>

**Kinship foster care** involves placement of children with relatives in the relatives’ homes. Relatives are the preferred placement for children who must be removed from their parents, as this kind of placement maintains the children’s connections with their families. In Illinois, kinship care providers may be licensed or unlicensed.

**Traditional foster care** involves placement of children with non-relatives in the non-relatives’ homes. These traditional foster parents have been trained, assessed, and licensed to provide shelter and care.

<sup>1</sup> Adoption Assistance and Child Welfare Act of 1980, Pub. L. 96-272.

<sup>2</sup> Illinois Department of Children and Family Services. (October, 2016). *Procedures 301 Placement and Visitation Services*. Springfield, IL: Author.

<sup>3</sup> Illinois Department of Children and Family Services. (November, 2016). *Procedures 315.250 Reunification, Planning for After Care and Termination of Services*. Springfield, IL: Author.

**Specialized or treatment foster care** involves placement of children with foster families who have been specially trained to care for children with certain medical or behavioral needs. Examples include medically fragile children, children with emotional or behavioral disorders, and children with HIV/AIDS. Treatment foster parents are required to obtain additional training to become licensed, provide more support for children than regular family foster care, and have lower limits on the number of children that can be cared for in their home.

**Emergency shelters** provide temporary living arrangements for children if no other possible foster home placements can be arranged.<sup>4</sup> DCFS policy states that placements in emergency shelters should not exceed 30 calendar days.

Two other placement types are non-family settings. **Group home** refers to a community-based residence that houses more children than are permitted to reside in a foster family home, but fewer than a residential treatment center. In Illinois, the number of children in a group home is limited to 10 or fewer. All other non-family settings are combined into a broad category called **institutions** in the current chapter. This category includes a variety of congregate care placements such as residential treatment centers, detention centers, hospitals and other health facilities. Since the number of children placed in group homes is relatively small, several analyses in this chapter combine children in group homes with children in other congregate care settings. In these instances, the combined term “Institution/Group Home” is used.

One advantage of placing children in the least restrictive, most family-like setting is that it increases bonding capital. Bonding capital is a type of social capital that comes from strong ties to family and friends. At the individual level, bonding capital is measured as a person's primary source of social support.<sup>5</sup> One advantage of placement with kin is that it builds on a child's existing bonding capital. However, research finds that children in traditional foster care eventually develop bonds with foster parents comparable to those who are placed with kin.<sup>6</sup>

Placement restrictiveness is examined in two different groups of children: 1) initial placements of children entering care in a given fiscal year and 2) children in care at the end of the fiscal year. The first indicator (initial placements) over-represents children who are in care for a short period of time but provides important information about initial placements, which can influence a child's trajectory through substitute care. The second indicator (end-of-year placements) provides a snapshot of the overall types of placement for all the children in care at the end of each fiscal year.

<sup>4</sup> Illinois Department of Children and Family Services. (October, 2014). *Procedures 301 Appendix G Temporary Placement to the DFCS Statewide Emergency Shelter System*. Springfield, IL: Author.

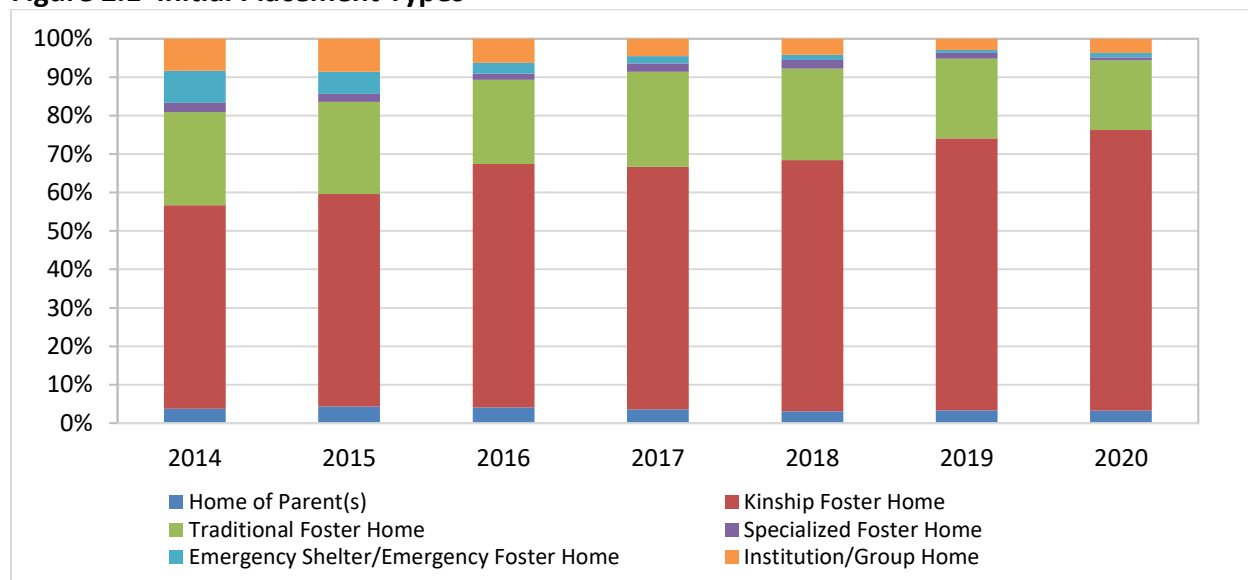
<sup>5</sup> Putnam, R. (2000). *Bowling Alone: The Collapse and Revival of American Community*. New York: Simon & Schuster. Granovetter M. S. (1973). The strength of weak ties. *American Journal of Sociology*, 78, 1360-1380.

<sup>6</sup> Testa, M., Bruhn, C. M. & Helton, J. (2010). Comparative safety, stability, and continuity of children's placements in formal and informal substitute care. In M. B. Webb, et al., *Child Welfare and Child Well-being: New Perspectives from the National Survey of Child and Adolescent Well-being*, (pp. 159-191). New York: Oxford.

**Initial Placements**

Initial placement types for children entering care during fiscal years 2014 through 2020 are shown in Figure 2.1. In the past seven years, between 3.1% and 4.3% of children were initially placed in the home of their parent(s) after DCFS took legal responsibility for them (see Appendix B, Indicator 2.A.1). Most children entering care were initially placed in kinship foster homes, and that percentage has increased from 53.0% in 2014 to 73.1% in 2020 (see Appendix B, Indicator 2.A.2). Conversely, the percentage of children initially placed in traditional foster homes has decreased in recent years from 24.7% in 2017 to its lowest point of 18.1% in 2020 (see Appendix B, Indicator 2.A.3). The percentage of children initially placed in specialized foster homes is small compared to other types of placements and reached its lowest point (0.8%) in 2020 (see Appendix B, Indicator 2.A.4). The percentage of children initially placed in emergency shelters or emergency foster homes has been very small since 2017 and was 1.1% in 2020 (see Appendix B, Indicator 2.A.5). The reduced use of emergency shelters in recent years coincides with DCFS initiatives to decrease the use of emergency shelters and develop alternative emergency foster homes.<sup>7</sup> The percentage of children with an initial placement in group homes or institutions has decreased in recent years from 8.6% in 2015 to 3.7% in 2020 (see Appendix B, Indicator 2.A.6).

**Figure 2.1 Initial Placement Types**

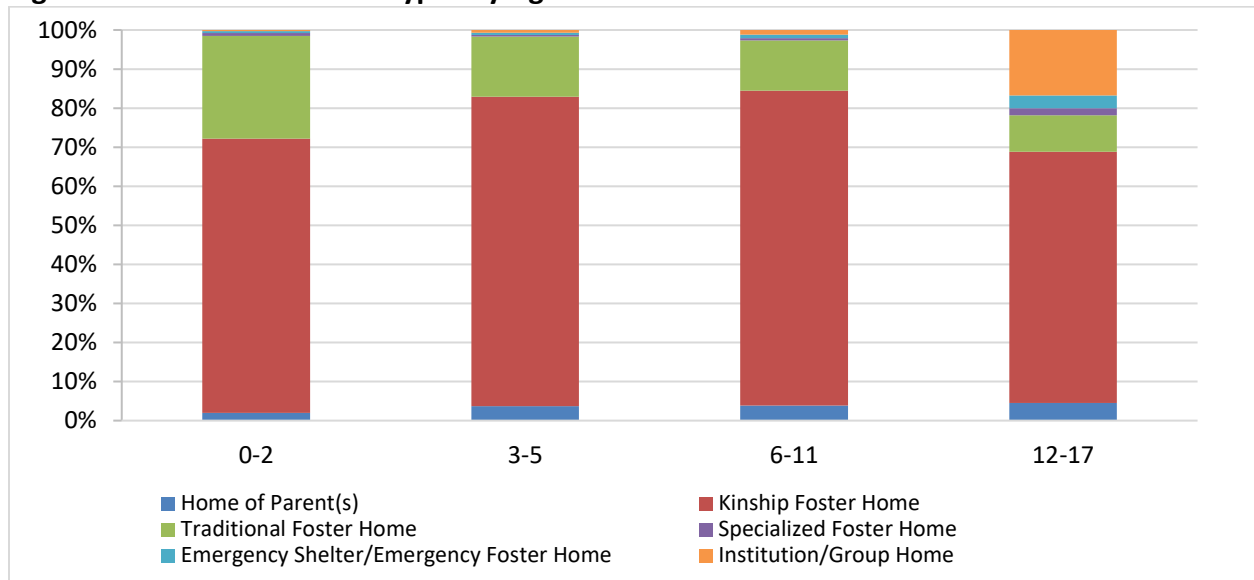


<sup>7</sup> Sheldon, G.H. (March, 2017). *Memo on the initiatives undertaken in the last year*. Springfield, IL: Illinois Department of Children and Family Services.



The use of different placement types for initial placements varies by child age, race/ethnicity, and geographical region of the state. These relationships are explored in more detail by examining the initial placements during the most recent fiscal year (2020) for which data are available. Over 97% of children 11 years and younger were initially placed in less restrictive settings such as home of parent(s), kinship, traditional, or specialized foster homes, as compared to 79.9% of youth 12 to 17 years old (see Figure 2.2 and Appendix B, Indicators 2.A.1–2.A.6). Conversely, around 20.0% of youth 12 to 17 years old were initially placed in a more restrictive settings (emergency shelters, group homes, and institutions); these placements were much less common for younger children. The increased use of kinship homes as initial placements over the past 7 years has occurred across all age groups, but was particularly notable among older children. For children 12 to 17 years old, the percentage initially placed in kinship homes has increased from 34.1% in 2014 to 64.3% in 2020 (a relative 89% increase, see Indicator 2.A.2).

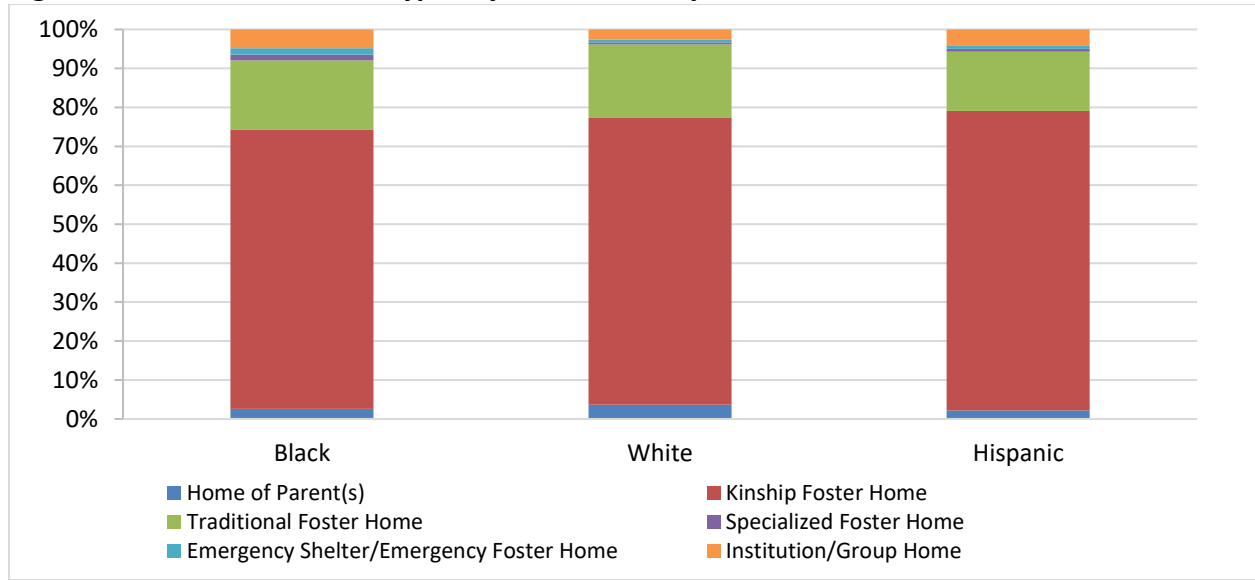
**Figure 2.2 Initial Placement Types by Age - 2020**



Initial placement types varied slightly by child race/ethnicity (see Figure 2.3 and Appendix B, Indicators 2.A.1–2.A.6). In the past, Black children were less likely than White and Hispanic children to be placed in kinship foster homes and were more likely to be placed in traditional foster homes in their initial placements. In 2020, the percentage of Black children initially placed in kinship foster homes reached its peak of the past seven years (71.7%) and was comparable to the percentages of White children (73.6%) and Hispanic children (76.9%). However, the percentage of Black children initially placed in group homes or institutions (4.8% in 2020) continues to be higher than that for White children (2.6% in 2020).

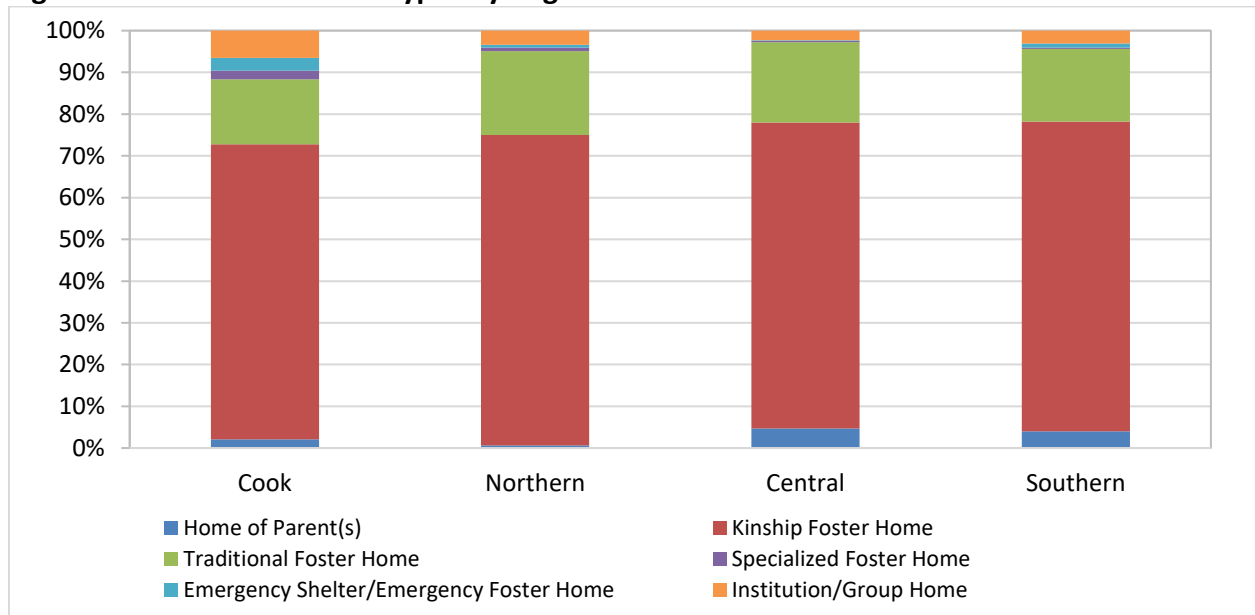
CONTINUITY AND STABILITY IN CARE

**Figure 2.3 Initial Placement Types by Race/Ethnicity - 2020**



Initial placement types also varied by region (see Figure 2.4 and Appendix B, Indicators 2.A.1–2.A.6). In 2020, as compared to other regions, the Cook region had a highest percentage of initial placements in specialized foster homes (2.1% vs. Northern, 0.8%; Central, 0.3%; and Southern, 0.3%), emergency shelters/emergency foster homes (3.1% vs. Northern, 0.7%; Central, 0.2%; Southern, 1.0%), and institutions/group homes (6.5% vs. Northern, 3.4%; Central, 2.3%; and Southern, 3.1%). On the other hand, a positive trend has been shown in the Cook region in the recent years. The percentage of children initially placed kinship foster homes in this region has increased from 56.6% in 2018 to 70.7% in 2020.

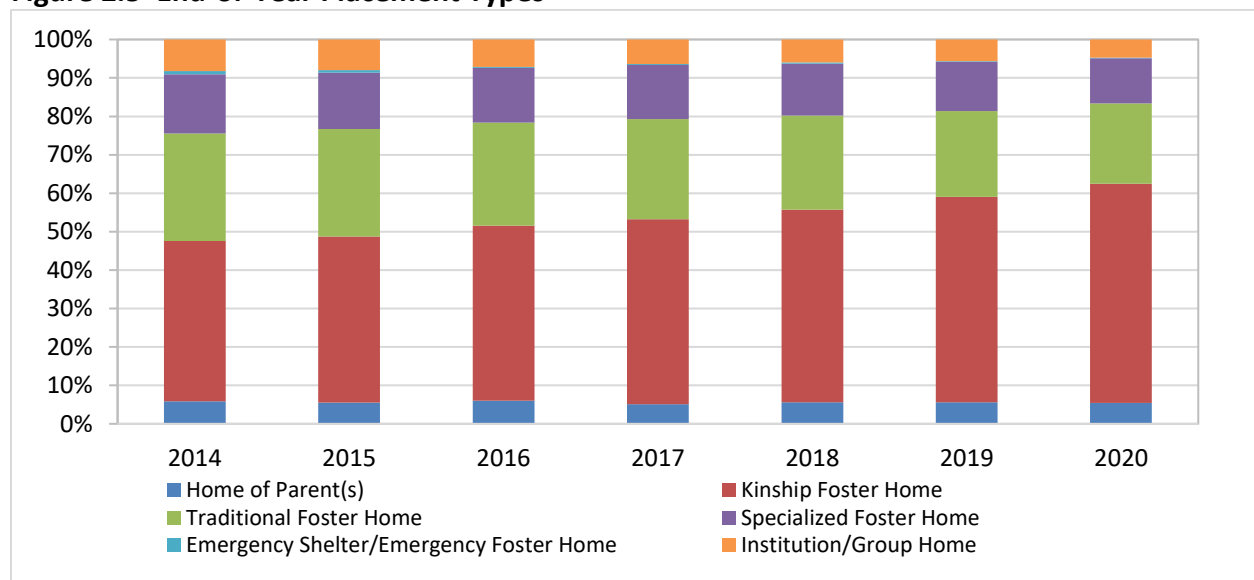
**Figure 2.4 Initial Placement Types by Region - 2020**



### End-of-Year Placements

End-of-year placement types for children in substitute care during fiscal years 2014 through 2020 are shown in Figure 2.5. Among children in substitute care at the end of the fiscal year, 5.1-6.0% were placed with their parent(s) over the past seven years (see Appendix B, Indicator 2.B.1). The percentage of children in kinship foster homes at the end of the year increased each year from 41.7% in 2014 to 57.1% in 2020 (see Appendix B, Indicator 2.B.2). The percentage of children in traditional foster homes decreased each year from 28.0% in 2014 to 20.9% in 2020 (see Appendix B, Indicator 2.B.3). The percentage of children in specialized foster homes at the end of the year decreased gradually over the past seven years and was at its lowest point (11.7%) in 2020 (see Appendix B, Indicator 2.B.4). Less than 1% of children were placed in emergency shelters or emergency foster homes at the end of the year during the last seven years (see Appendix B, Indicator 2.B.5). The percentages of children in group homes and institutions at the end of the year have been decreasing over the past seven years and reached their lowest points in 2020 (0.5% in group homes and 4.2% in institutions) (see Appendix B, Indicators 2.B.6 and 2.B.7). These data may indicate the impact of DCFS initiatives to move long-staying youth out of congregate care settings.

**Figure 2.5 End-of-Year Placement Types**

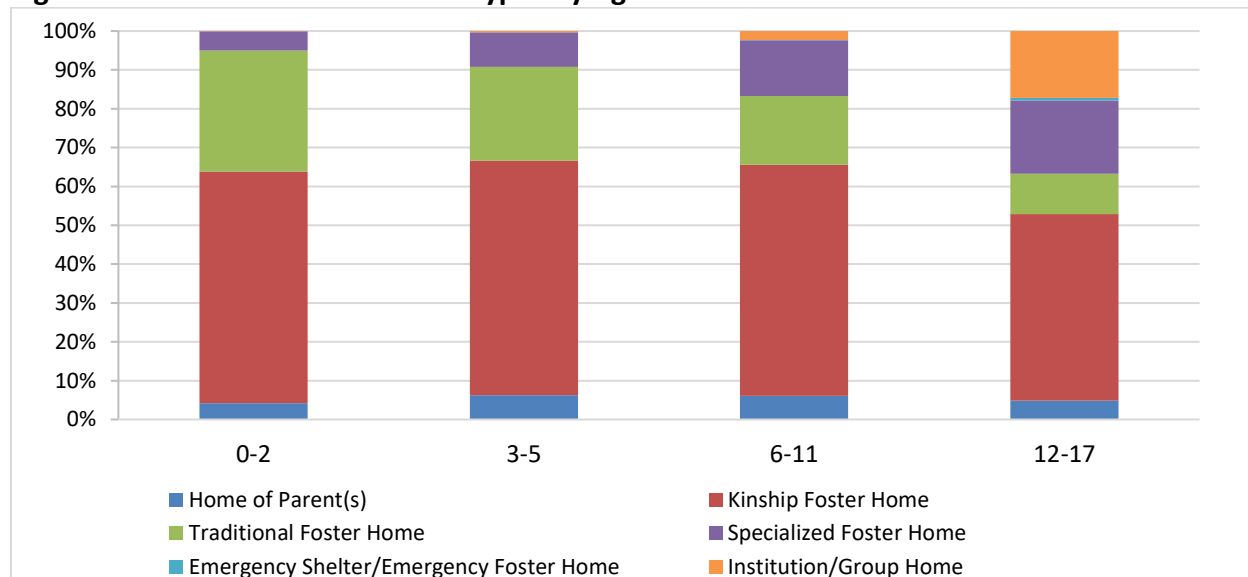


The distribution of placement types for end-of-year placements also varies by child age, race/ethnicity, and region. These relationships are explored by examining end-of-year placements during the most recent fiscal year for which data are available (2020). A child's placement at the end of the year varied by age (see Figure 2.6 and Appendix B, Indicators 2.B.1–2.B.7). In 2020, around 60% of children 11 years and younger were living in kinship foster homes at the end of the year, compared to 48.0% of youth 12 to 17 years old. Similarly, the percentage of children living in traditional foster homes was higher for younger children: 31.2% of children 0 to 2 years old were in traditional foster homes at the end of the year compared to 10.4% of youth 12 to 17 years old. Conversely, the proportion of children placed in specialized

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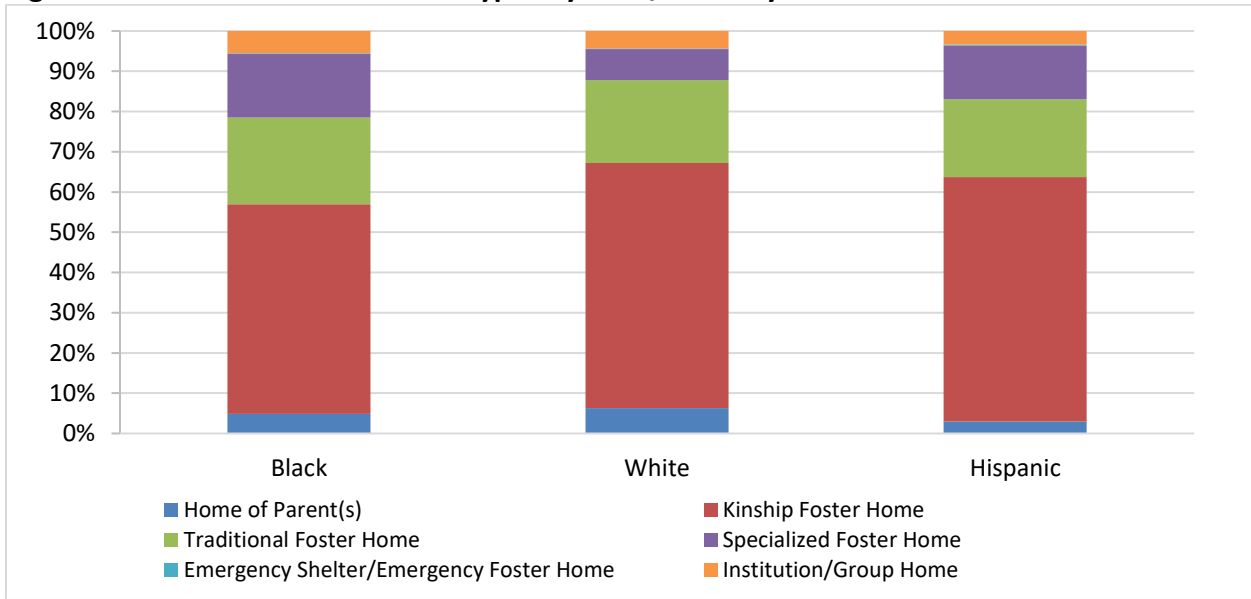
foster homes, institutions, or group homes at the end of year was larger for older children. For example, 2.3% of children 6 to 11 years old were living in group homes or institutions at the end of 2020, compared to 17.2% of children 12 to 17 years old. There have been some positive trends towards less restrictive placements for children 12 to 17 years old during the past seven years. Older youth had the largest increase in the percentage placed in kinship foster homes at the end of year, from 26.4% in 2014 to 48.0% in 2020. The percentage of older youth placed in an institution decreased from 22.7% in 2014 to 15.2% in 2020 (see Indicator 2.B.7).

**Figure 2.6 End-of-Year Placement Types by Age - 2020**



When placements at the end of FY2020 were compared by race/ethnicity, Black children were less likely than White or Hispanic children to be placed in kinship foster homes; 52.0% compared to 60.8% and 60.7%, respectively) and less likely to be placed in a specialized foster home (7.7% compared to 15.8% and 13.4%, respectively) (see Figure 2.7 and Appendix B, Indicators 2.B.1–2.B.7).

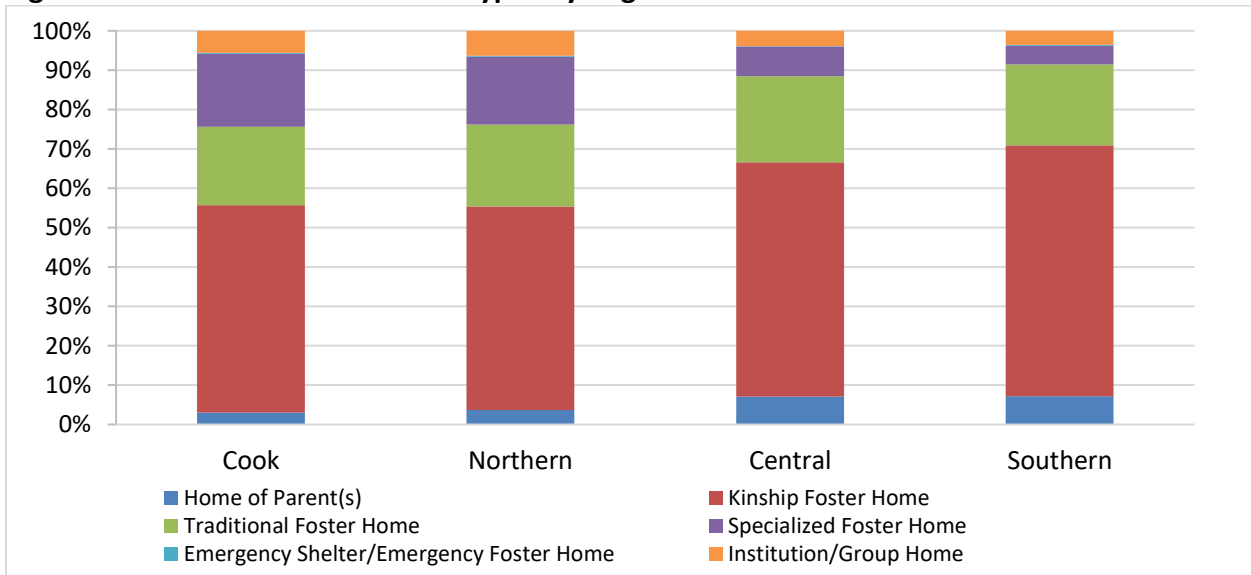
**Figure 2.7 End-of-Year Placement Types by Race/Ethnicity - 2020**



Analysis of children’s placement settings at the end of FY2020 shows several regional differences (see Figure 2.8 and Appendix B, Indicators 2.B.1–2.B.7). The Central (7.1%) and Southern (7.2%) regions had higher percentages of children living in the home of parent(s) than did the Northern (3.7%) and Cook (3.0%) regions. The Southern region had the highest percentage of children placed in kinship foster homes (63.7%) followed by the Central region (59.5%), the Cook region (52.6%), and the Northern region (51.7%). Children in the Cook (18.5%) and Northern (17.2%) regions were more likely to live in specialized foster homes than those in the Central (7.5%) and Southern (4.7%) regions.



**Figure 2.8 End-of-Year Placement Types by Region - 2020**



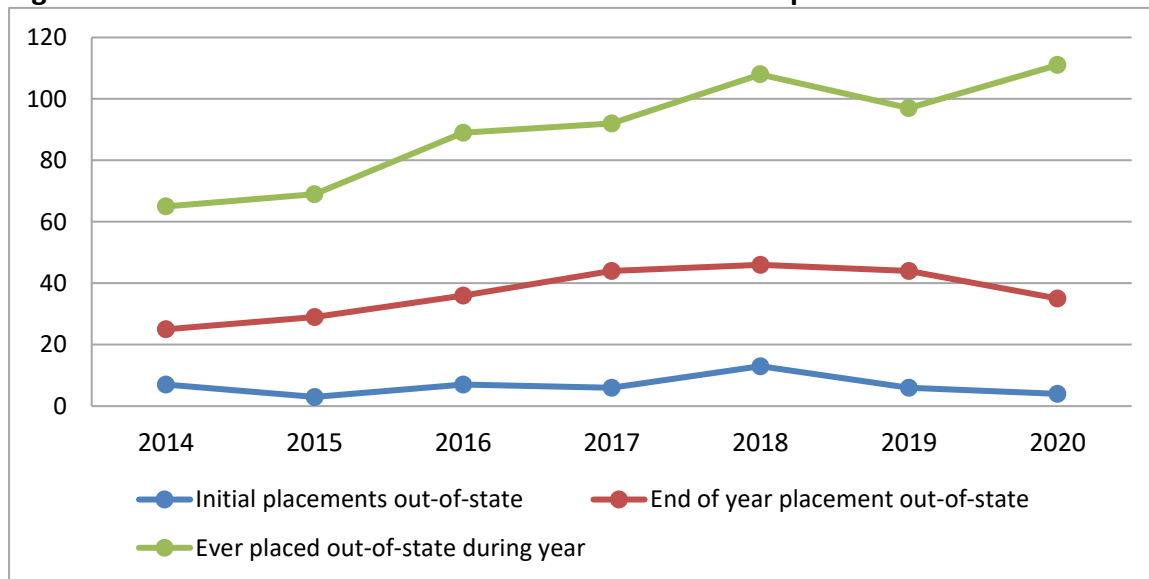
## Children Placed in Out-of-State Group Homes or Institutions

**BOX 2.2**

Recent reporting by the *Chicago Tribune*<sup>8</sup> highlighted Illinois DCFS' increased use of placements in out-of-state mental health institutions for children in care. The article cites data from the federal Adoption and Foster Care Analysis and Reporting System (AFCARS) indicating that the number of children Illinois DCFS placed in out-of-state care grew from 19 in 2011 to 56 in 2018. The Tribune's reporting emphasized the limited capacity of DCFS to monitor the care and safety of children placed out-of-state, and it described incidents in which children placed out-of-state were maltreated in care.

The *B.H.* monitoring report included an indicator for out-of-state placement of children until FY2010. This indicator was discontinued because the number of children in out-of-state placements had dwindled to near zero for several years. In response to the concerns raised by the *Chicago Tribune* report, we examine the number of children placed in out-of-state group homes and institutions: 1) in their initial placements, 2) at the end of each fiscal year; and 3) at any time during the fiscal year (see Figure 2.9).<sup>9</sup> The number of children placed in an out-of-state institution in their first placement is small; the largest number in the past seven years was 13 in 2018. The number of children placed in out-of-state institutions at the end of the fiscal year was between 25 and 46 in the past seven years. The number of children ever placed out-of-state during the fiscal year increased from 65 in 2014 to 111 in 2020.

**Figure 2.9 Number of Children Placed in Out-of-State Group Homes or Institutions**

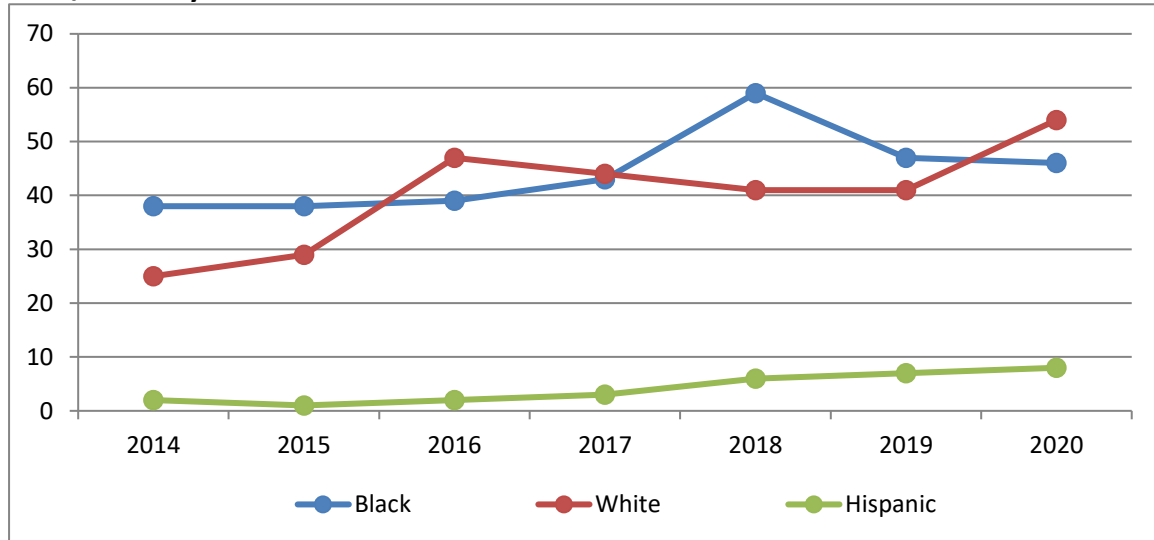


<sup>8</sup> Jackson, D., & Eldeib, D. (March 12, 2020). Hurt instead of helped: Foster children victimized in out-of-state facilities where oversight is lacking. *Chicago Tribune*.

<sup>9</sup> The end-of-year sample most closely compares to the AFCARS data reported in the *Chicago Tribune*.

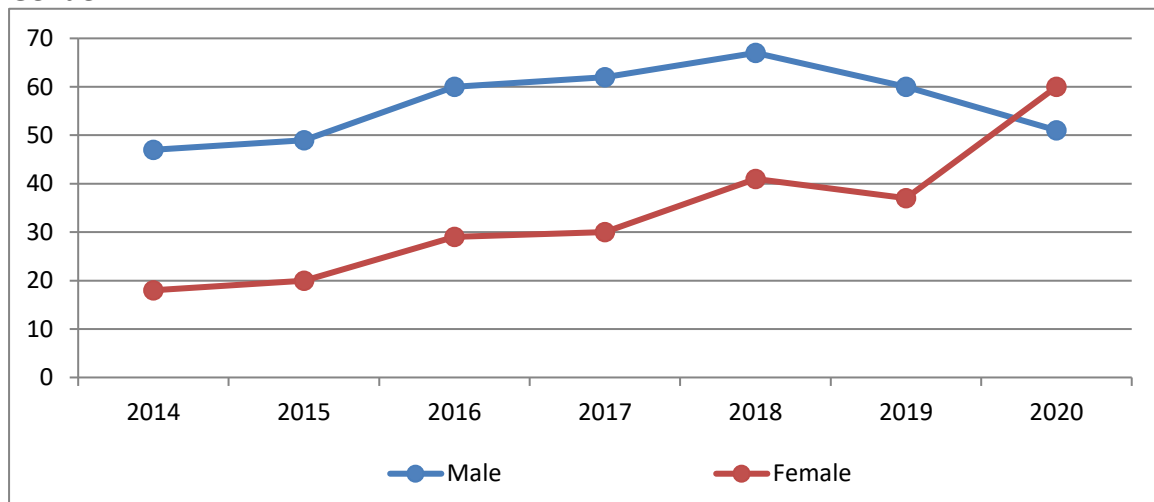
To understand the growing use of out-of-state group homes and institutions, the following analyses focus on children ever placed out-of-state during the fiscal year. In 2020, the majority of these children were placed in Wisconsin (45.7%) and almost 90% were 12 to 17 years old. The number of White children placed out-of-state increased from 25 in 2014 to 54 in 2020. The number of Black children placed out-of-state increased from 38 in 2014 to 54 in 2018 and then declined to 46 in 2020 (Figure 2.10)

**Figure 2.10 Number of Children Placed in Out-of-State Group Homes or Institutions by Race/Ethnicity**



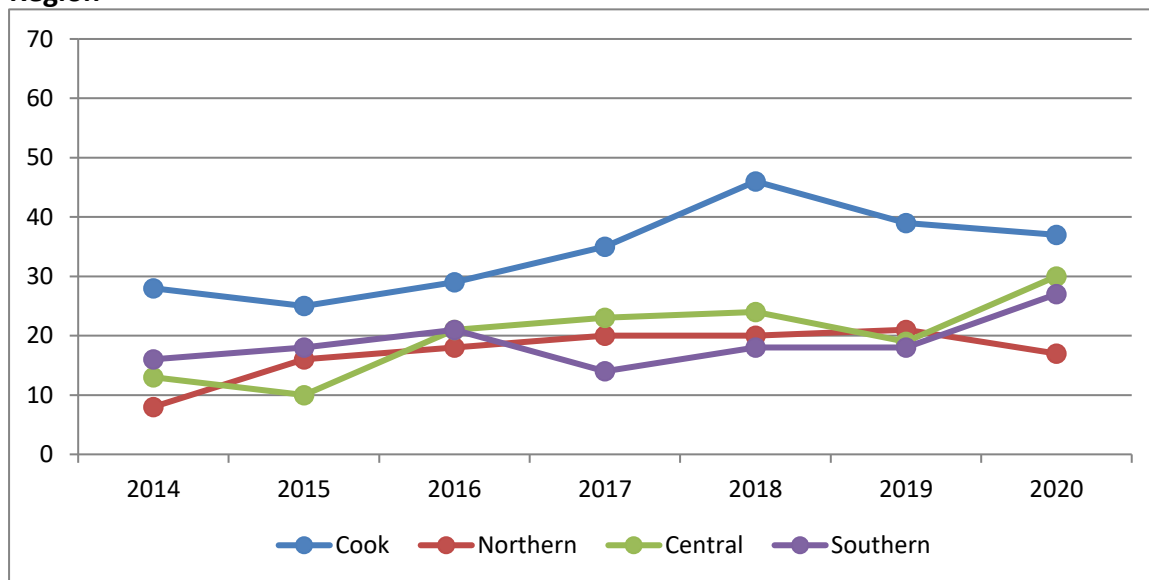
Until the most recent year, more male children than female children were placed in out-of-state group homes or institutions each year. The number of female children has been increasing in the past seven years and surpassed the number of male children in 2020 (see Figure 2.11).

**Figure 2.11 Number of Children Placed in Out-of-State Group Homes or Institutions by Gender**



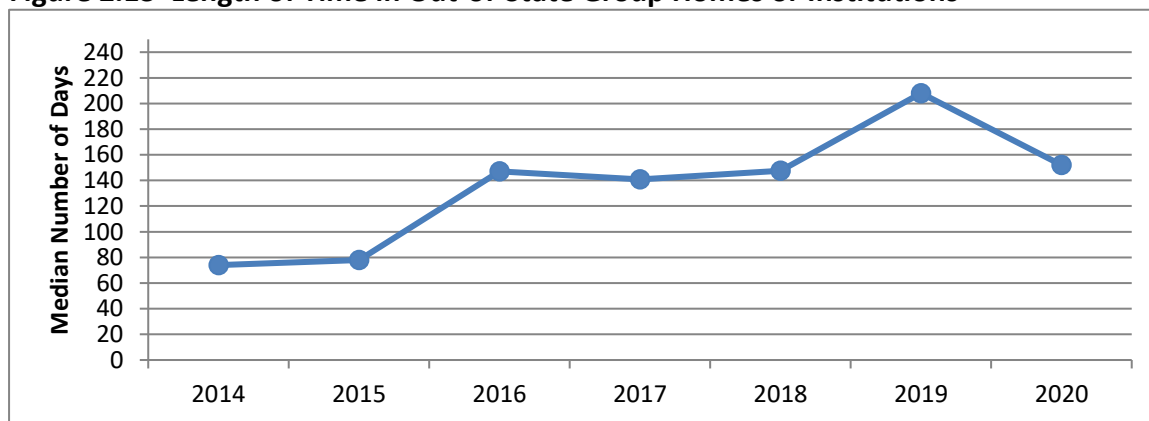
Children from the Cook region were most likely to be placed out-of-state as compared to the other regions. The number of children from the Cook region placed out-of-state has decreased in the last two years (see Figure 2.12).

**Figure 2.12 Number of Children Placed in Out-of-State Group Homes or Institutions by Region**



To examine the length of time children are in out-of-state placements, we calculated the median number of days that children stayed in out-of-state care during that fiscal year.<sup>10</sup> Figure 2.13 shows the median of length of time increased from 74 days in 2014 to 152 days in 2020.

**Figure 2.13 Length of Time in Out-of-State Group Homes or Institutions**



<sup>10</sup> Because the number of days is constrained to the fiscal year, the maximum stay for each year is 365 days. Some children stay in out-of-state placements longer than one year; their total length of stay would be different from the number reported here.



## Placement with Siblings

Research shows that there are many benefits of placing children with their siblings in substitute care when possible. Siblings may provide one another with emotional support, a sense of connection, and continuity when they are removed from what is familiar to them and placed into substitute care.<sup>11</sup> Research has shown that children who are placed with siblings are less likely to experience placement disruptions,<sup>12</sup> more likely to be reunified with their parents,<sup>13</sup> and less at risk for internalizing problems such as depression.<sup>14</sup>

The importance of maintaining sibling connections among children in substitute care is reflected in several pieces of legislation at the national and state level. The 2008 Fostering Connections to Success and Increasing Adoptions Act (P.L. 110-135) instructs states to make “reasonable efforts” to place siblings together. In Illinois, the importance of sibling relationships among children in DCFS care was reinforced when the Preserving Sibling Relationships for Children in State Care and Adopted through DCFS Public Act (P.A. 97-1076) was enacted in 2012. This act amended the Children and Family Services Act and specified that, when placing a child into a substitute care placement, “the Department shall place the child with the child’s sibling or siblings... unless the placement is not in each child’s best interest, or is otherwise not possible under the Department’s rules. If the child is not placed with a sibling under the Department’s rules, the Department shall consider placements that are likely to develop, preserve, nurture, and support sibling relationships, where doing so is in each child’s best interest.”<sup>15</sup>

Despite the preference for placing siblings together in substitute care, sometimes it may be better to place siblings apart. For example, some members of sibling groups may have physical or emotional disabilities that require specialized care. However, sometimes siblings are separated simply because not enough foster families are willing to take sibling groups. It is more difficult to find foster families who have the resources (physical, emotional, and financial) to provide for a sibling group. Additionally, some foster parents prefer one gender or a specific age range of children.

The likelihood of a child being initially placed with all of his or her siblings is related to two factors: the size of the sibling group and the type of foster home (kinship or traditional). As mentioned above, other types of placements, such as specialized foster homes or congregate care settings, are designed to serve children with special needs. The Department does not place

<sup>11</sup> McBeath, B., Kothari, B. H., Blakeslee, J., Lamson-Siu, E., Bank, L., Linares, L. O., & Schlonsky, A. (2014).

Intervening to improve outcomes for siblings in foster care: Conceptual, substantive, and methodological dimensions of a prevention science framework. *Children and Youth Services Review, 39*, 1-10.

<sup>12</sup> Leathers, S. J. (2005). Separation from siblings: Associations with placement adaptation and outcomes among adolescents in long-term foster care. *Children and Youth Services Review, 27*, 793-819.

<sup>13</sup> Albert, V. N., & King, W. C. (2008). Survival analyses of the dynamics of sibling experiences in foster care. *Families in Society, 89*, 533-541.

<sup>14</sup> Hegar, R. L., & Rosenthal, J. A. (2009). Kinship care and sibling placement: Child behavior, family relationships, and school outcomes. *Children and Youth Services Review, 31*, 670-679.

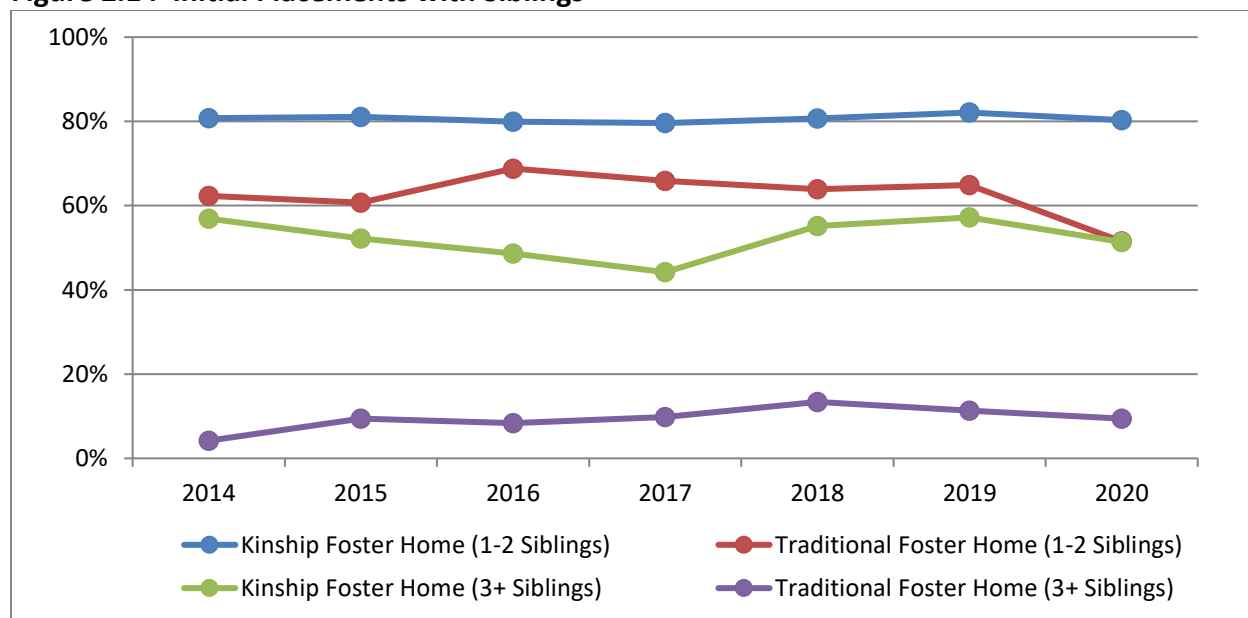
<sup>15</sup> The full text of P.A. 97-1076 is available online: <http://www.ilga.gov/legislation/97/HB/PDF/09700HB5592lv.pdf>

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siblings together in those placements when kinship or traditional foster homes are available and suitable for some of the sibling members. Therefore, the following analyses focus on children placed in kinship or traditional foster homes.

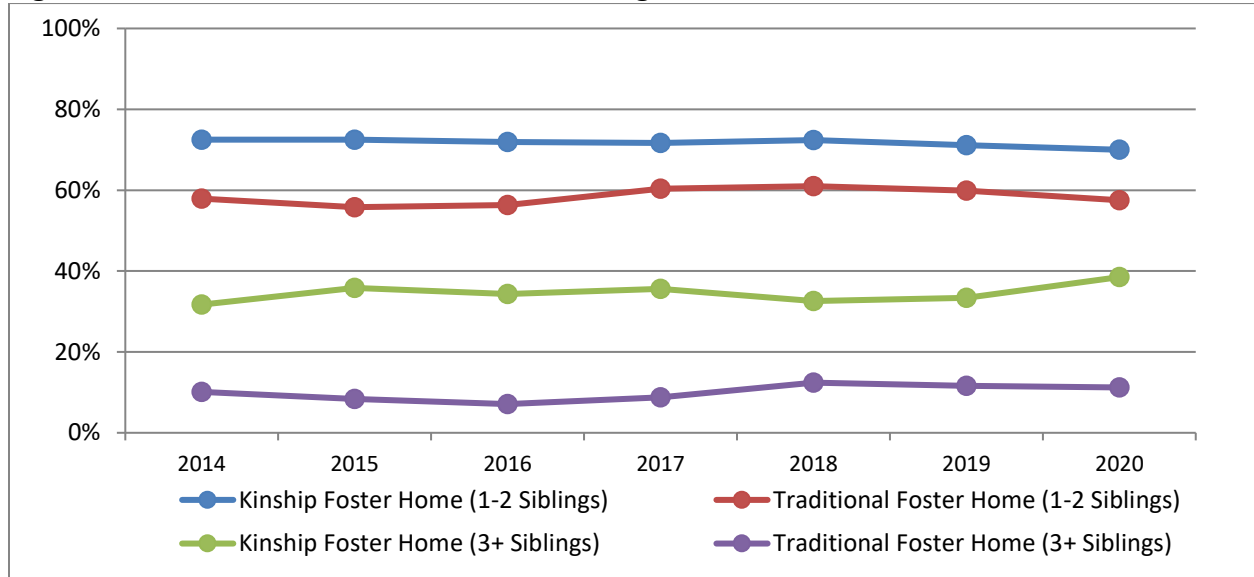
Of the 7,382 children who entered care in 2020, 6,731 (91.2%) were initially placed in kinship or traditional foster homes. Of these children, 2,992 (44.5%) had one or two siblings and 1,626 (24.2%) had three or more siblings who were also in care. As might be expected, the percentage of children with one or two siblings initially placed with all their siblings was higher than children with three or more siblings. Additionally, children initially placed in kinship foster homes were more likely to be placed with all their siblings than children initially placed in traditional foster homes. In 2020, 80.3% of children with one or two siblings were initially placed together in kinship foster homes compared to 51.5% of children who were initially placed in traditional foster homes. For children with three or more siblings, 51.4% were initially placed together in kinship foster homes compared to only 9.4% of children initially placed in traditional foster homes in 2020 (see Figure 2.14 and Appendix B, Indicator 2.C).

**Figure 2.14 Initial Placements with Siblings**



When the percentage of children placed with all their siblings in care was examined at the end of each fiscal year, the overall pattern was the same: smaller sibling groups and placement with kin increased the likelihood of siblings being placed together (see Figure 2.15 and Appendix B, Indicator 2.D). There has been little change in these percentages in the past seven years.

**Figure 2.15 End-of-Year Placements with Siblings**



## Placement Stability

2

Placement stability is important for children in substitute care, and placement instability has numerous negative consequences for a child's well-being and likelihood of achieving permanence. For example, placement instability during the first year of care has been tied to later negative outcomes such as increased mental health costs<sup>16</sup> and increased emergency department visits.<sup>17</sup> Two measures of placement stability are included in this monitoring report. The first measure was adapted from the Round 3 CFSR measure<sup>18</sup> and examines the number of placement moves per 1,000 days in substitute care. The second measure examines the percentage of youth age 12 to 17 who run away from substitute care during their first year in care (see Appendix A for technical definitions of the indicators used in the report).

<sup>16</sup> Rubin, D. M., Alessandrini, E. A., Feudtner, C., Mandell, D. S., Localio, A. R., & Hadley, T. (2004). Placement stability and mental health costs for children in foster care. *Pediatrics*, *113*, 1336-1341.

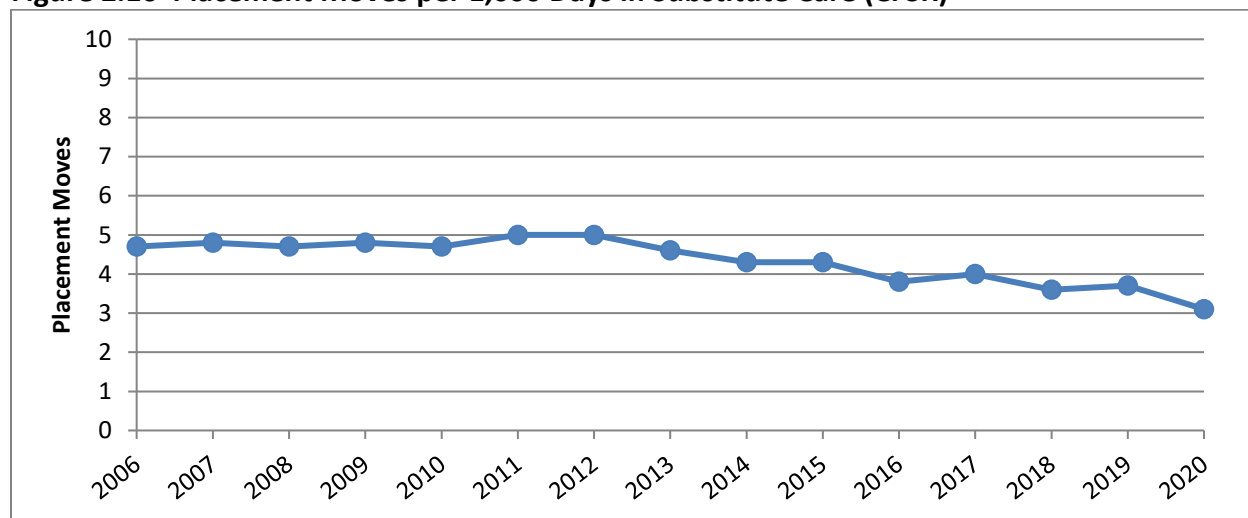
<sup>17</sup> Rubin, D. M., Alessandrini, E. A., Feudtner, C., Localio, A. R., & Hadley, T. (2004). Placement changes and emergency department visits in the first year of foster care. *Pediatrics*, *114*, 354-360.

<sup>18</sup> Children's Bureau (n.d.). CFSR Round Statewide Data Indicators. Retrieved from <https://capacity.childwelfare.gov/states/focus-areas/cqi/cfsr-data-syntax-toolkit/>

**Placement Moves Per 1,000 Days in Substitute Care (CFSR)**

The definition of placement stability in the Child and Family Services Reviews (CFSR) is the rate of placement moves per 1,000 days of substitute care among all children who enter substitute care in a 12-month period.<sup>19</sup> Although the measure used in this report is similar to the CFSR measure, the results are not age-adjusted and therefore are not identical to those presented in federal outcome reports. The placement moves per 1,000 days has been gradually decreasing since 2012 to its lowest point in 2020 (3.1 moves per 1,000 days) (see Figure 2.16 and Appendix B, Indicator 2.E).

**Figure 2.16 Placement Moves per 1,000 Days in Substitute Care (CFSR)**

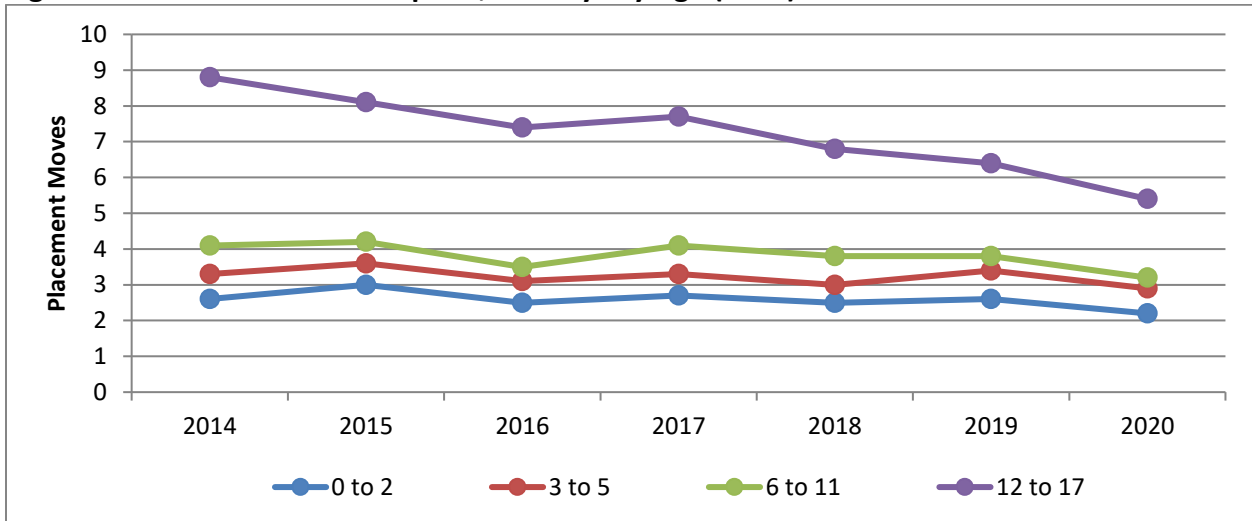


Consistent with past research,<sup>20</sup> placement stability in Illinois decreases as child age increases (see Figure 2.17 and Appendix B, Indicator 2.E). In 2020, the rate of placement moves per 1,000 days for children 0 to 2 years was 2.2 compared to 5.4 for youth 12 to 17 years. However, placement stability among youth age 12 to 17 has improved in the past several years, with the number of placement moves decreasing from 8.9 in 2014 to 5.4 in 2020.

<sup>19</sup> Ibid.

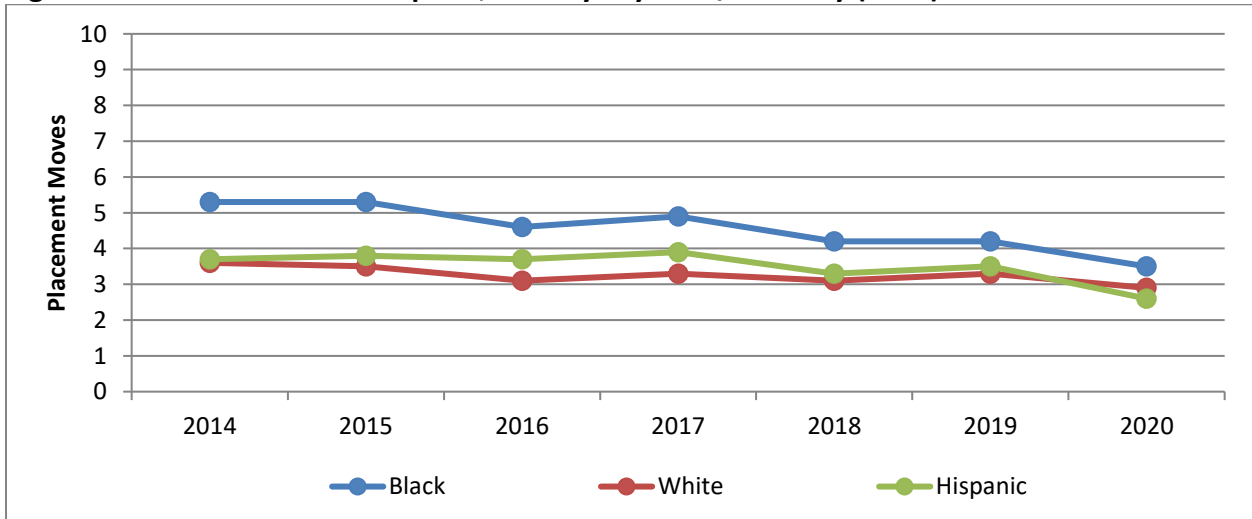
<sup>20</sup> Barth, R. P, Lloyd, E. C., Green, R. L., James, S., Leslie, L. K., & Landsverk, J. (2007). Predictors of placement moves among children with and without emotional and behavioral disorders. *Journal of Emotional and Behavioral Disorders*, 15, 46-55.

**Figure 2.17 Placement Moves per 1,000 Days by Age (CFSR)**



Black children experience less placement stability (3.5 moves per 1,000 days in 2020) compared to White children (2.9 moves per 1,000 days) and Hispanic children (2.6 moves per 1,000 days). Although placement stability is lower among Black children, it has improved from 5.4 moves in 2014 to 3.5 moves in 2020 (see Figure 2.18 and Appendix B, Indicator 2.E).

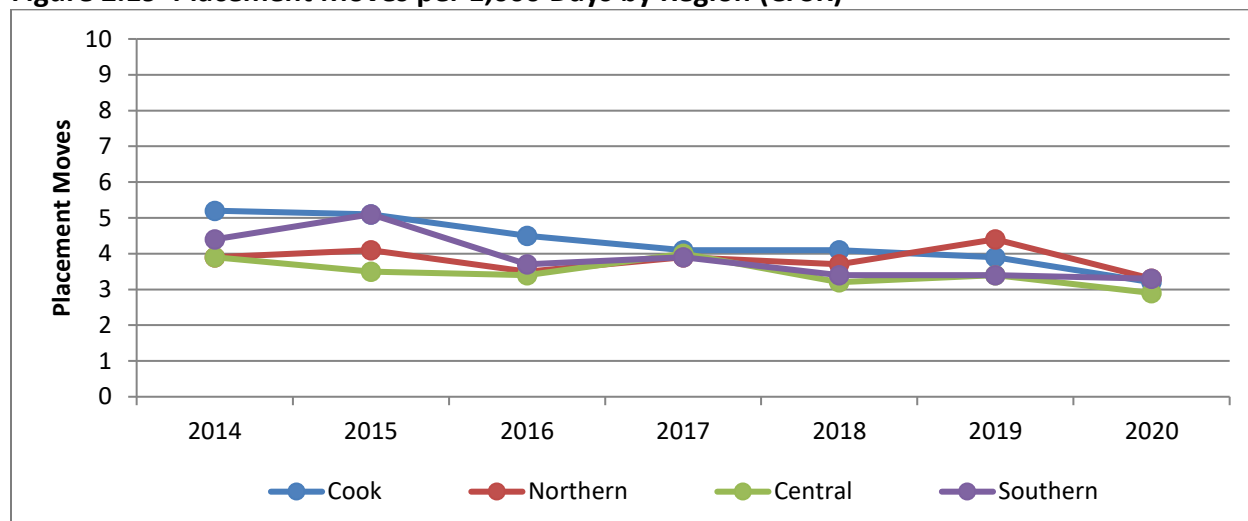
**Figure 2.18 Placement Moves per 1,000 Days by Race/Ethnicity (CFSR)**



## CONTINUITY AND STABILITY IN CARE

In the Cook region, the rate of placement moves per 1,000 days has steadily decreased in the past seven years and reached its lowest point of 3.2 moves in 2020, which is comparable to the rates reported in other regions (Northern, 3.3; Central, 2.9; Southern, 3.3; see Figure 2.19 and Appendix B, Indicator 2.E).

**Figure 2.19 Placement Moves per 1,000 Days by Region (CFSR)**



This year's report examines changes in placement, by initial placement type, experienced by children during their first year in substitute care. The initial placement type at entry in care was compared to the placement type at the end of the first year in care and eight categories of placement change were created: permanence achieved; trial reunification; no placement change; moved back to the same placement;<sup>21</sup> parallel move;<sup>22</sup> moved to a less restrictive placement;<sup>23</sup> moved to a more restrictive placement,<sup>24</sup> and other (such as runaway, armed services, or hospitals).

Figure 2.20 shows the types of placement changes experienced by children in different initial placement types who entered care in 2019. Among children initially placed in home of parents, 59.6% achieved permanence within 12 months and 19.7% had no change in placement during the 12-month period. Among children initially placed in kinship foster homes, 40.7% had no placement change during the 12-month period and 20.2% had a placement change but moved back to the same kinship home by the end of the first year. Only 5.9% of the children initially placed in kinship foster homes were moved to more restrictive placements by the end of their first year. Among the children initially placed in traditional foster homes, 28.6% had no

<sup>21</sup> The category "moved back to the same placement" refers to children who were removed from their initial placement but moved back to the same placement/provider by their 12<sup>th</sup> month.

<sup>22</sup> Parallel move refers to moves between similar types of placements; for example, a move between home of parents to a kinship or traditional foster home, or a move between a specialized foster home, emergency shelter/emergency foster home, or institution/group home.

<sup>23</sup> A move to a less restrictive placement is, for example, a move from an institution to a traditional foster home.

<sup>24</sup> A move to a more restrictive placement is, for example, a move from a kinship foster home to a specialized foster home or from a specialized foster home to an institution.

placement change, 23.2% moved back to the same foster home by the end of their first year, and 11.9% moved to more restrictive placements (including a specialized foster home, a group home, or an institution). Among children initially placed in specialized foster homes, 17.9% had no placement change, 40.0% moved back to the same specialized foster homes, 21.1% moved to a less restrictive placement (including a kinship or traditional foster home), and 9.5% moved to a more restrictive placement (including a group home or an institution). Among children initially placed in emergency shelter/emergency foster homes, 48.2% were moved to more restrictive placements (including a specialized foster home, a group home, or an institution), 5.9% were moved to less restrictive placements (including a kinship or traditional foster home), and 11.1% were in “other” placement types (such as runaway or hospitals). Among children initially placed in institutions/group homes, 35.8% were moved back to the same institution/group home within 12 months, 25.8% did not change placements, and 12.6% were in “other” placement types.

**Figure 2.20 Changes in Placement by Initial Placement Type for Children Initially Placed in 2019**

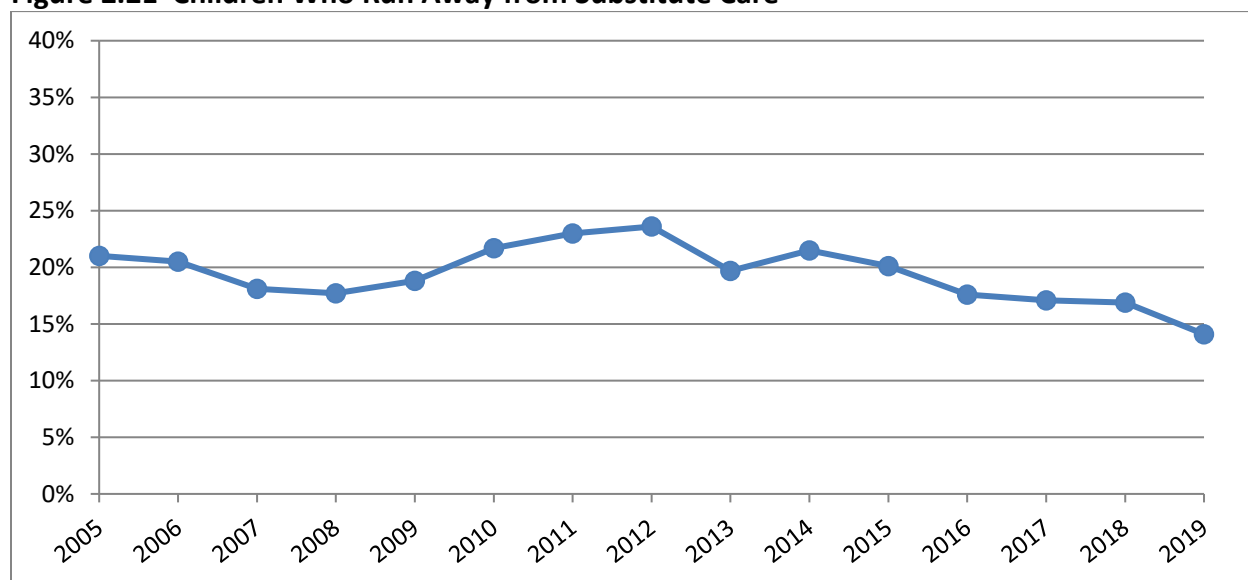


### ***Children Who Run Away from Substitute Care***

The nature of runaways from substitute care is different from typical runaways.<sup>25</sup> Most are running away to live with others, usually family or friends.<sup>26</sup> Running away puts children at risk for victimization, sexual exploitation, and substance abuse. It also limits their access to school, treatments, or services, such as counseling, medication, and substance abuse treatment. Children who run away are more likely to do so early in their placement, often in their first few months in care. Placement instability increases the likelihood of children running away from care. For example, children who have two placements are 70% more likely to run away than those who are in their first placement.<sup>27</sup>

This chapter examines the percentage of youth who run away within one year of entry into substitute care. Since running away occurs most frequently among older children, this indicator includes youth who are 12–17 years old when they enter care. In the past 15 years, the percentage of children who run away reached its highest point in 2012 (23.6%) and has decreased to its lowest point in 2019 (14.1%; see Figure 2.21).

**Figure 2.21 Children Who Run Away from Substitute Care**



<sup>25</sup> Gambon, T. B. & O'Brien, J. R. G. (2020). Runaway Youth: Caring for the Nation's Largest Segment of Missing Children. *Pediatrics*, 145, 1-14. Pergamit, M. R., Ernst, M., Benoit-Bryan J., & Kessel, J. (2010). *Why they run: An in-depth look at America's runaway youth*. Chicago, IL: the National Runaway Switchboard.

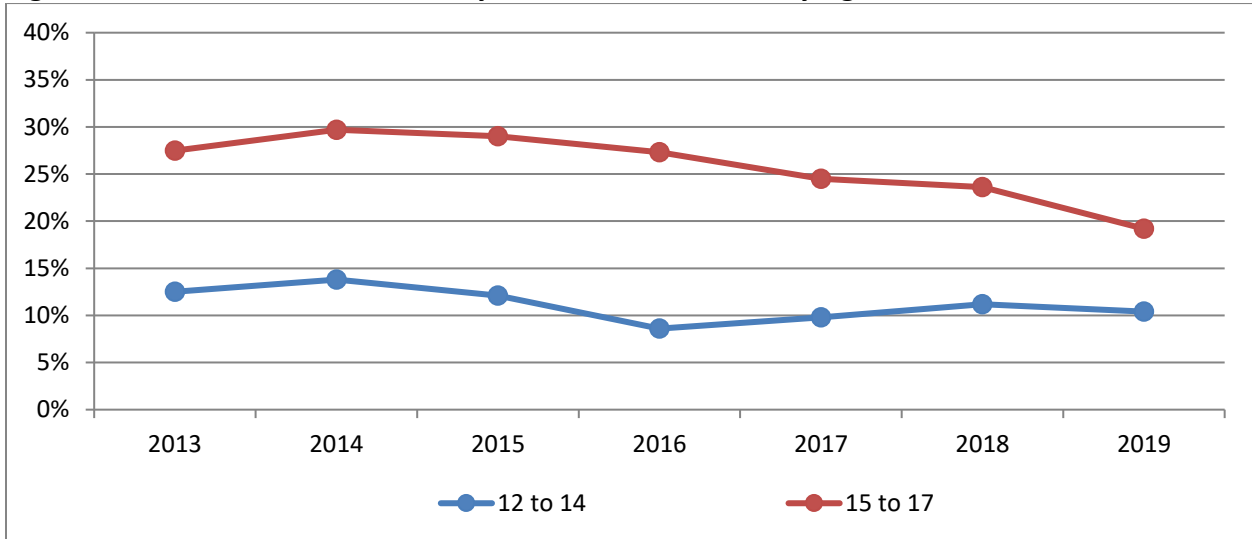
<sup>26</sup> Crosland, K., Joseph, R., Slattery, L., Hodges, S., & Dunlap, G. (2018). Why youth run: Assessing run function to stabilize foster care placement. *Children and Youth Services Review*, 85, 35-42. Crosland, K., & Dunlap, G. (2015). Running away from foster care: What do we know and what do we do? *Journal of Child & Family Studies*, 24, 1697-1706. Pergamit, M. R., & Ernst, M. (2011). *Running Away from Foster Care: Youths' Knowledge and Access of Services*. Chicago, IL: National Runaway Switchboard. Nesmith A. (2006). Predictors of running away from family foster care. *Child Welfare*, 85, 585-609.

<sup>27</sup> Courtney, M. E. & Zinn, A. (2009). Predictors of running away from out-of-home care. *Children and Youth Services Review*, 31, 1298-1306.

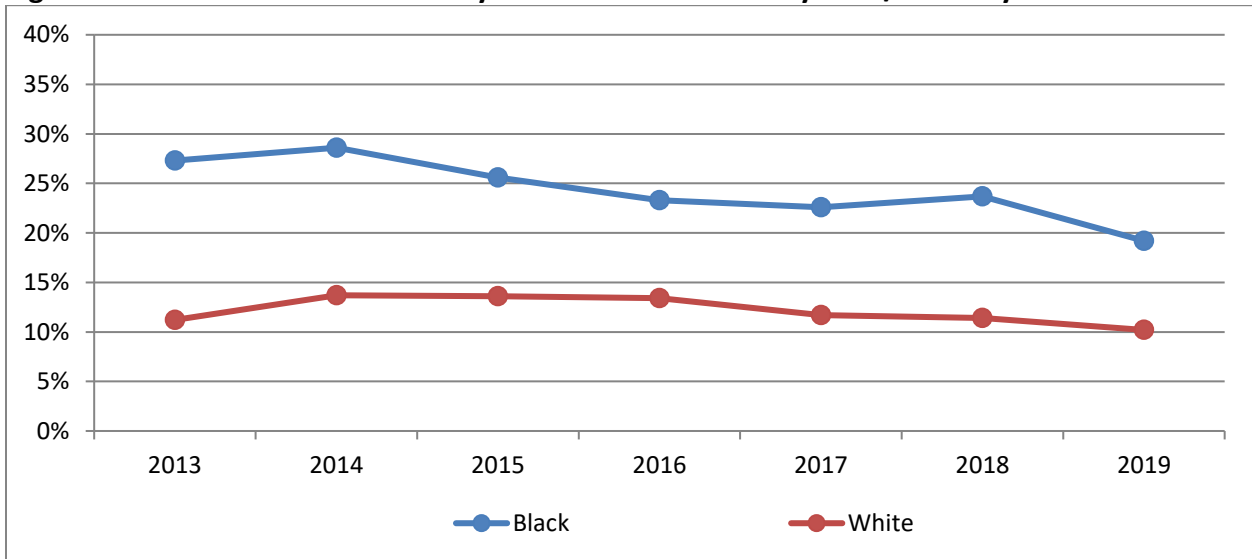


The percentage of youth who run away from substitute care differs by age and race/ethnicity, with a higher percentage of older youth (see Figure 2.22 and Appendix B, Indicator 2.F) and Black youth (see Figure 2.23 and Appendix B, Indicator 2.F) running away within their first year in care.

**Figure 2.22 Children Who Run Away from Substitute Care by Age**

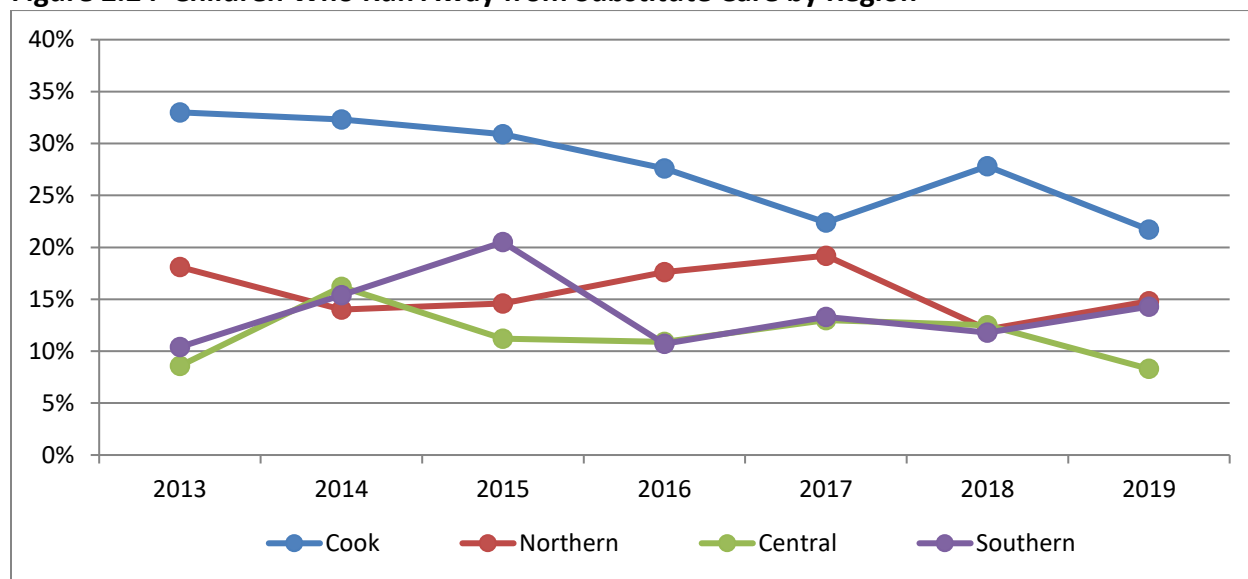


**Figure 2.23 Children Who Run Away from Substitute Care by Race/Ethnicity**



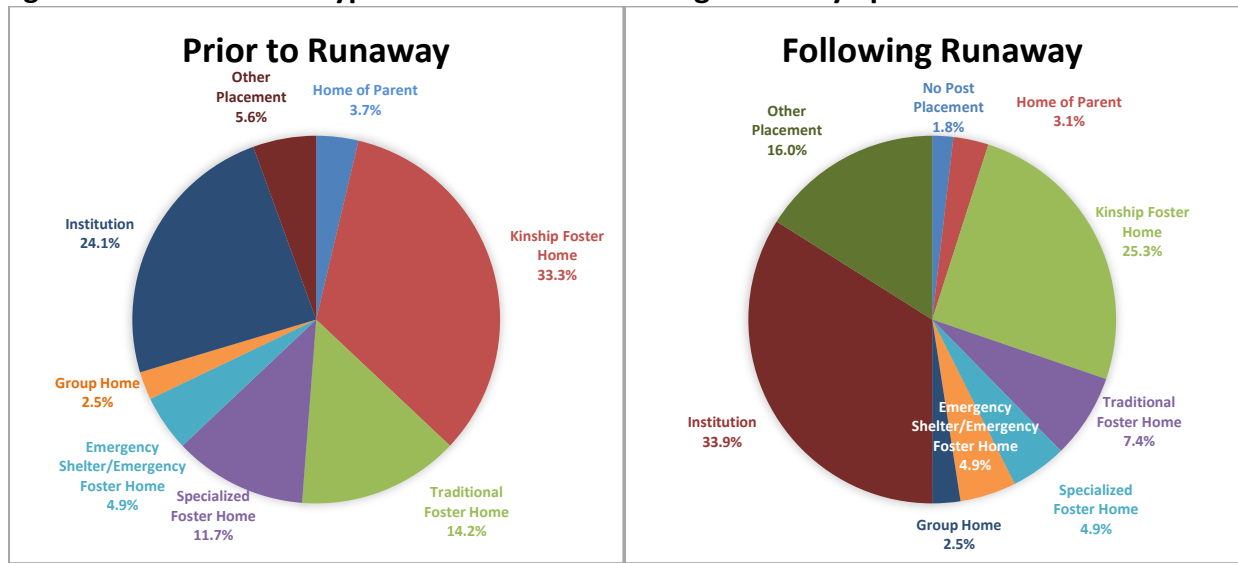
Youth in the Cook region were more likely to run away from their placements than those in other regions. Among youth entering substitute care in the Cook region in 2019, 21.7% ran away during their first year, compared to 14.8% in the Northern region, 8.3% in the Central region, and 14.3% in the Southern region (see Figure 2.24 and Appendix B, Indicator 2.F).

**Figure 2.24 Children Who Run Away from Substitute Care by Region**



To understand more about the youth who run away from their placements, we examined the placement types prior to and after their first runaway episode in 2019. In addition to the placement types used in previous analyses (home of parent, kinship foster home, traditional foster home, specialized foster home, emergency shelter/emergency foster home, group home, and institution), another placement type was created (“other” placement) that included medical hospitalization, psychiatric hospitalization, independent living, unauthorized placement, and unauthorized home of parent. Figure 2.25 shows that 33.3% of the youth who ran away in 2019 were living in a kinship foster home prior to running away, 24.1% were living in an institution, 14.2% were in a traditional foster home, and 11.7% were in a specialized foster home. After running away, 33.9% of the youth were placed in an institution, 25.3% in a kinship foster home, and 16.0 % in an “other” placement. A small number of youth (1.8%) had no placement following the runaway episode, which indicates that their cases were closed immediately after the runaway event.

Figure 2.25 Placement Types Prior to and Following Runaway Episodes - 2019



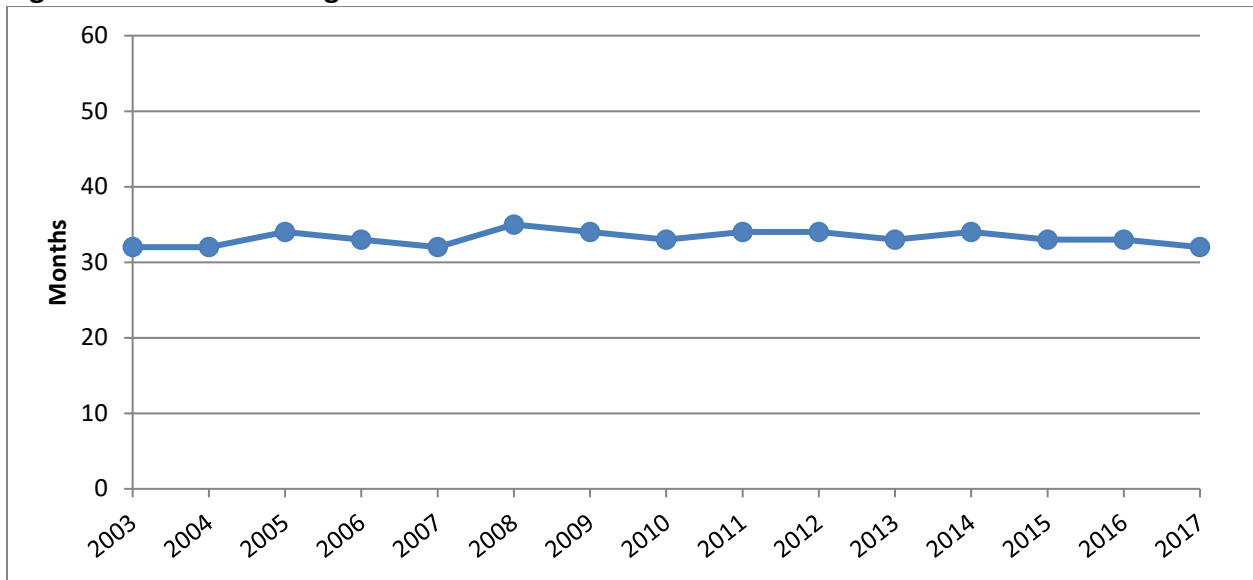
## Length of Time in Substitute Care

Children should not languish in foster care. The state may need to take custody of children to keep them safe, but they should not be raised in a substitute care setting for long periods of time. Once a child is placed in substitute care, the goal is to move them out of care as quickly as it is safe and reasonable to do so. The length of time a child spends in substitute care is affected by a variety of factors, including their permanency goal, the type of placement in which they live, and the type of maltreatment that brought them into care.

In this report, length of time in substitute care is measured by calculating the median length of time for all children who enter substitute care in a given fiscal year. The median length of stay is the number of months it takes for 50% of those children to exit substitute care. Some children might enter substitute care more than once in a given fiscal year. The analysis here only examines the length of their first spell during the year. Because this measure only includes children that entered care within a given fiscal year and excludes children that entered care in previous year(s) and remained in care, it over-represents children that are in care for a short period of time. The most recent year for which median length of stay in substitute care can be calculated is 2017, since there needs to be enough time for 50% of the children that enter in a given year to exit care. The median length of stay has been between 32 and 34 months for the past several years, and there has been little change in this indicator over the past 15 years (see Figure 2.26 and Appendix B, Indicator 2.G).

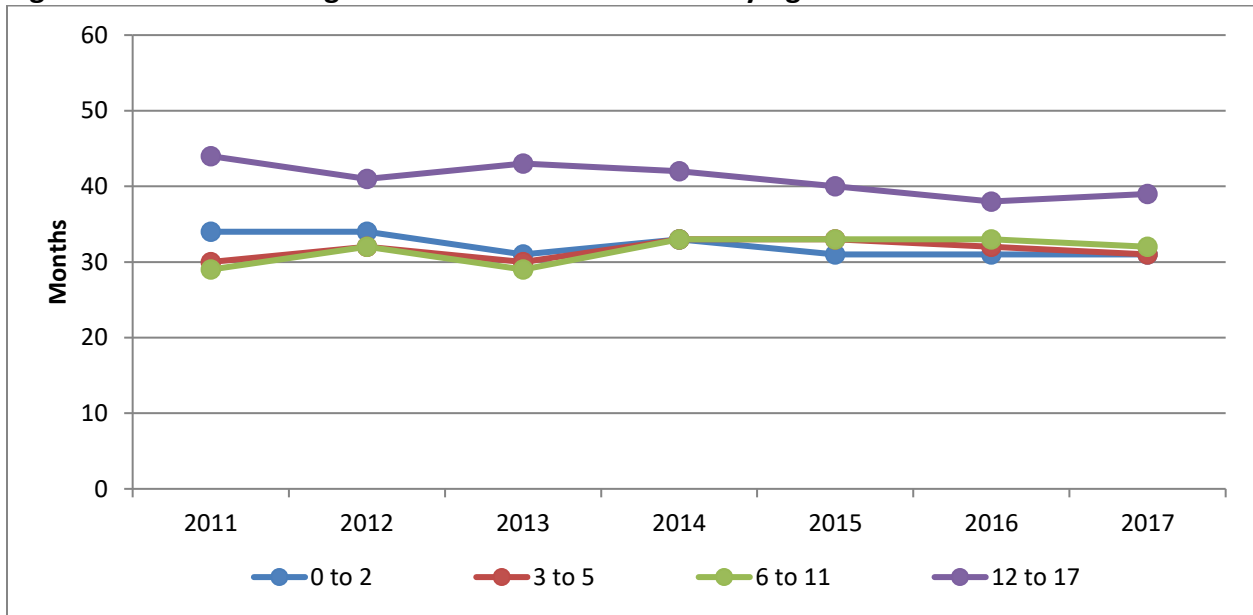
## CONTINUITY AND STABILITY IN CARE

**Figure 2.26 Median Length of Time in Substitute Care**



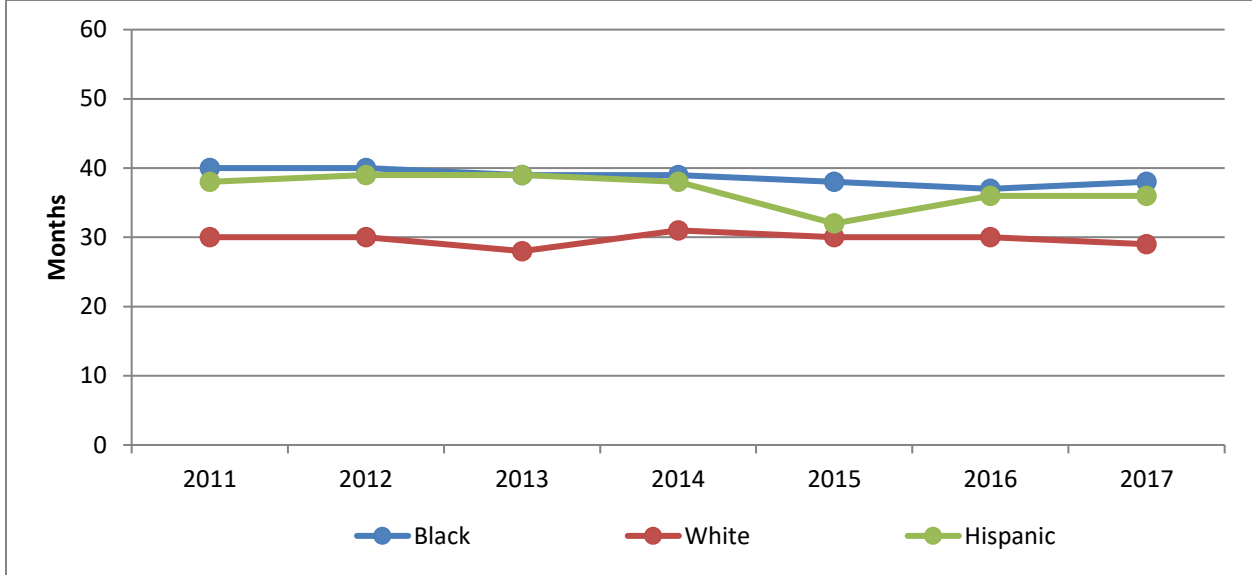
Older children have a longer median length of stay than younger children. The median length of stay for children 12 to 17 years old who entered care in 2017 was 39 months, compared to 31 months for children 0 to 2 and 3 to 5 years, and 32 months for those 6 to 11 years old (see Figure 2.27 and Appendix B, Indicator 2.G).

**Figure 2.27 Median Length of Time in Substitute Care by Age**



The median length of stay varies by race/ethnicity and was lowest for White children (29 months in 2017) compared to Black (38 months in 2017) and Hispanic children (36 months in 2017; see Figure 2.28 and Appendix B, Indicator 2.G).

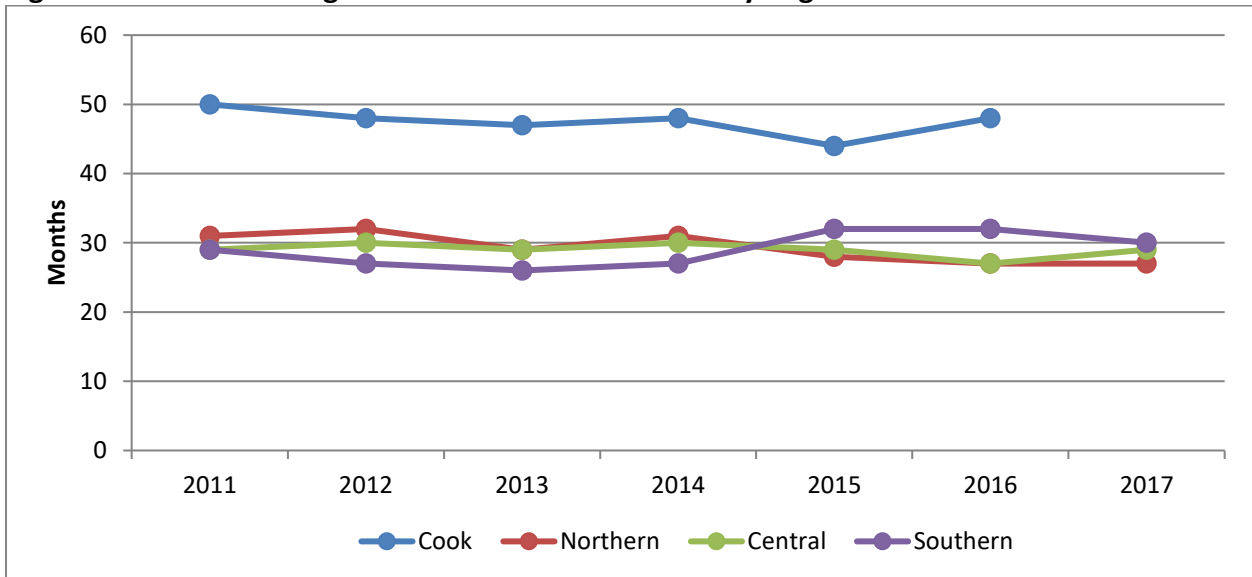
**Figure 2.28 Median Length of Time in Substitute Care by Race/Ethnicity**



There are notable regional differences in the median length of stay (see Figure 2.29 and Appendix B, Indicator 2.G). Children in the Cook region spent substantially longer time in substitute care than children who resided in other regions: 48 months was the median length of stay in the Cook region for the 2016 entry cohort, compared to 27 months for both Northern and Central regions, and 32 months for the Southern region.



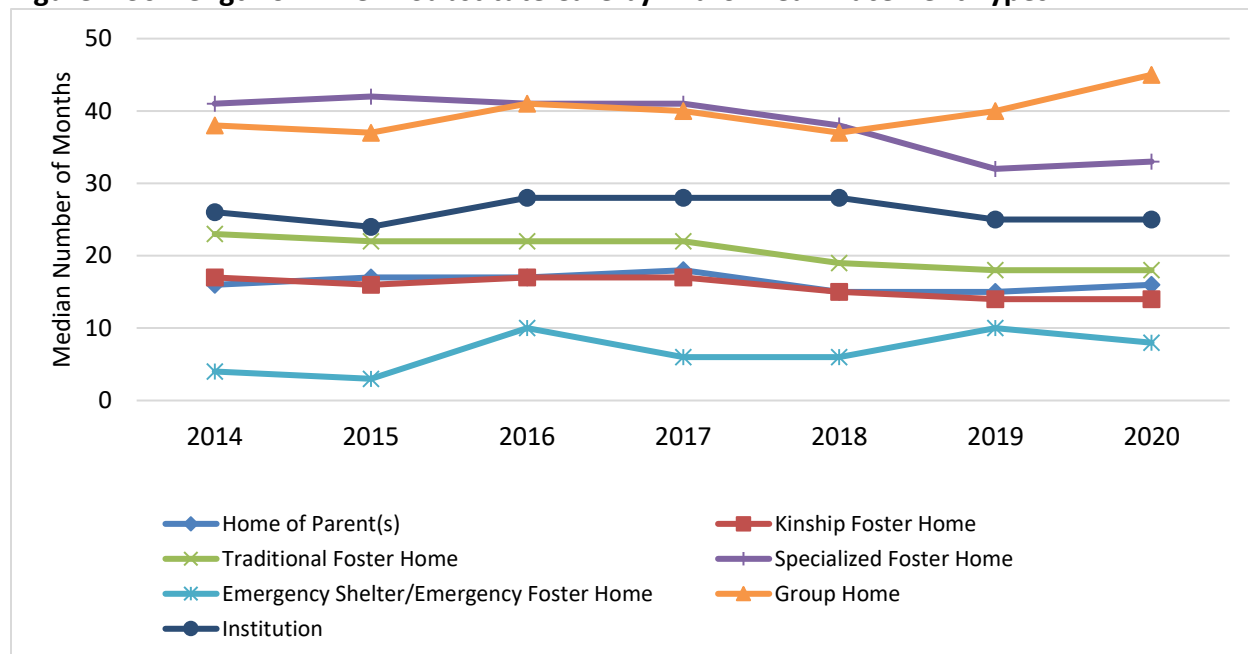
**Figure 2.29 Median Length of Time in Substitute Care by Region**



## CONTINUITY AND STABILITY IN CARE

In this year’s report, we also examined how the length of time in substitute care varied by end-of-year placement type. In this analysis, the length of time in substitute care is measured by calculating the median number of months between the case open date of each child and the last day of the state fiscal year (June 30<sup>th</sup>). The median number of months is the number of months for the fiftieth percentile of children in each type of placement. Figure 2.30 shows that children who were in an emergency shelter/emergency foster home at the end of the year had the shortest median length of time in substitute care, 3-10 months, over the past seven years. Children who were in specialized foster homes (32-42 months) or group homes (37-45 months) at the end of the year had the longest median lengths of time in substitute care among all children who were in substitute care at the end of each fiscal year. Fifty percent of the children who were placed in the home of parents, in kinship foster homes, or in traditional foster homes at the end of the year had been in substitute care for under two years (14-23 months). Fifty percent of children who were in institutions at the end of the year had been in substitute care for over two years (24-28 months).

**Figure 2.30 Length of Time in Substitute Care by End-of-Year Placement Types**



## Discussion and Conclusions: Family Continuity, Placement Stability, and Length of Time in Care

Once the state decides to take legal custody of children to protect them from harm, the child welfare system has a responsibility to provide the children in its care with safe and stable substitute living arrangements and ensure they maintain connections with their family members and siblings. After many years of relative stability, the number of children entering substitute care during the year has increased significantly in the past three fiscal years; the number increased from 4,779 entering care in FY2017 to 7,382 entering care in FY2020. In the past, when the number of children entering care increased rapidly, it led to an increased number of children being placed in emergency shelters, emergency foster homes, group homes, and institutions, especially in their initial placements. Examination of the percentage of children initially placed in these placement types during FY2019 and FY2020 does not show an increase in their use and, in fact, shows the opposite. The percentage of children and youth initially placed in emergency shelters and emergency foster homes as their first placement has decreased over the past seven years and was 1.1% in FY2020. The decrease in the use of initial placements in emergency shelters and foster homes has been especially noteworthy among older children ages 12 – 17 years; rates in this age group have decreased from 19.8% in 2014 to 3.3% in 2020. Similarly, initial placements in group homes and institutions have decreased over the past seven years, especially among older children, where the rate has dropped from 24.4% in 2014 to 16.7% in 2020. It is impressive that the Department has been able to decrease the percentage of children placed in these more restrictive placement types even as the number of children entering care has increased.

Improvements have also been seen in other indicators. For example, the percentage of youth ages 12 to 17 years who are placed with relatives in kinship foster homes at the end of year has increased from 26.4% in 2014 to 48.0% in 2020. In addition, the percentage of older youth, ages 12 to 17 years, who are placed in institutions at the end of the fiscal year has decreased from 22.7% in 2014 to 15.2% in 2020. Placement stability has also improved among all children in care, and with improvement noted among the older children age 12 to 17 years. In addition, the percentage of youth who run away from substitute care during their first year in care has fallen to a new low in the most recent year (14.1%). These improvements are encouraging, and the Department may wish to expand their efforts to continue to improve in these areas.

Although few children are placed in out-of-state placements each year, our analyses show that the number of children placed in out-of-state group homes and institutions increased rapidly in recent years, from 65 in 2014 to 111 in 2020. The increase in out-of-state institutional placements has occurred primarily among girls; the number of which has tripled over the seven year period. The Department has plans in place to reduce the use of out-of-state placements. We will continue to monitor the number of children placed outside Illinois in future *B.H.* monitoring reports.







### Chapter 3

# Legal Permanence: Reunification, Adoption, and Guardianship

All children deserve permanent homes. Although abuse and neglect sometimes make it necessary to place children temporarily in “substitute” homes, federal and state child welfare policies mandate that permanency planning should begin at the time of placement and that children should be placed in safe, nurturing, permanent homes within a reasonable timeframe. In Illinois, there are three processes through which children can exit substitute care and attain a permanent home: reunification with parents, adoption, and guardianship.

**Reunification** with parents is the preferred method for achieving permanence for children in substitute care, and it is the most common way that children exit care, accounting for 47% of exits nationwide.<sup>1</sup> Reunification is possible if parents are able to rectify the issues that endangered their children, often with the help of child welfare and other services. In some cases, parents are not able to provide a safe, nurturing home for their children, even with the aid of services. In these instances, child welfare professionals must find alternative placements for children as quickly as possible. A second permanency option is **adoption**, in which kin or non-kin adoptive parents legally commit to care for children. Adoptive parents have identical rights and responsibilities as biological parents; they may also receive financial support from the state. In 2019, adoptions made up 26% of foster care exits nationally,<sup>2</sup> and many children wait each year for adoption. **Guardianship** is a third permanency option in which caregivers, almost always kin, assume legal custody and permanent care of children and receive financial

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<sup>1</sup> U.S. Department of Health and Human Services. (2020). *The AFCARS report: Preliminary FY 2019 estimates*. Retrieved from <https://www.acf.hhs.gov/sites/default/files/documents/cb/afcarsreport27.pdf>

<sup>2</sup> Ibid.

assistance from the state. This form of permanence allows caregivers to provide a permanent home for children while not requiring them to terminate the parental rights of the biological parent, who is typically a close relative of the guardian. Guardianship is less common than reunification and adoption, accounting for 11% of foster care exits nationally in 2019.<sup>3</sup>

### Measuring Legal Permanence

There are several different ways to measure the performance of the child welfare system in achieving permanence for children in substitute care. Good indicators are tied to the system's critical performance goals, which in this case involve moving children from temporary placements in substitute care to permanent homes and doing so in a timely manner. Thus, permanency indicators should measure both the **likelihood** of achieving permanence as well as the **timeliness** in which it is achieved. In addition, the **stability** of the permanent placements should be monitored to ensure that the children who exit substitute care do not re-enter care.

One consideration when selecting indicators for measuring permanency outcomes is whether to combine the different types of permanency (reunification, adoption, and guardianship) into a single measure, or to examine the likelihood and timeliness of each type separately. The measures used in the third round of the Child and Family Services Reviews (CFSR) combine reunification, adoption, guardianship, and living with relatives into an overall permanency rate. The CFSR permanency indicators examine the overall permanency rate in three different groups of children: 1) children who enter substitute care during a 12-month period;<sup>4</sup> 2) children who have been in care between 12 and 23 months;<sup>5</sup> and 3) children who have been in care 24 months or more.<sup>6</sup> In addition, the Round 3 CFSR indicators include one measure of re-entry into substitute care for the children who achieve permanence within 12 months.<sup>7</sup> The *B.H.* monitoring report includes the four CFSR permanency indicators, plus two additional indicators of re-entry that are based on CFSR measures (see Appendix A for technical definitions of these indicators).<sup>8</sup>

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<sup>3</sup> Ibid.

<sup>4</sup> Children's Bureau (n.d.). *CFSR Round 3 Statewide Data Indicator Series: Permanency in 12 Months for Children Entering Foster Care*. Retrieved <https://capacity.childwelfare.gov/states/focus-areas/cqi/cfsr-data-syntax-toolkit/>

<sup>5</sup> Children's Bureau (n.d.). *CFSR Round 3 Statewide Data Indicator Series: Permanency in 12 Months for Children in Care 12 to 23 Months*. Retrieved from <https://capacity.childwelfare.gov/states/focus-areas/cqi/cfsr-data-syntax-toolkit/>

<sup>6</sup> Children's Bureau (n.d.). *CFSR Round 3 Statewide Data Indicator Series: Permanency in 12 Months for Children in Care 24 Months or More*. Retrieved from <https://capacity.childwelfare.gov/states/focus-areas/cqi/cfsr-data-syntax-toolkit/>

<sup>7</sup> Children's Bureau (n.d.). *CFSR Round 3 Statewide Data Indicator Series: Re-Entry to Foster Care*. Retrieved from <https://capacity.childwelfare.gov/states/focus-areas/cqi/cfsr-data-syntax-toolkit/>

<sup>8</sup> Please note that although we have adapted the CFSR measures for use in this report, we do not use the same data extraction method for computing the results, nor do we apply any risk adjustment strategies used by the Children's Bureau to calculate state performance. Therefore, the results presented in this report may not be comparable to those produced in the federal child welfare outcomes reports.

In an effort to provide a more nuanced understanding of the dynamics associated with children’s exits to permanence, this report also includes additional indicators that look at the likelihood and timeliness of each type of permanence (reunification, adoption, and guardianship) separately. Policy and practice changes may affect one type of exit positively, while negatively impacting another; examining only the overall permanency rate would mask such effects. This chapter therefore includes measures of the percentages of children in each yearly entry cohort that exit substitute care to reunification, adoption, and guardianship within 24 and 36 months.<sup>9</sup> For each type of permanence, the percentage of children exiting within 36 months is examined by child age, gender, race, and geographic region; notable differences in subgroups are described in the chapter. The stability of each permanence type is measured by the percentage that remain intact (i.e., the children do not re-enter substitute care) within 1 year (reunification only), 2 years, 5 years, and 10 years following the child’s exit from substitute care (see Appendix A for definitions of all indicators included in this report).

Child welfare systems strive to find permanent homes for all children in care, but this goal is not achieved for all children. Many children remain in care for much longer than 36 months, and others exit substitute care without a legally permanent parent or guardian—they run away, they are incarcerated, and they emancipate or “age out” of the child welfare system.

### Changes in Permanence at a Glance

#### Children Achieving Permanence (CFSR)

↔ Of all children who entered substitute care during the year, the percentage that achieved permanence within 12 months remained stable and was 14.3% of children who entered care in 2019.

↓ Of all children who had been in care between 12 and 23 months on the first day of the fiscal year, the percentage that achieved permanence within 12 months decreased from 28.2% in 2019 to 24.2% in 2020 (-14% change).

↓ Of all children who had been in care 24 months or more on the first day of the fiscal year, the percentage that achieved permanence within 12 months decreased from 23.3% in 2019 to 19.0% in 2020 (-18% change).

↓ Of all children who achieved permanence within 12 months, the percentage that re-entered substitute care within 12 months of discharge decreased from 12.6% of children who exited care in 2017 to 10.0% of children who exited care in 2018 (-21% change).

<sup>9</sup> The report also includes an indicator of the percentage of children who are reunified within 12 months. Because adoptions and guardianships are seldom finalized within 12 months of a child’s entry into care, the 12-month rate is only used for reunifications. Please also note that, because entry cohorts are used to examine permanency rates over time, the most recent entry cohort available to examine permanence within 36 months is the 2017 entry cohort.

## LEGAL PERMANENCE

↑ Of all children who achieved permanence after living in substitute care between 12 and 23 months, the percentage that re-entered substitute care within 12 months of discharge increased from 2.8% of children who exited care in 2018 to 4.6% of children who exited care in 2019 (+64% change).

↑ Of all children who achieved permanence after living in substitute care 24 months or more, the percentage that re-entered substitute care within 12 months of discharge increased from 1.3% of children who exited care in 2018 to 1.9% of children who exited care in 2019 (+46% change).

### Children Achieving Reunification

↔ Of all children who entered substitute care during the year, the percentage that was reunified with their parents within 12 months remained stable and was 14.7% of children who entered care in 2019.

↑ Of all children who entered substitute care during the year, the percentage that was reunified with their parents within 24 months increased from 27.1% of children who entered care in 2017 to 29.8% of children who entered care in 2018 (+10%).

↓ Of all children who entered substitute care during the year, the percentage that was reunified with their parents within 36 months decreased from 36.1% in 2016 to 34.1% in 2017 (-6%).

↔ Of all children who were reunified during the year, the percentage living with their family at 1 year post-reunification remained stable and was 91.4% of children who were reunified in 2019.

↔ Of all children who were reunified during the year, the percentage living with their family at 2 years post-reunification remained stable and was 88.4% of children who were reunified in 2018.

↔ Of all children who were reunified during the year, the percentage living with their family at 5 years post-reunification remained stable and was 87.1% of children who were reunified in 2015.

↔ Of all children who were reunified during the year, the percentage living with their family at 10 years post-reunification remained stable and was 85.1% of children who were reunified in 2010.

### Children Achieving Adoption

↓ Of all children who entered substitute care during the year, the percentage that was adopted within 24 months decreased from 5.6% of children who entered care in 2017 to 4.2% of children who entered care in 2018 (-25% change).

↑ Of all children who entered substitute care during the year, the percentage that was adopted within 36 months increased from 15.0% of children who entered care in 2016 to 16.8% of children who entered care in 2017 (+12% change).

↔ Of all children who were adopted during the year, the percentage living with their family at 2 years post-adoption remained stable and was 98.2% of children who were adopted in 2018.

↔ Of all children who were adopted during the year, the percentage living with their family at 5 years post-adoption remained stable and was 95.9% of children who were adopted in 2015.

↔ Of all children who were adopted during the year, the percentage living with their family at 10 years post-adoption remained stable and was 92.2% of children who were adopted in 2010.

### **Children Achieving Guardianship**

↓ Of all children who entered substitute care during the year, the percentage that attained guardianship within 24 months decreased from 0.7% of children who entered care in 2017 to 0.6% of children who entered care in 2018 (-14% change).

↓ Of all children who entered substitute care during the year, the percentage that attained guardianship within 36 months decreased from 2.6% of children who entered care in 2016 to 2.1% of children who entered care in 2017 (-19% change).

↔ Of all children who attained guardianship during the year, the percentage living with their family at 2 years post-guardianship remained stable and was 95.5% of children who attained guardianship in 2018.

↔ Of all children who attained guardianship during the year, the percentage living with their family at 5 years post-guardianship remained stable and was 89.5% of children who attained guardianship in 2015.

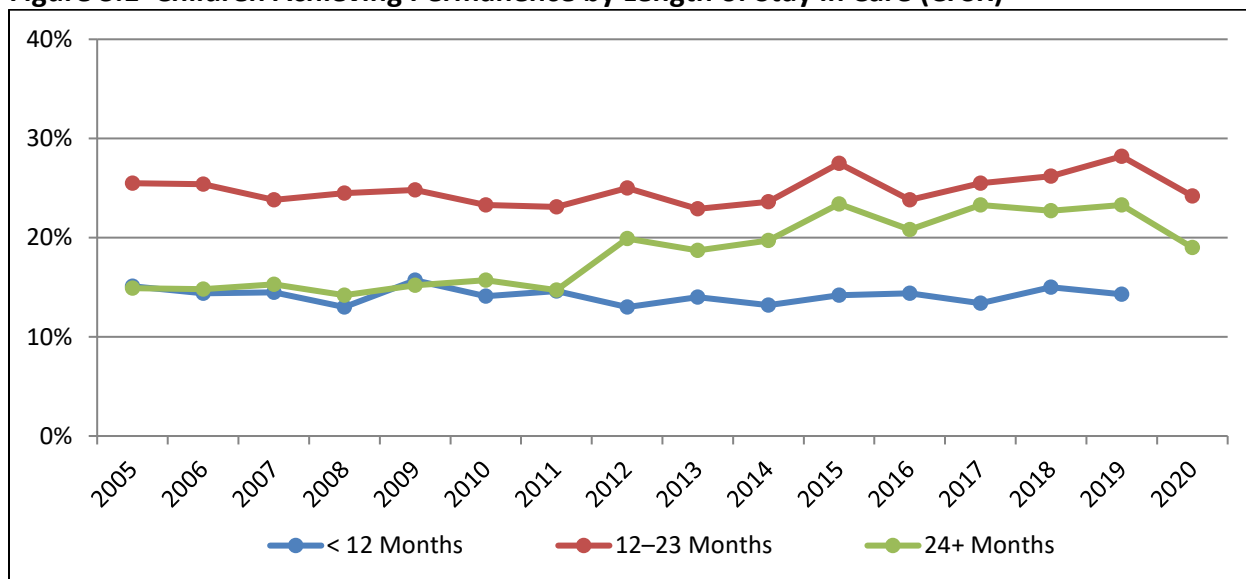
↔ Of all children who attained guardianship during the year, the percentage living with their family at 10 years post-guardianship remained stable and was 83.0% of children who attained guardianship in 2010.

## Children Achieving Permanence (CFSR)

The CFSR permanency indicators measure whether the child welfare agency “reunifies or places children in safe and permanent homes as soon as possible after removal.”<sup>10</sup> Figure 3.1 shows the percentages of children that exit substitute care through reunification, living with relatives, adoption, and guardianship each year over the past 15 years. Permanency rates are shown for three different groups of children: 1) children who enter substitute care during the fiscal year; 2) children who have been in care between 12 and 23 months on the first day of the fiscal year; and 3) children who have been in care 24 months or more on the first day of the fiscal year (see Figure 3.1 and Appendix B, Indicators 3.G, 3.H, and 3.I).

Between 13 and 15% of children who enter substitute care during the year achieved permanence within 12 months of entering care (blue line in Figure 3.1) and there has been little change in this rate for many years. The permanency rate among children who had been in care for 12 to 23 months (red line) has fluctuated between 24-28% over the past several years. Permanency rates for children in substitute care for 24 or more months (green line) increased from 15% in 2011 to 23% in 2019, but dropped to 19% in 2020.

**Figure 3.1 Children Achieving Permanence by Length of Stay in Care (CFSR)**

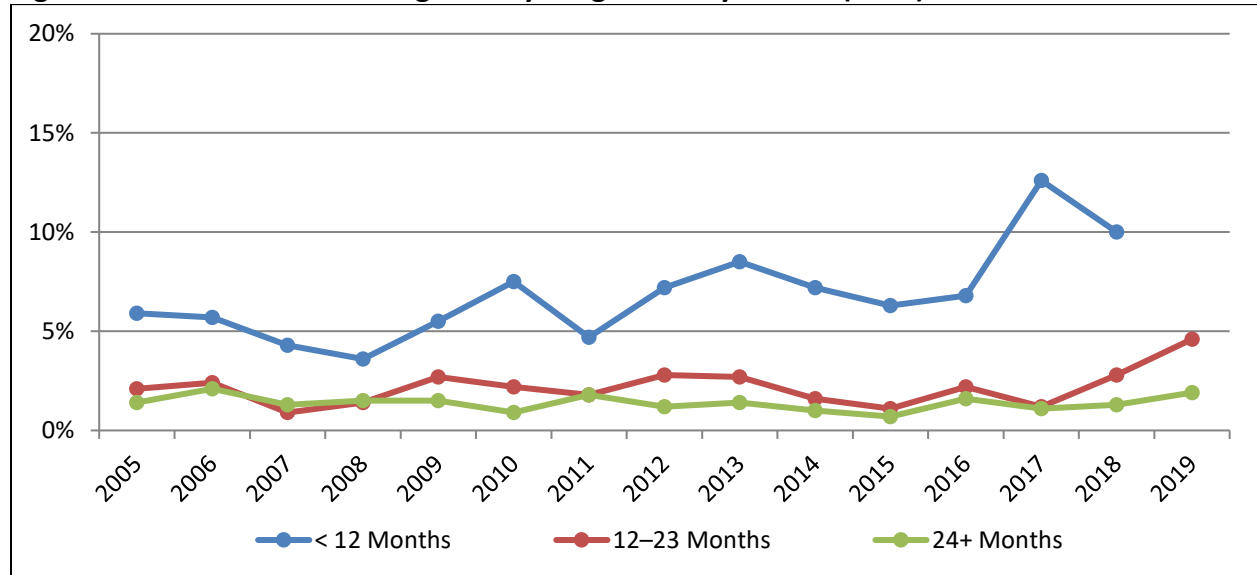


The percentages of children in each of these three groups that re-entered substitute care within 12 months of their exit are shown in Figure 3.2 (see Appendix B, Indicators 3.J, 3.K, and 3.L). Children in care less than 12 months prior to achieving permanence (blue line) have the highest rates of re-entry into substitute care compared to other groups of children; 10.0% of the children who achieved permanence in the past year re-entered substitute care within 12

<sup>10</sup> Children’s Bureau. (May 13, 2015). *Executive Summary of the Final Notice of Statewide Data Indicators and National Standards for Child and Family Service Reviews*. Accessed from [https://www.acf.hhs.gov/sites/default/files/cb/round3\\_cfsr\\_executive\\_summary.pdf](https://www.acf.hhs.gov/sites/default/files/cb/round3_cfsr_executive_summary.pdf)

months. Children who were in substitute care for 12 to 23 months (red line) and 24 months or more (green line) prior to achieving permanence had much lower rates of re-entry into substitute care compared to children in care less than 12 months prior to achieving permanence; between 1 and 5% of those children re-entered care within 12 months of achieving permanence.

**Figure 3.2 Children Re-Entering Care by Length of Stay in Care (CFSR)**

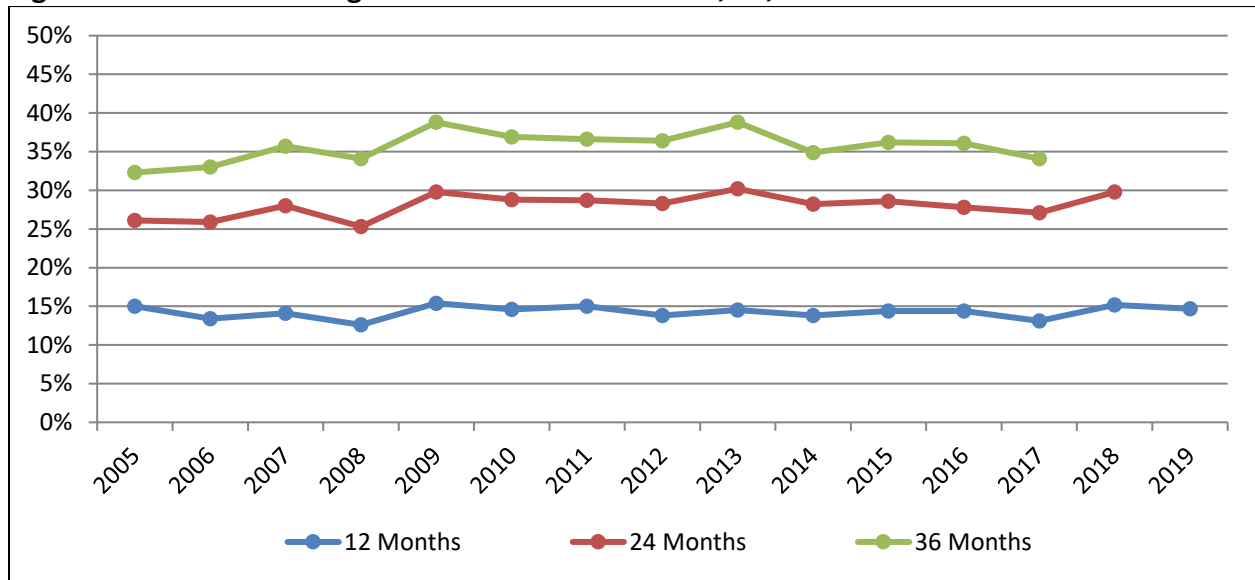


### Children Achieving Reunification

Figure 3.3 examines the percentage of children exiting substitute care to reunification within 12, 24, and 36 months of their entry into care (see Appendix B, Indicators 3.A.1, 3.A.2, and 3.A.3). For the 2019 entry cohort, 14.7% of children exited care to reunification within 12 months. For the 2018 entry cohort, 29.8% of children exited care within 24 months, and for the 2017 entry cohort, 34.1% exited within 36 months. There has been little change in the reunification rates for many years.

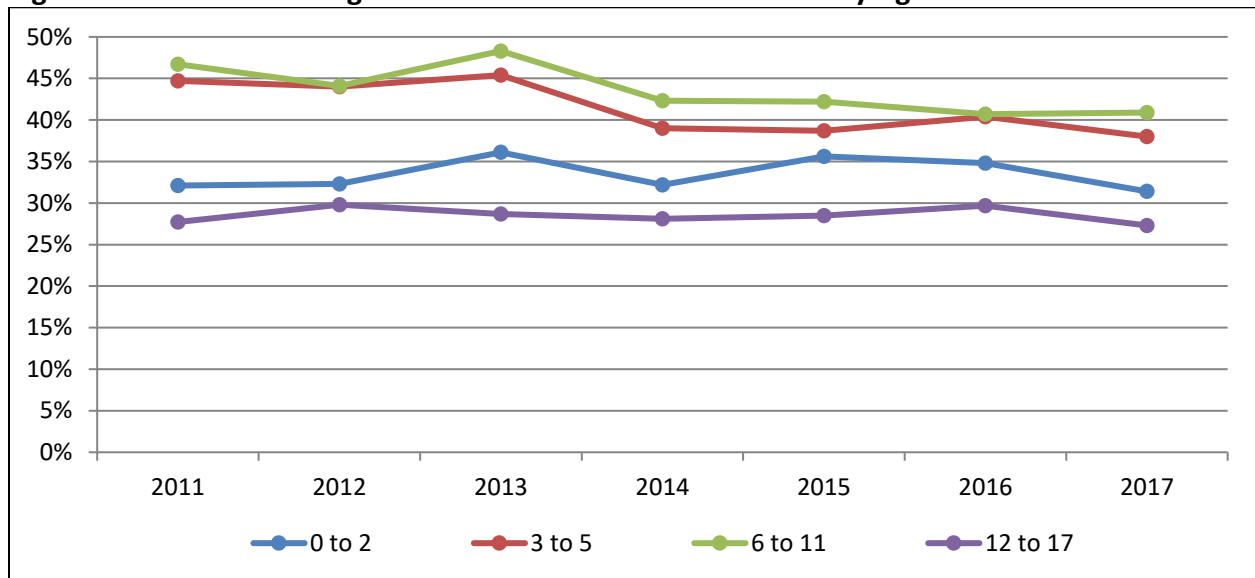


**Figure 3.3 Children Exiting to Reunification Within 12, 24, and 36 Months**



One factor that influences a child’s likelihood of reunification within 36 months is their age (see Figure 3.4 and Appendix B, Indicator 3.A.3). Children ages 3 to 11 years old when they entered care were most likely to be reunified—38.0% of children ages 3 to 5 years old and 40.9% of children 6 to 11 who entered care in 2017 were reunified within 36 months. Youth ages 12 to 17 years old were least likely to be reunified; 27.3% of those who entered care in 2017 were reunified within 3 years of entering care.<sup>11</sup>

**Figure 3.4 Children Exiting to Reunification Within 36 Months by Age**



<sup>11</sup> Youth in Illinois can opt to stay in the child welfare system until age 21. Further, because of the Foster Youth Successful Transition to Adulthood Act, children who exit the system can voluntarily return before age 21 to receive services and support.



Race and ethnicity are also associated with a child’s likelihood of achieving reunification within 3 years of entering care; in general, Black children are slightly less likely to be reunified than either White or Hispanic children (see Figure 3.5 and Appendix B, Indicator 3.A.3).

**Figure 3.5 Children Exiting to Reunification Within 36 Months by Race/Ethnicity**

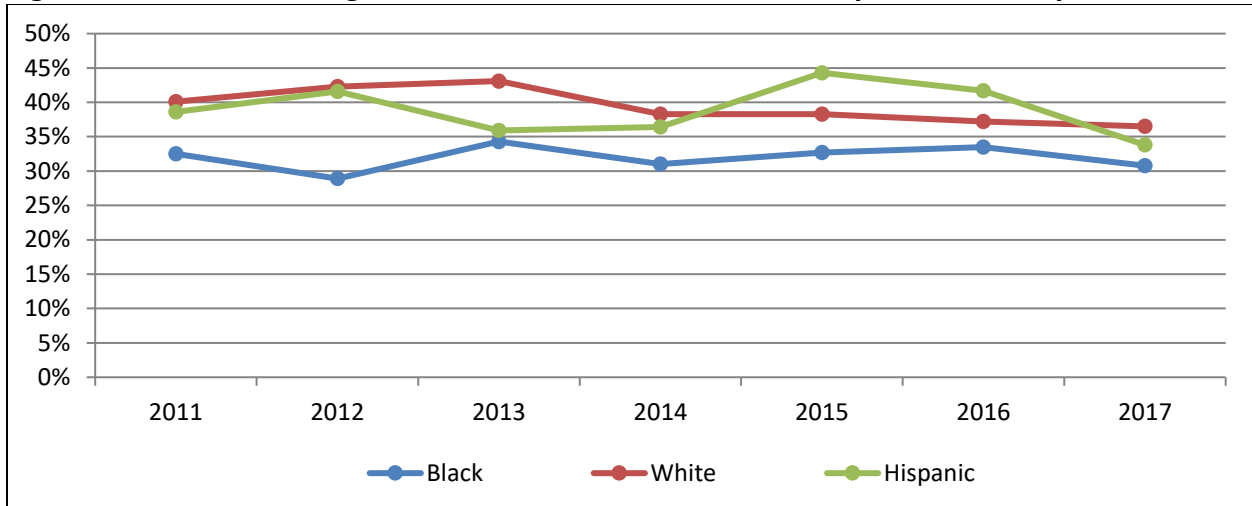
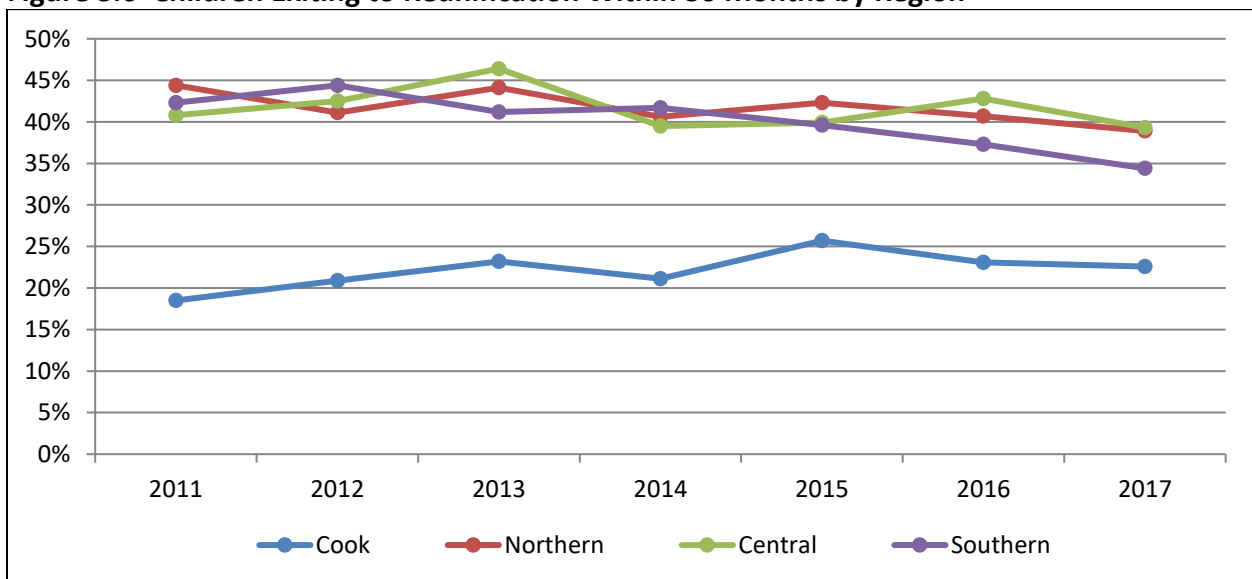


Figure 3.6 shows the 36-month reunification rate by region (see Appendix B, Indicator 3.A.3). Reunification rates in the Cook region are much lower than in any other region; only 22.6% of children who entered care in the Cook region in 2017 were reunified with their families within 36 months, compared to 38.9% of children in the Northern region, 39.3% of children in the Central region, and 34.4% of children in the Southern region.

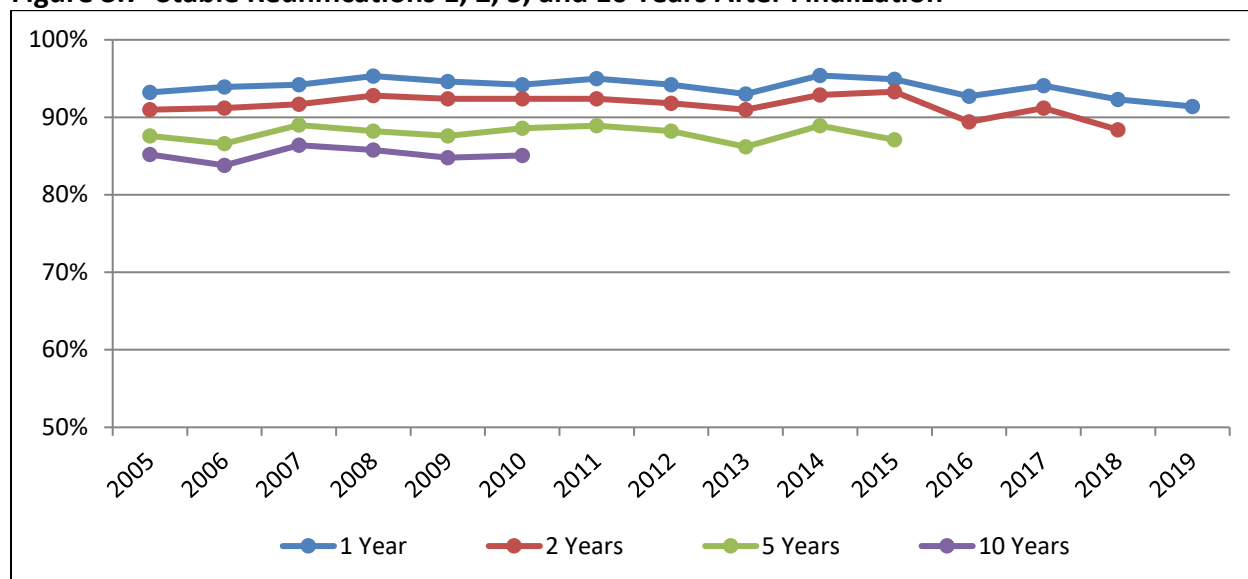
**Figure 3.6 Children Exiting to Reunification Within 36 Months by Region**



### Stability of Reunification

Reunification is only considered permanent if children can remain safely in their homes and are not removed again. Figure 3.7 displays the percentage of children that remain stable in their homes (and do not re-enter care) within 1, 2, 5, and 10 years following reunification with their parents (see Appendix B, Indicators 3.B.1, 3.B.2, 3.B.3, and 3.B.4). As expected, the stability of reunifications decreases over time. For example, of the children who were reunified in 2010, 94.2% remained one year after reunification, while only 85.1% remained at home after 10 years. There has been little fluctuation in the stability of reunifications over the past decade.

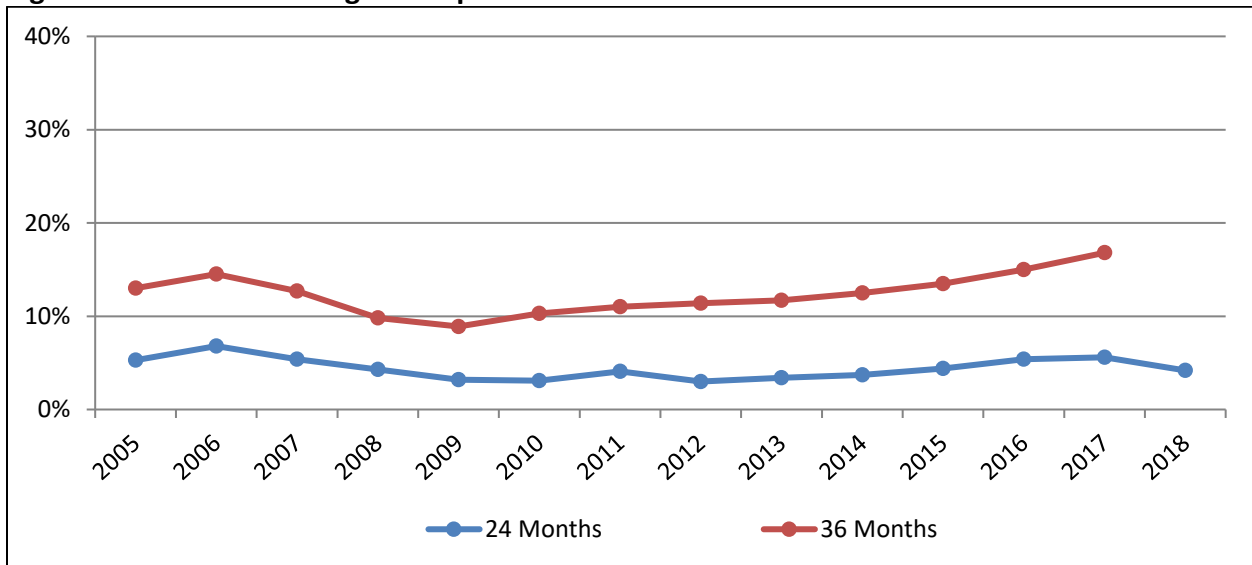
**Figure 3.7 Stable Reunifications 1, 2, 5, and 10 Years After Finalization**



### Children Achieving Adoption

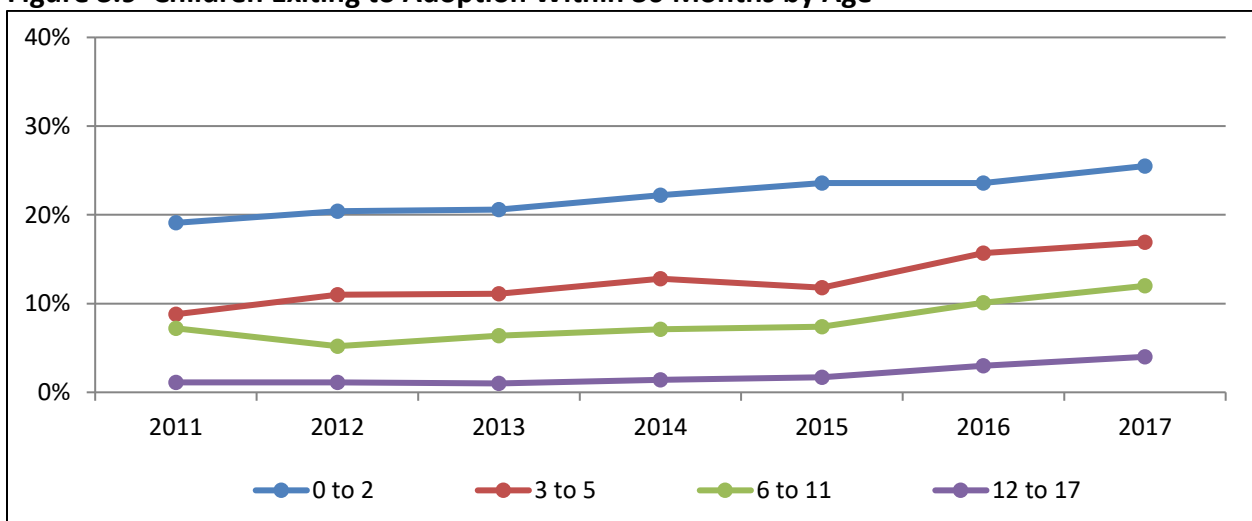
Adoption, in which a child’s biological parents’ rights are terminated and new adults assume this role, is another form of legal permanence available to children in substitute care. Adoption is generally considered a secondary option for permanence and is only available after reasonable efforts to achieve reunification have failed or become impossible. As such, it is unlikely to occur within 12 months of entry into care, and Figure 3.8 presents the percentages of children adopted within 24 and 36 months of entry into care (see Appendix B, Indicators 3.C.1 and 3.C.2). The 36-month adoption rate made an increase (up 12%), while the 24-month adoption rate fell a relative 25% from their previous years' entry cohorts.

**Figure 3.8 Children Exiting to Adoption Within 24 and 36 Months**



Age plays an important role in understanding the children most likely to be adopted; children from birth to 2 years of age are more likely to exit care to adoption than older children. Figure 3.9 shows the 36-month adoption rates by age group (see Appendix B, Indicator 3.C.2) and highlights the gap between the adoption rate for children 0 to 2 and all other age groups—25.5% of children 0 to 2 entering care in 2017 were adopted within 36 months, compared to 16.9% of children 3 to 5 years old, 12.0% of children 6 to 11 years old, and 4.0% of youth 12 to 17 years old. Youth 12 years and older when they enter care are very unlikely to be adopted within 3 years; typically, less than 4% of youth 12 years and older are adopted each year. However, the adoption rate for older children has increased from 1.0% for the 2013 entry cohort to 4.0% for the 2017 cohort.

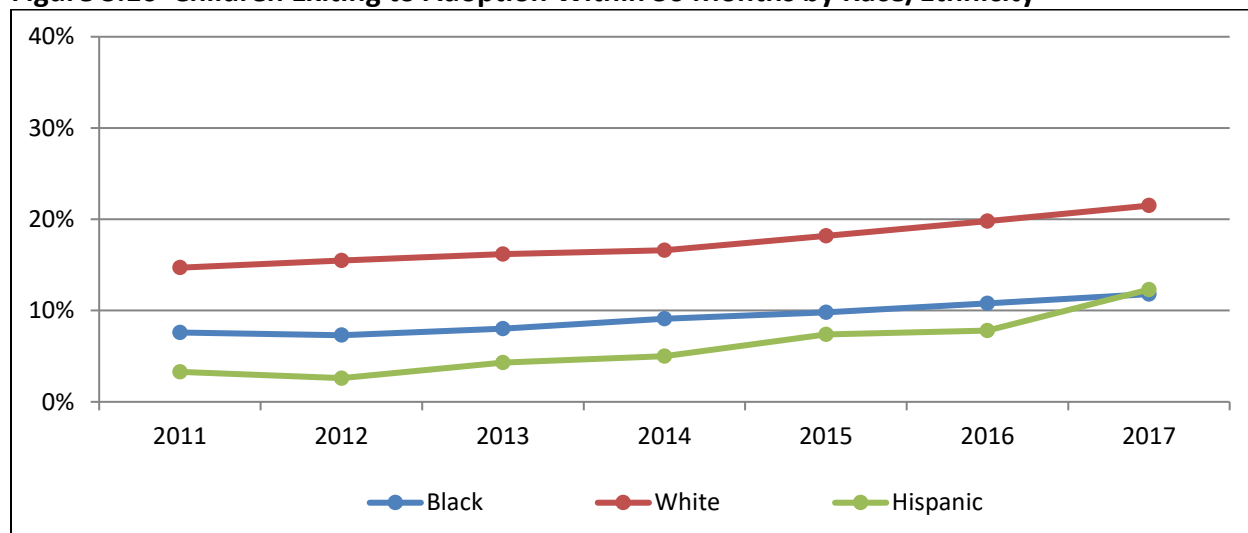
**Figure 3.9 Children Exiting to Adoption Within 36 Months by Age**



## LEGAL PERMANENCE

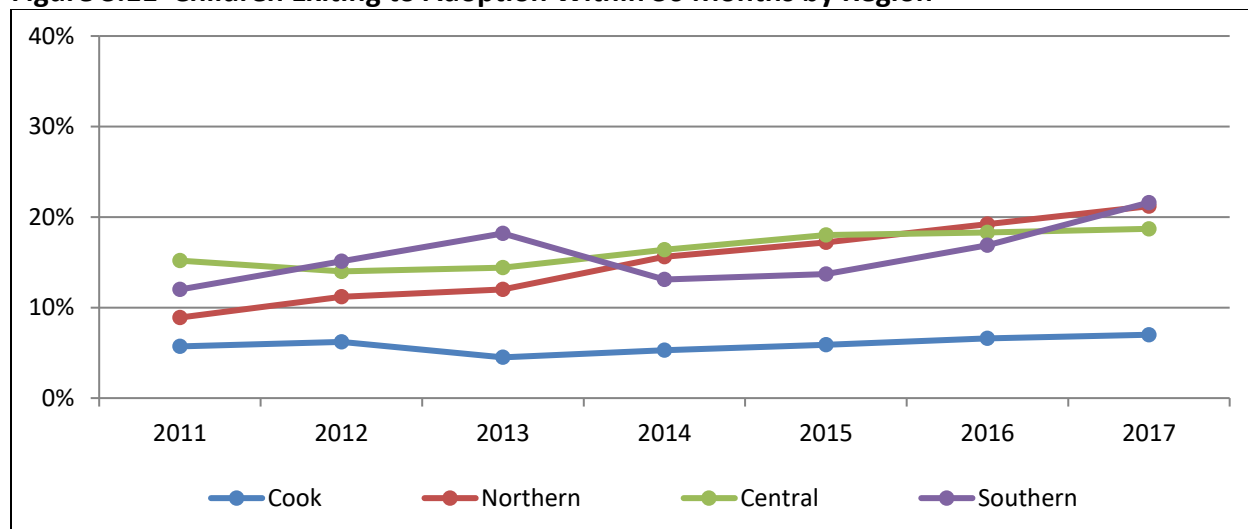
Race and ethnicity are other factors that influences the likelihood of adoption. White children are consistently more likely to exit care to adoption within 36 months than are Black and Hispanic children, as shown in Figure 3.10 (see also Appendix B, Indicator 3.C.2). For White children entering care in 2017, 21.5% exited care to adoption within 36 months, compared to 11.8% of Black children and 12.3% of Hispanic children. Adoption rates among all three groups have been increasing over the past several years.

**Figure 3.10 Children Exiting to Adoption Within 36 Months by Race/Ethnicity**



Adoption rates by region are shown in Figure 3.11 (see also Appendix B, Indicator 3.C.2). As with reunifications, adoption rates in the Cook region are markedly lower than other regions; only 7.0% of children who entered care in the Cook region in 2017 were adopted within 36 months, compared to 21.2% of children in the Northern region, 18.7% of children in the Central region, and 21.6% of children in the Southern region.

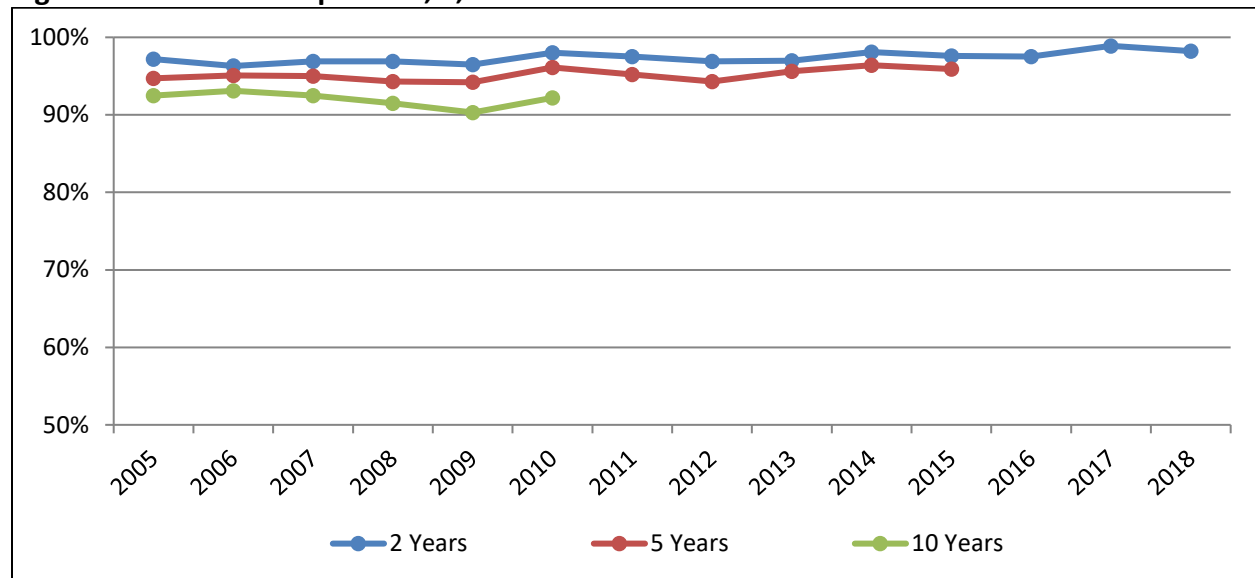
**Figure 3.11 Children Exiting to Adoption Within 36 Months by Region**



## Stability of Adoption

Rates of post-adoption stability after 2, 5, and 10 years are presented in Figure 3.12 (see Appendix B, Indicators 3.D.1, 3.D.2, and 3.D.3). Of children adopted in 2010, 98.0% of them remained in their adoptive homes after 2 years, 96.1% after 5 years, and 92.2% after 10 years. There has been little variability in the stability of adoptions over the past several years.

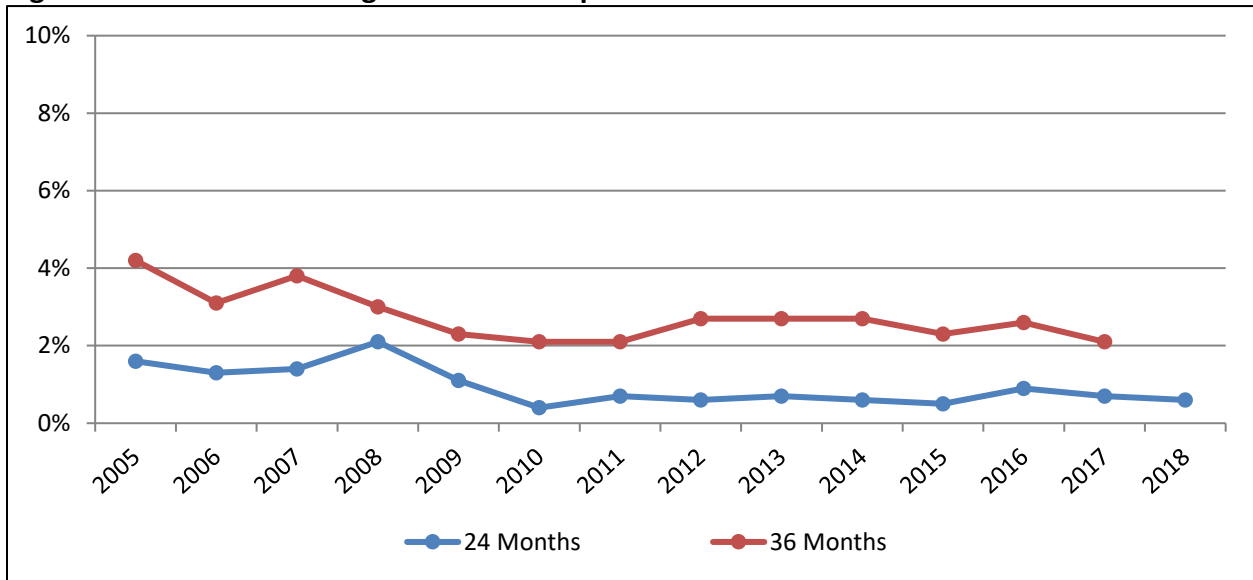
**Figure 3.12 Stable Adoptions 2, 5, and 10 Years After Finalization**



## Children Achieving Guardianship

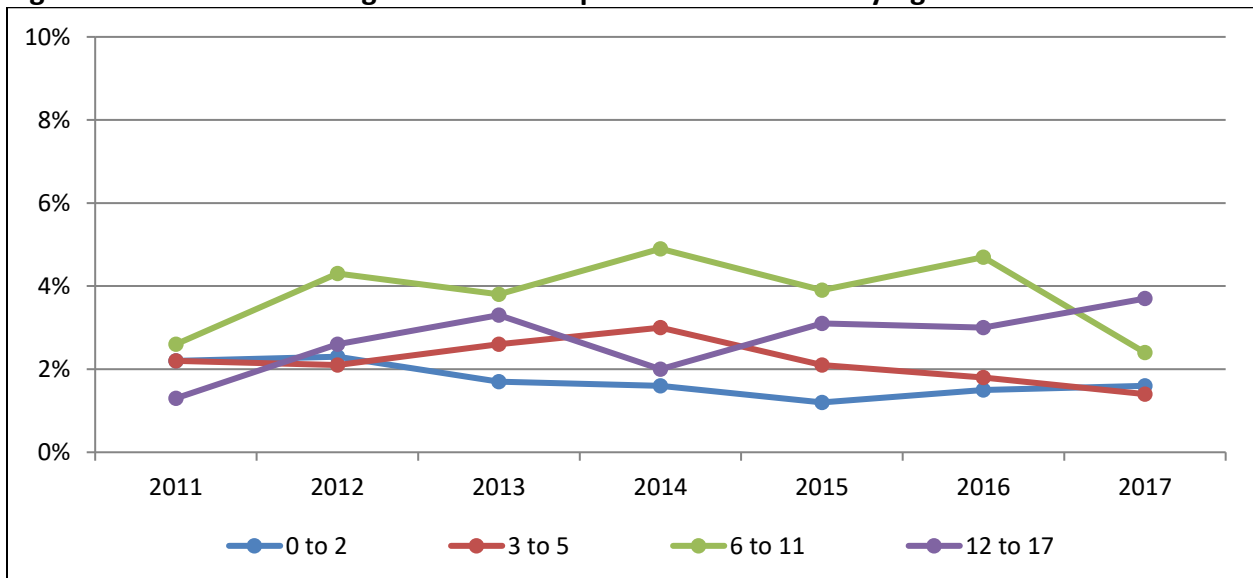
The third type of permanence explored in this report is guardianship, in which an adult or adults other than the child's biological parents assume legal guardianship of the child and receive support from the state to help pay for that child's care. As with adoption, guardianships generally are considered as an option for permanence only after attempts at reunification have been exhausted; rates of guardianship after 24 and 36 months of entering care are shown in Figure 3.13 (see Appendix B, Indicators 3.E.1 and 3.E.2). The percentage of children exiting to guardianship within 36 months reached its peak of 4.2% among children in the 2005 entry cohort. The trend over the next several years was one of decline, reaching a low of 2.1% in the 2010 and 2011 entry cohorts. Although rates of guardianship were slightly higher for the 2012 – 2016 entry cohorts, they have fallen back to 2.1% among children in the most recent (2017) entry cohort. Exits to guardianships within 24 months of entry are rare and have been less than 1% for over a decade.

**Figure 3.13 Children Exiting to Guardianship Within 24 and 36 Months**



Unlike adoption, which is most likely to occur among the youngest children in care, guardianship within 36 months has been most likely to occur among children who enter care between 6 and 17 years old and least likely to occur among children 0 to 5 years (see Figure 3.14 and Appendix B, Indicator 3.E.2). The small total number of children who exit care to guardianship each year means the percentages tend to vary more from year to year than other types of exits.

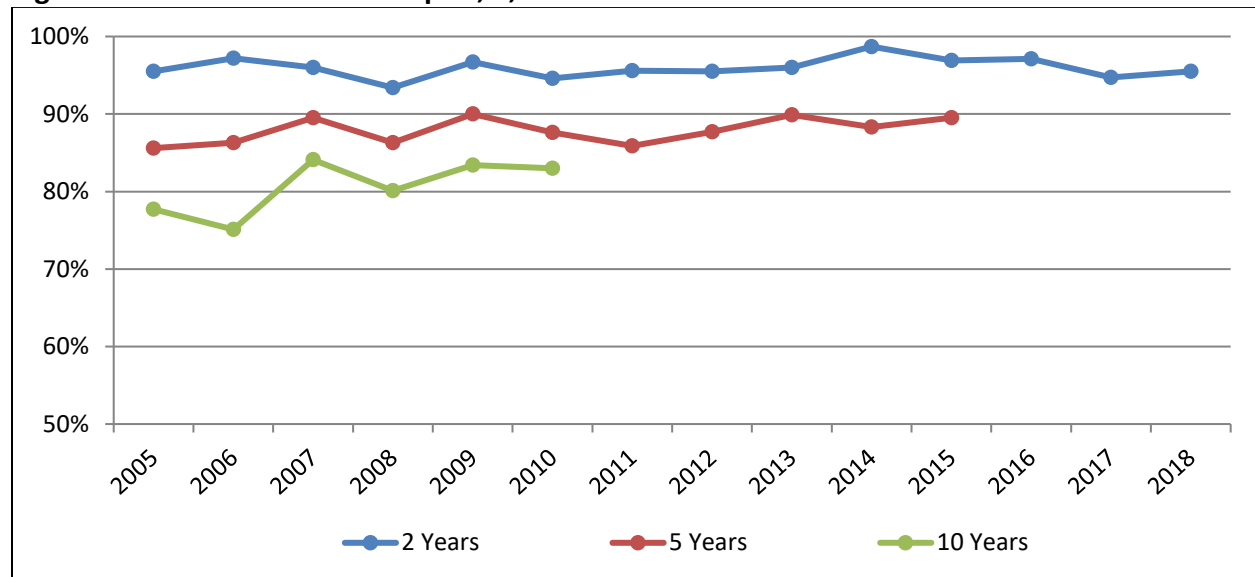
**Figure 3.14 Children Exiting to Guardianship Within 36 Months by Age**



## Stability of Guardianship

The stability of guardianship after 2, 5, and 10 years is shown in Figure 3.15 (see Appendix B, Indicators 3.F.1, 3.F.2, and 3.F.3). Using this information, we can see how children who exited care to guardianship in 2010 have fared over the past 10 years. Of children who exited care to guardianship in 2010, 94.6% remained with their guardian after 2 years; 87.6% after 5 years; and 83.0% after 10 years. The rates of stability within 2 and 5 years of exiting substitute care have been relatively unchanged for several years, while the 10-year stability rate has been more variable.

**Figure 3.15 Stable Guardianships 2, 5, and 10 Years After Finalization**



### Living with Relatives

#### BOX 3.1

A fourth type of permanence known as “living with relatives” is included in the federal permanency measures. In this type of permanence, relatives assume legal guardianship of a child without receiving a subsidy or becoming licensed foster parents. Figure 3.16 shows the number of children exiting to live with relatives within 24 and 36 months. Living with relatives is a type of permanence used less commonly in Illinois than nationally (6% of children exiting care in 2019)<sup>12</sup> and much less often than reunification, adoption, or guardianship.

This permanency type has remained relatively stable over time. Over the past 15 years, between 1.1–1.8% of children who entered substitute care during the year achieved permanence by exiting to relatives within 36 months of entering care.

<sup>12</sup> U.S. Department of Health and Human Services. (2020). *The AFCARS report: Preliminary FY 2019 estimates*. Retrieved from <https://www.acf.hhs.gov/sites/default/files/documents/cb/afcarsreport27.pdf>

**3.16 Children Exiting to Relatives Within 24 and 36 Months**

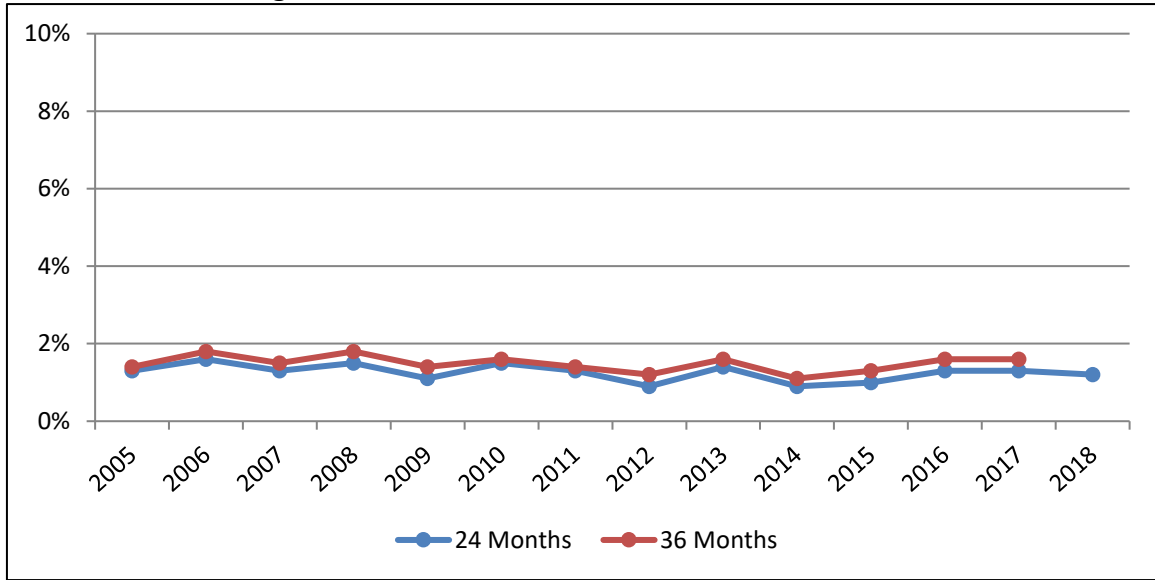
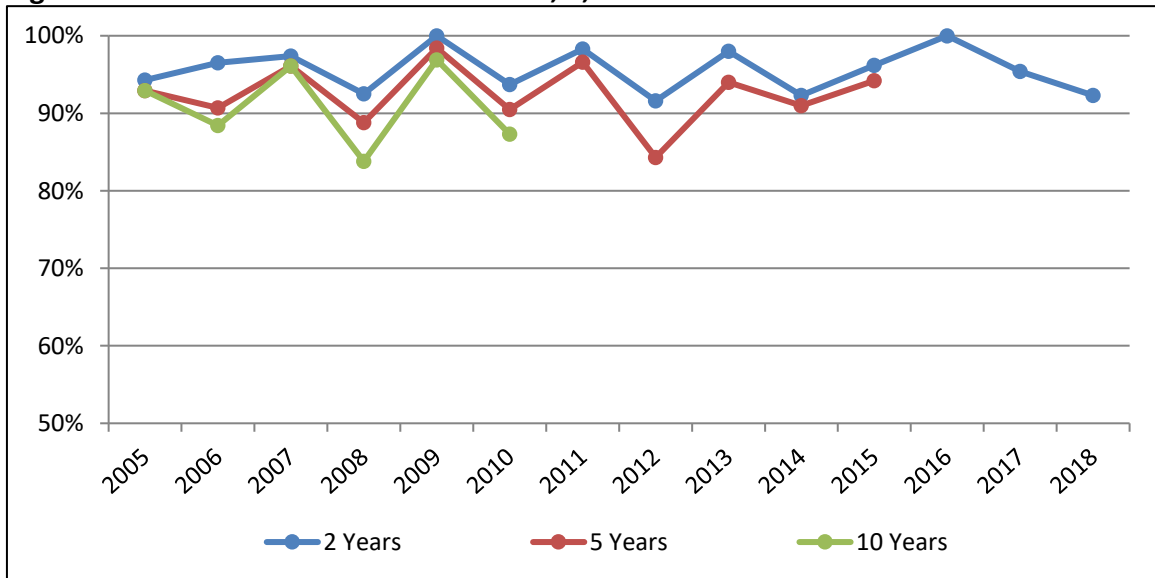


Figure 3.17 shows the stability rates for relative placements after 2, 5, and 10 years. Looking at the children who exited to live with relatives in 2010, we see that 93.7% remain in their homes after 2 years, and 90.5% after 5 years, and 87.3% after 10 years. Because of the overall small number of children exiting to this permanency type, the stability rates are more variable than other types of permanency. However, the overall trend is similar to other permanency types (i.e., reunification, adoption, and guardianship); the stability of living with relatives decreases over time.

**Figure 3.17 Stable Relative Placements 2, 5, and 10 Years After Finalization**

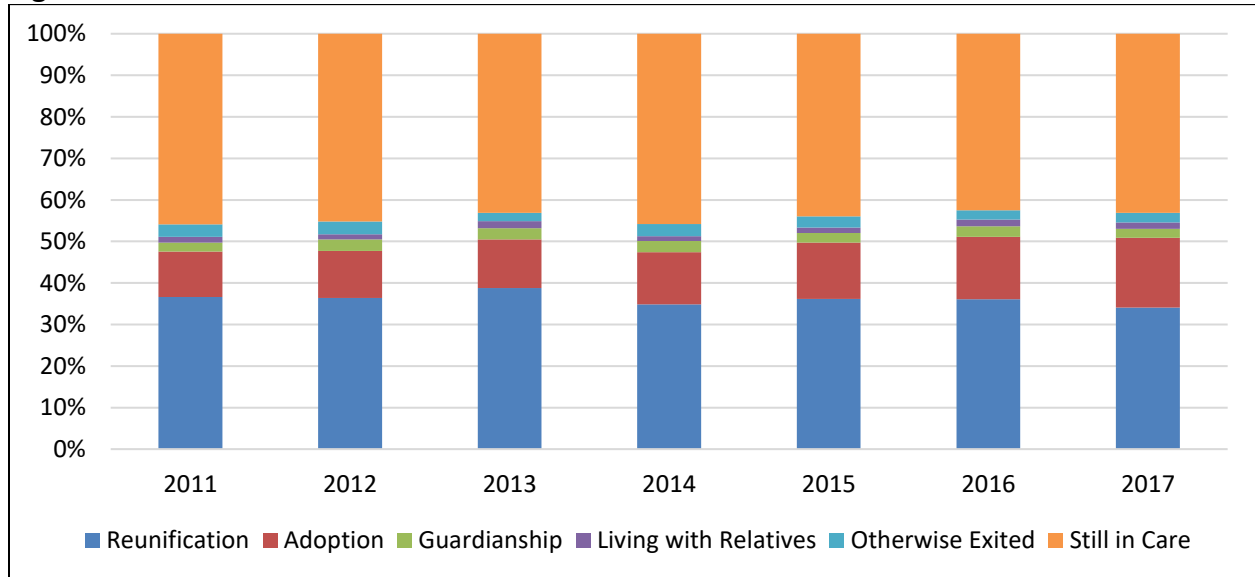




## Children Who Do Not Achieve Legal Permanence

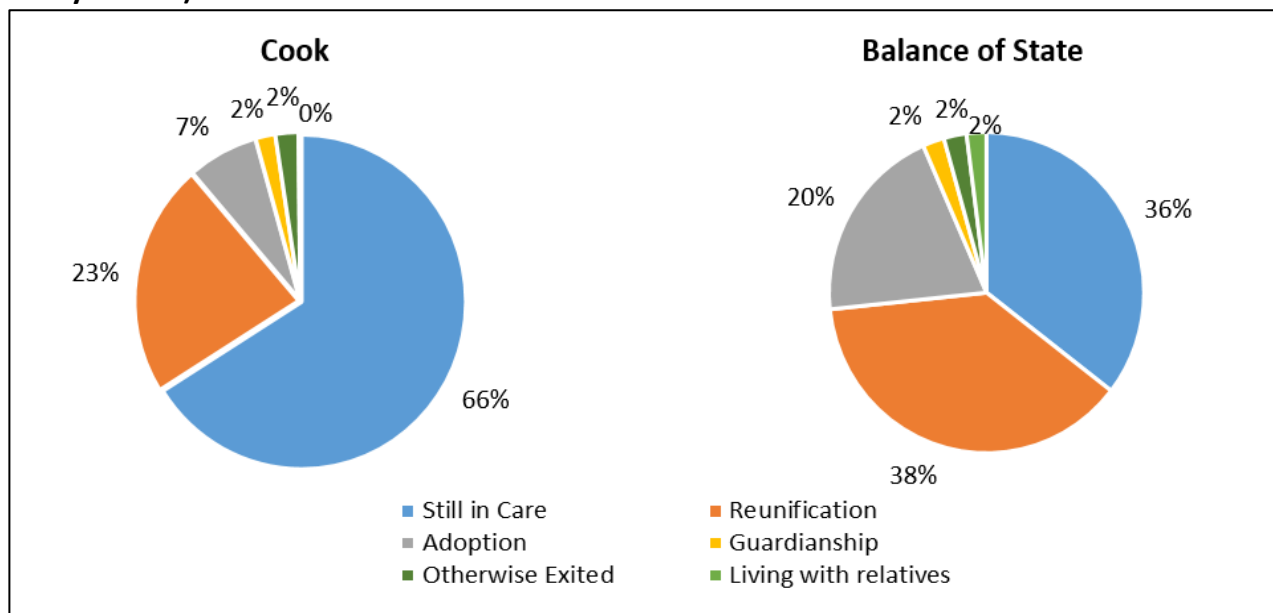
In the sections above, we explored four ways children exit care to legal permanence: reunification with their family of origin, adoption, guardianship, and living with relatives. More than half (54.6%) of the children in the 2017 entry cohort exited care within 36 months to one of these permanency options (see Figure 3.18). However, a significant portion of the children in this entry cohort remained in care longer than 36 months (43.1%) and others exited substitute care without ever achieving legal permanence (2.3%). Figure 3.18 shows the permanency outcomes for all children in each entry cohort over the past seven years. From 2011 to 2017, between 42.5% and 45.9% of children remained in care more than 36 months. A small percentage of each entry cohort (between 2.2% and 3.1%) exited substitute care within 36 months without ever achieving legal permanence; these “non-permanency exits” include aging out, incarceration, and running away.

**Figure 3.18 Exits from Substitute Care Within 36 Months**



There are large regional differences in the achievement of timely permanence for children in care. Figure 3.19 compares the outcomes for children in care after 36 months in the Cook region versus the rest of the state. Approximately 66.0% of children in care in the Cook region remain in care after 36 months, 22.6% are reunified, 7.0% are adopted, and 1.9% are in guardianships. In the balance of the state, 35.5% of children are still in care after 36 months, 37.9% are reunified, 20.1% are adopted, and 2.3% are in guardianships.

**Figure 3.19 Exits from Substitute Care Within 36 Months: Cook Versus Balance of State (2017 Entry Cohort)**



### Discussion and Conclusions: Legal Permanence

State child welfare agencies are not meant to be long-term caregivers for children. Once a child is removed from his or her home, the goal is to find a safe and permanent home in which he or she can develop normally and thrive. In Illinois, about half of the children who enter substitute care achieve permanence within three years, either through reunification, adoption, or guardianship; this rate has been consistent for the past decade.

Reunification remains the most common exit type, followed by adoption and then, for a small number of children, guardianship or living with relatives. Age, race, and region continue to influence a child’s likelihood of achieving permanence. Children who enter care when older, children who are Black, and children who live in the Cook region are less likely to achieve permanence than children who are younger, children who are White, and children who live elsewhere in the state.

In Illinois, there are large regional differences in the achievement of timely permanence for children in care. Over 66% of children taken into substitute care in the Cook region can expect to stay there longer than three years. In contrast, other regions of the state keep 36% of children in care that long. A continuing effort to achieve timely permanence in the Cook region is needed, so that these dismal numbers can be improved.

Another important indicator to measure the performance of child welfare system in achieving permanence for children in substitute care is the stability of the permanent placements. In Illinois, about 10% of the children who achieved permanence in the past year re-entered

substitute care within a year, at a higher rate than the national average of 8.1%.<sup>13</sup> It remains unknown which factors may be contributing to the high rate of reentry for children in substitute care; the high rate of re-entry deserves additional scrutiny.

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<sup>13</sup> Children's Bureau (n.d.). *CFSR Round 3 Statewide Data Indicator Series: Re-Entry to Foster Care*. Retrieved from <https://capacity.childwelfare.gov/states/focus-areas/cqi/cfsr-data-syntax-toolkit/>





## Chapter 4

# Racial and Ethnic Disproportionality

Child welfare systems across the nation share the concern that children from some racial and ethnic minority groups may be disproportionately represented in the child welfare system compared to their representation in the general population.<sup>1</sup> One of the goals in the Department’s *Child Welfare Transformation Strategic Plan* is to track racial equity at critical decision points to help inform planning and decision-making.<sup>2</sup> This chapter provides information relevant to that goal by examining racial and ethnic disproportionality in the Illinois child welfare system at five critical decision points (see Figure 4.1) during 2014–2020, including:

- A. investigated/screened-in maltreatment reports,
- B. protective custodies,
- C. indicated maltreatment reports,
- D. post-investigation service provision, including substitute care and intact family services, and
- E. timely exits from substitute care.

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<sup>1</sup> Child Welfare Information Gateway. (2016). *Racial disproportionality and disparity in child welfare*. Washington, DC: U.S. Department of Health and Human Services, Children’s Bureau.

<sup>2</sup> Illinois Department of Children and Family Services. (January, 2017). *Illinois Child Welfare Transformation: 2016-2021*. Springfield, IL: Author.

**Figure 4.1 Child Welfare Decision Points**

## Measuring Racial and Ethnic Disproportionality

Racial and ethnic disproportionality refers to over- or under-representation of a racial or ethnic group in the child welfare system compared to that group's representation in the general population. In this report, it is represented by a Racial Disproportionality Index (RDI), in which the percentage of children in a racial or ethnic group involved in some part of the child welfare system is divided by the percentage of children in a relevant base population.

There are two commonly used methods for calculating RDI; each uses a different population in the denominator. The first is the "absolute RDI," in which a racial or ethnic group's representation at a specific child welfare decision point is divided by that group's representation in the general child population. The same denominator (the general child population) is used when calculating absolute RDIs at each decision point. The absolute RDI provides information about a racial or ethnic group's over- or under-representation at each decision point, but does not take into account the impact that disproportionality at earlier child welfare decision points has on later decision points.

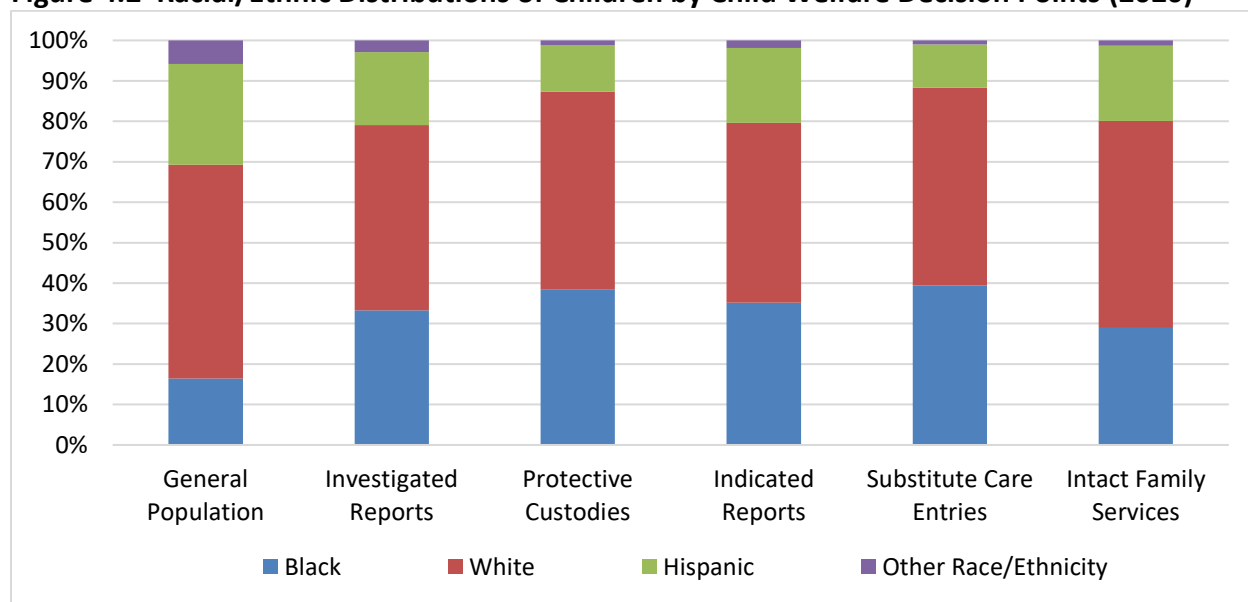
In order to isolate the impact of disproportionality at each decision point, a second measure, known as the "relative RDI," can be calculated; this measure divides a racial or ethnic group's representation at a child welfare decision point by that group's representation at a prior child welfare decision point. Relative RDIs change the denominator based on the decision point of the child welfare system that is being examined. For example, the denominator for calculating the relative RDI of "protective custodies" is the number of children who were investigated, instead of the number in the general child population.

To calculate the absolute RDIs in this chapter, data on race and ethnicity for the Illinois child population were obtained from the National Center for Health Statistics.<sup>3</sup> Figure 4.2 shows the

<sup>3</sup> National Center for Health Statistics. (2020). Vintage 2019 bridged-race postcensal population estimates (April 1, 2010-July 1, 2019). Prepared under a collaborative arrangement with the U.S. Census Bureau. Available online from [https://www.cdc.gov/nchs/nvss/bridged\\_race.htm](https://www.cdc.gov/nchs/nvss/bridged_race.htm) as of July 9, 2020, following release by the U.S. Census Bureau of the unbridged Vintage 2019 postcensal estimates by 5-year age groups. [Retrieved 7/29/2020].

racial and ethnic distribution of children at each child welfare decision in FY2020.<sup>4</sup> The last decision point, children in care longer than 36 months, is excluded from the figure because children in the FY2020 cohort have not been in care for at least 36 months. Throughout the chapter, the RDI are reported only for the three largest racial/ethnic groups in Illinois: White (Non-Hispanic), Black (Non-Hispanic), and Hispanic (any race). The numbers of children in other racial/ethnic groups involved in the child welfare system in Illinois (e.g., Native Americans, Asian) are so small that the resulting RDIs fluctuate significantly from year to year. RDIs are examined for the state as a whole as well as for each DCFS administrative region (Cook, Northern, Central, and Southern) to discern if there are any regional differences. Appendix C contains the absolute and relative RDI at each decision point for the three racial/ethnic groups over the past seven years.

**Figure 4.2 Racial/Ethnic Distributions of Children by Child Welfare Decision Points (2020)**



## Interpreting Racial Disproportionality Indices

Absolute or relative RDI values less than 1.0 indicate under-representation. For example, an RDI of 0.5 means that children are half as represented at that decision point as they are in the population (absolute RDI) or at a prior decision point (relative RDI). RDI values equal or close to 1.0 indicate no disproportionality; children in that group are represented at rates that are proportionate to their representation in the population. RDI values greater than 1.0 indicate over-representation. For example, an RDI of 2.0 means that children in that group are represented at twice the rate at a decision point as they are in the population (absolute RDI) or at a prior decision point (relative RDI). To show the differences in RDI between racial/ethnic groups or across years, they are displayed in figures throughout the report. Since an RDI of 1.0

<sup>4</sup> The 2019 National Center for Health Statistics postcensal estimates were used for the “General Population” in Figure 4.2 and the calculations of RDIs in FY2019 and FY2020.

## DISPROPORTIONALITY

indicates no disproportionality, 1.0 is set as the baseline on the figures. Values above the baseline indicate over-representation, while values below the baseline indicate under-representation. In both instances, the length of the bar in the chart corresponds to the amount of disproportionality.

Absolute RDI is the traditional measure for reporting disproportionality, and it provides useful information about how representations of a racial/ethnic group at a given decision point differ from their representation in the general population. Absolute RDI is unlikely to change across the child welfare decision points because shifting from over- or under-representation at one decision point to another requires the same group be conversely under- or over-represented at a latter decision point.

Relative RDI adjusts for representation at past decision points. For example, when we examine representation in protective custodies, we compare representation to all children being investigated, rather than the general population. We ask, "What is the representation of children taken into protective custodies compared to the representation of children being investigated?" Disproportionate representation in the relative RDI has already controlled for any previous over- or under-representation; therefore, even relatively small RDI (e.g., those below 0.9 or above 1.1) are of significant concern and are noted throughout the report. Disproportionate representation in relative RDI suggests decision-makers may find reason to review procedures to understand why disproportionate representation is occurring at specific decision points.

It is important to note that the child welfare system in Illinois, as in all states, is a reactionary system: Child maltreatment is investigated only when a report is received. This means the starting decision point in these analyses (investigations) reflects patterns of disproportionate reporting. For example, if Hispanic children are reported at disproportionately lower rates than Hispanic children in the general population, it will also be the case that Hispanic children are investigated at disproportionately lower rates. This rate of investigation does not mean we can conclude Hispanic children are safer, however. We lack information about the "true" rate of maltreatment, and this limits the conclusions we can draw about what absolute and relative RDI can tell us about child safety and bias in the system.

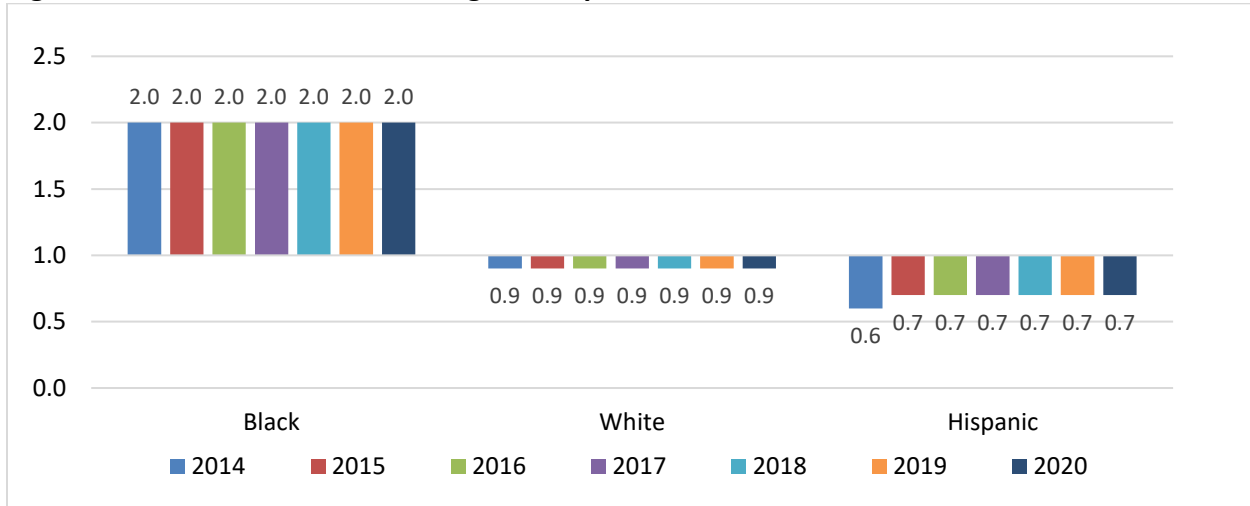
### **Investigated Reports**

The first decision point examined is investigated reports. At this stage, DCFS staff at the State Central Register (SCR) screen each call that is received from a maltreatment reporter to determine if the circumstances meet the criteria for an investigation. Calls can be either screened in to become investigated reports or screened out and no further child welfare actions are taken. Figure 4.3 shows the Absolute RDI (absolute and relative RDI are identical because the general population is the applicable denominator for both) for the three racial/ethnic groups (Black, White, and Hispanic) for investigated reports at the state level over the past seven years. White children are proportionally represented compared to their



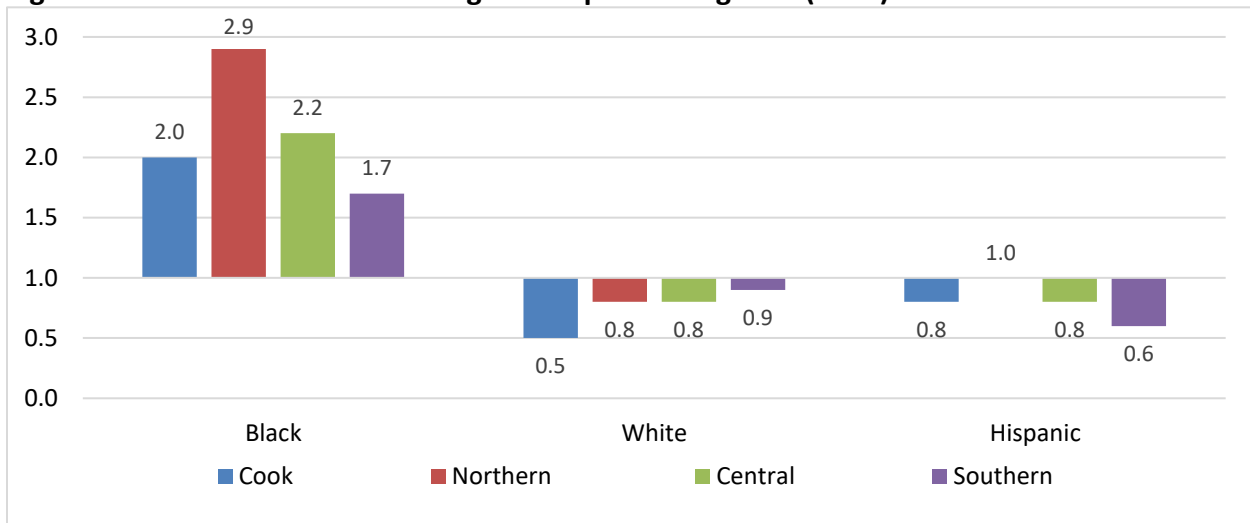
representation in the general population (RDI = 0.9), Black children are over-represented (RDI = 2.0), and Hispanic children are under-represented (RDIs = 0.6-0.7; see Appendix C, Table 4.A.1). There is little change in any of the three groups over the past seven years.

**Figure 4.3 Absolute RDI for Investigated Reports—State**



When the absolute RDIs for investigated reports in 2020 are examined by region (see Figure 4.4), several values stand out. Black children in the Northern region have an RDI of 2.9, greater than any other region and the state as a whole. White children are under-represented in the Cook (RDI = 0.5), Northern (RDI = 0.8), and Central (RDI = 0.8) regions, and are proportionally represented in the Southern region (RDI = 0.9). Hispanic children are under-represented in the Cook (RDI = 0.8), Central (RDI = 0.8), and Southern (RDI = 0.6) regions, but are proportionally represented in the Northern region (RDI = 1.0). This regional pattern for Black children has been consistent over time (see Appendix C, Table 4.A.2).

**Figure 4.4 Absolute RDI for Investigated Reports—Regional (2020)**



## Asian American and Pacific Islander Children

### BOX 4.1

From 2014 through 2020, Asian American and Pacific Islander (AAPI, defined as non-Hispanic Asian alone and non-Hispanic Other Pacific Islander alone) children comprised 5% of the Illinois child population. In addition, AAPI children are the majority of children in the “other race/ethnicity” category in this report. AAPI children were under-represented in the state’s protective service system during these years, making up 1-2% of the state’s annual investigations, with a modal RDI of 0.3 (see Table 4.1). AAPI children are also under-represented among children receiving state protective services—more so than Hispanic children—on a national level.<sup>5</sup>

**Table 4.1 Asian American and Pacific Islander Children**

	2014	2015	2016	2017	2018	2019	2020 <sup>6</sup>
# in general population <sup>7</sup>	143,242	144,650	145,218	146,422	146,211	146,140	146,140
% of general population	4.8%	4.9%	5.0%	5.1%	5.1%	5.2%	5.2%
# of investigations	1,002	1,125	1,323	1,271	1,502	1,642	1,522
% of investigations	1.1%	1.2%	1.3%	1.3%	1.4%	2.0%	1.4%
RDI	0.2	0.2	0.3	0.3	0.3	0.4	0.3

## Protective Custodies

The next decision point examined is protective custody. During an investigation, a child protective services (CPS) worker can take protective custody of a child if he or she believes that the child is unsafe in the home or with the caregiver; the child is taken into care for up to 48 hours (excluding weekends) until a shelter hearing is convened.<sup>8</sup> Figure 4.5 shows the absolute RDIs at this decision point for the three racial/ethnic groups over the past seven years. In recent

<sup>5</sup> Child Welfare Information Gateway. (2016). Racial disproportionality and disparity in child welfare. Washington, DC: U.S. Department of Health and Human Services, Children’s Bureau.

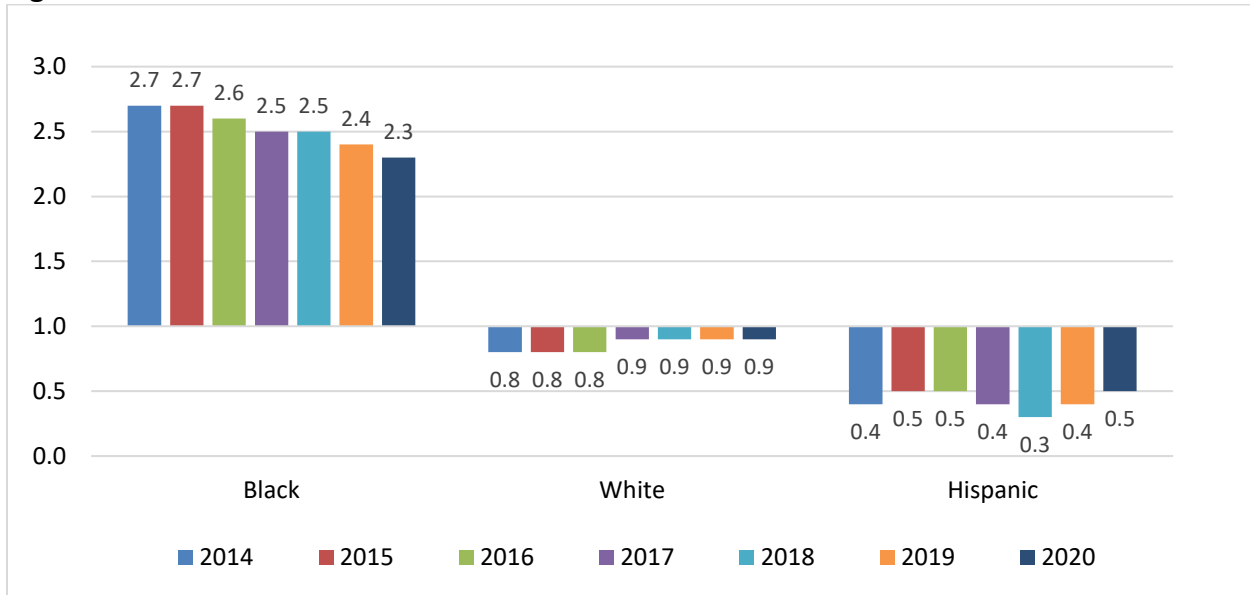
<sup>6</sup> The 2019 estimate is used for the number of AAPI children in the general population and RDI calculations for both 2019 and 2020.

<sup>7</sup> The Annie E. Casey Foundation. (2021). KIDS COUNT Data Center. Available online from <https://datacenter.kidscount.org>. [Retrieved 6/1/2021].

<sup>8</sup> Illinois Department of Children and Family Services. (October, 2015). *Procedures 300 Section 120 Taking Children into Protective Custody*. Springfield: Author. Retrieved from [https://www.illinois.gov/dcf/aboutus/notices/Documents/procedures\\_300.pdf](https://www.illinois.gov/dcf/aboutus/notices/Documents/procedures_300.pdf)

years, the RDIs for White children are close to 1, indicating proportional representation at this decision point. Black children are over-represented at rates 2.3 to 2.7 times their proportion in the Illinois child population, and Hispanic children are under-represented (RDIs range from 0.3 to 0.5). There has been a decline in the disproportionality among Black children at this decision point in recent years (see Appendix C, Table 4.B.1).

**Figure 4.5 Absolute RDI for Protective Custodies—State**



When the absolute RDIs for protective custodies are examined by region, there are striking differences for Black children (see Figure 4.6 and Appendix C, Table 4.B.2); the Northern region has the highest RDI (4.1), followed by Cook (2.6), Central (2.5), and Southern (1.4) in 2020. There are also regional differences in the RDIs for protective custodies for White children; they are particularly under-represented in the Cook region (RDI = 0.3), under-represented in the Northern (RDI = 0.7) and Central (RDI = 0.8) regions, and proportionally represented in the Southern region (RDI = 1.0). Hispanic children are consistently under-represented in the Cook, Northern, and Central regions over the past seven years. The RDIs for Hispanic children in the Central and Southern regions, both characterized by a small number of Hispanic children, show substantial variability for this decision point over the past seven years (see Appendix C, Table 4.B.2 for seven year data).

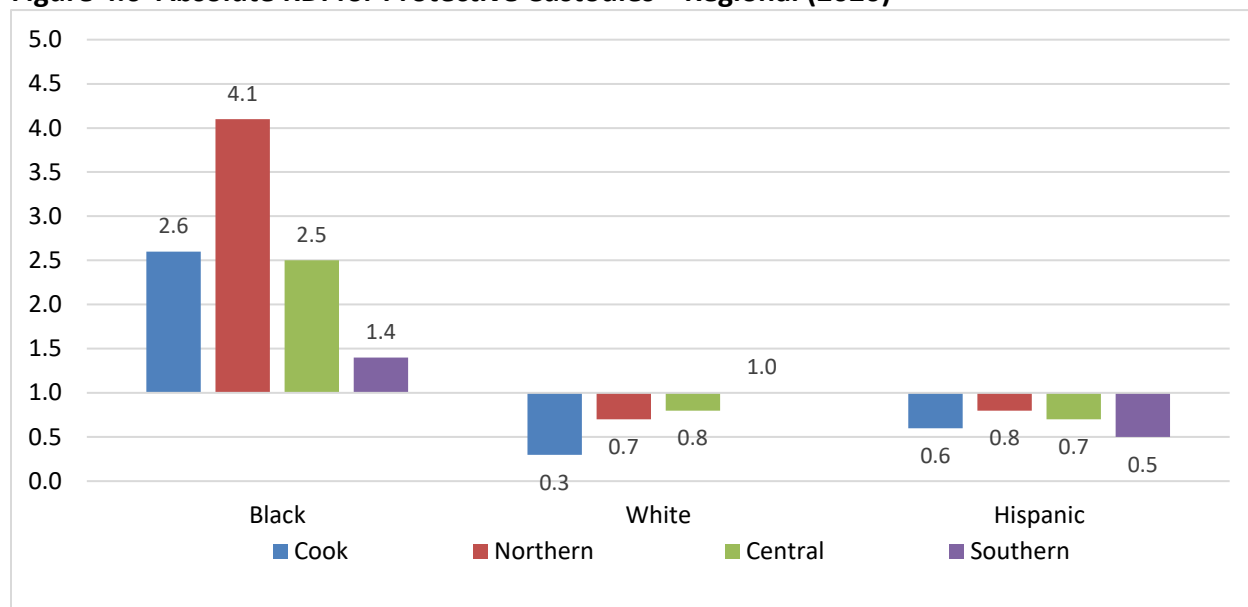
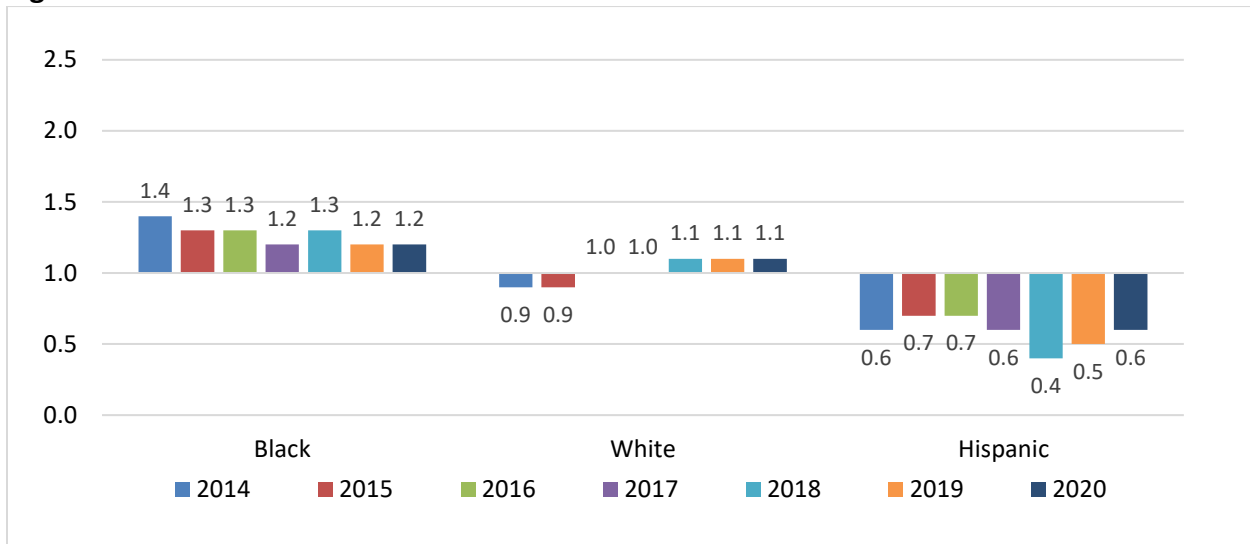
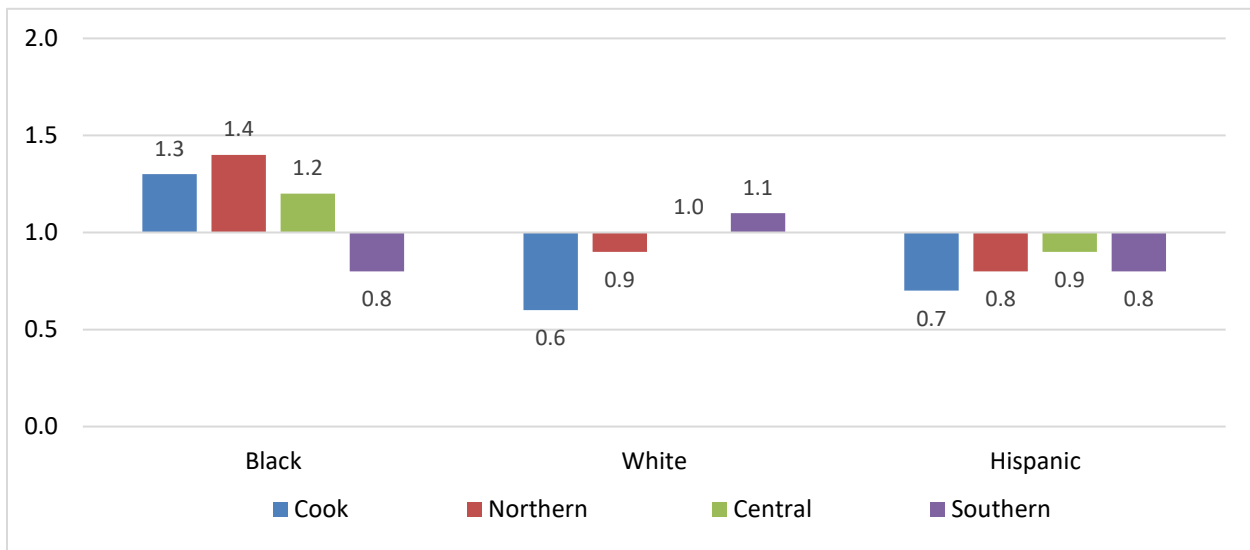
**Figure 4.6 Absolute RDI for Protective Custodies—Regional (2020)**

Figure 4.7 shows the relative RDIs at this decision point for the three racial/ethnic groups over the past seven years. This is the first decision point at which relative RDIs can be calculated. The relative RDI shows the percentage of children taken into protective custody divided by the percentage of children who are investigated. Relative RDIs greater than 1.0 indicate that children in a race/ethnicity group make up a higher percentage of children taken into protective custody than their representation among investigations; relative RDIs less than 1.0 indicate a lower percentage compared to investigations.

Examination of the relative RDI for protective custodies for the three groups at the state level (see Figure 4.7) shows that Black children are more likely to be taken into protective custody compared to the rate at which they are investigated (relative RDIs between 1.2 and 1.4), while Hispanic children are less likely to be taken into protective custody compared to their investigation rates (relative RDIs between 0.4 and 0.7). The relative RDIs for White children are close or equal to 1.0, which indicates that there is little difference in the rates of protective custodies compared to rates of investigation (see Appendix C, Table 4.B.3).

**Figure 4.7 Relative RDI for Protective Custodies—State**

Regional relative RDIs for 2020 protective custodies are shown in Figure 4.8 (see Appendix C, Table 4.B.4). In the Cook (RDI = 1.3), Northern (RDI = 1.4), and Central (RDI = 1.2) regions, relative RDIs indicate over-representation for Black children, while the relative RDI in the Southern region (RDI = 0.8) indicates under-representation at this decision point in 2020. White children in the Cook region are under-represented at this decision point, with relative RDI of 0.6. White children in the other three regions are proportionally represented. Hispanic children in Cook (RDI = 0.7), Northern (RDI = 0.8) and Southern (RDI = 0.8) regions are under-represented in 2020, while Hispanic children in the Central region are more proportionally represented (RDI = 0.9). Due to small numbers of Hispanic children at these decision points in the Central and Southern regions, the relative RDIs for protective custodies for Hispanic children in these regions fluctuated a great deal over the last seven years.

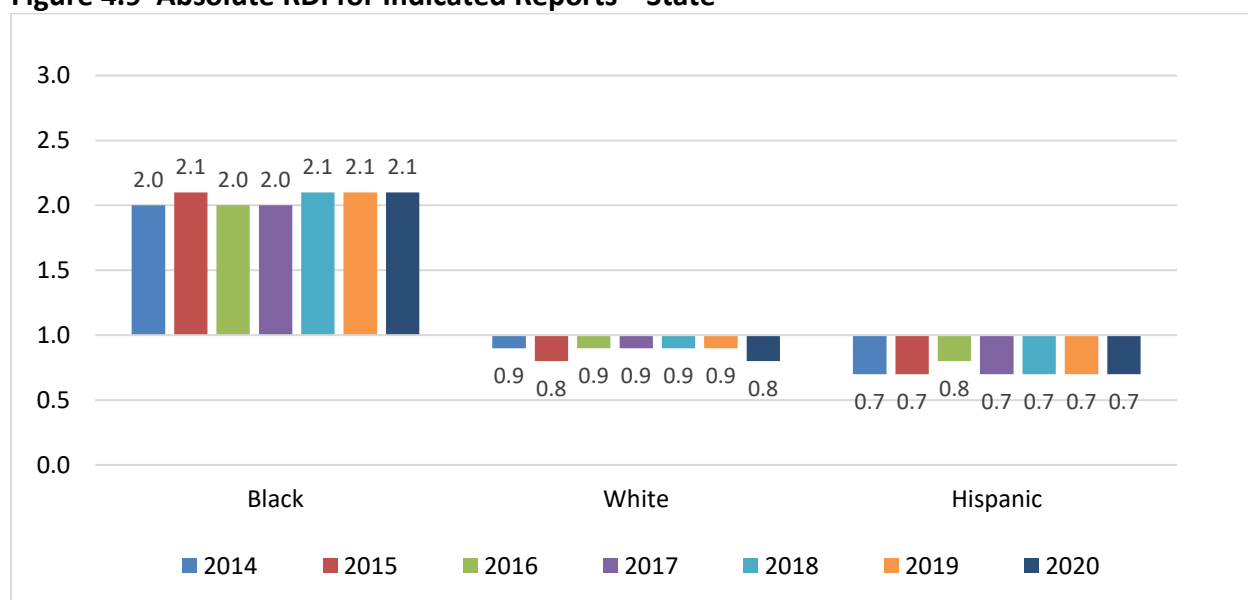
**Figure 4.8 Relative RDI for Protective Custodies—Regional (2020)**

## Indicated Reports

The next decision point examined is indicated maltreatment reports. Reports are indicated when CPS workers find credible evidence that the alleged abuse or neglect occurred.<sup>9</sup> If the allegations are indicated, the perpetrators' names are entered into the State Central Register and remain there for a period of 5 to 50 years, depending on the allegation type.<sup>10</sup>

The absolute RDIs for the three groups at this decision point over the past seven years are shown in Figure 4.9. Black children are consistently over-represented among children with indicated reports, Hispanic children are under-represented, and for most years, White children are proportionately represented (see Appendix C, Table 4.C.1).

**Figure 4.9 Absolute RDI for Indicated Reports—State**



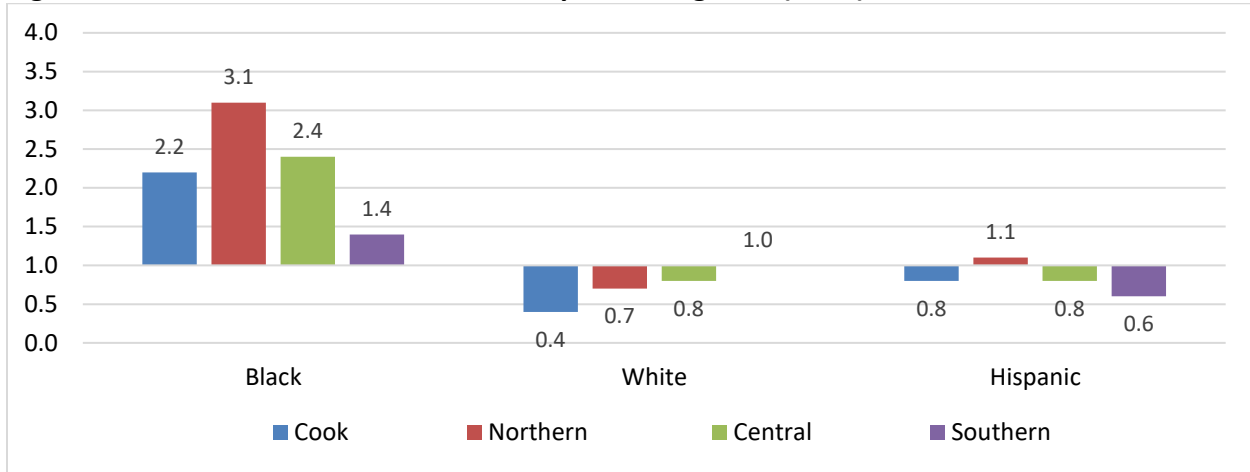
At the regional level (see Figure 4.10 and Appendix C, Table 4.C.2), the Northern region has the highest over-representation of Black children in indicated reports (RDI = 3.1) in 2020, followed by the Central (RDI = 2.4), Cook (RDI = 2.2), and Southern regions (RDI = 1.4). White children are particularly under-represented at this decision point in the Cook region (RDI = 0.4) in 2020. While also under-represented in the Northern (RDI = 0.7) and Central (RDI = 0.8) regions, they are proportionally represented in the Southern region (RDI = 1.0). Hispanic children are under-represented at this decision point in 2020 in the Southern (RDI=0.6), Cook (RDI = 0.8), and

<sup>9</sup> Illinois Department of Children and Family Services. (October, 2015). *Procedures 300 Section 50 Investigative Process*. Springfield: Author. Retrieved from [https://www.illinois.gov/dcf/aboutus/notices/Documents/procedures\\_300.pdf](https://www.illinois.gov/dcf/aboutus/notices/Documents/procedures_300.pdf)

<sup>10</sup> Illinois Department of Children and Family Services. (August, 2002). *Procedures 431 Section 140 Maintenance of Department Records*. Springfield: Author. Retrieved from [https://www.illinois.gov/dcf/aboutus/notices/Documents/procedures\\_431.pdf](https://www.illinois.gov/dcf/aboutus/notices/Documents/procedures_431.pdf)

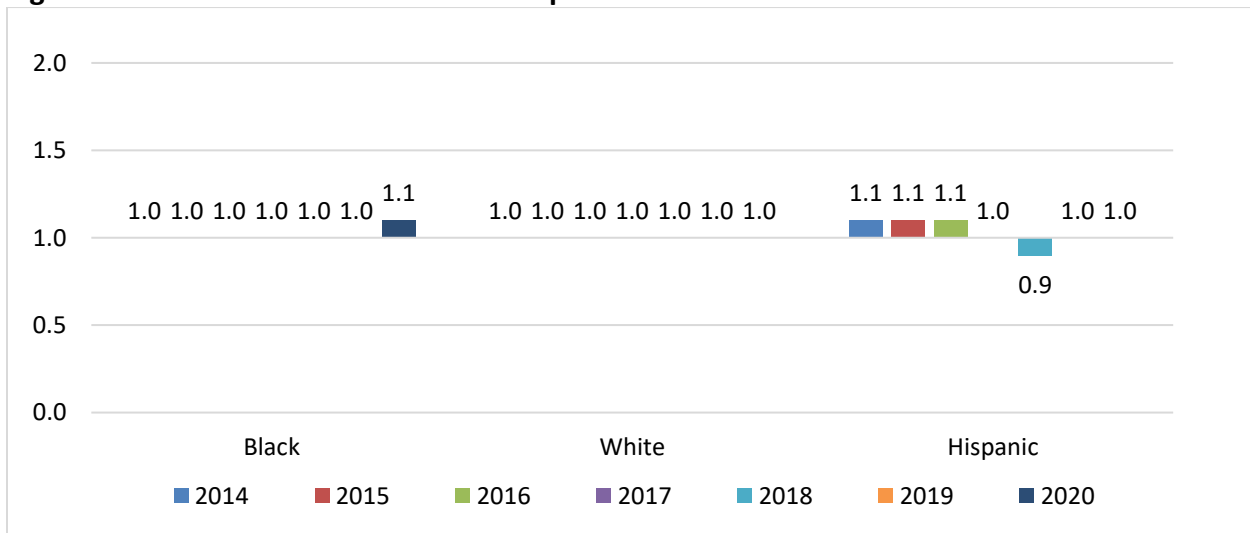
Central (RDI = 0.8) regions, but are proportionally represented in the Northern region (RDI = 1.1).

**Figure 4.10 Absolute RDI for Indicated Reports—Regional (2020)**



The relative RDIs at this decision point were calculated by comparing the percentage of children in indicated reports to the percentage of children in investigated reports. The relative RDIs for the three groups at this decision point over the past seven years are shown in Figure 4.11. At the state level, all three racial groups have relative RDIs at or near 1.0 across the seven years, suggesting that the degree of disproportionality did not increase or decrease at this decision point compared to the previous decision point (see Appendix C, Table 4.C.3). The regional relative RDIs at this decision point (not shown) were also at or near 1.0 for all four regions, with the exception of the Southern region, where, in 2020, Black children are under-represented in indicated reports relative to their proportion in investigated reports (RDI = 0.8) (see Appendix C, Table 4.C.4).

**Figure 4.11 Relative RDI for Indicated Reports—State**



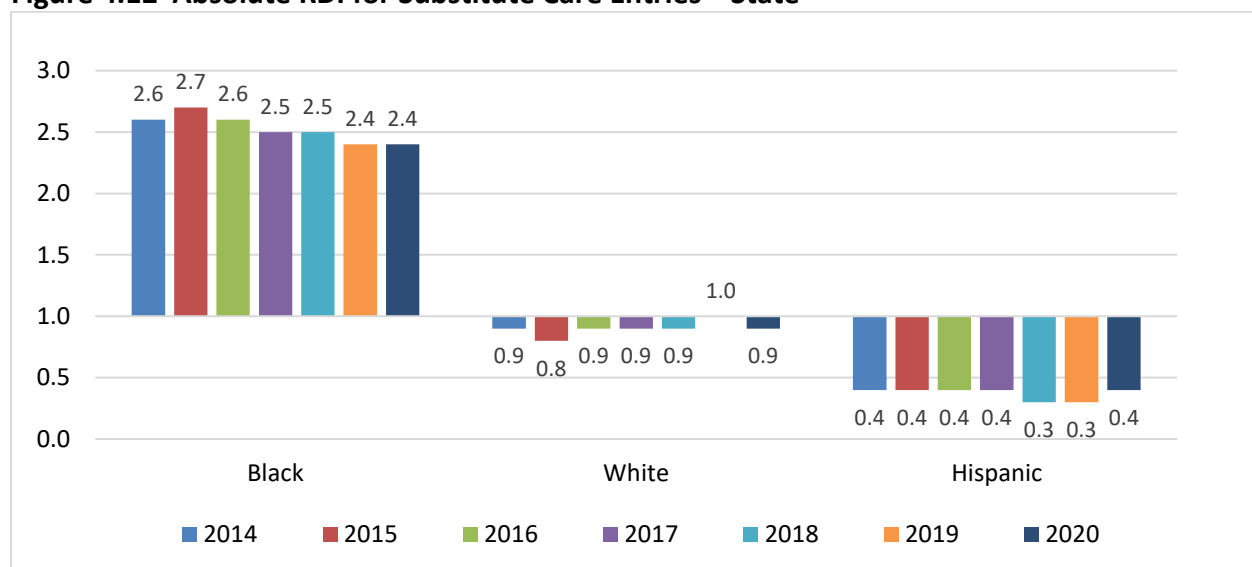
## Post-Investigation Services

The next decisions involve whether or not to provide post-investigation services following an indicated investigation. In Illinois, there are two types of post-investigative services that can be provided by the child welfare system—substitute care and intact family services. If the child welfare worker concludes that "there are safety threats that cannot be controlled or mitigated through the service provision,"<sup>11</sup> the child may be removed and placed into substitute care. In other instances, the worker may decide that it is in the best interest of the child to remain at home while the family receives supportive services in what are known as intact family cases.

### Substitute Care Entries

The absolute RDI for substitute care entries for the three groups over the last seven years are shown in Figure 4.12 (see Appendix C, Table 4.D.1). Black children are placed into substitute care at rates about 2.5 times that of their percentage within the Illinois child population. White children tend to be proportionately represented during these years (RDI = 0.9 or 1.0), but were under-represented in 2015 (RDI = 0.8). Hispanic children are under-represented compared to their percentage in the Illinois child population (RDI = 0.4 or 0.3).

**Figure 4.12 Absolute RDI for Substitute Care Entries—State**



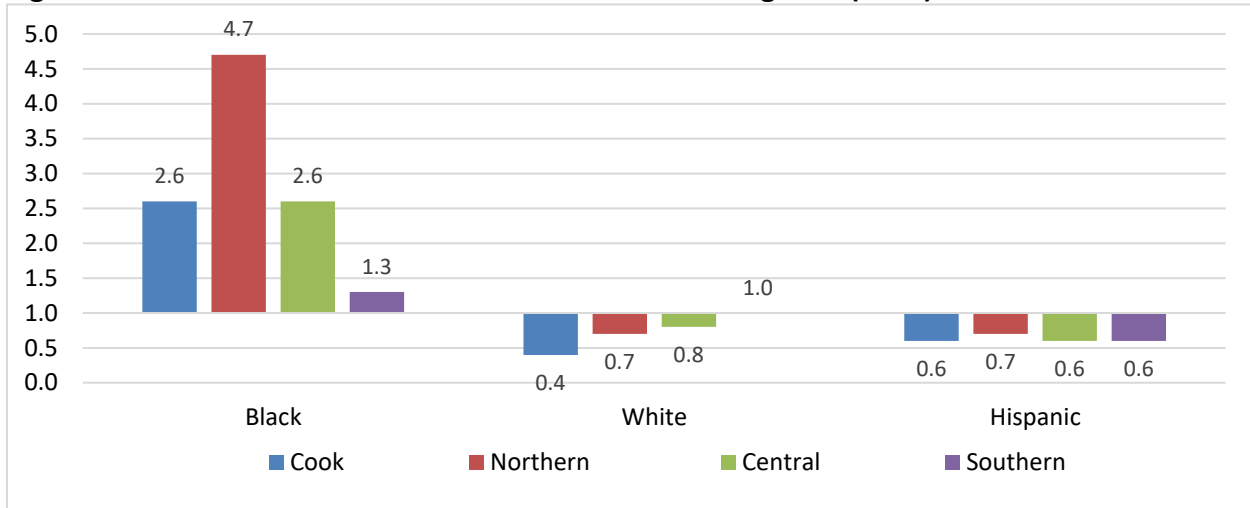
When the absolute RDIs for substitute care entries are examined by region, there are striking differences for Black children (see Figure 4.13 and Appendix C, Table 4.D.2). In 2020, the Northern region has the highest RDI (4.7), followed by Cook and Central (RDI = 2.6), and Southern (RDI = 1.3). The Northern region has had RDIs for Black children in substitute care

<sup>11</sup> Illinois Department of Children and Family Services. (October, 2015). Procedures 300 Section 130 Reports of Child Abuse and Neglect. Springfield: Author. Retrieved from [https://www2.illinois.gov/dcfs/aboutus/notices/Documents/procedures\\_300.pdf](https://www2.illinois.gov/dcfs/aboutus/notices/Documents/procedures_300.pdf)



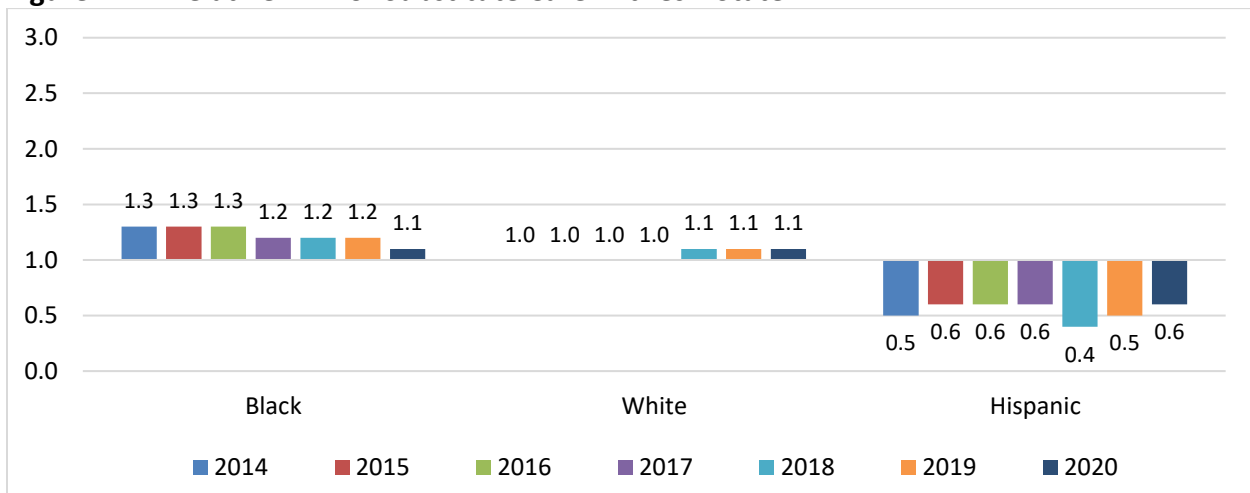
entries that are significantly higher than the other regions for each of the last seven years. White children are especially under-represented in substitute care entries in Cook (RDI = 0.4), and to a lesser degree in the Northern (RDI = 0.7) and Central regions (RDI = 0.8). They are proportionally represented in the Southern region (RDI = 1.0). Hispanic children are under-represented in all regions during 2020 (RDIs = 0.6-0.7).

**Figure 4.13 Absolute RDI for Substitute Care Entries—Regional (2020)**



The relative RDI for substitute care entries at the state level were calculated by comparing the percentage of children entering substitute care to the percentage of children with indicated reports and are shown in Figure 4.14 (see Appendix C, Table 4.D.3). Black children had relative RDIs of 1.2 or 1.3 in 2014-2019, meaning that their removal rate was higher than their indication rate. White children entered substitute care at rates proportional to their representation among indicated reports. The relative RDIs for Hispanic children were between 0.4 and 0.6 for the past seven years, meaning that workers remove Hispanic children from home and place them into substitute care less frequently than their indication rates.

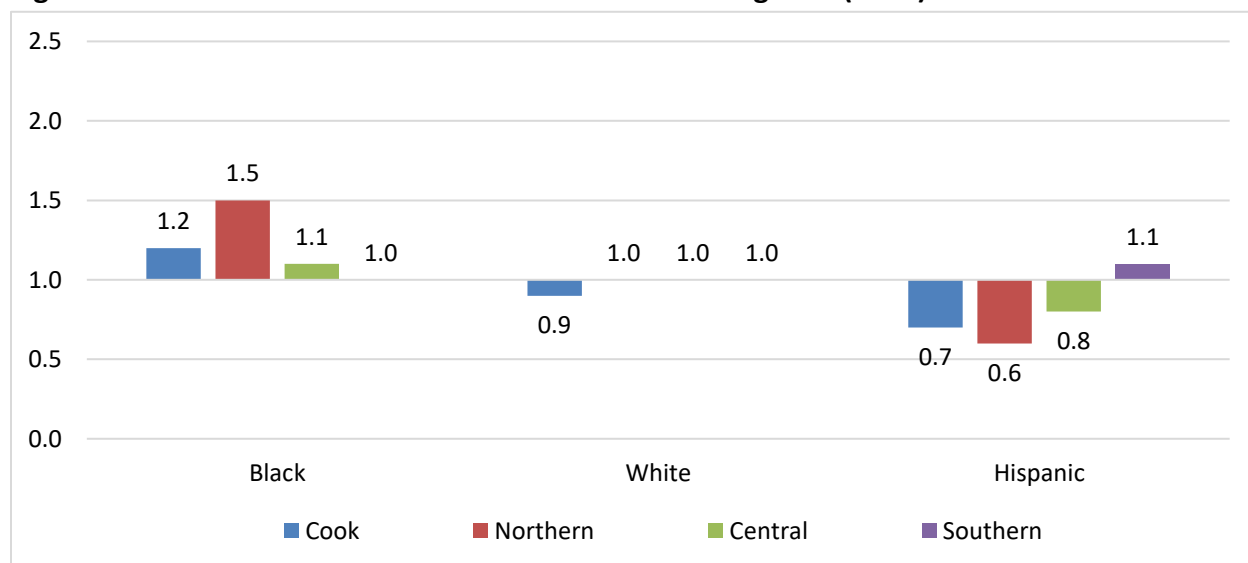
**Figure 4.14 Relative RDI for Substitute Care Entries—State**



## DISPROPORTIONALITY

Regional relative RDIs for 2020 substitute care entries are shown in Figure 4.15. Black children are over-represented among substitute care entries in the Cook (RDI = 1.2) and Northern (RDI = 1.5) regions and are proportionally represented in the Central region (RDI = 1.1) and Southern (RDI = 1.0) regions. In 2020, White children entered substitute care at rates proportional to their representation among indicated reports in all regions. In the Cook region, in the previous six years, White children had been under-represented in substitute care relative to their proportion among indicated reports (RDIs = 0.6-0.8). In 2020, Hispanic children are under-represented in all regions (RDIs = 0.6-0.8) except the Southern region (RDI = 1.1). However, the relative RDI of Hispanic children for this decision point in the Southern region fluctuated considerably over the previous six years (RDIs = 0.5-1.4), most likely due to the small numbers of Hispanic children entering substitute care in this region each year (see Appendix C, Table 4.D.4).

**Figure 4.15 Relative RDI for Substitute Care Entries—Regional (2020)**



### ***Intact Family Services***

Figure 4.16 shows the absolute RDI for children receiving intact family services 2014-2020 (see Appendix C, Table 4.E.1). The pattern is similar to other decision points, with Black children over-represented, Hispanic children under-represented, and White children proportionately represented.

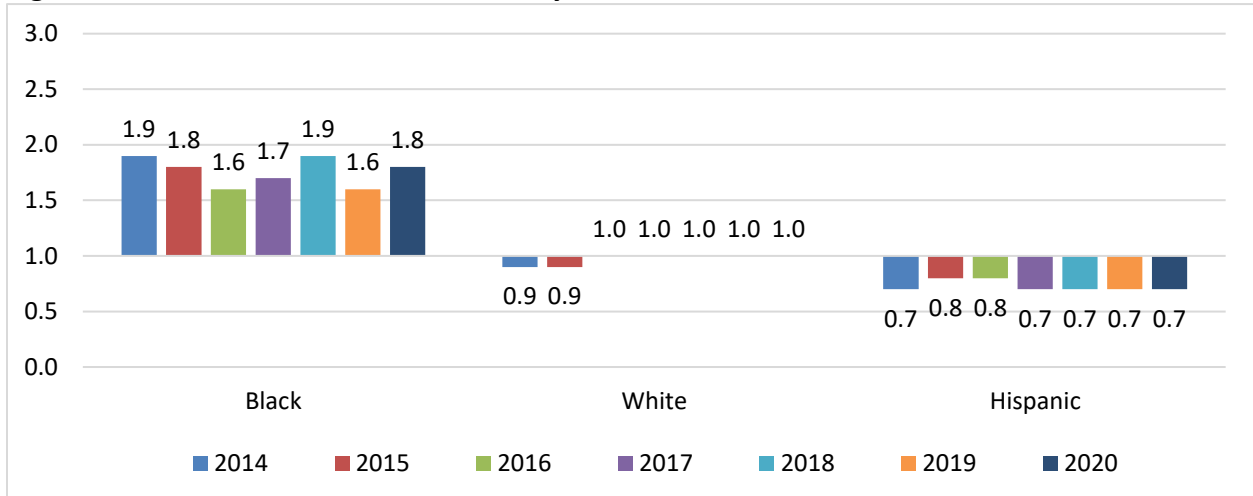
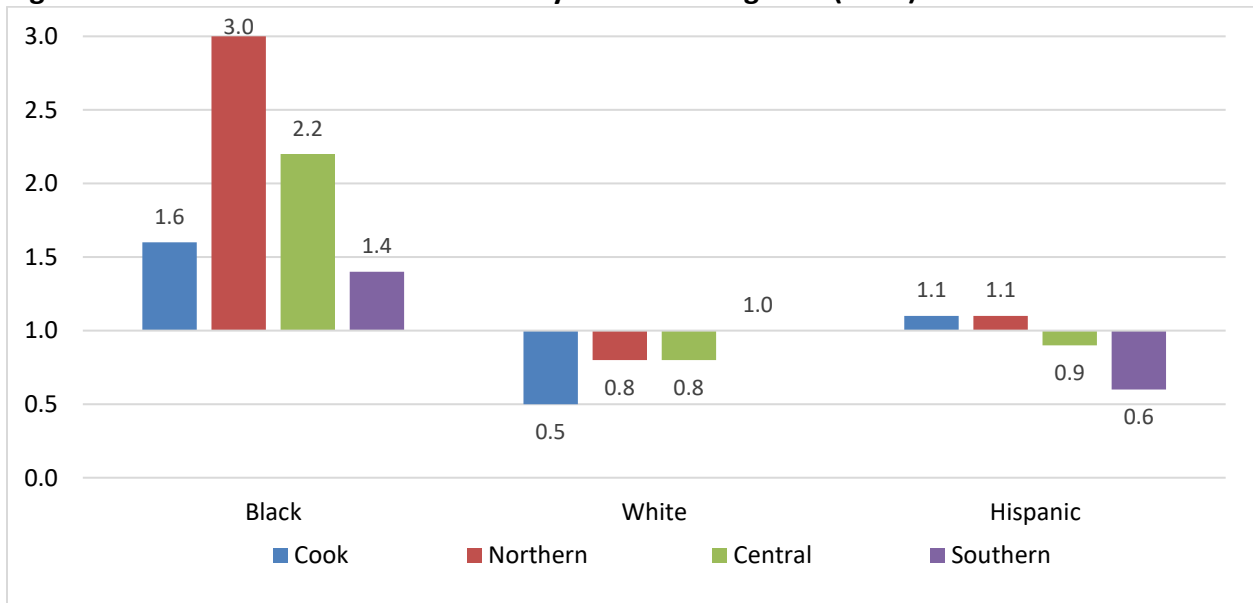
**Figure 4.16 Absolute RDI for Intact Family Services—State**

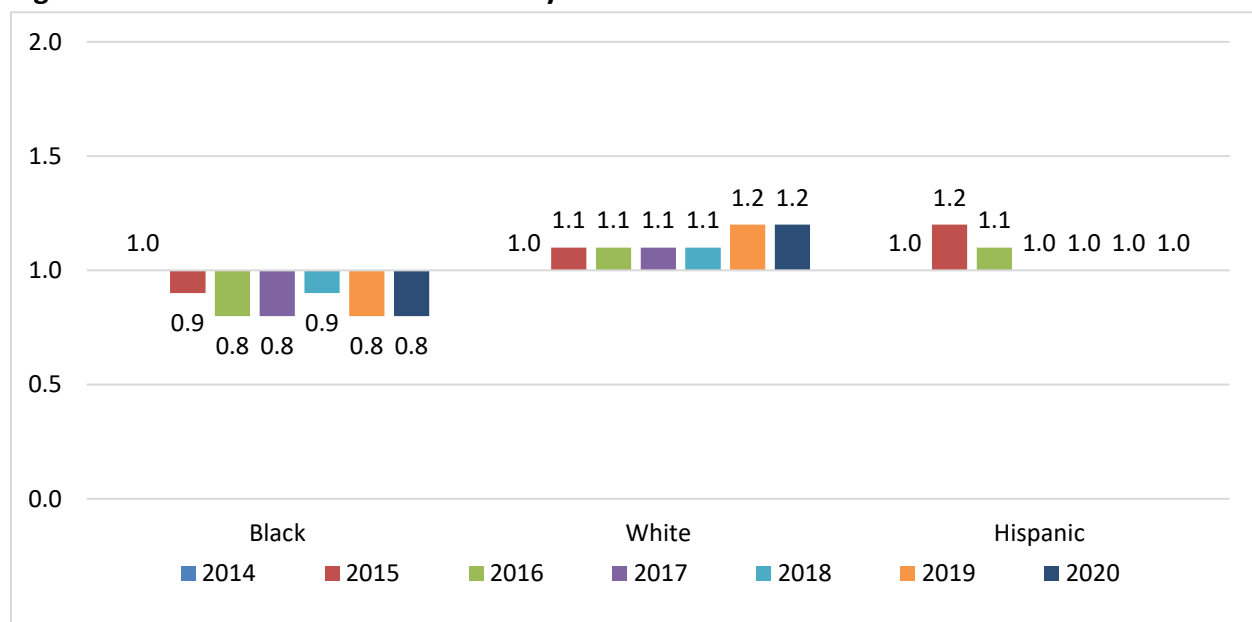
Figure 4.17 shows the 2020 absolute RDI for intact family services for each of the DCFS regions. The RDI for Black children, showing over-representation in all regions, is largest in the Northern region (RDI = 3.0) and smallest in the Southern region (RDI = 1.4). White children are under-represented in all regions, except Southern, where they are proportionally represented. In 2020, Hispanic children are proportionally represented in the Cook, Northern, and Central regions, and under-represented in the Southern region (RDI = 0.6). Over the previous six years, the absolute RDI for Hispanic children in the Central region indicated under-representation (RDIs = 0.5-0.7) (see Appendix C, Table 4.E.2 for seven year data).

**Figure 4.17 Absolute RDI for Intact Family Services—Regional (2020)**

## DISPROPORTIONALITY

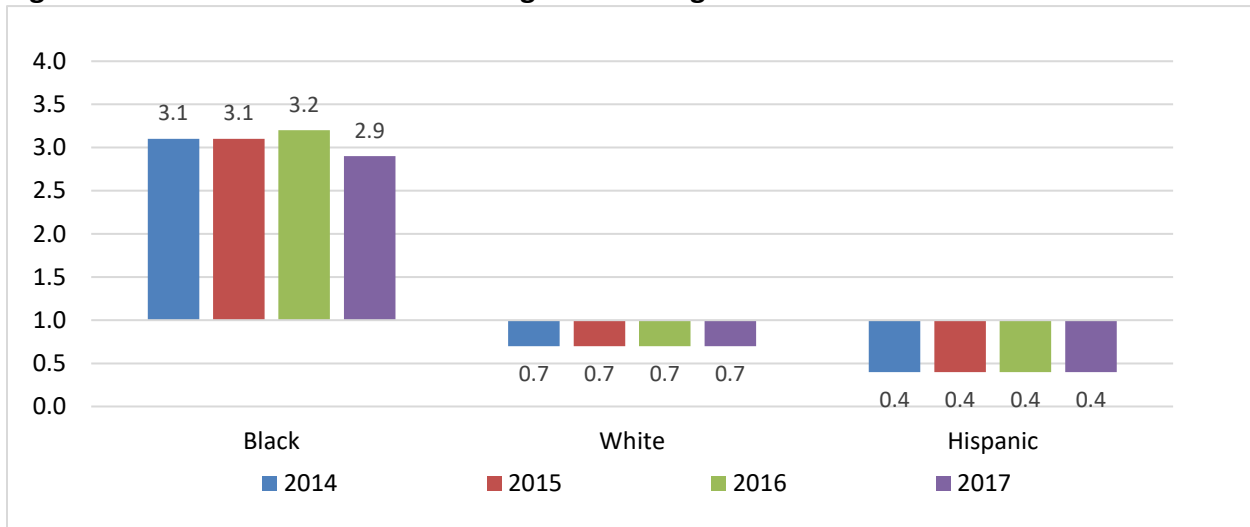
Figure 4.18 shows relative RDI for receipt of intact family services at the state level, which was calculated by comparing the percentage of children receiving intact family services to the percentage of children with indicated maltreatment reports. The relative RDIs for intact family services for White and Hispanic children vary between 1.0 and 1.2 over the past seven years. This means that children in these racial and ethnic groups were provided with intact family services at rates equal to or higher than the rates at which they were indicated for maltreatment. However, Black children were under-represented among those receiving intact family services relative to those with indicated maltreatment reports (see Appendix C, Table 4.E.3). The data on the regional relative RDI for intact family services (see Appendix C, Table 4.E.4) show that the under-representation for Black children occurs primarily in the Cook and Southern regions of the state.

**Figure 4.18 Relative RDI for Intact Family Services—State**

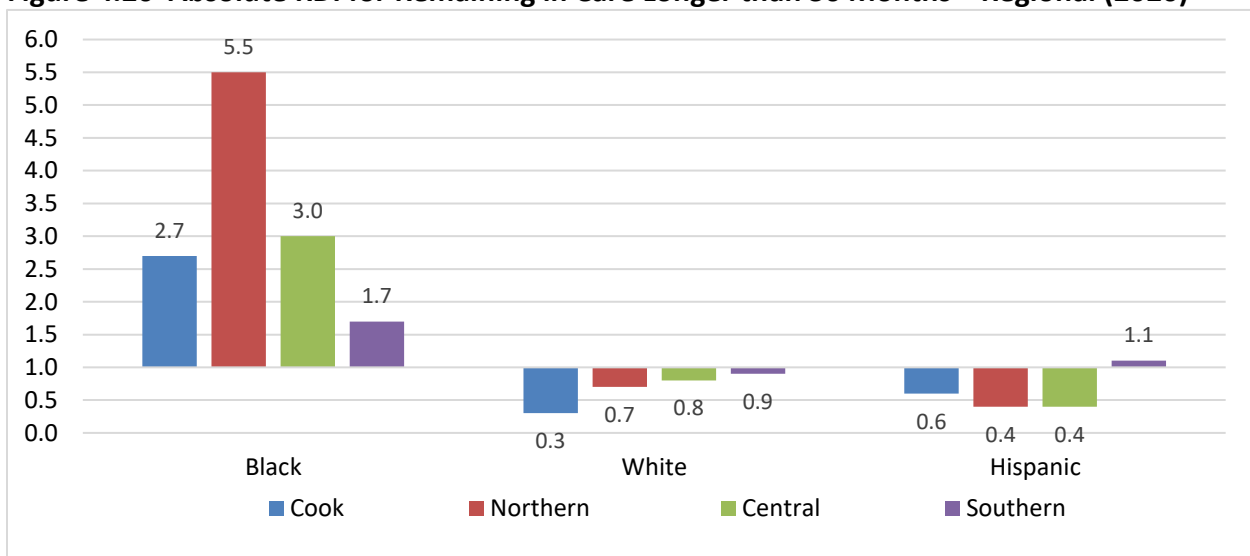


## Substitute Care Exits

The final decision point examined is substitute care exits. When children are removed from their families and placed into substitute care, the goal is for them to safely exit substitute care as soon as possible, either through reunification with their biological caregivers, adoption, or guardianship. A sizeable percentage of children remain in substitute care for long periods of time in Illinois, and this indicator examines the percentage of children in each racial group that remain in substitute care for more than three years. When the absolute RDIs are examined at this stage, Black children are over-represented, with RDIs around 3.0. Both White (RDIs = 0.7) and Hispanic (RDIs = 0.4) children are under-represented (see Figure 4.19 and Appendix C, Table 4.F.1).

**Figure 4.19 Absolute RDI for Remaining in Care Longer than 36 Months—State**

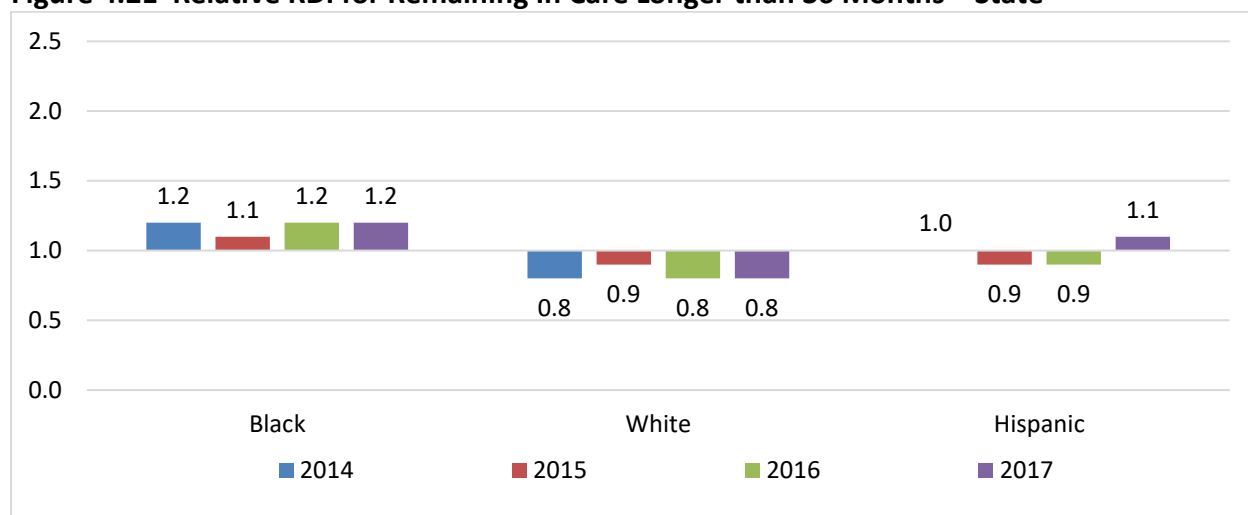
The regional patterns for the absolute RDI are shown in Figure 4.20 (see Appendix C, Table 4.F.2). Disproportionality for Black children in the Northern region is very high, five and a half times their proportion in the general population (RDI = 5.5). Black children are also over-represented among children remaining in substitute care for more than 36 months in the Central (RDI = 3.0), Cook (RDI = 2.7), and Southern (RDI = 1.7) regions. White children are under-represented among children in care longer than 36 months in the Cook, Northern, and Central regions, and are proportionally represented in the Southern region. Hispanic children are under-represented in the Cook, Northern, and Central regions but proportionately represented in the Southern region in 2020. However, the RDI for Hispanic children for this decision point in the Southern region fluctuated greatly from year-to-year due to small numbers (RDIs = 0.2 - 1.1).

**Figure 4.20 Absolute RDI for Remaining in Care Longer than 36 Months—Regional (2020)**

## DISPROPORTIONALITY

The relative RDI for this indicator examines the percentage of children in each racial group that remain in substitute care for more than three years compared to the percentage of children in the same racial group that entered substitute care. When examining these relative RDIs at the state level (see Figure 4.21 and Appendix C, Table 4.F.3), Black children are disproportionately over-represented among the children who stayed in care for longer than 36 months (RDI = 1.2 for children who entered care in 2017). White children are under-represented (RDI = 0.8 for children who entered care in 2017) and Hispanic children are proportionally represented (RDI = 1.1) at this decision point. Examination of the regional relative RDIs show proportional representation across regions with few exceptions that are most likely due to the small numbers of Hispanic children in substitute care (see Appendix C, Table 4.F.4).

**Figure 4.21 Relative RDI for Remaining In Care Longer than 36 Months—State**



## Discussion and Conclusions: Racial and Ethnic Disproportionality

This chapter examines racial and ethnic disproportionality in the Illinois child welfare system at decision points where children in a particular racial/ethnic group may be disproportionately represented compared to the representation in the general population or at a previous decision point. By doing so, we can begin to identify decision points in the child welfare system where over- or under-representation may become magnified. These decision points may then serve as a starting point for efforts to root out racial biases—be they implicit, explicit, or institutional—that harm children.

We examined racial and ethnic disproportionality in two ways. Absolute racial disproportionality indices were calculated that compared children's percentages at child welfare decision points with their corresponding percentage in the Illinois child population. The results of these analyses found that, compared to their percentage in the general child population, Black children were over-represented and Hispanic children were under-represented at every decision point in the child welfare system over the past seven years; White children, in contrast, were proportionally represented. Regional analysis indicates that

the highest rate of disproportionality for Black children occurs in the Northern region; RDIs are lower in the Southern region at most decision points. The over-representation among Black children in the child welfare system is particularly high for children who remain in substitute care more than 3 years; the percentage of Black children who remain in care longer than 3 years is almost 3 times their percentage in the Illinois child population.

Relative RDIs examine the representation of a particular racial/ethnic group at one decision point compared to a prior, relevant decision point. When relative RDIs were examined in Illinois for the three racial/ethnic groups, analyses indicated that disproportionality was exacerbated among Black and Hispanic children at the protective custody and substitute care entry decision points: Black children became more over-represented and Hispanic children under-represented. Disproportionality also increased for Black children at the substitute care exit decision; the percentage of Black children that remained in care longer than 3 years was even larger than the percentage of Black children that entered care.

In contrast to the consistent pattern of over-representation of Black children in the Illinois child welfare system, the relative RDI analysis shows that Black children are under-represented among children who receive intact family services compared to their representation among children with indicated reports. In other words, the proportion of Black children who receive intact family services is smaller than the proportion of Black children with indicated reports. In contrast, White and Hispanic children are either slightly over-represented or are proportionately represented among children receiving intact family services when compared to their representations among children with indicated reports. The fact that Black children are over-represented among substitute care entries but under-represented among intact family service case openings suggests that DCFS staff decision-making at investigation conclusion and case opening deserves additional scrutiny.

Both over-representation and under-representation could result from unfair treatments or uneven resource allocations against a specific racial or ethnic group. One of the goals in the DCFS strategic plan is to eliminate racial/ethnic disparity through implementing the Family Focused, Trauma Informed, and Strengths Based (FTS) Illinois Core Practice Model in communities.<sup>12</sup> Careful tracking of RDIs over time can inform any improvement in the Department's efforts in this important area.

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<sup>12</sup> Illinois Department of Children and Family Services. (January, 2017). *Illinois Child Welfare Transformation: 2016-2021*. Springfield, IL: Author. Retrieved from [https://www2.illinois.gov/dcf/aboutus/newsandreports/documents/2016-2021\\_illinois\\_childwelfare\\_transformation\\_strategic\\_plan\\_final.pdf](https://www2.illinois.gov/dcf/aboutus/newsandreports/documents/2016-2021_illinois_childwelfare_transformation_strategic_plan_final.pdf)







## Chapter 5

# Child Well-Being

Theodore P. Cross, Steve P. Tran, Eliza Betteridge, Robert Hjertquist,  
Tawny Spinelli, Jennifer Prior, Neil Jordan, and Soonhyung Kwon

Studies across the country have found that 40% to 60% of children and youth in substitute care have significant behavioral or emotional problems.<sup>1</sup> The 2017 Illinois Child Well-Being Study also found a high rate of behavioral and emotional problems among Illinois children in substitute care—see the study final report,<sup>2</sup> a research brief on the issue,<sup>3</sup> and the well-being chapter in FY2019 *B.H. Monitoring Report*.<sup>4</sup> In this chapter, we explore the identification of behavioral and emotional needs in the Integrated Assessment (IA), which is a nationally recognized DCFS program<sup>5</sup> that provides comprehensive family assessments for children entering substitute care. As part of the IA, a screener completes the Child and Adolescent Needs and Strengths (CANS) scale, a structured tool to assess children and families' needs and

<sup>1</sup> Bronsard, G., Alessandrini, M., Fond, G., Loundou, A., Auquier, P., Tordjman, S., & Boyer, L. (2016). The prevalence of mental disorders among children and adolescents in the child welfare system: A systematic review and meta-analysis. *Medicine*, 95(7). Burns, B. J., Phillips, S. D., Wagner, H. R., Barth, R. P., Kolko, D. J., Campbell, Y., & Landsverk, J. (2004). Mental health need and access to mental health services by youths involved with child welfare: A national survey. *Journal of the American Academy of Child and Adolescent Psychiatry*, 43(8), 960-970.

<sup>2</sup> Cross, T.P., Tran, S., Hernandez, A., & Rhodes, E. (2019). *The 2017 Illinois Child Well-Being Study: Final Report*. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign.  
[https://cfrc.illinois.edu/pubs/rp\\_20190619\\_2017IllinoisChildWell-BeingStudy.pdf](https://cfrc.illinois.edu/pubs/rp_20190619_2017IllinoisChildWell-BeingStudy.pdf)

<sup>3</sup> Tran, S.P., Cross, T.P. & Kwon, S. (2020). *The emotional and behavioral health of school-age children and youth in DCFS care: Findings from the 2017 Illinois Child Well-Being Study*. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign.

[https://cfrc.illinois.edu/pubs/bf\\_20200914\\_TheEmotionalandBehavioralHealthofSchool-AgeChildrenandYouthinDCFSCare:Findingsfromthe2017IllinoisChildWell-BeingStudy.pdf](https://cfrc.illinois.edu/pubs/bf_20200914_TheEmotionalandBehavioralHealthofSchool-AgeChildrenandYouthinDCFSCare:Findingsfromthe2017IllinoisChildWell-BeingStudy.pdf)

<sup>4</sup> Fuller, T., Nieto, M., Wang, S., Adams, K.A., Wakita, S., Tran, S., Chiu, Y. Braun, M., Cross, T.P., Lee, L., Burnett, A., & Meyer, H. (2019). *Conditions of children in or at risk of foster care in Illinois: FY2019 Monitoring Report of the B.H. Consent Decree*. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign.

<sup>5</sup> Children's Bureau (2010). *Illinois' Integrated Assessment Process*. Children's Bureau Express.  
<https://cbexpress.acf.hhs.gov/index.cfm?event=website.viewArticles&issueid=114&sectionid=3&articleid=2826>

strengths. In this chapter, we present the results of a study that examined whether there is an association between a child's score on the IA CANS and later behavioral and emotional needs in care and the services they receive. We also examine whether the identification of behavioral and emotional needs at entry into substitute care is still relevant when children and youth have been in care for long periods of time. The results speak to the validity of the IA and help illuminate the ongoing behavioral and emotional problems of many Illinois children in substitute care. The chapter is adapted from a recent article we published in a peer-reviewed journal.<sup>6</sup>

IA screens for a range of different needs, including need for behavioral health services.<sup>7</sup> For each case, an IA clinician known as a screener works with the child's caseworker and other members of the child protection team. The screener conducts developmental screenings and teams with the caseworker to gather and integrate this clinical information with information provided by other professionals involved in the case. The team writes an IA report that details the child and family's needs and strengths, discusses the underlying conditions and risk factors that led to DCFS involvement, identifies child and family strengths and supports, and recommends interventions. The team completes the IA CANS, which informs case decision-making, service planning, and outcomes management.<sup>8</sup> Caseworkers are expected to complete the CANS every six months the child is in care. This is the first study that relates the IA CANS behavioral and emotional needs data to other measures of behavioral and emotional needs collected when children and youth were in substitute care.

## Methods

### ***CANS Data***

One data source was CANS data collected from a children's baseline Integrated Assessments that were conducted between November 2005 and November 2017. The Mental Health Services and Policy Program at the Northwestern University Feinberg School of Medicine maintains a database of CANS data for DCFS. The DCFS CANS 2.0 used in IA includes 139 items that assess a wide array of child and family needs and strengths. For most individual items measuring children's needs, the screener chooses one of the following ratings: 0 = No evidence (no need for action); 1 = Watchful waiting, prevention (efforts are needed to monitor this need or engage in activities to ensure that it does not become worse); 2 = Action required (the need is interfering in a notable way with the child's or family's life, and something should be done); and 3 = Immediate or intensive action required (the need is dangerous or disabling and a

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<sup>6</sup> Cross, T.P. Tran, S.P., Betteridge, E., Hjertquist, R., Spinelli, T., Prior, J. & Jordan, N. (2021). The relationship of needs assessed at entry into out-of-home care to children and youth's later emotional and behavioral problems in care. *Children and Youth Services Review*. Advanced online publication. 105896

<sup>7</sup> Smithgall, C., Jarpe-Ratner, E., Gnedko-Berry, N., & Mason, S. (2015). Developing and testing a framework for evaluating the quality of comprehensive family assessment in child welfare. *Child Abuse & Neglect*, 44, 194-206.

<sup>8</sup> Lyons, J. S., Small, L., Weiner, D. A., & Kisiel, C. (2008). *Child and Adolescent Needs and Strengths: Illinois Department of Children and Family Services (Version 2.0)*. Chicago, IL: Buddin Praed Foundation.

priority for intervention). A score of 2 or 3 indicates a need that should be addressed in a service plan. For this chapter, we analyzed the IA CANS Behavioral/Emotional Needs domain score. This represented the highest IA CANS score on the following CANS items: Psychosis, Attention Deficit/Impulse Control, Depression, Anxiety, Oppositional Behavior, Conduct, Substance Abuse, Attachment Difficulties, Eating Disturbance, Affect Dysregulation, Behavioral Regression, Somatization, and Anger Control.<sup>9</sup>

### ***Well-Being Study Data***

A second source of data was the 2017 Illinois Child Well-Being Study, which examined a range of well-being domains, including child development, physical health, emotional and behavioral health, education, safety, experiences of substitute care, and resilience. The Survey Research Laboratory of the University of Illinois at Chicago collected data through interviews from December 2017 to July 2018. The study used a stratified random sample design and included 700 children and youth who were in care on October 23, 2017. Thus, this was a point-in-time study and not a cohort study. This means that children and youth in the sample had entered substitute care at different times and varied in their length of time in care. Interviews were conducted with caseworkers, caregivers, and children and youth age 7 or older. Stratified random sampling was used to ensure that enough cases of children and youth in different age groups and with different lengths of care were adequately represented. The sample was weighted with simple post-stratification weights that adjusted the sample distribution of age by year based on the population distribution of age by years in care. Caseworker interviews were completed for 527 cases (response rate = 80.9%), caregiver interviews were completed for 381 cases (response rate = 62.4%), and child interviews were completed for 145 cases (response rate = 48.7%). We combined the data from the two sources, the IA CANS data file and the 2017 Child Well-Being Study, into a single analysis file.

For the work presented in this chapter, we used several measures from the 2017 Illinois Child Well-Being Study. One was the Total Problem Score from the Child Behavior Checklist (CBCL), a measure in which caregivers rate a checklist of 113 items measuring emotional or behavioral problems children and youth might have. Caregivers rate each item on a 3-point scale (0 = not true, 1 = somewhat or sometimes true, 2 = very true or often true), in reference to the child's behavior in the previous six months. The CBCL has cut-off scores for the total score that identify children and youth who need mental health interventions (clinical range) or may need them (borderline clinical range).

A second measure was a caregiver report of child emotional and behavioral problems. In the caregiver interview of the Well-Being Study, caregivers were read a list of different mental health or emotional problems children and youth might have, including attention deficit disorder, depression, bipolar or extreme mood swings, conduct or behavioral problem, oppositional or defiant disorder, extreme stress from abuse or neglect, attachment problems

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<sup>9</sup> For results for other CANS variables, see Cross et al. (2021), *ibid.*, which can be requested by email from Dr. Cross at [tpcross@illinois.edu](mailto:tpcross@illinois.edu).

with caregivers, eating disorders, sexually aggressive behaviors, alcohol or substance abuse, and other emotional or behavioral health problems. From this set of problems, we constructed a yes/no variable that represented whether the caregiver identified the child as currently having *any* of these problems.

Caregivers were also asked if their child was currently receiving emotional or behavioral health services. A separate yes/no question was asked about each of the following services: counseling, group therapy, in-school therapeutic services, self-esteem/anger management classes, outpatient psychiatry, outpatient psychiatric care, inpatient psychiatric care, tutoring, mentoring, and crisis intervention. We created a yes/no variable representing whether their child was currently receiving any of these services. When caregivers answered yes to the question of whether their child had a specific emotional or behavioral problem (see above), the interviewer also asked a follow-up question about whether the child had been prescribed medication for that problem. From this set of questions, we created a yes/no variable about whether the caregiver said that the child had been prescribed medication for any emotional or behavioral problem.

We calculated the amount of time children and youth had been in substitute care. The time in substitute care ranged from less than 1 year to 16 years, and the weighted median length of time in care was 1.71 years (i.e., half the sample had been in care for less than 1.71 years, and half for more than 1.71 years).<sup>10</sup>

## Results

### ***Behavioral and Emotional Needs of Children and Youth at Entry into Substitute Care***

We had IA data for the CANS Behavioral and Emotional Needs Domain Score on 214 children and youth. Only a small percentage (2.2%) had a CANS score of 3 indicating a need for immediate/intensive action, but 26.9% had a CANS score of 2 indicating a need for action, though somewhat less urgent. Almost half of the sample (44.7%) had a CANS score of 1, indicating a need for “watchful waiting” and effort to prevent more serious problems. Just 26.2% had no evidence of behavioral or emotional needs and no need for action.

### ***Behavioral and Emotional Needs of Children While in Substitute Care***

According to their caregivers, many children and youth had emotional and behavioral needs while in substitute care. On the CBCL for children and youth age 6 to 18 years, 41.5% scored in the clinical or borderline clinical range, which indicates a likely need for treatment. More than half of caregivers (62.3%) reported their child had at least one emotional/behavioral problem and about the same percentage (60.0%) were receiving a behavioral health service. Over a fifth (20.7%) of children and youth were currently taking psychiatric medication for emotional and behavioral problems.

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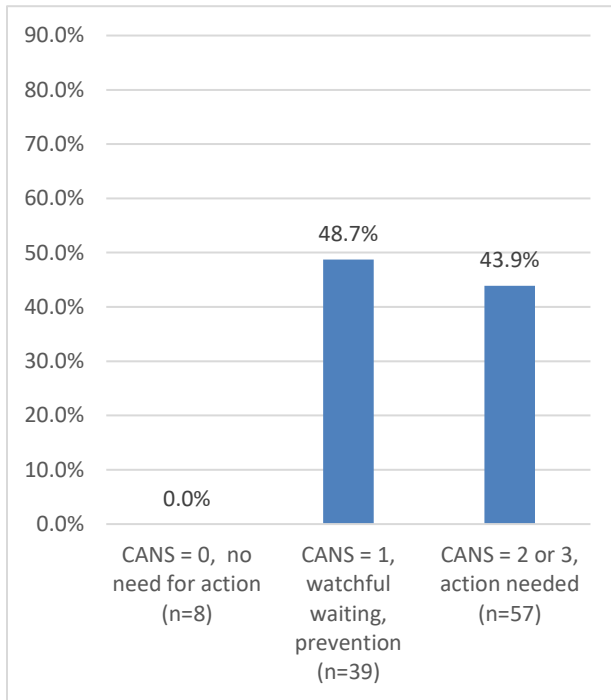
<sup>10</sup> The unweighted median for length of time of care was 2.64 years; see Cross et al. (2021), *ibid*.

***Relationships Between Needs at Entry and Needs While in Care***

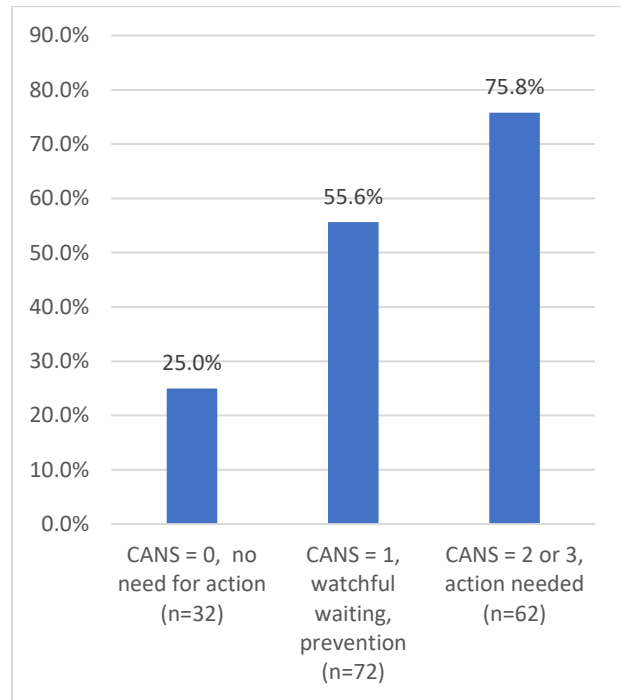
We examined whether the behavioral and emotional needs identified in the IA CANS at children and youth's entry into substitute care was associated with their behavioral and emotional needs while they were in care. The CANS Behavioral-Emotional Needs score at entry into care was significantly related to children later being in the borderline clinical or clinical range on the CBCL ( $\chi^2 (1)=6.58, p=.040$ ). As Figure 5.1 shows, 48.7% of children and youth given an IA CANS score of 1 (watchful waiting) and 43.9% of those with an IA CANS score of 2 or 3 (action needed) later scored in the borderline clinical or clinical range on the CBCL. None of the 8 children or youth who were given a score of 0 on the IA CANS (no action needed) scored in the borderline clinical or clinical range on the CBCL. The IA CANS was associated with whether caregivers reported that their child had one or more behavioral or emotional problems while they were in care [ $\chi^2 (1)=22.40, p<.001$ , see Figure 5.2]: 55.6% of children with IA CANS of 1 and 75.8% of children with IA CANS of 2 or 3 had a behavioral or emotional problem while in care. In contrast, only 25% of youth with IA CANS of 0 were identified by their caregivers as having a behavioral or emotional problem while in care.

The IA CANS also was associated with whether a child or youth later received behavioral health services ( $\chi^2 (1)=33.65, p<.001$ ) and whether they later received psychiatric medication ( $\chi^2 (1)=10.21, p=.006$ ). Only 25% of children with an IA CANS behavioral or emotional needs score of 0 received a behavioral health service while they were in care, compared to 63.4% of children and youth with an IA CANS score of 1 and 85.5% of children and youth with an IA CANS score of 2 to 3 (see Figure 5.3). Only 3.1% of children and youth with an IA CANS score of 0 later received psychiatric medication, compared to 18.3% of children and youth with an IA CANS score of 1 and 30.6% of children and youth with an IA CANS score of 2 to 3 (see Figure 5.4).

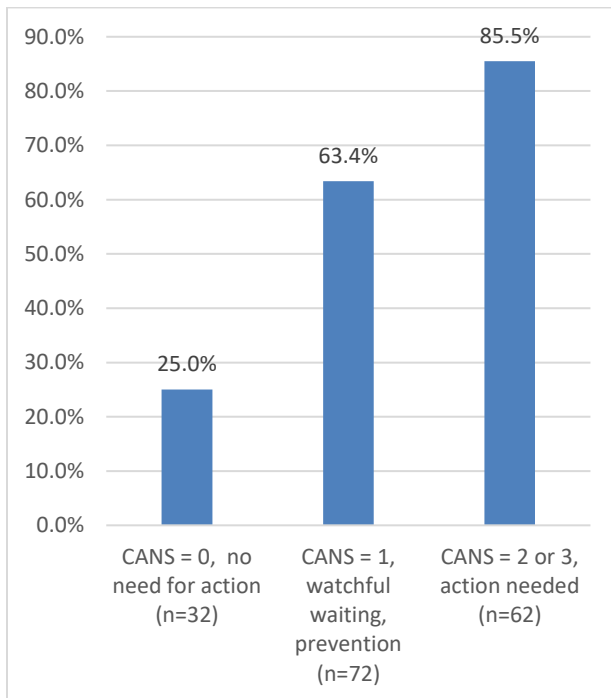
**Figure 5.1 CBCL Total Score in Borderline Clinical or Clinical Range by IA CANS Behavioral-Emotional Need Score**



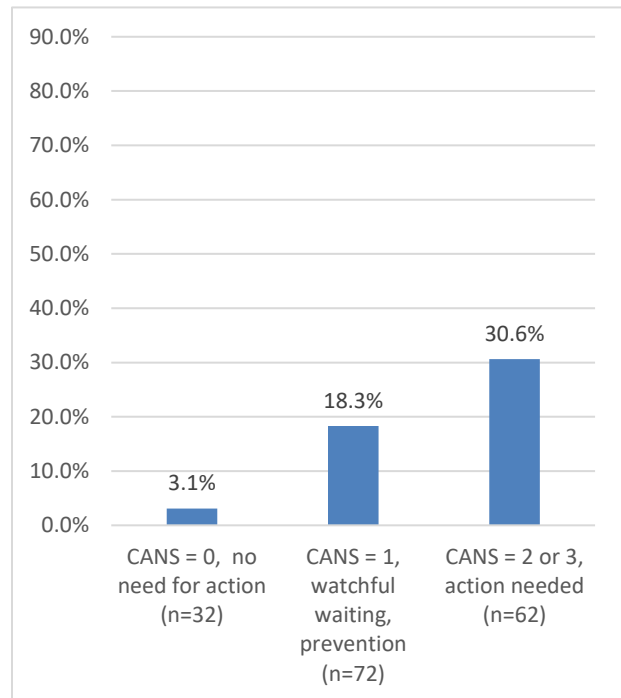
**Figure 5.2 Caregiver Perception of Child Emotional/Behavioral Need by IA CANS Behavioral-Emotional Need Score**



**Figure 5.3 Children Receiving a Behavioral Health Service by IA CANS Behavioral-Emotional Need Score**



**Figure 5.4 Children Receiving Psychiatric Medication by IA CANS Behavioral-Emotional Need Score**



### ***Relationship Between Need at Entry and During Substitute Care by Length of Time in Care***

We assessed whether the relationship between having behavioral and emotional needs at entry into substitute care (as measured by the IA CANS) and behavioral and emotional needs during children and youth's stay in care (as measured by the Well-Being Study) differed depending on the amount of time they had been in substitute care. We hypothesized that the IA CANS would have a stronger relationship with the needs of children and youth who had been in care for a short period than for children and youth who had been in care for a long period. If children had been in a care a long time, their need might have decreased because of the services and support they received earlier in care.

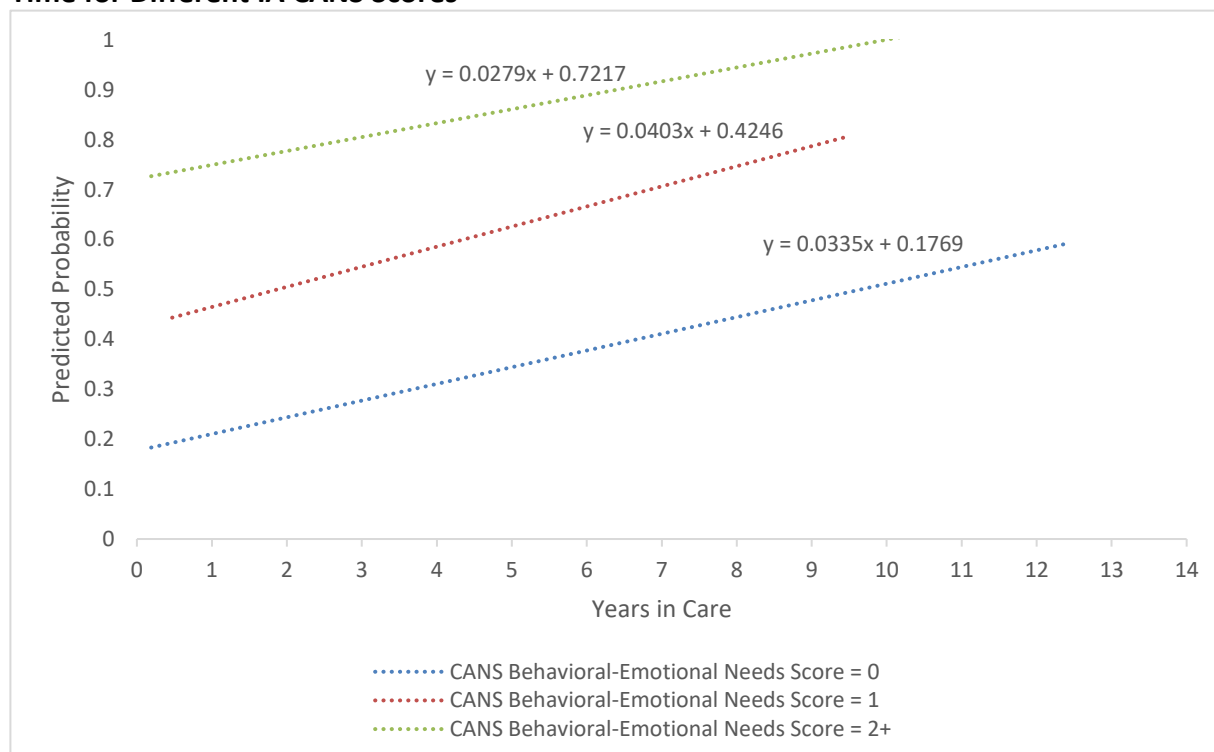
However, the results of a logistic regression analysis showed that the relationship between needs at entry and needs while in care was still substantial when children and youth had been in care for extended periods of time. There was a statistically significant relationship between the IA CANS Behavioral-Emotional Needs Score and the likelihood that a caregiver would identify a child behavioral or emotional problem (odds ratio = 2.99, Wald  $\chi^2$  (1)=20.94,  $p < .001$ ). However, there was not a significant interaction effect of the IA CANS Behavioral-Emotional Needs Score by time in care (odds ratio = 1.01, Wald  $\chi^2$  (1)=.010,  $p = .922$ ), which means that the relationship between the IA CANS and later behavioral or emotional needs was not significantly affected by the length of time in care.

Figure 5.5 illustrates how the IA CANS Behavioral and Emotional Needs variable was related to emotional and behavioral needs even for children and youth who had been in care for a number of years. The lines in Figure 5.5 show how likely it is that caregivers identified a child behavioral or emotional problem across the entire range of time in care for children and youth with a particular IA CANS Behavioral-Emotional Needs score. The blue line shows the predicted probability of the caregiver perceiving a behavioral or emotional problem for children and youth who had an IA CANS score of 0 (representing no evidence, no need for action). The red line shows the predicted probability of a caregiver perceiving a behavioral or emotional problem for children and youth who had an IA CANS score of 1 (representing watchful waiting/prevention/mild degree). The green line shows the predicted probability of a caregiver perceiving a behavioral or emotional problem for children and youth who had an IA CANS score of 2 or 3, representing an emotional or behavioral need identified at entry into substitute care that needed to be addressed.

The length of time in care for children and youth with an IA Risk Behavior score of 0 (no need for action) ranged from less than a year to more than 12 years. Across that range, the likelihood that a caregiver identified a child behavioral or emotional problem was between 20% and 40%. For children and youth with an IA Behavioral or Emotional Needs score of 1 (watchful waiting, prevention), the likelihood was between 40% and 70% across a range of more than 9 years. For children and youth with an IA Behavioral or Emotional score of 2 or 3 (action), the likelihood exceeded 70% across a range of more than 10 years. The differences in likelihood of having a behavioral and emotional problem did not decrease over time.

Considering a child or youth who has been in care for 6 years illustrates the strength of this relationship between the IA CANS and needs for children in care for a long period. If this child received an IA CANS Behavioral-Emotional Needs score of 2 or 3 at entry into care, the predicted probability that their caregiver would identify a child behavioral and emotional problem 6 years later was 88.9%. If the IA CANS score was 1, the predicted probability of a later problem was 66.6%. If the IA CANS score was 0, the predicted probability of a later problem was 37.8%.

**Figure 5.5 Predicted Probability of a Child Behavioral or Emotional Problem Over Time for Different IA CANS Scores**

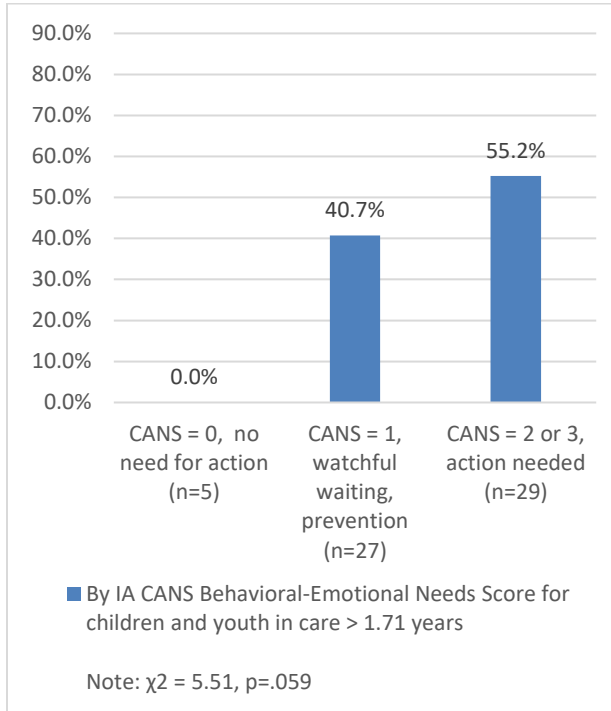


*Note.* The figure presents the predicted probability of a caregiver perceiving a child behavioral or emotional problem, calculated from logistic regression analysis.

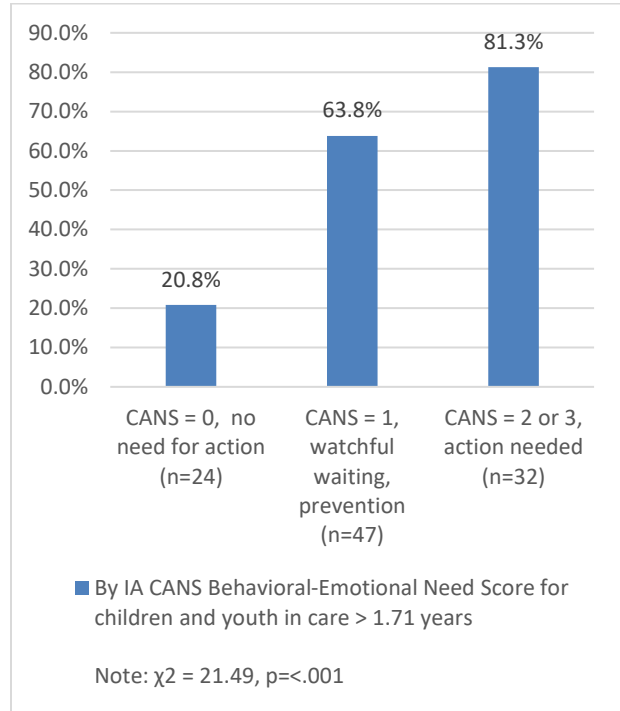
We examined the relationship between the IA CANS separately for cases below and above the weighted median on length of time in care, which was 1.71 years. We found that the relationship between the IA CANS behavioral and emotional needs score and behavioral and emotional needs while in care was strong for both groups. Figures 5.6 through 5.9 present results for those children and youth who had been in care for 1.71 years or more. Even for this group, children and youth with higher IA CANS emotional and behavioral needs scores were substantially more likely to have behavioral and emotional problems than children with lower IA CANS scores.



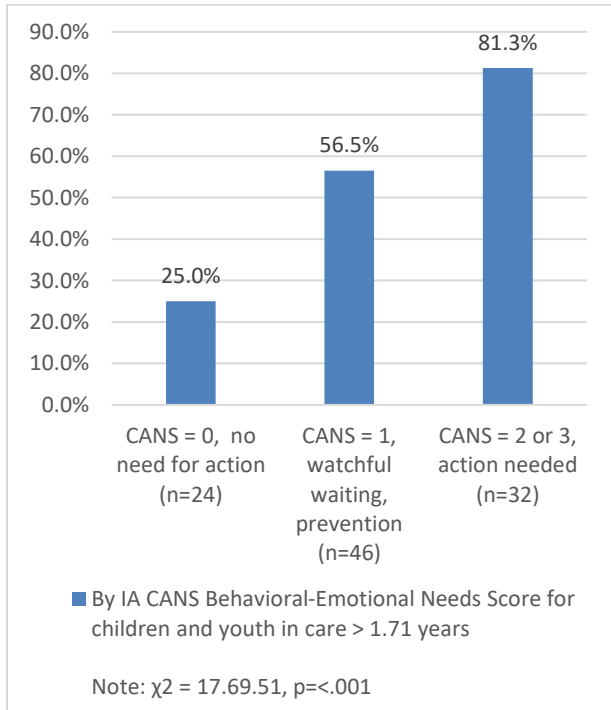
**Figure 5.6 Percentage CBCL Total Score in Borderline Clinical/Clinical Range**



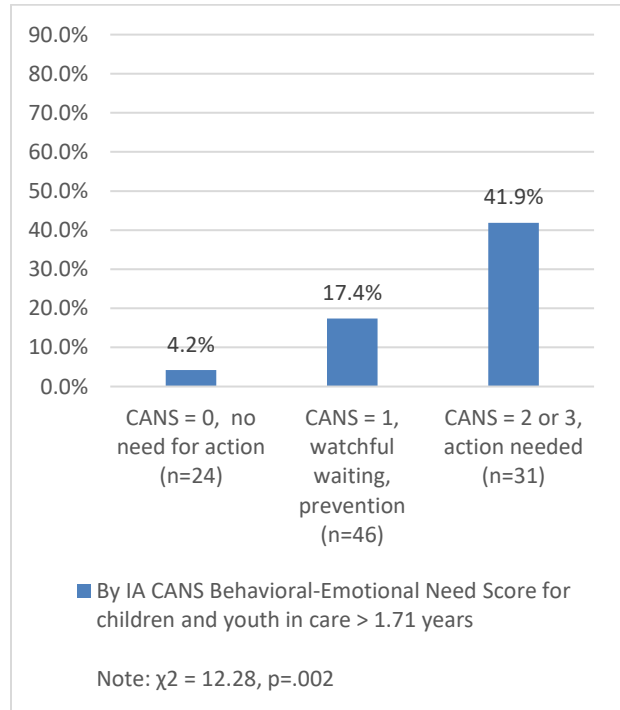
**Figure 5.8 Percentage of Children and Youth Receiving a Behavioral Health Service**



**Figure 5.7 Percentage of Caregivers Who Perceive a Child Behavioral or Emotional Problem**



**Figure 5.9 Percentage of Children and Youth Receiving a Psychiatric Medication**



## Discussion

These results provide evidence that scores on the IA CANS Behavioral and Emotional Needs domain were significantly associated with children and youth's emotional and behavioral needs during their stay in substitute care, even years after the IA CANS was completed. The IA CANS was also substantially related to whether children and youth would later receive behavioral health services. An important aim of the IA CANS is to identify children and youth in need of services as they enter care.

The Integrated Assessment is relevant for understanding children and youth's behavioral and needs even when they have been in substitute care for years. As a number of studies have found, the behavioral and emotional challenges of children and youth in substitute care are persistent.<sup>11</sup> It is likely that these difficulties stem from the maltreatment these children and youth have experienced and other adverse childhood experiences they have endured. Clearly more needs to be done to promote the emotional and behavioral health of children and youth in substitute care, given the evidence that their problems may often be chronic. The current study may help motivate agencies to try promising interventions that have demonstrated positive outcomes for children in substitute care but have not been widely implemented.<sup>12</sup> These interventions resemble evidence-supported interventions used with other at-risk youth and have specifically been tested with youth in substitute care.

This analysis has limitations. The IA CANS scores may not adequately capture some aspects of the assessment provided in the text of the IA report. Also, the 2017 Illinois Child Well-Being study is not longitudinal. Thus we cannot measure changes in children and youth's emotional

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<sup>11</sup> Leon et al. (2016) *ibid*. Kim, J., Cicchetti, D., Rogosch, F. A., & Manly, J. T. (2009). Child maltreatment and trajectories of personality and behavioral functioning: Implications for the development of personality disorder. *Development and Psychopathology*, 21(3), 889–912. Lansford, J. E., Malone, P. S., Stevens, K. I., Dodge, K. A., Bates, J.E., & Pettit, G. S. (2006). Developmental trajectories of externalizing and internalizing behaviors: Factors underlying resilience in physically abused children. *Development and Psychopathology*, 18(1), 35–55. Proctor, L. J., Skriner, L. C., Roesch, S., & Litrownik, A. J. (2010). Trajectories of behavioral adjustment following early placement in foster care: Predicting stability and change over 8 Years. *Journal of the American Academy of Child and Adolescent Psychiatry*, 49(5), 464–473. Yoon, S. (2018). Fostering resilient development: Protective factors underlying externalizing trajectories of maltreated children. *Journal of Child and Family Studies*, 27(2), 443–452.

<sup>12</sup> Leve, L.D., Fisher, P.A., & Chamberlain, P. (2009). Multidimensional Treatment Foster Care as a preventive intervention to promote resiliency among youth in the child welfare system. *Journal of Personality*, 77(6), 1869–1902. Leve, L. D., Harold, G. T., Chamberlain, P., Landsverk, J. A., Fisher, P. A., & Vostanis, P. (2012). Practitioner review: Children in foster care – vulnerabilities and evidence-based interventions that promote resilience processes. *Journal of Child Psychology and Psychiatry and Allied Disciplines*, 53(12), 1197–1211. Oriana Linares, L., Montalto, D., Li, M., & Oza, V. S. (2016). A promising parenting intervention in foster care. *Journal of Consulting and Clinical Psychology*, 74(1), 32–41. Taussig, H. N., Weiler, L. M., Garrido, E. F., Rhodes, T., Boat, A., & Fadell, M. (2019). A positive youth development approach to improving mental health outcomes for maltreated children in foster care: Replication and extension of an RCT of the Fostering Healthy Futures Program. *American Journal of Community Psychology*. 64(3-4), 405–417. Wood, J. N., Dougherty, S. L., Long, J., Messer, E. P., & Rubin, D. (2019). A pilot investigation of a novel intervention to improve behavioral well-being for children in foster care. *Journal of Emotional & Behavioral Disorders*, 27(1), 3–13.

and behavioral well-being over time. Children and youth who have been in substitute care long-term differ in important ways from children and youth who leave substitute care after briefer stays, and we cannot determine how much our results relate to the persistence of needs versus differences between the populations of children and youth with longer and shorter stays in care.

Despite these limitations, these results provide evidence for the validity of the IA and help support its value. Given the difficulties in accessing resources for children and youth in substitute care, the Integrated Assessment may be the most thorough and professional assessment a child entering substitute care will ever receive. The baseline CANS may be the only time at which a professional screener is involved in the assessment and can provide expert guidance to the caseworker. Caseworkers assigned to the case could benefit from reading the IA report and considering its implications for current service plans. The IA should also inform periodic assessments throughout the life of the case. For example, findings from the IA can suggest what types of professionals should be involved in evaluating the children's needs over time.





## Appendix A

# Indicator and Variable Definitions

Appendix A-1 provides definitions for each of the outcome indicators used in the report. For each indicator, a general definition is provided, followed by a description of the population of children included in the denominator and numerator, and any children who were excluded from the calculations. In this report, all indicators are calculated based on the state fiscal year, which spans the 12-month period from July 1 to June 30. All indicators exclude youth 18 years and older. Indicators used in the Child and Family Service Reviews are designated by (CFSR) in the indicator title.

Appendix A-2 provides the operational definition of race/ethnicity used in this report.

## A-1. Indicator Definitions

### Chapter 1: Child Safety

#### **Indicator 1.A: Maltreatment Recurrence (CFSR)<sup>1</sup>**

*Definition:* Of all children who were victims of a substantiated maltreatment report during the fiscal year, the percentage that were victims of another substantiated maltreatment report within 12 months.

*Denominator:* The number of children with at least one substantiated maltreatment report during the fiscal year.

*Numerator:* The number of children who had another substantiated maltreatment report within 12 months of their initial report.

*Exclusions:* 1) subsequent reports of maltreatment within 14 days of the initial report are excluded; 2) multiple reports on the same incident date are excluded; 3) substantiated reports of allegation 60 (Environment Injurious to Health and Welfare) between October 1, 2001–December 31, 2013 and May 31, 2014–June 11, 2014 are excluded.

#### **Indicator 1.B: Maltreatment Among Children in Intact Family Cases**

*Definition:* Of all children served in intact family cases during the fiscal year, the percentage that had a substantiated maltreatment report within 12 months.

*Denominator:* The number of children served in intact family cases during the fiscal year. Intact family cases are defined as those in which all children in the family are at home at the time the family case opens.

*Numerator:* The number of children who had a substantiated report within 12 months of the case open date.

*Exclusions:* 1) intact family cases open 7 days or fewer are excluded; 2) intact family cases with any child who enters substitute care within 30 days of case open date are excluded; 3) subsequent reports within 14 days of the initial maltreatment report are excluded; 4) multiple reports on the same incident date are excluded; 5) substantiated reports of allegation 60 (Environment Injurious to Health and Welfare) between October 1, 2001–December 31, 2013 and May 31, 2014–June 11, 2014 are excluded; 6) maltreatment reports in child care facilities, including day care facilities, foster homes, group homes, and residential treatment centers, are excluded.

#### **Indicator 1.C: Maltreatment Recurrence Among Children Receiving No Services**

*Definition:* Of all children with a substantiated report who did not receive intact family or substitute care services, the percentage that had another substantiated report within 12 months.

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<sup>1</sup> Children's Bureau (n.d.). CFSR Round Statewide Data Indicators. Retrieved from <https://capacity.childwelfare.gov/states/focus-areas/cqi/cfsr-data-syntax-toolkit/>

*Denominator:* The number of children with a substantiated maltreatment report during the fiscal year who were not in an intact family case or placed into substitute care within 60 days of the maltreatment report date.

*Numerator:* The number of children who had another substantiated maltreatment report within 12 months of their initial report.

*Exclusions:* 1) subsequent reports of maltreatment within 14 days of the initial report are excluded; 2) multiple reports on the same incident date are excluded; 3) substantiated reports of allegation 60 (Environment Injurious to Health and Welfare) between October 1, 2001–December 31, 2013 and May 31, 2014–June 11, 2014 are excluded.

**Indicator 1.D: Maltreatment in Substitute Care (CFSR)<sup>2</sup>**

*Definition:* Of all children in substitute care during the fiscal year, the rate of maltreatment per 100,000 days of substitute care.

*Denominator:* The total number of days that children were in substitute care placements, including trial home visits, during the fiscal year.

*Numerator:* The total number of substantiated maltreatment reports that occurred during substitute care placements.

*Adjustments:* The results are multiplied by 100,000 to produce larger numbers that are easier to understand.

*Exclusions:* 1) substitute care episodes less than 8 days are excluded; 2) if a youth turns age 18 while in care, the time in care and maltreatment reports that occur after their 18th birthday are excluded; 3) maltreatment reports that occur within the first 7 days of removal are excluded; 4) subsequent reports that occur within 1 day of the initial report are excluded; 5) if the incident date did not occur during the substitute care spell, the maltreatment report is excluded; 6) substantiated reports of allegation 60 (Environment Injurious to Health and Welfare) between October 1, 2001–December 31, 2013 and May 31, 2014–June 11, 2014 are excluded.

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<sup>2</sup> Ibid.

## Chapter 2: Family Continuity, Placement Stability, and Length of Time in Care

### Indicator 2.A.1: Initial Placement—Home of Parents

*Definition:* Of all children entering substitute care, the percentage that was placed in the home of their parent(s) in their first placement.

*Denominator:* The number of children entering substitute care during the fiscal year.

*Numerator:* The number of children initially placed in the home of parents (HMP).

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

### Indicator 2.A.2: Initial Placement—Kinship Foster Home

*Definition:* Of all children entering substitute care, the percentage that was placed in kinship foster homes in their first placement.

*Denominator:* The number of children entering substitute care during the fiscal year.

*Numerator:* The number of children initially placed in kinship foster homes. The Kinship Foster Home category includes Delegated Relative Authority (DRA) and Home of Relative (HMR).

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

### Indicator 2.A.3: Initial Placement—Traditional Foster Home

*Definition:* Of all children entering substitute care, the percentage that was placed in traditional foster homes in their first placement.

*Denominator:* The number of children entering substitute care during the fiscal year.

*Numerator:* The number of children initially placed in traditional foster homes. The Traditional Foster Home category includes Foster Home Boarding DCFS (FHB), Foster Home Indian (FHI), Foster Home Boarding Private Agency (FHP), and Foster Home Adoption (FHA).

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

### Indicator 2.A.4: Initial Placement—Specialized Foster Home

*Definition:* Of all children entering substitute care, the percentage that was placed in specialized foster homes in their first placement.

*Denominator:* The number of children entering substitute care during the fiscal year.

*Numerator:* The number of children initially placed in specialized foster homes. The Specialized Foster Home category includes Foster Home Specialized (FHS) and Foster Home Treatment (FHT).

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

### Indicator 2.A.5: Initial Placement—Emergency Shelter/Emergency Foster Home

*Definition:* Of all children entering substitute care, the percentage that was placed in emergency shelters or emergency foster homes in their first placement.

*Denominator:* The number of children entering substitute care during the fiscal year.

*Numerator:* The number of children initially placed in emergency shelters or emergency foster homes. The Emergency Shelter or Emergency Foster Home category includes Youth Emergency Shelters (YES), Agency Foster Care/Shelter Care, Emergency Shelters Institutions, Emergency Shelters Group Homes, and Emergency Foster Care (EFC).

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.



**Indicator 2.A.6: Initial Placement—Group Home/Institution**

*Definition:* Of all children entering substitute care, the percentage that placed in group homes or institutions in their first placement.

*Denominator:* The number of children entering substitute care during the fiscal year.

*Numerator:* The number of children initially placed in group homes or institutions. The Group Home or Institution category includes Group Home (GRH), Detention Facility/Jail (DET), Institution DCFS (ICF), Institution Department of Corrections (IDC), Institution Department of Mental Health (IMH), Institution Private Child Care Facility (IPA), Institution Rehabilitation Services (IRS), and Nursing Care Facility (NCF).

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

**Indicator 2.B.1: End of Year Placement—Home of Parents**

*Definition:* Of all children in substitute care at the end of the fiscal year, the percentage that was placed in the home of their parent(s).

*Denominator:* The number of children in substitute care at the end of the fiscal year.

*Numerator:* The number of children placed in the home of parents (HMP).

**Indicator 2.B.2: End of Year Placement—Kinship Foster Home**

*Definition:* Of all children in substitute care at the end of the fiscal year, the percentage that was placed in kinship foster homes.

*Denominator:* The number of children in substitute care at the end of the fiscal year.

*Numerator:* The number of children placed in kinship foster homes. The Kinship Foster Home category includes Delegated Relative Authority (DRA) and Home of Relative (HMR).

**Indicator 2.B.3: End of Year Placement—Traditional Foster Home**

*Definition:* Of all children in substitute care at the end of the fiscal year, the percentage that was placed in traditional foster homes.

*Denominator:* The number of children in substitute care at the end of the fiscal year.

*Numerator:* The number of children placed in traditional foster homes. The Traditional Foster Home category includes Foster Home Boarding (FHB), Foster Home Indian (FHI), Foster Home Boarding Private Agency (FHP), and Foster Home Adoption (FHA).

**Indicator 2.B.4: End of Year Placement—Specialized Foster Home**

*Definition:* Of all children in substitute care at the end of the fiscal year, the percentage that was placed in specialized foster homes.

*Denominator:* The number of children in substitute care at the end of the fiscal year.

*Numerator:* The number of children placed in specialized foster homes. The Specialized Foster Home category includes Foster Home Specialized (FHS) and Foster Home Treatment (FHT).

**Indicator 2.B.5: End of Year Placement —Emergency Shelter/Emergency Foster Home**

*Definition:* Of all children in substitute care at the end of the fiscal year, the percentage that was placed in emergency shelters or emergency foster homes.

*Denominator:* The number of children in substitute care at the end of the fiscal year.

## INDICATOR AND VARIABLE DEFINITIONS

*Numerator:* The number of children placed in emergency shelters or emergency foster homes. The Emergency Shelter or Emergency Foster Home category includes Youth Emergency Shelters (YES), Agency Foster Care/Shelter Care, Emergency Shelters Institutions, Emergency Shelters Group Homes, and Emergency Foster Care (EFC).

### **Indicator 2.B.6: End of Year Placement—Group Home**

*Definition:* Of all children in substitute care at the end of the fiscal year, the percentage that was placed in group homes.

*Denominator:* The number of children in substitute care at the end of the fiscal year.

*Numerator:* The number of children placed in group homes. The Group Home category includes Group Home (GRH).

### **Indicator 2.B.7: End of Year Placement—Institution**

*Definition:* Of all children in substitute care at the end of the fiscal year, the percentage that was placed in institutions.

*Denominator:* The number of children in substitute care at the end of the fiscal year.

*Numerator:* The number of children placed in institutions. The Institution category includes Detention Facility/Jail (DET), Institution DCFS (ICF), Institution Department of Corrections (IDC), Institution Department of Mental Health (IMH), Institution Private Child Care Facility (IPA), Institution Rehabilitation Services (IRS), and Nursing Care Facility (NCF).

### **Indicator 2.C: Initial Placement with Siblings**

*Definition:* Of all children entering substitute care and initially placed in kinship or traditional foster homes, the percentage that was placed with their siblings in their initial placement.

*Denominator:* The number of children entering substitute care during the fiscal year who had siblings in substitute care and were initially placed into kinship or traditional foster homes.

Siblings are defined as children who belong to a common family based on the ID number of the family.

*Numerator:* The number of children placed in the same foster home as all of their siblings in substitute care in their initial placement.

*Exclusions:* 1) children with no siblings in substitute care are excluded; 2) children who enter substitute care and stay 7 or fewer days are excluded.

### **Indicator 2.D: End of Year Placement with Siblings**

*Definition:* Of all children in kinship or traditional foster homes at the end of the fiscal year, the percentage that was placed with their siblings.

*Denominator:* The number of children in kinship or traditional foster homes at the end of the fiscal year who had siblings in substitute care. Siblings are defined as children who belong to a common family based on the ID number of the family.

*Numerator:* The number of children placed in the same foster home as all of their siblings in substitute care at the end of the fiscal year.

*Exclusions:* Children with no siblings in substitute care are excluded.

**Indicator 2.E: Placement Stability (CFSR)<sup>3</sup>**

*Definition:* Of all children who entered substitute care during the fiscal year, the rate of placement moves per 1,000 days of care.

*Denominator:* Among the children who entered substitute care during the year, the total number of days they were in substitute care at the end of the fiscal year.

*Numerator:* The number of placement moves during the fiscal year.

*Adjustment:* The result is multiplied by 1,000 to produce larger numbers that are easier to understand.

*Exclusions:* 1) children who enter care and stay 7 days or fewer are excluded; 2) for youth who enter at age 17 and turn 18 during the period, any time in substitute care beyond the 18th birthday or placement changes after that date are excluded; 3) the initial removal from the home is not counted as a placement move.

**Indicator 2.F: Children Who Run Away from Substitute Care**

*Definition:* Of all children age 12 to 17 entering substitute care, the percentage that run away from a substitute care placement during their first year.

*Denominator:* The number of children age 12 to 17 entering substitute care during the fiscal year.

*Numerator:* The number of children who run away from their substitute care placement within one year from the case opening date. Runaway includes: Runaway, Abducted, and Whereabouts Unknown.

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

**Indicator 2.G: Median Length of Stay in Substitute Care**

*Definition:* The median length of stay in substitute care of all children who entered substitute care during the fiscal year. The median represents the amount of time in months that it took half of the children who entered substitute care in a fiscal year to exit care or emancipate.

*Population:* The number of children who enter substitute care during the fiscal year. If the child had more than one out-of-home spell during the fiscal year, the first spell was selected.

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

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<sup>3</sup> Ibid.

### Chapter 3: Legal Permanence—Reunification, Adoption, and Guardianship

#### **Indicator 3.A.1: Reunification Within 12 Months**

*Definition:* Of all children who entered substitute care during the year, the percentage that was reunified with their parents within 12 months.

*Denominator:* The number of children entering substitute care during the fiscal year.

*Numerator:* The number of children who were reunified within 12 months of the date of entry into substitute care. Reunification is defined as when the child is returned home and legal custody is transferred back to parent(s) or the placement case is closed.

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

#### **Indicator 3.A.2: Reunification Within 24 Months**

*Definition:* Of all children who entered substitute care during the year, the percentage that was reunified with their parents within 24 months.

*Denominator:* The number of children entering substitute care during the fiscal year.

*Numerator:* The number of children who were reunified within 24 months of the date of entry into substitute care. Reunification is defined as when the child is returned home and legal custody is transferred back to parent(s) or the placement case is closed.

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

#### **Indicator 3.A.3: Reunification Within 36 Months**

*Definition:* Of all children who entered substitute care during the year, the percentage that was reunified with their parents within 36 months.

*Denominator:* The number of children entering substitute care during the fiscal year.

*Numerator:* The number of children who were reunified within 36 months of the date of entry into substitute care. Reunification is defined as when the child is returned home and legal custody is transferred back to parent(s) or the placement case is closed.

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

#### **Indicator 3.B.1: Stability of Reunification at One Year**

*Definition:* Of all children who were reunified during the year, the percentage that remained with their family at one year.

*Denominator:* The number of children reunified during the fiscal year. Reunification is defined as when the child is returned home and legal custody is transferred back to parent(s) or the placement case is closed.

*Numerator:* The number of children who did not re-enter substitute care within one year of reunification.

*Exclusions:* Children who re-entered substitute care and stayed 7 days or fewer are excluded.

**Indicator 3.B.2: Stability of Reunification at Two Years**

*Definition:* Of all children who were reunified during the year, the percentage that remained with their family at two years.

*Denominator:* The number of children reunified during the fiscal year. Reunification is defined as when the child is returned home and legal custody is transferred back to parent(s) or the placement case is closed.

*Numerator:* The number of children who did not re-enter substitute care within two years of reunification.

*Exclusions:* Children who re-entered substitute care and stayed 7 days or fewer are excluded.

**Indicator 3.B.3: Stability of Reunification at Five Years**

*Definition:* Of all children who were reunified during the year, the percentage that remained with their family at five years.

*Denominator:* The number of children reunified during the fiscal year. Reunification is defined as when the child is returned home and legal custody is transferred back to parent(s) or the placement case is closed.

*Numerator:* The number of children who did not re-enter substitute care within five years of reunification.

*Exclusions:* Children who re-entered substitute care and stayed 7 days or fewer are excluded.

**Indicator 3.B.4: Stability of Reunification at Ten Years**

*Definition:* Of all children who were reunified during the year, the percentage that remained with their family at ten years.

*Denominator:* The number of children reunified during the fiscal year. Reunification is defined as when the child is returned home and legal custody is transferred back to parent(s) or the placement case is closed.

*Numerator:* The number of children who did not re-enter substitute care within ten years of reunification.

*Exclusions:* Children who re-entered substitute care and stayed 7 days or fewer are excluded.

**Indicator 3.C.1: Adoption Within 24 Months**

*Definition:* Of all children who entered substitute care during the year, the percentage that was adopted within 24 months.

*Denominator:* The number of children entering substitute care during the fiscal year.

*Numerator:* The number of children who were adopted within 24 months of the date of entry into substitute care.

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

**Indicator 3.C.2: Adoption Within 36 Months**

*Definition:* Of all children who entered substitute care during the year, the percentage that was adopted within 36 months.

*Denominator:* The number of children entering substitute care during the fiscal year.

*Numerator:* The number of children who were adopted within 36 months of the date of entry into substitute care.

## INDICATOR AND VARIABLE DEFINITIONS

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

### **Indicator 3.D.1: Stability of Adoption at Two Years**

*Definition:* Of all children who were adopted during the year, the percentage that remained with their family at two years.

*Denominator:* The number of children adopted during the fiscal year.

*Numerator:* The number of children who did not re-enter substitute care within two years of adoption.

*Exclusions:* Children who re-entered substitute care and stayed 7 days or fewer are excluded.

### **Indicator 3.D.2: Stability of Adoption at Five Years**

*Definition:* Of all children who were adopted during the year, the percentage that remained with their family at five years.

*Denominator:* The number of children adopted during the fiscal year.

*Numerator:* The number of children who did not re-enter substitute care within five years of adoption.

*Exclusions:* Children who re-entered substitute care and stayed 7 days or fewer are excluded.

### **Indicator 3.D.3: Stability of Adoption at Ten Years**

*Definition:* Of all children who were adopted during the year, the percentage that remained with their family at ten years.

*Denominator:* The number of children adopted during the fiscal year.

*Numerator:* The number of children who did not re-enter substitute care within ten years of adoption.

*Exclusions:* Children who re-entered substitute care and stayed 7 days or fewer are excluded.

### **Indicator 3.E.1: Guardianship Within 24 Months**

*Definition:* Of all children who entered substitute care during the year, the percentage that was taken into guardianship within 24 months.

*Denominator:* The number of children entering substitute care during the fiscal year.

*Numerator:* The number of children taken into guardianship within 24 months of the date of entry into substitute care.

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

### **Indicator 3.E.2: Guardianship Within 36 Months**

*Definition:* Of all children who entered substitute care during the year, the percentage that was taken into guardianship within 36 months.

*Denominator:* The number of children entering substitute care during the fiscal year.

*Numerator:* The number of children taken into guardianship within 36 months of the date of entry into substitute care.

*Exclusions:* Children who enter care and stay 7 days or fewer are excluded.

**Indicator 3.F.1: Stability of Guardianship at Two Years**

*Definition:* Of all children taken into guardianship during the year, the percentage that remained with their family at two years.

*Denominator:* The number of children taken into guardianship during the fiscal year.

*Numerator:* The number of children who did not re-enter substitute care within two years of guardianship.

*Exclusions:* Children who re-entered substitute care and stayed 7 days or fewer are excluded.

**Indicator 3.F.2: Stability of Guardianship at Five Years**

*Definition:* Of all children taken into guardianship during the year, the percentage that remained with their family at five years.

*Denominator:* The number of children taken into guardianship during the fiscal year.

*Numerator:* The number of children who did not re-enter substitute care within five years of guardianship.

*Exclusions:* Children who re-entered substitute care and stayed 7 days or fewer are excluded.

**Indicator 3.F.3: Stability of Guardianship at Ten Years**

*Definition:* Of all children taken into guardianship during the year, the percentage that remained with their family at ten years.

*Denominator:* The number of children taken into guardianship during the fiscal year.

*Numerator:* The number of children who did not re-enter substitute care within ten years of guardianship.

*Exclusions:* Children who re-entered substitute care and stayed 7 days or fewer are excluded.

**Indicator 3.G: Permanency in 12 Months for Children Entering Substitute Care (CFSR)<sup>4</sup>**

*Definition:* Of all children who entered substitute care during the fiscal year, the percentage that was discharged to permanency within 12 months.

*Denominator:* The number of children who enter substitute care during the fiscal year.

*Numerator:* The number of children who are discharged to permanency (reunification, living with relative, adoption, or guardianship) within 12 months of entering substitute care.

*Exclusions:* 1) children who enter care and stay 7 days or fewer are excluded; 2) youth entering care at age 17 who turn 18 while in care or discharge at age 18 are excluded from the numerator.

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<sup>4</sup> Ibid.

## INDICATOR AND VARIABLE DEFINITIONS

### **Indicator 3.H: Permanency in 12 Months for Children in Care 12 to 23 Months (CFSR)<sup>5</sup>**

*Definition:* Of all children in care on the first day of the fiscal year who had been in care between 12 and 23 months, the percentage that was discharged to permanency within 12 months.

*Denominator:* The number of children in substitute care on the first day of the fiscal year who had been in substitute care between 12 and 23 months.

*Numerator:* The number of children who are discharged to permanency (reunification, living with relative, adoption, or guardianship) within 12 months of the first day of the fiscal year.

*Exclusions:* Youth entering care at age 17 who turn 18 while in care or discharge at age 18 are excluded from the numerator.

### **Indicator 3.I: Permanency in 12 Months for Children in Care 24 Months or More (CFSR)<sup>6</sup>**

*Definition:* Of all children in care on the first day of the fiscal year who had been in care for 24 months or more, the percentage that was discharged to permanency within 12 months.

*Denominator:* The number of children in substitute care on the first day of the fiscal year period who had been in substitute care for 24 months or more.

*Numerator:* The number of children who are discharged to permanency (reunification, living with relative, adoption, or guardianship) within 12 months of the first day of the fiscal year.

*Exclusions:* Youth entering care at age 17 who turn 18 while in care or discharge at age 18 are excluded from the numerator.

### **Indicator 3.J: Re-Entry to Substitute Care Among Children in Care Less Than 12 Months (CFSR)<sup>7</sup>**

*Definition:* Of all children who entered foster care during the fiscal year and attained permanency within 12 months, the percentage that re-entered substitute care within 12 months of their discharge.

*Denominator:* The number of children who entered substitute care during the fiscal year and were discharged within 12 months to reunification, living with a relative, adoption, or guardianship.

*Numerator:* The number of children who re-entered substitute care within 12 months of discharge. If a child had multiple re-entries within 12 months of discharge, only their first re-entry is selected.

*Exclusions:* 1) children who enter care and stay 7 days or fewer are excluded from the denominator; 2) children who re-enter care and stay 7 days or fewer are excluded from the numerator.

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<sup>5</sup> Ibid.

<sup>6</sup> Ibid.

<sup>7</sup> Ibid.



**Indicator 3.K: Re-Entry to Substitute Care Among Children in Care 12 to 23 Months**

*Definition:* Of all children who had been in substitute care between 12 and 23 months and exited to permanency during the fiscal year, the percentage that re-entered substitute care within 12 months of their discharge.

*Denominator:* The number of children in substitute care on the first day of the fiscal year who had been in substitute care between 12 and 23 months and who were discharged to permanency (reunification, living with a relative, adoption, or guardianship) during the fiscal year.

*Numerator:* The number of children who re-entered substitute care within 12 months of discharge. If a child had multiple re-entries within 12 months of discharge, only their first re-entry is selected.

*Exclusions:* Children who re-enter care and stay 7 days or fewer are excluded from the numerator.

**Indicator 3.L: Re-Entry to Substitute Care Among Children in Care 24 Months or More**

*Definition:* Of all children who had been in substitute care 24 months or more and exited to permanency during the fiscal year, the percentage that re-entered substitute care within 12 months of their discharge.

*Denominator:* Number of children in substitute care on the first day of the fiscal year who had been in care for 24 months or more who were discharged to permanency (reunification, living with a relative, adoption, or guardianship) within 12 months.

*Numerator:* Number of children who re-enter substitute care within 12 months of discharge. If a child has multiple re-entries within 12 months of discharge, only their first re-entry is selected.

*Exclusions:* Children who re-enter care and stay 7 days or fewer are excluded from the numerator.

**A-2. Operational Definition of Race/Ethnicity**

The race/ethnicity variable used in this report was created from two variables in the Statewide Automated Child Welfare Information System (SACWIS) and the Child and Youth Centered Information System (CYCIS): primary race and ethnicity. The ethnicity variable includes several codes designating Hispanic origin, including Hispanic South American, Hispanic Cuban, Hispanic Mexican, Hispanic Puerto Rican, Hispanic Spanish Descent, Hispanic Dominican, Hispanic Central American, and Hispanic Other. If the individual's ethnicity was coded as any of these, their race/ethnicity in this report was coded as "Hispanic" regardless of the primary race code. If the individual's ethnicity was *not* of Hispanic origin, their race/ethnicity in this report was determined using the code in the primary race variable contained in SACWIS and CYCIS. Values on the primary race variable include: White, Black, Native American/Alaska Native, Asian, and Native Hawaiian/Other Pacific Islanders. Because the numbers in categories other than White and Black are small, they are combined into one category labeled as "other race/ethnicity."

## INDICATOR AND VARIABLE DEFINITIONS

Note that if the value of primary race was “could not be verified,” “unknown,” “declined to identify,” or missing (null), it was treated as missing and excluded when indicators are reported by race/ethnicity.



## Appendix B

# Outcome Data by Region, Gender, Age, and Race/Ethnicity

Appendix B provides data on each of the outcome indicators defined in Appendix A. For each indicator, data are presented for the state, followed by breakdowns by DCFS administrative region, child gender, age, and race/ethnicity. The data used to compute these indicators come from two Illinois DCFS data systems: the Statewide Automated Child Welfare Information System (SACWIS) and the Child and Youth Centered Information System (CYCIS). Both the SACWIS and CYCIS data were extracted on December 31, 2020. All indicators are calculated based on the state fiscal year, which spans the 12-month period from July 1 to June 30.

**Indicator 1.A Maltreatment Recurrence (CFSR)**

Of all children who were victims of a substantiated maltreatment report during the fiscal year, the percentage that were victims of another substantiated maltreatment report within 12 months.

	2013	2014	2015	2016	2017	2018	2019
Children with a substantiated maltreatment report	18,657	25,024	30,733	29,708	28,851	32,027	33,466
Children with another substantiated report within 12 months	1,601	2,811	3,480	3,572	3,794	4,158	4,634
Percent	8.6%	11.2%	11.3%	12.0%	13.2%	13.0%	13.8%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	407	7.3%	683	8.9%	823	9.2%	723	9.2%	777	10.2%	881	9.8%	1,063	11.0%
Northern	308	6.4%	707	10.5%	887	10.2%	895	10.7%	792	10.7%	888	11.4%	1,013	12.0%
Central	535	9.8%	926	13.0%	1,166	13.3%	1,209	13.8%	1,413	15.6%	1,554	15.2%	1,608	16.0%
Southern	351	12.6%	495	14.2%	604	14.1%	745	16.1%	807	16.9%	835	16.6%	946	18.0%

Male	786	8.7%	1,443	11.8%	1,747	11.6%	1,777	12.1%	1,973	13.8%	2,028	12.8%	2,344	14.1%
Female	815	8.5%	1,368	10.8%	1,731	11.1%	1,793	12.0%	1,820	12.6%	2,125	13.2%	2,287	13.7%

0 to 2	421	9.3%	847	13.3%	1,131	13.2%	1,169	13.8%	1,237	15.0%	1,339	14.6%	1,446	15.7%
3 to 5	369	9.5%	607	12.1%	746	12.1%	768	13.2%	813	14.5%	878	14.3%	960	14.8%
6 to 11	523	8.6%	933	11.1%	1,104	11.0%	1,144	12.0%	1,197	13.0%	1,285	12.6%	1,484	13.8%
12 to 17	288	6.9%	419	8.1%	497	8.3%	486	8.4%	543	9.5%	655	10.2%	737	10.7%

Black	571	9.5%	941	11.0%	1,135	10.6%	1,089	11.2%	1,168	12.0%	1,258	11.4%	1,551	13.6%
White	855	9.2%	1,510	12.9%	1,837	13.2%	2,027	14.5%	2,096	15.4%	2,298	15.3%	2,449	15.9%
Hispanic	167	5.8%	342	8.1%	472	8.6%	441	8.0%	504	10.0%	566	10.4%	605	10.1%
Other Race/Ethnicity	5	3.0%	9	3.8%	26	7.5%	12	3.8%	22	7.6%	34	10.8%	25	6.9%

**Indicator 1.B Maltreatment Among Children in Intact Family Cases**

Of all children served in intact family cases during the fiscal year, the percentage that had a substantiated maltreatment report within 12 months.

	2013	2014	2015	2016	2017	2018	2019
Children in intact family cases	10,583	13,490	11,185	10,225	11,617	12,871	14,482
Children with substantiated reports	869	1,895	1,559	1,407	1,924	2,079	2,601
Percent	8.2%	14.0%	13.9%	13.8%	16.6%	16.2%	18.0%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	277	5.7%	581	10.7%	495	10.6%	342	8.9%	474	12.4%	465	10.6%	575	12.5%
Northern	135	7.5%	356	13.3%	335	14.1%	290	13.1%	365	13.6%	364	15.7%	507	18.4%
Central	269	10.2%	575	17.4%	409	16.2%	422	17.4%	640	21.9%	765	20.2%	961	21.5%
Southern	188	14.4%	383	18.4%	320	20.1%	353	20.1%	445	20.3%	485	20.5%	558	20.8%

Male	445	8.4%	983	14.3%	811	14.2%	699	13.5%	992	16.7%	1,042	16.0%	1,312	17.7%
Female	424	8.0%	912	13.8%	748	13.6%	708	14.0%	932	16.4%	1,037	16.4%	1,289	18.3%

0 to 2	262	8.9%	605	17.3%	578	18.6%	451	16.5%	645	20.2%	696	20.0%	821	21.7%
3 to 5	217	9.3%	405	14.4%	331	14.5%	301	14.8%	409	18.3%	432	17.0%	570	19.0%
6 to 11	270	7.9%	635	13.8%	453	12.0%	473	13.4%	622	15.9%	670	15.2%	836	17.2%
12 to 17	120	6.4%	250	9.6%	197	9.7%	182	9.4%	248	10.9%	281	11.5%	374	13.2%

Black	351	7.5%	667	13.5%	498	11.8%	387	10.8%	600	15.0%	633	13.3%	778	15.9%
White	422	9.8%	955	16.1%	787	16.7%	837	18.3%	1,046	19.5%	1,168	20.2%	1,472	21.4%
Hispanic	82	6.6%	230	11.3%	239	12.0%	167	9.1%	238	12.0%	225	11.1%	298	12.8%
Other Race/Ethnicity	14	4.1%	42	7.4%	31	12.4%	16	9.8%	34	15.8%	48	20.3%	45	14.6%

**Indicator 1.C Maltreatment Recurrence Among Children Receiving No Services**

Of all children with a substantiated report who did not receive intact family or substitute care services, the percentage that had another substantiated report within 12 months.

	2013	2014	2015	2016	2017	2018	2019
Children receiving no services	13,537	16,963	21,266	21,642	20,030	22,043	22,754
Children with substantiated reports	1,007	1,524	1,994	2,282	2,220	2,395	2,763
Percent	7.4%	9.0%	9.4%	10.5%	11.1%	10.9%	12.1%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	266	6.3%	390	7.3%	468	7.6%	476	8.1%	498	9.2%	527	8.1%	728	9.9%
Northern	196	5.5%	416	8.6%	523	8.1%	621	9.4%	482	8.7%	576	9.6%	684	10.5%
Central	353	8.9%	501	10.5%	728	12.0%	822	13.0%	831	13.3%	917	13.6%	885	14.4%
Southern	192	10.6%	217	10.4%	275	10.7%	363	12.8%	405	14.2%	375	13.3%	464	16.5%

Male	481	7.5%	764	9.3%	987	9.5%	1,135	10.7%	1,157	11.8%	1,153	10.7%	1,409	12.6%
Female	526	7.5%	760	8.7%	1,005	9.3%	1,145	10.4%	1,062	10.5%	1,237	11.1%	1,351	11.8%

0 to 2	226	8.5%	390	10.7%	550	11.0%	712	13.1%	659	13.5%	681	12.9%	771	14.7%
3 to 5	228	8.1%	329	9.8%	451	10.4%	491	11.5%	474	12.2%	483	11.4%	575	13.1%
6 to 11	345	7.5%	529	8.9%	670	9.2%	756	10.4%	723	10.7%	773	10.5%	908	11.7%
12 to 17	208	6.1%	274	7.0%	321	7.0%	319	6.9%	362	8.1%	458	9.0%	504	9.5%

Black	358	8.4%	513	9.1%	638	8.7%	707	9.9%	729	10.6%	753	9.9%	1,001	12.3%
White	542	8.1%	817	10.4%	1,075	11.3%	1,277	12.9%	1,176	12.9%	1,264	12.8%	1,340	14.0%
Hispanic	103	4.6%	184	6.0%	260	6.6%	285	6.8%	301	8.1%	348	8.4%	405	8.9%
Other Race/Ethnicity	3	2.2%	7	3.9%	15	5.5%	10	4.0%	12	5.4%	28	11.5%	14	4.8%

**Indicator 1.D Maltreatment in Substitute Care (CFSR)**

Of all children in substitute care during the fiscal year, the rate of maltreatment per 100,000 days of substitute care.

	2014	2015	2016	2017	2018	2019	2020
Children in substitute care during the fiscal year	19,723	19,965	19,183	19,183	19,897	21,346	23,502
Days in substitute care	5,553,595	5,520,637	5,393,309	5,296,246	5,407,101	5,707,073	6,418,266
Substantiated maltreatment reports	510	661	722	756	753	1,016	1,240
Maltreatment rate per 100,000 days	9.2	12.0	13.4	14.3	13.9	17.8	19.3

	Maltreatment rate per 100,000 days	Maltreatment rate per 100,000 days	Maltreatment rate per 100,000 days	Maltreatment rate per 100,000 days	Maltreatment rate per 100,000 days	Maltreatment rate per 100,000 days	Maltreatment rate per 100,000 days
Cook	7.1	10.1	11.1	13.6	13.3	17.8	18.2
Northern	9.0	9.9	14.1	12.4	11.3	16.1	19.3
Central	11.1	15.2	15.4	15.2	15.0	18.7	20.7
Southern	11.4	13.8	15.0	16.4	16.0	17.8	19.1

Male	8.5	11.9	12.8	13.2	13.6	16.7	18.7
Female	9.9	12.1	14.1	15.4	14.3	19.0	20.0

0 to 2	7.2	9.7	10.2	9.8	10.7	11.1	13.7
3 to 5	10.4	15.0	16.2	15.3	16.1	21.8	23.2
6 to 11	12.0	14.6	15.6	18.1	15.4	22.5	21.4
12 to 17	7.9	9.9	13.2	15.2	15.1	19.2	22.6

Black	8.0	11.9	13.6	14.1	14.1	18.8	19.9
White	10.4	12.1	13.4	14.3	14.9	18.3	18.0
Hispanic	11.1	12.7	13.2	16.6	8.5	11.8	21.8
Other Race/Ethnicity	7.0	8.7	10.3	9.7	11.5	11.9	22.5

## CONTINUITY AND STABILITY IN CARE

### Indicator 2.A.1 Initial Placement: Home of Parents

Of all children entering substitute care, the percentage that was placed in the home of their parents in their first placement.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children entering substitute care	4,838	5,091	4,640	4,779	5,728	6,488	7,382
Children placed in home of parents	178	218	189	171	176	213	235
Percent	3.7%	4.3%	4.1%	3.6%	3.1%	3.3%	3.2%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	12	0.9%	16	1.1%	10	0.8%	10	0.8%	7	0.5%	7	0.6%	37	2.1%
Northern	18	1.7%	6	0.6%	4	0.4%	8	0.9%	0	0.0%	10	0.9%	8	0.6%
Central	110	7.1%	160	9.6%	141	8.8%	118	6.7%	103	4.8%	133	5.3%	131	4.7%
Southern	38	4.5%	36	4.1%	34	3.9%	35	3.6%	66	5.0%	63	3.9%	59	4.0%

Male	89	3.6%	119	4.6%	107	4.4%	89	3.6%	87	2.9%	113	3.5%	129	3.4%
Female	89	3.8%	99	3.9%	82	3.7%	82	3.5%	89	3.2%	100	3.1%	106	2.9%

0 to 2	47	2.6%	56	2.7%	39	2.1%	39	2.0%	37	1.6%	49	1.9%	59	2.0%
3 to 5	27	3.4%	34	3.9%	42	5.5%	30	3.6%	39	4.2%	50	4.1%	48	3.7%
6 to 11	56	4.7%	76	6.6%	71	6.7%	61	5.4%	60	4.3%	71	4.5%	66	3.9%
12 to 17	48	4.6%	52	5.0%	37	3.9%	41	4.6%	40	3.9%	43	3.8%	62	4.5%

Black	63	2.9%	75	3.3%	54	2.9%	57	3.1%	56	2.5%	83	3.5%	71	2.6%
White	107	4.8%	119	5.3%	123	5.5%	100	4.2%	105	3.6%	109	3.2%	137	3.7%
Hispanic	8	2.3%	16	3.5%	5	1.2%	10	2.3%	10	2.7%	10	2.0%	17	2.2%
Other Race/Ethnicity	0	0.0%	7	5.5%	7	9.2%	3	2.6%	5	3.8%	10	5.9%	5	2.8%



**Indicator 2.A.2 Initial Placement: Kinship Foster Home**

Of all children entering substitute care, the percentage that was placed in kinship foster homes in their first placement.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children entering substitute care	4,838	5,091	4,640	4,779	5,728	6,488	7,382
Children placed in kinship foster homes	2,566	2,815	2,942	3,015	3,745	4,594	5,395
Percent	53.0%	55.3%	63.4%	63.1%	65.4%	70.8%	73.1%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	568	41.5%	697	46.5%	724	57.9%	698	58.5%	771	56.6%	792	62.6%	1,251	70.7%
Northern	670	62.1%	673	64.1%	634	69.8%	586	68.5%	648	70.3%	798	70.8%	994	74.4%
Central	874	56.4%	919	55.2%	976	61.0%	1,098	62.3%	1,392	65.4%	1,768	70.9%	2,043	73.4%
Southern	454	54.0%	526	60.0%	608	68.9%	633	65.3%	934	71.1%	1,236	77.2%	1,107	74.2%

Male	1,266	51.3%	1,370	53.0%	1,479	61.4%	1,520	61.7%	1,907	64.4%	2,271	69.9%	2,705	72.0%
Female	1,300	54.9%	1,445	57.6%	1,463	65.5%	1,495	64.6%	1,838	66.4%	2,323	71.8%	2,689	74.2%

0 to 2	977	53.4%	1,125	54.9%	1,152	61.7%	1,187	62.2%	1,515	63.8%	1,697	67.0%	2,097	70.2%
3 to 5	489	62.1%	543	63.0%	543	70.5%	597	70.7%	646	68.9%	906	74.4%	1,034	79.2%
6 to 11	746	63.1%	716	62.6%	778	73.0%	800	70.3%	1,013	72.6%	1,245	78.2%	1,375	80.6%
12 to 17	354	34.1%	431	41.6%	469	50.1%	431	48.4%	570	55.9%	746	65.2%	889	64.3%

Black	985	46.0%	1,153	51.5%	1,141	60.4%	1,075	58.7%	1,365	60.8%	1,527	64.9%	1,939	71.7%
White	1,346	59.8%	1,312	58.3%	1,464	65.3%	1,581	66.4%	2,043	69.2%	2,543	74.2%	2,706	73.6%
Hispanic	173	50.4%	272	59.0%	283	69.4%	278	64.4%	224	60.9%	387	76.8%	587	76.9%
Other Race/Ethnicity	62	58.5%	73	57.5%	44	57.9%	73	62.4%	92	70.8%	108	63.5%	123	69.1%

CONTINUITY AND STABILITY IN CARE

**Indicator 2.A.3 Initial Placement: Traditional Foster Home**

Of all children entering substitute care, the percentage that was placed in traditional foster homes in their first placement.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children entering substitute care	4,838	5,091	4,640	4,779	5,728	6,488	7,382
Children placed in traditional foster homes	1,173	1,221	1,015	1,180	1,362	1,342	1,336
Percent	24.2%	24.0%	21.9%	24.7%	23.8%	20.7%	18.1%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	252	18.4%	249	16.6%	226	18.1%	257	21.5%	327	24.0%	278	22.0%	275	15.5%
Northern	278	25.8%	272	25.9%	206	22.7%	212	24.8%	214	23.2%	276	24.5%	268	20.1%
Central	476	30.7%	493	29.6%	397	24.8%	470	26.7%	566	26.6%	529	21.2%	534	19.2%
Southern	167	19.9%	207	23.6%	186	21.1%	241	24.9%	255	19.4%	259	16.2%	259	17.4%

Male	583	23.6%	620	24.0%	516	21.4%	611	24.8%	707	23.9%	665	20.5%	689	18.3%
Female	590	24.9%	601	24.0%	499	22.4%	569	24.6%	655	23.7%	677	20.9%	647	17.8%

0 to 2	655	35.8%	700	34.1%	610	32.7%	639	33.5%	762	32.1%	745	29.4%	787	26.3%
3 to 5	183	23.2%	189	21.9%	155	20.1%	197	23.3%	228	24.3%	243	20.0%	201	15.4%
6 to 11	200	16.9%	204	17.8%	157	14.7%	226	19.9%	250	17.9%	229	14.4%	219	12.8%
12 to 17	135	13.0%	128	12.4%	93	9.9%	118	13.3%	122	12.0%	125	10.9%	129	9.3%

Black	569	26.6%	530	23.7%	429	22.7%	466	25.5%	576	25.7%	556	23.6%	481	17.8%
White	499	22.2%	568	25.2%	493	22.0%	571	24.0%	656	22.2%	653	19.1%	695	18.9%
Hispanic	81	23.6%	88	19.1%	67	16.4%	100	23.1%	89	24.2%	80	15.9%	116	15.2%
Other Race/Ethnicity	24	22.6%	33	26.0%	19	25.0%	34	29.1%	29	22.3%	48	28.2%	36	20.2%

**Indicator 2.A.4 Initial Placement: Specialized Foster Home**

Of all children entering substitute care, the percentage that was placed in specialized foster homes in their first placement.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children entering substitute care	4,838	5,091	4,640	4,779	5,728	6,488	7,382
Children placed in specialized foster homes	117	109	72	106	131	95	62
Percent	2.4%	2.1%	1.6%	2.2%	2.3%	1.5%	0.8%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	74	5.4%	69	4.6%	56	4.5%	83	7.0%	93	6.8%	65	5.1%	37	2.1%
Northern	13	1.2%	15	1.4%	0	0.0%	7	0.8%	14	1.5%	8	0.7%	11	0.8%
Central	16	1.0%	14	0.8%	12	0.8%	11	0.6%	15	0.7%	14	0.6%	9	0.3%
Southern	14	1.7%	11	1.3%	4	0.5%	5	0.5%	9	0.7%	8	0.5%	5	0.3%

Male	54	2.2%	49	1.9%	41	1.7%	52	2.1%	57	1.9%	54	1.7%	34	0.9%
Female	63	2.7%	60	2.4%	31	1.4%	54	2.3%	74	2.7%	41	1.3%	28	0.8%

0 to 2	46	2.5%	39	1.9%	22	1.2%	29	1.5%	43	1.8%	34	1.3%	22	0.7%
3 to 5	15	1.9%	15	1.7%	9	1.2%	11	1.3%	20	2.1%	14	1.1%	5	0.4%
6 to 11	13	1.1%	21	1.8%	14	1.3%	25	2.2%	30	2.1%	14	0.9%	10	0.6%
12 to 17	43	4.1%	34	3.3%	27	2.9%	41	4.6%	38	3.7%	33	2.9%	25	1.8%

Black	62	2.9%	55	2.5%	39	2.1%	67	3.7%	87	3.9%	53	2.3%	37	1.4%
White	43	1.9%	38	1.7%	17	0.8%	18	0.8%	29	1.0%	28	0.8%	19	0.5%
Hispanic	7	2.0%	11	2.4%	12	2.9%	16	3.7%	14	3.8%	12	2.4%	5	0.7%
Other Race/Ethnicity	5	4.7%	3	2.4%	1	1.3%	4	3.4%	1	0.8%	2	1.2%	0	0.0%

CONTINUITY AND STABILITY IN CARE

**Indicator 2.A.5 Initial Placement: Emergency Shelter/Emergency Foster Home**

Of all children entering substitute care, the percentage that was placed in emergency shelters or emergency foster homes in their first placement.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children entering substitute care	4,838	5,091	4,640	4,779	5,728	6,488	7,382
Children placed in emergency shelters or emergency foster homes	404	290	131	93	75	54	84
Percent	8.4%	5.7%	2.8%	1.9%	1.3%	0.8%	1.1%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	188	13.7%	147	9.8%	58	4.6%	35	2.9%	42	3.1%	38	3.0%	55	3.1%
Northern	48	4.4%	40	3.8%	29	3.2%	16	1.9%	13	1.4%	10	0.9%	9	0.7%
Central	29	1.9%	19	1.1%	12	0.8%	12	0.7%	8	0.4%	5	0.2%	5	0.2%
Southern	139	16.5%	84	9.6%	32	3.6%	30	3.1%	12	0.9%	1	0.1%	15	1.0%

Male	236	9.6%	159	6.2%	80	3.3%	53	2.2%	49	1.7%	32	1.0%	44	1.2%
Female	168	7.1%	131	5.2%	51	2.3%	40	1.7%	26	0.9%	22	0.7%	40	1.1%

0 to 2	51	2.8%	52	2.5%	10	0.5%	1	0.1%	3	0.1%	1	0.0%	14	0.5%
3 to 5	44	5.6%	31	3.6%	6	0.8%	2	0.2%	2	0.2%	2	0.2%	8	0.6%
6 to 11	103	8.7%	53	4.6%	14	1.3%	7	0.6%	14	1.0%	12	0.8%	16	0.9%
12 to 17	206	19.8%	154	14.9%	101	10.8%	83	9.3%	56	5.5%	39	3.4%	46	3.3%

Black	215	10.0%	149	6.7%	61	3.2%	40	2.2%	35	1.6%	35	1.5%	46	1.7%
White	155	6.9%	108	4.8%	59	2.6%	43	1.8%	27	0.9%	14	0.4%	25	0.7%
Hispanic	29	8.5%	27	5.9%	10	2.5%	9	2.1%	12	3.3%	5	1.0%	7	0.9%
Other Race/Ethnicity	5	4.7%	6	4.7%	1	1.3%	1	0.9%	1	0.8%	0	0.0%	6	3.4%

**Indicator 2.A.6 Initial Placement: Group Home/Institution**

Of all children entering substitute care, the percentage that was placed in group homes or institutions in their first placement.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children entering substitute care	4,838	5,091	4,640	4,779	5,728	6,488	7,382
Children placed in group homes or institutions	400	438	291	214	239	190	270
Percent	8.3%	8.6%	6.3%	4.5%	4.2%	2.9%	3.7%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	274	20.0%	322	21.5%	176	14.1%	110	9.2%	122	9.0%	85	6.7%	115	6.5%
Northern	52	4.8%	44	4.2%	35	3.9%	26	3.0%	33	3.6%	25	2.2%	46	3.4%
Central	46	3.0%	60	3.6%	62	3.9%	53	3.0%	46	2.2%	46	1.8%	63	2.3%
Southern	28	3.3%	12	1.4%	18	2.0%	25	2.6%	38	2.9%	34	2.1%	46	3.1%

Male	242	9.8%	267	10.3%	185	7.7%	140	5.7%	155	5.2%	116	3.6%	154	4.1%
Female	158	6.7%	171	6.8%	106	4.7%	74	3.2%	84	3.0%	74	2.3%	116	3.2%

0 to 2	52	2.8%	78	3.8%	34	1.8%	12	0.6%	13	0.5%	6	0.2%	9	0.3%
3 to 5	30	3.8%	50	5.8%	15	1.9%	7	0.8%	3	0.3%	3	0.2%	9	0.7%
6 to 11	65	5.5%	73	6.4%	32	3.0%	19	1.7%	29	2.1%	22	1.4%	21	1.2%
12 to 17	253	24.4%	237	22.9%	210	22.4%	176	19.8%	194	19.0%	159	13.9%	231	16.7%

Black	246	11.5%	278	12.4%	165	8.7%	125	6.8%	125	5.6%	99	4.2%	131	4.8%
White	99	4.4%	106	4.7%	87	3.9%	67	2.8%	93	3.1%	79	2.3%	96	2.6%
Hispanic	45	13.1%	47	10.2%	31	7.6%	19	4.4%	19	5.2%	10	2.0%	31	4.1%
Other Race/Ethnicity	10	9.4%	5	3.9%	4	5.3%	2	1.7%	2	1.5%	2	1.2%	8	4.5%

CONTINUITY AND STABILITY IN CARE

**Indicator 2.B.1 End of Year Placement: Home of Parents**

Of all children in substitute care at the end of the fiscal year, the percentage that was placed in the home of their parents.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children in substitute care at end of year	14,659	14,336	14,225	13,942	14,675	15,907	18,295
Children in home of parents	859	794	847	715	822	894	984
Percent	5.9%	5.5%	6.0%	5.1%	5.6%	5.6%	5.4%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	152	3.0%	153	3.1%	161	3.2%	132	2.8%	143	3.1%	159	3.4%	159	3.0%
Northern	173	5.3%	91	2.9%	92	3.2%	65	2.4%	71	2.8%	82	3.1%	113	3.7%
Central	398	9.6%	370	9.0%	441	10.7%	327	7.9%	409	8.8%	442	8.4%	442	7.1%
Southern	136	6.2%	180	8.5%	153	6.9%	191	8.0%	199	7.0%	211	6.3%	270	7.2%

Male	453	5.9%	403	5.3%	427	5.7%	395	5.4%	425	5.6%	455	5.6%	519	5.5%
Female	406	5.8%	391	5.8%	420	6.2%	320	4.8%	397	5.7%	439	5.7%	465	5.2%

0 to 2	184	5.8%	185	5.6%	175	5.4%	151	4.7%	184	5.1%	195	4.9%	195	4.2%
3 to 5	205	6.5%	167	5.7%	198	6.6%	168	5.6%	187	6.0%	213	6.2%	253	6.3%
6 to 11	289	6.6%	263	6.2%	273	6.5%	250	6.0%	285	6.6%	319	6.8%	327	6.1%
12 to 17	181	4.6%	179	4.6%	201	5.3%	146	4.1%	166	4.6%	167	4.4%	209	4.9%

Black	358	5.0%	294	4.2%	330	4.9%	256	4.0%	301	4.7%	359	5.3%	371	4.9%
White	423	6.9%	427	7.2%	437	7.4%	385	6.4%	436	6.6%	456	6.1%	538	6.3%
Hispanic	64	6.3%	45	4.0%	56	4.6%	62	5.0%	59	5.0%	53	4.2%	50	3.0%
Other Race/Ethnicity	14	4.7%	27	8.4%	21	7.0%	11	3.6%	23	6.8%	24	6.0%	17	3.8%

**Indicator 2.B.2 End of Year Placement: Kinship Foster Home**

Of all children in substitute care at the end of the fiscal year, the percentage that was placed in kinship foster homes.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children in substitute care at end of year	14,659	14,336	14,225	13,942	14,675	15,907	18,295
Children in kinship foster homes	6,110	6,199	6,478	6,702	7,360	8,497	10,440
Percent	41.7%	43.2%	45.5%	48.1%	50.2%	53.4%	57.1%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	1,942	38.4%	2,023	40.5%	2,148	43.3%	2,137	45.0%	2,094	45.3%	2,182	46.8%	2,788	52.6%
Northern	1,469	44.7%	1,407	45.4%	1,335	45.7%	1,240	46.4%	1,208	46.9%	1,270	47.9%	1,572	51.7%
Central	1,661	40.2%	1,758	42.7%	1,851	44.9%	2,037	49.3%	2,395	51.7%	2,907	55.5%	3,689	59.5%
Southern	1,038	47.3%	1,011	47.6%	1,144	51.4%	1,288	54.0%	1,663	58.4%	2,138	63.7%	2,391	63.7%

Male	3,061	39.8%	3,085	40.9%	3,212	43.0%	3,303	45.1%	3,660	47.8%	4,233	51.7%	5,160	55.1%
Female	3,048	43.8%	3,113	45.8%	3,266	48.4%	3,399	51.3%	3,700	52.7%	4,264	55.3%	5,279	59.1%

0 to 2	1,501	47.0%	1,599	48.2%	1,645	50.7%	1,736	54.4%	2,016	55.7%	2,262	56.6%	2,788	59.6%
3 to 5	1,598	50.8%	1,481	50.8%	1,564	52.0%	1,601	53.3%	1,699	54.2%	1,977	57.8%	2,441	60.4%
6 to 11	1,966	45.1%	2,008	47.7%	2,080	49.8%	2,126	51.2%	2,289	52.8%	2,676	56.8%	3,180	59.5%
12 to 17	1,045	26.4%	1,111	28.6%	1,189	31.3%	1,239	34.5%	1,356	37.8%	1,582	41.9%	2,031	48.0%

Black	2,778	38.7%	2,810	40.4%	2,825	41.8%	2,783	43.6%	2,944	45.7%	3,208	47.6%	3,928	52.0%
White	2,755	44.7%	2,692	45.5%	2,880	48.5%	3,093	51.8%	3,638	54.7%	4,366	58.7%	5,191	60.8%
Hispanic	449	44.1%	540	47.5%	620	51.3%	650	52.3%	586	49.4%	666	52.6%	1,010	60.7%
Other Race/Ethnicity	128	43.0%	154	48.1%	145	48.7%	160	51.8%	168	49.4%	218	54.6%	258	57.7%

CONTINUITY AND STABILITY IN CARE

**Indicator 2.B.3 End of Year Placement: Traditional Foster Home**

Of all children in substitute care at the end of the fiscal year, the percentage that was placed in traditional foster homes.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children in substitute care at end of year	14,659	14,336	14,225	13,942	14,675	15,907	18,295
Children in traditional foster homes	4,098	4,013	3,809	3,626	3,592	3,554	3,820
Percent	28.0%	28.0%	26.8%	26.0%	24.5%	22.3%	20.9%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	1,309	25.9%	1,296	25.9%	1,272	25.7%	1,187	25.0%	1,116	24.2%	1,044	22.4%	1,057	19.9%
Northern	943	28.7%	916	29.5%	842	28.8%	767	28.7%	690	26.8%	639	24.1%	633	20.8%
Central	1,179	28.6%	1,172	28.5%	1,070	25.9%	1,050	25.4%	1,132	24.4%	1,187	22.6%	1,356	21.9%
Southern	667	30.4%	629	29.6%	625	28.1%	622	26.1%	654	23.0%	684	20.4%	774	20.6%

Male	2,002	26.0%	2,037	27.0%	1,948	26.1%	1,849	25.3%	1,835	24.0%	1,757	21.4%	1,909	20.4%
Female	2,095	30.1%	1,975	29.1%	1,861	27.6%	1,777	26.8%	1,757	25.0%	1,797	23.3%	1,911	21.4%

0 to 2	1,316	41.2%	1,362	41.0%	1,256	38.7%	1,159	36.3%	1,231	34.0%	1,302	32.6%	1,456	31.2%
3 to 5	1,068	34.0%	1,026	35.2%	981	32.6%	946	31.5%	962	30.7%	923	27.0%	976	24.2%
6 to 11	1,156	26.5%	1,072	25.5%	1,065	25.5%	1,004	24.2%	932	21.5%	863	18.3%	946	17.7%
12 to 17	558	14.1%	553	14.2%	507	13.3%	517	14.4%	467	13.0%	466	12.3%	442	10.4%

Black	1,987	27.7%	1,977	28.4%	1,892	28.0%	1,758	27.5%	1,660	25.8%	1,622	24.1%	1,628	21.5%
White	1,730	28.1%	1,632	27.6%	1,509	25.4%	1,465	24.5%	1,529	23.0%	1,530	20.6%	1,754	20.6%
Hispanic	281	27.6%	307	27.0%	309	25.6%	302	24.3%	299	25.2%	297	23.5%	321	19.3%
Other Race/Ethnicity	99	33.2%	94	29.4%	88	29.5%	90	29.1%	85	25.0%	84	21.1%	92	20.6%



**Indicator 2.B.4 End of Year Placement: Specialized Foster Home**

Of all children in substitute care at the end of the fiscal year, the percentage that was placed in specialized foster homes.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children in substitute care at end of year	14,659	14,336	14,225	13,942	14,675	15,907	18,295
Children in specialized foster homes	2,261	2,105	2,024	1,964	1,978	2,031	2,148
Percent	15.4%	14.7%	14.2%	14.1%	13.5%	12.8%	11.7%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	1,135	22.5%	1,032	20.7%	995	20.1%	974	20.5%	973	21.1%	953	20.5%	983	18.5%
Northern	408	12.4%	427	13.8%	415	14.2%	413	15.5%	415	16.1%	486	18.3%	522	17.2%
Central	543	13.2%	505	12.3%	470	11.4%	437	10.6%	421	9.1%	430	8.2%	466	7.5%
Southern	175	8.0%	141	6.6%	144	6.5%	140	5.9%	169	5.9%	162	4.8%	177	4.7%

Male	1,310	17.0%	1,198	15.9%	1,169	15.6%	1,166	15.9%	1,137	14.8%	1,167	14.2%	1,214	13.0%
Female	950	13.7%	907	13.4%	855	12.7%	798	12.0%	841	12.0%	864	11.2%	934	10.5%

0 to 2	184	5.8%	160	4.8%	161	5.0%	144	4.5%	184	5.1%	237	5.9%	231	4.9%
3 to 5	265	8.4%	235	8.1%	258	8.6%	280	9.3%	279	8.9%	297	8.7%	358	8.9%
6 to 11	771	17.7%	696	16.5%	623	14.9%	652	15.7%	703	16.2%	707	15.0%	763	14.3%
12 to 17	1,041	26.3%	1,014	26.1%	982	25.9%	888	24.7%	812	22.6%	790	20.9%	796	18.8%

Black	1,326	18.5%	1,222	17.6%	1,151	17.0%	1,113	17.4%	1,109	17.2%	1,106	16.4%	1,197	15.8%
White	741	12.0%	685	11.6%	678	11.4%	624	10.5%	619	9.3%	675	9.1%	660	7.7%
Hispanic	155	15.2%	163	14.3%	161	13.3%	185	14.9%	196	16.5%	191	15.1%	223	13.4%
Other Race/Ethnicity	39	13.1%	32	10.0%	32	10.7%	40	12.9%	50	14.7%	54	13.5%	62	13.9%

CONTINUITY AND STABILITY IN CARE

**Indicator 2.B.5 End of Year Placement: Emergency Shelter/Emergency Foster Home**

Of all children in substitute care at the end of the fiscal year, the percentage that was placed in emergency shelters or emergency foster homes.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children in substitute care at end of year	14,659	14,336	14,225	13,942	14,675	15,907	18,295
Children in emergency shelters or emergency foster homes	130	83	47	33	42	27	37
Percent	0.9%	0.6%	0.3%	0.2%	0.3%	0.2%	0.2%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	54	1.1%	38	0.8%	13	0.3%	16	0.3%	11	0.2%	10	0.2%	13	0.2%
Northern	32	1.0%	13	0.4%	7	0.2%	6	0.2%	9	0.3%	3	0.1%	9	0.3%
Central	23	0.6%	17	0.4%	13	0.3%	4	0.1%	10	0.2%	7	0.1%	6	0.1%
Southern	21	1.0%	15	0.7%	14	0.6%	7	0.3%	12	0.4%	7	0.2%	9	0.2%

Male	73	0.9%	46	0.6%	30	0.4%	17	0.2%	27	0.4%	20	0.2%	24	0.3%
Female	57	0.8%	37	0.5%	17	0.3%	16	0.2%	15	0.2%	7	0.1%	13	0.1%

0 to 2	7	0.2%	2	0.1%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
3 to 5	2	0.1%	1	0.0%	0	0.0%	0	0.0%	0	0.0%	3	0.1%	1	0.0%
6 to 11	33	0.8%	9	0.2%	0	0.0%	3	0.1%	4	0.1%	7	0.1%	7	0.1%
12 to 17	88	2.2%	71	1.8%	47	1.2%	30	0.8%	38	1.1%	17	0.4%	29	0.7%

Black	73	1.0%	42	0.6%	24	0.4%	21	0.3%	20	0.3%	9	0.1%	13	0.2%
White	47	0.8%	31	0.5%	22	0.4%	8	0.1%	19	0.3%	15	0.2%	20	0.2%
Hispanic	8	0.8%	10	0.9%	0	0.0%	3	0.2%	1	0.1%	3	0.2%	4	0.2%
Other Race/Ethnicity	2	0.7%	0	0.0%	1	0.3%	1	0.3%	2	0.6%	0	0.0%	0	0.0%

**Indicator 2.B.6 End of Year Placement: Group Home**

Of all children in substitute care at the end of the fiscal year, the percentage that was placed in group homes.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children in substitute care at end of year	14,659	14,336	14,225	13,942	14,675	15,907	18,295
Children in group homes	165	158	132	102	101	119	96
Percent	1.1%	1.1%	0.9%	0.7%	0.7%	0.7%	0.5%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	77	1.5%	71	1.4%	54	1.1%	37	0.8%	33	0.7%	43	0.9%	28	0.5%
Northern	37	1.1%	35	1.1%	40	1.4%	23	0.9%	24	0.9%	26	1.0%	35	1.2%
Central	41	1.0%	43	1.0%	31	0.8%	34	0.8%	34	0.7%	32	0.6%	26	0.4%
Southern	10	0.5%	9	0.4%	7	0.3%	8	0.3%	10	0.4%	18	0.5%	7	0.2%

Male	108	1.4%	90	1.2%	69	0.9%	61	0.8%	64	0.8%	70	0.9%	62	0.7%
Female	57	0.8%	68	1.0%	63	0.9%	41	0.6%	37	0.5%	49	0.6%	34	0.4%

0 to 2	1	0.0%	5	0.2%	3	0.1%	2	0.1%	1	0.0%	1	0.0%	0	0.0%
3 to 5	0	0.0%	0	0.0%	1	0.0%	3	0.1%	0	0.0%	2	0.1%	0	0.0%
6 to 11	15	0.3%	12	0.3%	14	0.3%	12	0.3%	11	0.3%	15	0.3%	10	0.2%
12 to 17	149	3.8%	141	3.6%	114	3.0%	85	2.4%	89	2.5%	101	2.7%	86	2.0%

Black	97	1.4%	81	1.2%	72	1.1%	47	0.7%	47	0.7%	51	0.8%	39	0.5%
White	56	0.9%	66	1.1%	46	0.8%	46	0.8%	49	0.7%	59	0.8%	51	0.6%
Hispanic	8	0.8%	10	0.9%	12	1.0%	8	0.6%	4	0.3%	5	0.4%	4	0.2%
Other Race/Ethnicity	4	1.3%	1	0.3%	2	0.7%	1	0.3%	1	0.3%	4	1.0%	2	0.4%

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**Indicator 2.B.7 End of Year Placement: Institution**

Of all children in substitute care at the end of the fiscal year, the percentage that was placed in institutions.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children in substitute care at end of year	14,659	14,336	14,225	13,942	14,675	15,907	18,295
Children in institutions	1,036	984	888	800	780	785	770
Percent	7.1%	6.9%	6.2%	5.7%	5.3%	4.9%	4.2%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	382	7.6%	382	7.6%	313	6.3%	266	5.6%	249	5.4%	269	5.8%	272	5.1%
Northern	225	6.8%	213	6.9%	188	6.4%	158	5.9%	156	6.1%	143	5.4%	156	5.1%
Central	282	6.8%	248	6.0%	249	6.0%	245	5.9%	235	5.1%	237	4.5%	214	3.5%
Southern	147	6.7%	141	6.6%	138	6.2%	131	5.5%	140	4.9%	136	4.1%	128	3.4%

Male	691	9.0%	683	9.1%	621	8.3%	528	7.2%	509	6.6%	492	6.0%	475	5.1%
Female	345	5.0%	301	4.4%	267	4.0%	272	4.1%	271	3.9%	293	3.8%	295	3.3%

0 to 2	4	0.1%	6	0.2%	2	0.1%	2	0.1%	4	0.1%	1	0.0%	4	0.1%
3 to 5	6	0.2%	8	0.3%	4	0.1%	3	0.1%	6	0.2%	6	0.2%	11	0.3%
6 to 11	128	2.9%	149	3.5%	124	3.0%	105	2.5%	111	2.6%	122	2.6%	113	2.1%
12 to 17	898	22.7%	821	21.1%	758	20.0%	690	19.2%	659	18.4%	656	17.4%	642	15.2%

Black	558	7.8%	526	7.6%	457	6.8%	411	6.4%	363	5.6%	387	5.7%	379	5.0%
White	413	6.7%	385	6.5%	371	6.2%	348	5.8%	363	5.5%	331	4.5%	319	3.7%
Hispanic	52	5.1%	61	5.4%	51	4.2%	34	2.7%	42	3.5%	51	4.0%	53	3.2%
Other Race/Ethnicity	12	4.0%	12	3.8%	9	3.0%	6	1.9%	11	3.2%	15	3.8%	16	3.6%

**Indicator 2.C Initial Placement with Siblings**

Of all children entering substitute care and initially placed in kinship or traditional foster homes, the percentage that was placed with their siblings in their initial placement.							
	2014	2015	2016	2017	2018	2019	2020
<b>Kinship Foster Care</b>	<b>1-2 siblings</b>						
Children with 1-2 siblings	1,298	1,371	1,372	1,438	1,805	2,275	2,512
Children initially placed with all siblings	1,049	1,112	1,096	1,145	1,456	1,867	2,016
Percent	80.8%	81.1%	79.9%	79.6%	80.7%	82.1%	80.3%
<b>Traditional Foster Care</b>	<b>1-2 siblings</b>						
Children with 1-2 siblings	408	471	369	464	499	521	480
Children initially placed with all siblings	254	286	254	306	319	338	247
Percent	62.3%	60.7%	68.8%	65.9%	63.9%	64.9%	51.5%
<b>Kinship Foster Care</b>	<b>3 or more siblings</b>						
Children with 3 or more siblings	531	584	638	642	764	1,028	1,391
Children initially placed with all siblings	302	305	310	284	422	588	715
Percent	56.9%	52.2%	48.6%	44.2%	55.2%	57.2%	51.4%
<b>Traditional Foster Care</b>	<b>3 or more siblings</b>						
Children with 3 or more siblings	215	170	143	205	254	238	235
Children initially placed with all siblings	9	16	12	20	34	27	22
Percent	4.2%	9.4%	8.4%	9.8%	13.4%	11.3%	9.4%

**Indicator 2.D End of Year Placement with Siblings**

Of all children in kinship or traditional foster homes at the end of the fiscal year, the percentage that was placed with their siblings.							
	2014	2015	2016	2017	2018	2019	2020
<b>Kinship Foster Care</b>	<b>1-2 siblings</b>						
Children with 1-2 siblings	3,072	3,085	3,270	3,383	3,730	4,363	5,265
Children placed with all siblings at end of year	2,227	2,236	2,350	2,425	2,699	3,100	3,688
Percent	72.5%	72.5%	71.9%	71.7%	72.4%	71.1%	70.0%
<b>Traditional Foster Care</b>	<b>1-2 siblings</b>						
Children with 1-2 siblings	1,967	1,971	1,883	1,759	1,742	1,687	1,877
Children placed with all siblings at end of year	1,138	1,099	1,061	1,063	1,063	1,011	1,080
Percent	57.9%	55.8%	56.3%	60.4%	61.0%	59.9%	57.5%
<b>Kinship Foster Care</b>	<b>3 or more siblings</b>						
Children with 3 or more siblings	1,549	1,569	1,562	1,602	1,719	1,979	2,600
Children placed with all siblings at end of year	491	561	535	571	560	661	1,002
Percent	31.7%	35.8%	34.3%	35.6%	32.6%	33.4%	38.5%
<b>Traditional Foster Care</b>	<b>3 or more siblings</b>						
Children with 3 or more siblings	1,144	1,034	961	950	947	970	1,023
Children placed with all siblings at end of year	116	87	68	84	117	113	115
Percent	10.1%	8.4%	7.1%	8.8%	12.4%	11.6%	11.2%

**Indicator 2.E Placement Stability (CFSR)**

Of all children who entered substitute care during the fiscal year, the rate of placement moves per 1,000 days of care.

	2014	2015	2016	2017	2018	2019	2020
Children entering substitute care	4,494	4,741	4,389	4,562	5,510	6,233	7,110
Days in substitute care	755,449	801,811	735,270	749,116	907,474	1,003,086	1,237,288
Placement moves	3,264	3,482	2,788	2,987	3,242	3,692	3,882
Placement moves per 1,000 days in substitute care	4.3	4.3	3.8	4.0	3.6	3.7	3.1

	Moves per 1,000 days	Moves per 1,000 days	Moves per 1,000 days	Moves per 1,000 days	Moves per 1,000 days	Moves per 1,000 days	Moves per 1,000 days
Cook	5.2	5.1	4.5	4.1	4.1	3.9	3.2
Northern	3.9	4.1	3.5	3.9	3.7	4.4	3.3
Central	3.9	3.5	3.4	4.0	3.2	3.4	2.9
Southern	4.4	5.1	3.7	3.9	3.4	3.4	3.3

Male	4.2	4.2	3.7	4.0	3.6	3.7	3.1
Female	4.5	4.5	3.9	4.0	3.6	3.7	3.2

0 to 2	2.6	3.0	2.5	2.7	2.5	2.6	2.2
3 to 5	3.3	3.6	3.1	3.3	3.0	3.4	2.9
6 to 11	4.1	4.2	3.5	4.1	3.8	3.8	3.2
12 to 17	8.8	8.1	7.4	7.7	6.8	6.4	5.4

Black	5.3	5.3	4.6	4.9	4.2	4.2	3.5
White	3.6	3.5	3.1	3.3	3.1	3.3	2.9
Hispanic	3.7	3.8	3.7	3.9	3.3	3.5	2.6
Other Race/Ethnicity	3.7	3.5	3.5	4.5	4.3	3.6	3.2

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**Indicator 2.F Children Who Run Away from Substitute Care**

Of all children ages 12 to 17 entering substitute care, the percentage that run away from a substitute care placement during their first year.							
	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
Children entering substitute care between age 12 to 17	1,002	1,039	1,036	937	890	1,020	1,145
Children who run away during their first year	197	223	208	165	152	172	162
Percent	19.7%	21.5%	20.1%	17.6%	17.1%	16.9%	14.1%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	116	33.0%	122	32.3%	110	30.9%	85	27.6%	62	22.4%	85	27.8%	61	21.7%
Northern	43	18.1%	30	14.0%	33	14.6%	31	17.6%	30	19.2%	22	12.1%	31	14.8%
Central	24	8.6%	45	16.2%	34	11.2%	31	10.9%	38	13.0%	41	12.5%	33	8.3%
Southern	14	10.4%	26	15.4%	31	20.5%	18	10.7%	22	13.3%	24	11.8%	37	14.3%

Male	88	18.0%	109	20.3%	110	22.0%	73	15.5%	76	17.2%	87	16.9%	82	15.1%
Female	109	21.3%	114	22.8%	98	18.2%	92	19.8%	76	17.0%	85	16.8%	80	13.3%

12 to 14	65	12.5%	74	13.8%	66	12.1%	42	8.6%	44	9.8%	62	11.2%	68	10.4%
15 to 17	132	27.5%	149	29.7%	142	29.0%	123	27.3%	108	24.5%	110	23.6%	94	19.2%

Black	129	27.3%	147	28.6%	131	25.6%	94	23.3%	87	22.6%	104	23.7%	88	19.2%
White	49	11.2%	59	13.7%	58	13.6%	58	13.4%	45	11.7%	56	11.4%	57	10.2%
Hispanic	14	20.9%	14	18.4%	19	24.7%	11	13.1%	18	19.4%	11	17.2%	14	13.9%
Other Race/Ethnicity	4	16.0%	3	16.7%	0	0.0%	0	0.0%	1	4.3%	1	4.2%	1	5.9%



**Indicator 2.G Median Length of Stay in Substitute Care**

The median length of stay in substitute care of all children who entered substitute care during the fiscal year.							
	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
Children entering substitute care	4,719	4,764	4,746	4,838	5,091	4,640	4,779
Median length of stay (in months)	34	34	33	34	33	33	32

	N	Months	N	Months	N	Months	N	Months	N	Months	N	Months	N	Months
Cook	1,122	50	1,361	48	1,277	47	1,368	48	1,500	44	1,250	48	1,193	43
Northern	1,011	31	1,060	32	1,187	29	1,079	31	1,050	28	908	27	855	27
Central	1,646	29	1,453	30	1,551	29	1,551	30	1,665	29	1,600	27	1,762	29
Southern	940	29	888	27	730	26	840	27	876	32	882	32	969	30

Male	2,414	34	2,431	35	2,444	32	2,470	35	2,584	33	2,408	32	2,465	32
Female	2,305	35	2,332	34	2,302	33	2,368	34	2,507	33	2,232	33	2,314	32

0 to 2	1,878	34	1,880	34	1,897	31	1,828	33	2,050	31	1,867	31	1,907	31
3 to 5	851	30	860	32	802	30	788	33	862	33	770	32	844	31
6 to 11	1,021	29	1,016	32	1,044	29	1,183	33	1,143	33	1,066	33	1,138	32
12 to 17	969	44	1,008	41	1,002	43	1,039	42	1,036	40	937	38	890	39

Black	2,043	40	2,057	40	2,031	39	2,140	39	2,240	38	1,889	37	1,830	38
White	2,320	30	2,322	30	2,245	28	2,249	31	2,251	30	2,243	30	2,380	29
Hispanic	246	38	269	39	351	39	343	38	461	32	408	36	432	36
Other Race/Ethnicity	110	32	114	26	117	29	106	31	127	36	76	33	117	33

**Indicator 3.A.1 Reunification Within 12 Months**

Of all children who entered substitute care during the year, the percentage that was reunified with their parents within 12 months.

	2013	2014	2015	2016	2017	2018	2019
Children entering substitute care	4,746	4,838	5,091	4,640	4,779	5,728	6,488
Children reunified within 12 months	689	669	734	670	627	873	952
Percent	14.5%	13.8%	14.4%	14.4%	13.1%	15.2%	14.7%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	84	6.6%	81	5.9%	112	7.5%	60	4.8%	60	5.0%	138	10.1%	81	6.4%
Northern	204	17.2%	217	20.1%	188	17.9%	177	19.5%	150	17.5%	183	19.8%	202	17.9%
Central	256	16.5%	205	13.2%	267	16.0%	297	18.6%	285	16.2%	354	16.6%	436	17.5%
Southern	145	19.9%	166	19.8%	167	19.1%	136	15.4%	132	13.6%	198	15.1%	233	14.6%

Male	356	14.6%	329	13.3%	356	13.8%	355	14.7%	320	13.0%	458	15.5%	469	14.4%
Female	333	14.5%	340	14.4%	378	15.1%	315	14.1%	307	13.3%	415	15.0%	483	14.9%

0 to 2	253	13.3%	218	11.9%	276	13.5%	254	13.6%	218	11.4%	306	12.9%	314	12.4%
3 to 5	134	16.7%	117	14.8%	133	15.4%	121	15.7%	118	14.0%	157	16.7%	194	15.9%
6 to 11	190	18.2%	205	17.3%	198	17.3%	182	17.1%	184	16.2%	254	18.2%	269	16.9%
12 to 17	112	11.2%	129	12.4%	127	12.3%	113	12.1%	107	12.0%	156	15.3%	175	15.3%

Black	248	12.2%	241	11.3%	279	12.5%	233	12.3%	208	11.4%	322	14.3%	321	13.6%
White	379	16.9%	354	15.7%	367	16.3%	360	16.0%	347	14.6%	470	15.9%	514	15.0%
Hispanic	40	11.4%	53	15.5%	60	13.0%	58	14.2%	55	12.7%	55	14.9%	81	16.1%
Other Race/Ethnicity	21	17.9%	21	19.8%	23	18.1%	16	21.1%	13	11.1%	22	16.9%	28	16.5%

**Indicator 3.A.2 Reunification Within 24 Months**

Of all children who entered substitute care during the year, the percentage that was reunified with their parents within 24 months.

	2012	2013	2014	2015	2016	2017	2018
Children entering substitute care	4,764	4,746	4,838	5,091	4,640	4,779	5,728
Children reunified within 24 months	1,348	1,434	1,362	1,454	1,291	1,294	1,708
Percent	28.3%	30.2%	28.2%	28.6%	27.8%	27.1%	29.8%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	186	13.7%	185	14.5%	196	14.3%	260	17.3%	182	14.6%	200	16.8%	284	20.9%
Northern	343	32.4%	423	35.6%	380	35.2%	371	35.3%	313	34.5%	265	31.0%	326	35.4%
Central	497	34.2%	560	36.1%	487	31.4%	545	32.7%	553	34.6%	571	32.4%	749	35.2%
Southern	322	36.3%	265	36.3%	299	35.6%	278	31.7%	243	27.6%	258	26.6%	349	26.6%

Male	677	27.8%	757	31.0%	672	27.2%	733	28.4%	683	28.4%	660	26.8%	897	30.3%
Female	671	28.8%	677	29.4%	690	29.1%	721	28.8%	608	27.2%	634	27.4%	811	29.3%

0 to 2	460	24.5%	540	28.5%	468	25.6%	565	27.6%	497	26.6%	465	24.4%	611	25.7%
3 to 5	287	33.4%	277	34.5%	251	31.9%	273	31.7%	232	30.1%	252	29.9%	306	32.6%
6 to 11	351	34.5%	398	38.1%	405	34.2%	371	32.5%	343	32.2%	380	33.4%	517	37.0%
12 to 17	250	24.8%	219	21.9%	238	22.9%	245	23.6%	219	23.4%	197	22.1%	274	26.9%

Black	428	20.8%	529	26.0%	526	24.6%	570	25.4%	478	25.3%	450	24.6%	623	27.8%
White	804	34.6%	777	34.6%	710	31.6%	689	30.6%	664	29.6%	690	29.0%	920	31.2%
Hispanic	86	32.0%	85	24.2%	94	27.4%	157	34.1%	120	29.4%	117	27.1%	118	32.1%
Other Race/Ethnicity	30	26.3%	42	35.9%	32	30.2%	33	26.0%	23	30.3%	29	24.8%	39	30.0%

**Indicator 3.A.3 Reunification Within 36 Months**

Of all children who entered substitute care during the year, the percentage that was reunified with their parents within 36 months.							
	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
Children entering substitute care	4,719	4,764	4,746	4,838	5,091	4,640	4,779
Children reunified within 36 months	1,727	1,733	1,841	1,688	1,841	1,673	1,628
Percent	36.6%	36.4%	38.8%	34.9%	36.2%	36.1%	34.1%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	208	18.5%	284	20.9%	296	23.2%	288	21.1%	386	25.7%	289	23.1%	270	22.6%
Northern	449	44.4%	436	41.1%	524	44.1%	438	40.6%	444	42.3%	370	40.7%	333	38.9%
Central	672	40.8%	617	42.5%	719	46.4%	612	39.5%	664	39.9%	685	42.8%	692	39.3%
Southern	398	42.3%	394	44.4%	301	41.2%	350	41.7%	347	39.6%	329	37.3%	333	34.4%

Male	900	37.3%	884	36.4%	965	39.5%	841	34.0%	954	36.9%	886	36.8%	829	33.6%
Female	827	35.9%	849	36.4%	876	38.1%	847	35.8%	887	35.4%	787	35.3%	799	34.5%

0 to 2	602	32.1%	607	32.3%	685	36.1%	588	32.2%	730	35.6%	650	34.8%	598	31.4%
3 to 5	380	44.7%	378	44.0%	364	45.4%	307	39.0%	334	38.7%	311	40.4%	321	38.0%
6 to 11	477	46.7%	448	44.1%	504	48.3%	501	42.3%	482	42.2%	434	40.7%	466	40.9%
12 to 17	268	27.7%	300	29.8%	288	28.7%	292	28.1%	295	28.5%	278	29.7%	243	27.3%

Black	663	32.5%	594	28.9%	697	34.3%	664	31.0%	733	32.7%	633	33.5%	564	30.8%
White	931	40.1%	983	42.3%	968	43.1%	862	38.3%	862	38.3%	835	37.2%	869	36.5%
Hispanic	95	38.6%	112	41.6%	126	35.9%	125	36.4%	204	44.3%	170	41.7%	146	33.8%
Other Race/Ethnicity	38	34.5%	44	38.6%	49	41.9%	37	34.9%	37	29.1%	29	38.2%	39	33.3%

**Indicator 3.B.1 Stability of Reunification at One Year**

Of all children who were reunified during the year, the percentage that remained with their family at one year.							
	2013	2014	2015	2016	2017	2018	2019
Children reunified	2,000	2,004	2,145	1,965	1,896	1,962	2,290
Children stable at one year	1,860	1,912	2,036	1,822	1,785	1,810	2,093
Percent	93.0%	95.4%	94.9%	92.7%	94.1%	92.3%	91.4%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	340	95.0%	333	94.9%	383	91.4%	336	92.3%	362	95.0%	440	91.7%	416	92.9%
Northern	434	92.3%	514	95.7%	588	95.8%	422	93.2%	388	93.9%	373	92.6%	375	89.9%
Central	635	91.6%	667	95.8%	696	95.7%	734	92.8%	708	94.1%	627	91.9%	857	91.1%
Southern	451	94.2%	398	94.8%	369	95.8%	330	92.4%	327	93.4%	370	93.2%	445	91.9%

Male	966	93.5%	1,033	95.7%	1,020	94.8%	968	93.7%	929	94.0%	987	93.3%	1,058	90.5%
Female	894	92.5%	879	95.0%	1,016	95.0%	854	91.6%	856	94.3%	823	91.0%	1,035	92.3%

0 to 2	342	90.5%	383	91.8%	439	93.8%	418	91.7%	371	91.6%	394	89.3%	466	89.6%
3 to 5	465	93.6%	468	96.3%	474	95.4%	414	93.2%	435	96.2%	449	93.7%	484	90.8%
6 to 11	672	93.2%	666	96.9%	700	95.5%	599	93.7%	592	95.6%	601	94.1%	711	93.3%
12 to 17	381	94.3%	395	95.4%	423	94.6%	391	91.8%	387	92.1%	366	90.8%	432	90.9%

Black	669	92.5%	709	96.2%	829	94.0%	762	92.4%	710	94.7%	715	89.6%	798	91.5%
White	1,017	93.2%	1,018	94.3%	996	95.6%	862	92.6%	869	94.4%	853	93.1%	1,080	91.1%
Hispanic	127	93.4%	129	100.0%	170	94.4%	154	95.7%	163	91.1%	211	98.6%	166	93.3%
Other Race/Ethnicity	47	94.0%	56	96.6%	41	100.0%	44	91.7%	43	93.5%	31	91.2%	49	90.7%

**Indicator 3.B.2 Stability of Reunification at Two Years**

Of all children who were reunified during the year, the percentage that remained with their family at two years.							
	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>
Children reunified	2,180	2,000	2,004	2,145	1,965	1,896	1,962
Children stable at two years	2,002	1,820	1,861	2,002	1,756	1,730	1,734
Percent	91.8%	91.0%	92.9%	93.3%	89.4%	91.2%	88.4%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	336	91.6%	337	94.1%	324	92.3%	376	89.7%	334	91.8%	353	92.7%	431	89.8%
Northern	499	88.0%	420	89.4%	495	92.2%	578	94.1%	408	90.1%	371	89.8%	350	86.8%
Central	767	95.4%	621	89.6%	655	94.1%	685	94.2%	697	88.1%	685	91.1%	599	87.8%
Southern	400	90.5%	442	92.3%	387	92.1%	363	94.3%	317	88.8%	321	91.7%	354	89.2%

Male	1,013	90.9%	942	91.2%	1,009	93.5%	1,004	93.3%	931	90.1%	897	90.8%	940	88.8%
Female	987	92.9%	878	90.8%	852	92.1%	998	93.4%	825	88.5%	833	91.7%	794	87.8%

0 to 2	374	90.8%	333	88.1%	370	88.7%	429	91.7%	392	86.0%	358	88.4%	370	83.9%
3 to 5	508	93.4%	460	92.6%	458	94.2%	463	93.2%	399	89.9%	422	93.4%	431	90.0%
6 to 11	678	91.4%	654	90.7%	647	94.2%	693	94.5%	584	91.4%	572	92.4%	579	90.6%
12 to 17	442	91.7%	373	92.3%	386	93.2%	417	93.3%	381	89.4%	378	90.0%	354	87.8%

Black	766	89.7%	652	90.2%	687	93.2%	824	93.4%	735	89.1%	691	92.1%	689	86.3%
White	1,064	92.9%	995	91.2%	994	92.0%	969	93.0%	829	89.0%	839	91.1%	814	88.9%
Hispanic	130	96.3%	126	92.6%	124	96.1%	168	93.3%	150	93.2%	157	87.7%	200	93.5%
Other Race/Ethnicity	42	91.3%	47	94.0%	56	96.6%	41	100.0%	42	87.5%	43	93.5%	31	91.2%

**Indicator 3.B.3 Stability of Reunification at Five Years**

Of all children who were reunified during the year, the percentage that remained with their family at five years.							
	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>
Children reunified	1,997	2,070	2,221	2,180	2,000	2,004	2,145
Children stable at five years	1,750	1,834	1,975	1,922	1,724	1,782	1,869
Percent	87.6%	88.6%	88.9%	88.2%	86.2%	88.9%	87.1%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	346	89.2%	326	87.4%	342	91.4%	318	86.6%	318	88.8%	318	90.6%	364	86.9%
Northern	397	88.0%	388	85.8%	455	87.8%	480	84.7%	406	86.4%	480	89.4%	554	90.2%
Central	717	86.1%	811	92.3%	798	87.9%	743	92.4%	587	84.7%	619	88.9%	631	86.8%
Southern	290	89.2%	309	84.4%	380	90.3%	381	86.2%	413	86.2%	365	86.9%	320	83.1%

Male	915	87.3%	925	89.5%	1,007	89.8%	976	87.5%	896	86.7%	961	89.1%	939	87.3%
Female	830	88.0%	909	87.7%	965	88.0%	944	88.8%	828	85.6%	821	88.8%	930	87.0%

0 to 2	339	86.7%	368	86.4%	375	85.4%	357	86.7%	307	81.2%	351	84.2%	395	84.4%
3 to 5	396	85.5%	438	88.0%	502	90.0%	486	89.3%	434	87.3%	433	89.1%	429	86.3%
6 to 11	612	88.2%	596	88.8%	667	89.7%	644	86.8%	615	85.3%	619	90.1%	642	87.6%
12 to 17	403	89.8%	432	90.9%	431	89.8%	435	90.2%	368	91.1%	379	91.5%	403	90.2%

Black	647	85.5%	739	89.4%	798	87.9%	729	85.4%	615	85.1%	659	89.4%	782	88.7%
White	919	88.7%	946	87.8%	999	89.0%	1,026	89.6%	941	86.3%	948	87.8%	889	85.3%
Hispanic	141	90.4%	90	90.0%	125	92.6%	125	92.6%	122	89.7%	120	93.0%	158	87.8%
Other Race/Ethnicity	43	89.6%	59	90.8%	53	96.4%	42	91.3%	46	92.0%	55	94.8%	40	97.6%

LEGAL PERMANENCE

**Indicator 3.B.4 Stability of Reunification at Ten Years**

Of all children who were reunified during the year, the percentage that remained with their family at ten years.							
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
Children reunified	1,994	2,081	2,030	1,906	1,900	1,997	2,070
Children stable at ten years	1,667	1,774	1,701	1,646	1,630	1,693	1,761
Percent	83.6%	85.2%	83.8%	86.4%	85.8%	84.8%	85.1%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	480	82.6%	456	82.8%	420	85.5%	374	84.6%	267	88.1%	342	88.1%	311	83.4%
Northern	319	88.6%	331	87.8%	342	87.7%	378	85.3%	336	88.4%	385	85.4%	376	83.2%
Central	571	83.5%	657	87.3%	569	81.5%	563	88.2%	687	84.9%	690	82.8%	778	88.5%
Southern	297	80.5%	330	82.5%	370	82.0%	331	86.4%	340	83.3%	276	84.9%	296	80.9%

Male	877	83.5%	920	84.7%	862	84.2%	864	86.1%	857	86.0%	890	84.9%	893	86.4%
Female	789	83.7%	852	85.8%	838	83.4%	782	86.7%	769	85.6%	798	84.6%	868	83.8%

0 to 2	281	78.5%	316	82.1%	313	81.9%	267	80.2%	318	81.7%	320	81.8%	347	81.5%
3 to 5	307	79.9%	347	80.5%	366	78.2%	354	84.9%	377	85.7%	378	81.6%	412	82.7%
6 to 11	528	82.9%	586	85.4%	560	84.1%	566	87.8%	513	84.5%	592	85.3%	570	84.9%
12 to 17	551	89.6%	525	90.7%	462	89.9%	459	89.8%	422	90.9%	403	89.8%	432	90.9%

Black	666	83.5%	707	81.9%	689	81.3%	650	82.9%	576	84.8%	625	82.6%	704	85.1%
White	810	82.4%	878	86.9%	882	85.1%	854	88.3%	882	85.4%	884	85.3%	909	84.3%
Hispanic	122	87.1%	128	90.1%	110	87.3%	88	88.9%	111	90.2%	141	90.4%	89	89.0%
Other Race/Ethnicity	69	94.5%	61	92.4%	20	100.0%	54	96.4%	61	93.8%	43	89.6%	59	90.8%



**Indicator 3.C.1 Adoption Within 24 Months**

Of all children who entered substitute care during the year, the percentage that was adopted within 24 months.							
	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>
Children entering substitute care	4,764	4,746	4,838	5,091	4,640	4,779	5,728
Children adopted within 24 months	142	161	178	225	250	270	243
Percent	3.0%	3.4%	3.7%	4.4%	5.4%	5.6%	4.2%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	35	2.6%	28	2.2%	25	1.8%	29	1.9%	26	2.1%	23	1.9%	19	1.4%
Northern	25	2.4%	36	3.0%	21	1.9%	62	5.9%	57	6.3%	63	7.4%	50	5.4%
Central	41	2.8%	65	4.2%	82	5.3%	92	5.5%	118	7.4%	118	6.7%	108	5.1%
Southern	41	4.6%	32	4.4%	50	6.0%	42	4.8%	49	5.6%	66	6.8%	66	5.0%

Male	64	2.6%	79	3.2%	100	4.0%	107	4.1%	131	5.4%	135	5.5%	125	4.2%
Female	78	3.3%	82	3.6%	78	3.3%	118	4.7%	119	5.3%	135	5.8%	118	4.3%

0 to 2	101	5.4%	127	6.7%	132	7.2%	164	8.0%	172	9.2%	181	9.5%	188	7.9%
3 to 5	21	2.4%	19	2.4%	27	3.4%	32	3.7%	33	4.3%	38	4.5%	21	2.2%
6 to 11	17	1.7%	12	1.1%	13	1.1%	22	1.9%	30	2.8%	36	3.2%	24	1.7%
12 to 17	3	0.3%	3	0.3%	6	0.6%	7	0.7%	15	1.6%	15	1.7%	10	1.0%

Black	40	1.9%	61	3.0%	55	2.6%	80	3.6%	74	3.9%	67	3.7%	68	3.0%
White	85	3.7%	90	4.0%	113	5.0%	134	6.0%	165	7.4%	172	7.2%	154	5.2%
Hispanic	3	1.1%	3	0.9%	3	0.9%	7	1.5%	7	1.7%	17	3.9%	11	3.0%
Other Race/Ethnicity	14	12.3%	7	6.0%	7	6.6%	4	3.1%	2	2.6%	10	8.5%	6	4.6%

**Indicator 3.C.2 Adoption Within 36 Months**

Of all children who entered substitute care during the year, the percentage that was adopted within 36 months.							
	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
Children entering substitute care	4,719	4,764	4,746	4,838	5,091	4,640	4,779
Children adopted within 36 months	518	542	557	605	689	697	803
Percent	11.0%	11.4%	11.7%	12.5%	13.5%	15.0%	16.8%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	64	5.7%	85	6.2%	58	4.5%	72	5.3%	88	5.9%	82	6.6%	83	7.0%
Northern	90	8.9%	119	11.2%	142	12.0%	168	15.6%	181	17.2%	174	19.2%	181	21.2%
Central	251	15.2%	204	14.0%	224	14.4%	255	16.4%	300	18.0%	292	18.3%	330	18.7%
Southern	113	12.0%	134	15.1%	133	18.2%	110	13.1%	120	13.7%	149	16.9%	209	21.6%

Male	260	10.8%	252	10.4%	278	11.4%	310	12.6%	342	13.2%	359	14.9%	417	16.9%
Female	258	11.2%	290	12.4%	279	12.1%	295	12.5%	347	13.8%	338	15.1%	386	16.7%

0 to 2	358	19.1%	383	20.4%	391	20.6%	405	22.2%	484	23.6%	440	23.6%	487	25.5%
3 to 5	75	8.8%	95	11.0%	89	11.1%	101	12.8%	102	11.8%	121	15.7%	143	16.9%
6 to 11	74	7.2%	53	5.2%	67	6.4%	84	7.1%	85	7.4%	108	10.1%	137	12.0%
12 to 17	11	1.1%	11	1.1%	10	1.0%	15	1.4%	18	1.7%	28	3.0%	36	4.0%

Black	155	7.6%	150	7.3%	162	8.0%	194	9.1%	220	9.8%	204	10.8%	216	11.8%
White	342	14.7%	361	15.5%	363	16.2%	373	16.6%	410	18.2%	445	19.8%	512	21.5%
Hispanic	8	3.3%	7	2.6%	15	4.3%	17	5.0%	34	7.4%	32	7.8%	53	12.3%
Other Race/Ethnicity	13	11.8%	24	21.1%	17	14.5%	21	19.8%	22	17.3%	13	17.1%	17	14.5%

**Indicator 3.D.1 Stability of Adoption at Two Years**

Of all children who were adopted during the year, the percentage that remained with their family at two years.							
	2012	2013	2014	2015	2016	2017	2018
Children adopted	1,757	1,499	1,539	1,870	1,583	1,849	1,732
Children stable at two years	1,702	1,454	1,509	1,825	1,543	1,829	1,701
Percent	96.9%	97.0%	98.1%	97.6%	97.5%	98.9%	98.2%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	453	94.8%	381	94.5%	313	96.6%	487	96.1%	391	95.1%	415	97.4%	394	96.8%
Northern	330	99.4%	280	98.2%	364	99.5%	403	98.5%	395	98.3%	470	99.4%	432	99.3%
Central	648	98.8%	531	98.0%	548	97.9%	575	98.6%	495	98.8%	639	99.5%	595	98.3%
Southern	271	93.1%	262	97.4%	284	98.3%	360	97.0%	262	97.4%	305	99.0%	280	98.2%

Male	883	97.0%	727	97.6%	798	98.0%	921	97.3%	780	97.7%	945	98.6%	856	98.2%
Female	817	96.7%	727	96.4%	711	98.1%	904	97.9%	761	97.2%	884	99.2%	845	98.3%

0 to 2	238	97.5%	206	99.0%	214	99.5%	270	100.0%	246	98.0%	321	99.4%	289	99.0%
3 to 5	617	99.0%	531	98.3%	547	99.3%	658	99.4%	501	98.0%	623	99.4%	577	99.5%
6 to 11	648	97.3%	545	97.5%	556	98.8%	710	97.7%	617	98.7%	667	99.3%	625	98.3%
12 to 17	199	88.8%	172	89.6%	192	91.4%	187	88.6%	179	91.3%	218	96.0%	210	93.8%

Black	768	95.9%	644	95.8%	620	97.5%	764	96.5%	643	96.4%	755	98.4%	695	96.8%
White	820	97.6%	713	97.9%	794	98.6%	945	98.4%	786	98.1%	924	99.2%	853	99.1%
Hispanic	95	99.0%	67	98.5%	55	98.2%	69	98.6%	81	98.8%	98	100.0%	107	100.0%
Other Race/Ethnicity	19	95.0%	30	96.8%	40	95.2%	47	97.9%	33	100.0%	48	98.0%	45	100.0%

LEGAL PERMANENCE

**Indicator 3.D.2 Stability of Adoption at Five Years**

Of all children who were adopted during the year, the percentage that remained with their family at five years.							
	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>
Children adopted	1,457	1,368	1,217	1,757	1,499	1,539	1,870
Children stable at five years	1,373	1,315	1,159	1,657	1,433	1,483	1,794
Percent	94.2%	96.1%	95.2%	94.3%	95.6%	96.4%	95.9%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	509	91.2%	442	93.6%	331	96.5%	443	92.7%	377	93.5%	305	94.1%	479	94.5%
Northern	212	98.6%	284	97.6%	197	96.6%	324	97.6%	278	97.5%	358	97.8%	393	96.1%
Central	461	95.2%	418	97.4%	423	94.8%	625	95.3%	522	96.3%	540	96.4%	570	97.8%
Southern	191	95.5%	171	97.2%	208	92.9%	265	91.1%	256	95.2%	280	96.9%	352	94.9%

Male	685	94.4%	679	96.6%	558	94.9%	857	94.2%	714	95.8%	789	96.9%	909	96.0%
Female	682	94.1%	630	95.6%	600	95.5%	798	94.4%	719	95.4%	694	95.7%	885	95.9%

0 to 2	270	97.8%	233	98.7%	179	98.9%	235	96.3%	205	98.6%	214	99.5%	268	99.3%
3 to 5	475	97.7%	478	98.4%	425	97.0%	606	97.3%	525	97.2%	543	98.5%	652	98.5%
6 to 11	476	92.4%	456	93.8%	419	94.4%	622	93.4%	533	95.3%	540	95.9%	695	95.6%
12 to 17	152	84.4%	148	92.5%	136	88.3%	194	86.6%	170	88.5%	186	88.6%	179	84.8%

Black	734	92.4%	668	94.9%	510	94.4%	740	92.4%	633	94.2%	607	95.4%	751	94.8%
White	532	96.7%	559	97.9%	573	95.5%	804	95.7%	703	96.6%	782	97.1%	928	96.7%
Hispanic	72	93.5%	62	92.5%	62	98.4%	94	97.9%	67	98.5%	54	96.4%	68	97.1%
Other Race/Ethnicity	35	97.2%	26	100.0%	14	100.0%	19	95.0%	30	96.8%	40	95.2%	47	97.9%

**Indicator 3.D.3 Stability of Adoption at Ten Years**

Of all children who were adopted during the year, the percentage that remained with their family at ten years.							
	2004	2005	2006	2007	2008	2009	2010
Children adopted	2,288	1,980	1,742	1,783	1,566	1,457	1,368
Children stable at ten years	2,095	1,832	1,622	1,650	1,433	1,315	1,261
Percent	91.6%	92.5%	93.1%	92.5%	91.5%	90.3%	92.2%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	1,182	88.9%	944	88.1%	740	88.5%	632	87.9%	535	89.3%	489	87.6%	427	90.5%
Northern	278	96.9%	242	97.2%	249	98.0%	296	94.0%	265	95.7%	204	94.9%	270	92.8%
Central	458	93.9%	437	97.5%	439	96.9%	517	95.4%	473	91.8%	439	90.7%	406	94.6%
Southern	173	97.2%	207	98.6%	193	98.0%	200	99.0%	160	91.4%	183	91.5%	158	89.8%

Male	1,054	91.5%	942	92.3%	826	93.0%	855	91.7%	728	90.8%	653	89.9%	651	92.6%
Female	1,041	91.6%	890	92.8%	795	93.2%	794	93.4%	703	92.3%	656	90.5%	604	91.7%

0 to 2	389	96.8%	329	94.5%	315	99.1%	327	96.5%	290	95.7%	267	96.7%	229	97.0%
3 to 5	614	94.8%	564	94.3%	541	95.8%	610	95.5%	490	95.0%	456	93.8%	451	92.8%
6 to 11	745	88.9%	672	90.9%	537	89.9%	517	90.4%	494	89.0%	440	85.4%	433	89.1%
12 to 17	347	86.8%	267	90.5%	229	87.4%	196	84.1%	159	82.8%	152	84.4%	148	92.5%

Black	1,371	88.8%	1,095	89.5%	914	89.8%	850	89.5%	718	88.9%	697	87.8%	631	89.6%
White	583	97.0%	593	98.0%	599	98.0%	665	97.4%	575	93.5%	511	92.9%	542	94.9%
Hispanic	82	97.6%	92	96.8%	74	98.7%	89	90.8%	89	100.0%	72	93.5%	62	92.5%
Other Race/Ethnicity	59	100.0%	52	91.2%	35	92.1%	46	88.5%	51	94.4%	35	97.2%	26	100.0%

**Indicator 3.E.1 Guardianship Within 24 Months**

Of all children who entered substitute care during the year, the percentage that was taken into guardianship within 24 months.							
	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>
Children entering substitute care	4764	4,746	4,838	5,091	4,640	4,779	5,728
Children taken into guardianship within 24 months	30	33	29	27	40	33	32
Percent	0.6%	0.7%	0.6%	0.5%	0.9%	0.7%	0.6%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	9	0.7%	8	0.6%	12	0.9%	10	0.7%	7	0.6%	3	0.3%	8	0.6%
Northern	3	0.3%	9	0.8%	3	0.3%	6	0.6%	9	1.0%	10	1.2%	8	0.9%
Central	4	0.3%	7	0.5%	10	0.6%	8	0.5%	16	1.0%	16	0.9%	11	0.5%
Southern	14	1.6%	9	1.2%	4	0.5%	3	0.3%	8	0.9%	4	0.4%	5	0.4%

Male	18	0.7%	11	0.5%	15	0.6%	12	0.5%	18	0.7%	20	0.8%	13	0.4%
Female	12	0.5%	22	1.0%	14	0.6%	15	0.6%	22	1.0%	13	0.6%	19	0.7%

0 to 2	9	0.5%	8	0.4%	5	0.3%	4	0.2%	7	0.4%	10	0.5%	4	0.2%
3 to 5	1	0.1%	7	0.9%	4	0.5%	6	0.7%	5	0.6%	3	0.4%	3	0.3%
6 to 11	8	0.8%	6	0.6%	9	0.8%	5	0.4%	14	1.3%	7	0.6%	14	1.0%
12 to 17	12	1.2%	12	1.2%	11	1.1%	12	1.2%	14	1.5%	13	1.5%	11	1.1%

Black	9	0.4%	9	0.4%	12	0.6%	7	0.3%	10	0.5%	9	0.5%	11	0.5%
White	19	0.8%	22	1.0%	15	0.7%	17	0.8%	28	1.2%	14	0.6%	21	0.7%
Hispanic	1	0.4%	2	0.6%	2	0.6%	1	0.2%	1	0.2%	9	2.1%	0	0.0%
Other Race/Ethnicity	1	0.9%	0	0.0%	0	0.0%	2	1.6%	1	1.3%	1	0.9%	0	0.0%

**Indicator 3.E.2 Guardianship Within 36 Months**

Of all children who entered substitute care during the year, the percentage that was taken into guardianship within 36 months.

	2011	2012	2013	2014	2015	2016	2017
Children entering substitute care	4,719	4,764	4,746	4,838	5,091	4,640	4,779
Children taken into guardianship within 36 months	101	131	127	133	119	120	102
Percent	2.1%	2.7%	2.7%	2.7%	2.3%	2.6%	2.1%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	30	2.7%	46	3.4%	38	3.0%	48	3.5%	51	3.4%	46	3.7%	23	1.9%
Northern	21	2.1%	16	1.5%	27	2.3%	24	2.2%	24	2.3%	14	1.5%	23	2.7%
Central	36	2.2%	29	2.0%	39	2.5%	44	2.8%	33	2.0%	42	2.6%	37	2.1%
Southern	14	1.5%	40	4.5%	23	3.2%	17	2.0%	11	1.3%	18	2.0%	19	2.0%

Male	49	2.0%	67	2.8%	62	2.5%	76	3.1%	48	1.9%	59	2.5%	55	2.2%
Female	52	2.3%	64	2.7%	65	2.8%	57	2.4%	71	2.8%	61	2.7%	47	2.0%

0 to 2	42	2.2%	43	2.3%	33	1.7%	30	1.6%	24	1.2%	28	1.5%	30	1.6%
3 to 5	19	2.2%	18	2.1%	21	2.6%	24	3.0%	18	2.1%	14	1.8%	12	1.4%
6 to 11	27	2.6%	44	4.3%	40	3.8%	58	4.9%	45	3.9%	50	4.7%	27	2.4%
12 to 17	13	1.3%	26	2.6%	33	3.3%	21	2.0%	32	3.1%	28	3.0%	33	3.7%

Black	42	2.1%	58	2.8%	50	2.5%	64	3.0%	41	1.8%	46	2.4%	32	1.7%
White	48	2.1%	67	2.9%	59	2.6%	56	2.5%	61	2.7%	65	2.9%	52	2.2%
Hispanic	8	3.3%	3	1.1%	14	4.0%	11	3.2%	13	2.8%	7	1.7%	15	3.5%
Other Race/Ethnicity	3	2.7%	3	2.6%	4	3.4%	2	1.9%	4	3.1%	2	2.6%	3	2.6%

**Indicator 3.F.1 Stability of Guardianship at Two Years**

Of all children taken into guardianship during the year, the percentage that remained with their family at two years.							
	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>
Children taken into guardianship	310	346	315	456	312	413	404
Children stable at two years	296	332	311	442	303	391	386
Percent	95.5%	96.0%	98.7%	96.9%	97.1%	94.7%	95.5%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	135	96.4%	144	99.3%	128	100.0%	206	98.1%	126	100.0%	179	96.8%	190	97.4%
Northern	52	94.5%	56	96.6%	68	97.1%	87	95.6%	73	97.3%	77	90.6%	80	92.0%
Central	93	95.9%	94	94.9%	72	98.6%	78	94.0%	65	91.5%	90	92.8%	92	96.8%
Southern	16	88.9%	38	86.4%	43	97.7%	71	98.6%	39	97.5%	45	97.8%	24	88.9%

Male	160	94.1%	183	96.8%	168	99.4%	226	95.8%	157	96.9%	199	93.0%	185	94.9%
Female	136	97.1%	149	94.9%	143	97.9%	216	98.2%	146	97.3%	192	96.5%	201	96.2%

0 to 2	19	100.0%	20	100.0%	11	100.0%	22	100.0%	9	100.0%	20	100.0%	14	93.3%
3 to 5	70	98.6%	66	97.1%	82	100.0%	92	97.9%	52	98.1%	60	93.8%	67	97.1%
6 to 11	107	95.5%	143	96.6%	116	100.0%	178	98.9%	125	96.9%	176	96.2%	138	97.2%
12 to 17	100	92.6%	103	93.6%	102	96.2%	150	93.8%	117	96.7%	135	92.5%	167	93.8%

Black	158	95.2%	181	98.9%	159	98.8%	247	96.1%	145	98.6%	187	93.5%	193	96.0%
White	121	95.3%	127	91.4%	124	98.4%	158	97.5%	126	96.2%	154	95.7%	135	93.8%
Hispanic	16	100.0%	20	100.0%	22	100.0%	31	100.0%	28	96.6%	39	95.1%	42	97.7%
Other Race/Ethnicity	1	100.0%	4	100.0%	6	100.0%	6	100.0%	4	80.0%	11	100.0%	16	100.0%



**Indicator 3.F.2 Stability of Guardianship at Five Years**

Of all children taken into guardianship during the year, the percentage that remained with their family at five years.							
	2009	2010	2011	2012	2013	2014	2015
Children taken into guardianship	519	542	206	310	346	315	456
Children stable at five years	467	475	177	272	311	278	408
Percent	90.0%	87.6%	85.9%	87.7%	89.9%	88.3%	89.5%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	290	90.6%	244	89.4%	97	83.6%	124	88.6%	132	91.0%	122	95.3%	193	91.9%
Northern	69	89.6%	90	84.9%	42	87.5%	49	89.1%	55	94.8%	59	84.3%	73	80.2%
Central	82	86.3%	104	86.0%	29	90.6%	86	88.7%	87	87.9%	61	83.6%	76	91.6%
Southern	26	96.3%	37	88.1%	9	90.0%	13	72.2%	37	84.1%	36	81.8%	66	91.7%

Male	236	87.4%	252	87.2%	94	88.7%	147	86.5%	172	91.0%	153	90.5%	203	86.0%
Female	231	92.8%	223	88.1%	83	83.0%	125	89.3%	139	88.5%	125	85.6%	205	93.2%

0 to 2	18	100.0%	17	89.5%	10	83.3%	19	100.0%	18	90.0%	9	81.8%	20	90.9%
3 to 5	77	92.8%	72	92.3%	41	93.2%	66	93.0%	65	95.6%	76	92.7%	86	91.5%
6 to 11	157	89.7%	172	86.9%	79	86.8%	98	87.5%	132	89.2%	98	84.5%	161	89.4%
12 to 17	215	88.5%	214	86.6%	47	79.7%	89	82.4%	96	87.3%	95	89.6%	141	88.1%

Black	300	88.2%	287	87.0%	113	83.1%	147	88.6%	164	89.6%	145	90.1%	227	88.3%
White	144	92.3%	143	88.8%	52	91.2%	109	85.8%	123	88.5%	109	86.5%	148	91.4%
Hispanic	18	100.0%	35	94.6%	7	87.5%	15	93.8%	20	100.0%	19	86.4%	27	87.1%
Other Race/Ethnicity	5	100.0%	8	66.7%	5	100.0%	1	100.0%	4	100.0%	5	83.3%	6	100.0%

**Indicator 3.F.3 Stability of Guardianship at Ten Years**

Of all children taken into guardianship during the year, the percentage that remained with their family at ten years.							
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
Children taken into guardianship	667	651	578	579	473	519	542
Children stable at ten years	554	506	434	487	379	433	450
Percent	83.1%	77.7%	75.1%	84.1%	80.1%	83.4%	83.0%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	380	85.8%	356	76.4%	286	75.9%	277	84.2%	223	81.4%	272	85.0%	231	84.6%
Northern	69	75.8%	40	74.1%	40	62.5%	66	90.4%	53	77.9%	66	85.7%	87	82.1%
Central	73	81.1%	77	85.6%	65	77.4%	98	79.0%	68	82.9%	75	78.9%	98	81.0%
Southern	32	74.4%	33	80.5%	43	81.1%	46	86.8%	35	71.4%	20	74.1%	34	81.0%

Male	250	83.9%	233	75.9%	234	75.2%	253	83.2%	193	79.1%	224	83.0%	239	82.7%
Female	304	82.4%	273	79.4%	200	74.9%	234	85.1%	185	81.1%	209	83.9%	211	83.4%

0 to 2	19	95.0%	20	90.9%	24	82.8%	25	92.6%	14	73.7%	16	88.9%	15	78.9%
3 to 5	80	88.9%	55	67.9%	57	71.3%	72	81.8%	55	84.6%	71	85.5%	66	84.6%
6 to 11	158	73.5%	159	67.9%	142	62.3%	153	75.4%	118	73.3%	131	74.9%	156	78.8%
12 to 17	297	86.8%	272	86.6%	211	87.6%	237	90.8%	192	84.2%	215	88.5%	213	86.2%

Black	412	82.9%	362	77.8%	311	73.5%	319	84.6%	266	79.9%	277	81.5%	272	82.4%
White	118	83.1%	112	79.4%	102	78.5%	149	82.8%	87	77.7%	134	85.9%	135	83.9%
Hispanic	20	95.2%	28	68.3%	19	82.6%	10	90.9%	22	100.0%	17	94.4%	33	89.2%
Other Race/Ethnicity	4	57.1%	4	100.0%	2	100.0%	9	81.8%	4	66.7%	5	100.0%	8	66.7%

**Indicator 3.G Permanency in 12 Months for Children Entering Substitute Care (CFSR)**

Of all children who entered substitute care during the fiscal year, the percentage that was discharged to permanency within 12 months.

	2013	2014	2015	2016	2017	2018	2019
Children entering substitute care	4,709	4,810	5,043	4,617	4,746	5,714	6,467
Children discharged to permanency within 12 months	661	636	717	665	635	858	928
Percent	14.0%	13.2%	14.2%	14.4%	13.4%	15.0%	14.3%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	76	6.1%	80	5.9%	110	7.5%	58	4.7%	55	4.7%	138	10.2%	85	6.8%
Northern	188	15.9%	192	17.8%	187	18.0%	177	19.4%	158	18.5%	187	20.4%	193	17.2%
Central	237	15.3%	198	12.8%	251	15.2%	290	18.2%	283	16.2%	329	15.5%	409	16.4%
Southern	160	21.9%	166	19.9%	169	19.4%	140	15.8%	139	14.3%	204	15.5%	241	15.1%

Male	338	13.9%	317	12.9%	350	13.7%	351	14.7%	327	13.4%	443	15.0%	458	14.1%
Female	323	14.1%	319	13.5%	367	14.8%	314	14.1%	308	13.4%	415	15.0%	470	14.6%

0 to 2	243	12.9%	212	11.6%	269	13.2%	241	13.0%	227	11.9%	306	12.9%	306	12.1%
3 to 5	126	16.2%	104	13.5%	129	15.4%	122	16.1%	113	13.7%	159	17.2%	188	15.7%
6 to 11	194	18.7%	184	15.6%	189	16.8%	180	17.0%	184	16.3%	245	17.6%	262	16.5%
12 to 17	98	9.8%	136	13.1%	130	12.5%	122	12.9%	111	12.4%	148	14.5%	172	15.0%

Black	240	12.0%	230	10.9%	276	12.5%	226	12.1%	203	11.3%	316	14.2%	298	12.8%
White	370	16.5%	343	15.3%	366	16.4%	361	16.1%	362	15.2%	461	15.6%	529	15.5%
Hispanic	33	9.5%	46	13.4%	52	11.4%	59	14.5%	52	12.0%	56	15.2%	66	13.0%
Other Race/Ethnicity	17	14.8%	17	15.9%	18	14.1%	15	18.5%	15	12.8%	21	16.2%	30	17.5%

**Indicator 3.H Permanency in 12 Months for Children in Care 12 to 23 Months (CFSR)**

Of all children in care on the first day of the fiscal year who had been in care between 12 and 23 months, the percentage that was discharged to permanency within 12 months.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children in care on the first day of the fiscal year who had been in care between 12 and 23 months	3,514	3,516	3,561	3,785	3,410	3,622	4,264
Children discharged to permanency within 12 months	828	966	847	964	892	1,022	1,030
Percent	23.6%	27.5%	23.8%	25.5%	26.2%	28.2%	24.2%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	140	12.8%	179	16.9%	167	14.7%	190	15.4%	177	17.1%	158	15.8%	150	13.5%
Northern	206	25.8%	240	27.6%	165	22.8%	208	29.0%	189	30.1%	207	33.5%	167	27.0%
Central	306	29.8%	389	34.6%	347	30.7%	398	32.9%	370	33.7%	431	33.6%	490	32.0%
Southern	176	29.8%	157	33.8%	168	29.4%	168	26.8%	156	24.0%	226	31.4%	223	22.2%

Male	436	23.9%	493	27.3%	437	23.8%	493	25.6%	466	26.4%	533	28.5%	524	23.9%
Female	392	23.3%	473	27.7%	410	23.7%	471	25.3%	426	25.9%	489	27.9%	506	24.4%

0 to 2	287	26.0%	347	30.7%	309	29.0%	376	31.8%	345	32.5%	379	33.4%	382	28.0%
3 to 5	178	24.1%	193	28.0%	164	23.8%	210	27.3%	183	26.3%	224	29.2%	214	24.2%
6 to 11	236	27.1%	244	28.8%	238	24.8%	240	24.1%	238	25.8%	273	28.3%	282	24.8%
12 to 17	127	15.9%	182	21.4%	136	16.1%	138	16.5%	126	17.2%	146	19.3%	152	17.3%

Black	250	15.8%	343	22.0%	301	18.6%	335	19.8%	319	22.4%	334	23.3%	327	19.1%
White	506	30.8%	542	33.9%	477	29.7%	531	32.2%	486	30.2%	589	33.6%	624	28.7%
Hispanic	42	19.8%	63	22.4%	50	19.2%	75	22.1%	75	24.4%	70	21.3%	50	19.2%
Other Race/Ethnicity	30	37.0%	18	23.7%	19	24.7%	21	21.6%	12	21.8%	24	25.0%	20	21.5%

**Indicator 3.I Permanency in 12 Months for Children in Care 24 Months or More (CFSR)**

Of all children in care on the first day of the fiscal year who had been in care 24 months or more, the percentage that was discharged to permanency within 12 months.							
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Children in care on the first day of the fiscal year who had been in care 24 months or more	10,044	9,776	9,256	9,168	9,108	8,823	8,683
Children discharged to permanency within 12 months	1,979	2,285	1,928	2,137	2,064	2,058	1,651
Percent	19.7%	23.4%	20.8%	23.3%	22.7%	23.3%	19.0%

	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Cook	520	11.5%	760	17.2%	571	13.8%	666	16.2%	753	18.1%	684	17.1%	503	12.9%
Northern	473	26.0%	479	26.5%	474	26.4%	511	29.2%	395	25.2%	361	24.6%	295	21.7%
Central	642	26.6%	638	27.7%	586	26.4%	638	28.9%	616	27.6%	631	29.6%	508	23.2%
Southern	344	26.9%	406	32.3%	297	27.3%	322	29.5%	300	26.1%	382	31.2%	345	27.8%

Male	1,055	19.7%	1,178	22.6%	988	20.0%	1,115	22.9%	1,070	22.3%	1,061	22.9%	869	19.0%
Female	924	19.8%	1,107	24.2%	938	21.7%	1,022	23.7%	994	23.1%	997	23.8%	782	19.1%

0 to 2	202	38.5%	229	43.7%	191	36.4%	228	45.4%	222	43.1%	215	45.5%	175	36.7%
3 to 5	691	35.9%	794	42.2%	594	35.8%	676	40.4%	655	39.3%	618	38.7%	519	33.1%
6 to 11	757	22.9%	925	27.9%	809	25.7%	856	27.2%	804	25.5%	814	26.3%	647	21.6%
12 to 17	329	7.7%	337	8.3%	334	8.5%	377	9.8%	383	10.1%	411	11.2%	310	8.5%

Black	906	15.6%	1,106	19.8%	915	17.7%	1,017	20.1%	999	20.2%	860	18.4%	694	15.3%
White	942	27.0%	1,001	29.1%	859	26.3%	914	28.1%	824	25.7%	961	29.9%	776	24.5%
Hispanic	95	16.9%	130	22.0%	119	18.7%	151	22.3%	186	24.8%	188	25.0%	131	16.8%
Other Race/Ethnicity	36	21.2%	48	27.4%	35	20.6%	55	30.4%	54	27.8%	43	23.9%	45	22.8%

**Indicator 3.J Re-Entry to Substitute Care Among Children in Care Less Than 12 Months (CFSR)**

Of all children who entered foster care during the fiscal year and attained permanency within 12 months, the percentage that re-entered substitute care within 12 months of their discharge.

	2012	2013	2014	2015	2016	2017	2018
Children who entered care and exited to permanency within 12 months	611	661	636	717	665	635	858
Children re-entering substitute care within 12 months	44	56	46	45	45	80	86
Percent	7.2%	8.5%	7.2%	6.3%	6.8%	12.6%	10.0%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	10	12.0%	7	9.2%	11	13.8%	13	11.8%	7	12.1%	6	10.9%	21	15.2%
Northern	14	9.5%	26	13.8%	11	5.7%	7	3.7%	9	5.1%	21	13.3%	17	9.1%
Central	11	5.4%	17	7.2%	10	5.1%	17	6.8%	11	3.8%	41	14.5%	32	9.7%
Southern	9	5.1%	6	3.8%	14	8.4%	8	4.7%	18	12.9%	12	8.6%	16	7.8%

Male	24	8.1%	27	8.0%	23	7.3%	24	6.9%	26	7.4%	43	13.1%	37	8.4%
Female	20	6.3%	29	9.0%	23	7.2%	21	5.7%	19	6.1%	37	12.0%	49	11.8%

0 to 2	12	6.1%	20	8.2%	12	5.7%	20	7.4%	16	6.6%	29	12.8%	37	12.1%
3 to 5	6	4.7%	8	6.3%	9	8.7%	7	5.4%	14	11.5%	7	6.2%	19	11.9%
6 to 11	11	7.1%	19	9.8%	11	6.0%	7	3.7%	4	2.2%	30	16.3%	15	6.1%
12 to 17	15	11.6%	9	9.2%	14	10.3%	11	8.5%	11	9.0%	14	12.6%	15	10.1%

Black	23	12.0%	25	10.4%	22	9.6%	32	11.6%	16	7.1%	30	14.8%	42	13.3%
White	16	4.3%	24	6.5%	16	4.7%	11	3.0%	21	5.8%	41	11.3%	39	8.5%
Hispanic	2	6.1%	5	15.2%	6	13.0%	1	1.9%	7	11.9%	5	9.6%	4	7.1%
Other Race/Ethnicity	3	18.8%	2	11.8%	2	11.8%	1	5.6%	1	6.7%	4	26.7%	1	4.8%

**Indicator 3.K Re-Entry to Substitute Care Among Children in Care 12 to 23 Months**

Of all children who had been in substitute care between 12 and 23 months and exited to permanency during the fiscal year, the percentage that re-entered substitute care within 12 months of their discharge.

	2013	2014	2015	2016	2017	2018	2019
Children who exited to permanency within 12 and 23 months	787	828	966	847	964	892	1,022
Children who re-entered substitute care within 12 months	21	13	11	19	12	25	47
Percent	2.7%	1.6%	1.1%	2.2%	1.2%	2.8%	4.6%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	5	3.9%	3	2.1%	6	3.4%	8	4.8%	6	3.2%	4	2.3%	5	3.2%
Northern	2	1.3%	4	1.9%	0	0.0%	4	2.4%	4	1.9%	5	2.6%	11	5.3%
Central	7	2.1%	4	1.3%	3	0.8%	5	1.4%	0	0.0%	11	3.0%	21	4.9%
Southern	7	3.9%	2	1.1%	2	1.3%	2	1.2%	2	1.2%	5	3.2%	10	4.4%

Male	12	2.9%	6	1.4%	8	1.6%	8	1.8%	5	1.0%	11	2.4%	29	5.4%
Female	9	2.4%	7	1.8%	3	0.6%	11	2.7%	7	1.5%	14	3.3%	18	3.7%

0 to 2	4	1.5%	3	1.0%	2	0.6%	5	1.6%	3	0.8%	10	2.9%	16	4.2%
3 to 5	5	2.8%	5	2.8%	4	2.1%	1	0.6%	3	1.4%	3	1.6%	9	4.0%
6 to 11	9	3.9%	2	0.8%	0	0.0%	8	3.4%	0	0.0%	6	2.5%	10	3.7%
12 to 17	3	2.8%	3	2.4%	5	2.7%	5	3.7%	6	4.3%	6	4.8%	12	8.2%

Black	11	4.4%	4	1.6%	5	1.5%	11	3.7%	7	2.1%	7	2.2%	16	4.8%
White	10	2.1%	9	1.8%	6	1.1%	7	1.5%	3	0.6%	18	3.7%	26	4.4%
Hispanic	0	0.0%	0	0.0%	0	0.0%	0	0.0%	2	2.7%	0	0.0%	1	1.4%
Other Race/Ethnicity	0	0.0%	0	0.0%	0	0.0%	1	5.3%	0	0.0%	0	0.0%	4	16.7%

LEGAL PERMANENCE

**Indicator 3.L Re-Entry to Substitute Care Among Children in Care 24 Months or More**

Of all children who had been in substitute care 24 months or more and exited to permanency during the fiscal year, the percentage that re-entered substitute care within 12 months of their discharge.

	2013	2014	2015	2016	2017	2018	2019
Children who exited to permanency after 24 months or more in care	1,962	1,979	2,285	1,928	2,137	2,064	2,058
Children who re-entered substitute care within 12 months	28	19	17	31	24	27	40
Percent	1.4%	1.0%	0.7%	1.6%	1.1%	1.3%	1.9%

	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Cook	5	0.8%	6	1.2%	4	0.5%	9	1.6%	10	1.5%	13	1.7%	13	1.9%
Northern	3	0.8%	5	1.1%	4	0.8%	6	1.3%	4	0.8%	3	0.8%	14	3.9%
Central	11	1.8%	5	0.8%	7	1.1%	10	1.7%	7	1.1%	9	1.5%	11	1.7%
Southern	9	2.7%	3	0.9%	2	0.5%	6	2.0%	3	0.9%	2	0.7%	2	0.5%

Male	13	1.3%	10	0.9%	10	0.8%	14	1.4%	15	1.3%	14	1.3%	24	2.3%
Female	15	1.6%	9	1.0%	7	0.6%	17	1.8%	9	0.9%	13	1.3%	16	1.6%

0 to 2	0	0.0%	0	0.0%	0	0.0%	3	1.6%	1	0.4%	3	1.4%	4	1.9%
3 to 5	6	0.9%	3	0.4%	1	0.1%	5	0.8%	3	0.4%	7	1.1%	13	2.1%
6 to 11	14	1.8%	4	0.5%	4	0.4%	12	1.5%	7	0.8%	8	1.0%	17	2.1%
12 to 17	8	2.5%	12	3.6%	12	3.6%	11	3.3%	13	3.4%	9	2.3%	6	1.5%

Black	12	1.3%	12	1.3%	9	0.8%	16	1.7%	9	0.9%	22	2.2%	23	2.7%
White	15	1.7%	6	0.6%	8	0.8%	12	1.4%	12	1.3%	4	0.5%	15	1.6%
Hispanic	1	0.9%	1	1.1%	0	0.0%	3	2.5%	2	1.3%	1	0.5%	2	1.1%
Other Race/Ethnicity	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	1.8%	0	0.0%	0	0.0%





## Appendix C

# Racial/Ethnic Disproportionality Data

Appendix C provides data for the racial/ethnic disproportionality analyses included in Chapter 4. For each indicator, data are presented for the state and the four DCFS administrative regions for the past seven fiscal years. The data used in this appendix come from three sources: 1) Illinois child population data were obtained from the National Center for Health Statistics;<sup>1</sup> child welfare data were obtained from 2) the Statewide Automated Child Welfare Information System (SACWIS) and 3) the Child and Youth Centered Information System (CYCIS). Both the SACWIS data and the CYCIS data were extracted on December 31, 2020. Note that the numbers in Appendix C are rounded to one decimal place for display purposes.

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<sup>1</sup> National Center for Health Statistics. (2020). Vintage 2019 bridged-race postcensal population estimates (April 1, 2010-July 1, 2019). Prepared under a collaborative arrangement with the U.S. Census Bureau. Available online from [https://www.cdc.gov/nchs/nvss/bridged\\_race.htm](https://www.cdc.gov/nchs/nvss/bridged_race.htm) as of July 9, 2020, following release by the U.S. Census Bureau of the unbridged Vintage 2019 postcensal estimates by 5-year age groups. [Retrieved 7/29/2020].

**DISPROPORTIONALITY**

**Table 4.A.1 Absolute RDI for Investigated Reports**

	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
<b>Black</b>							
Children in investigated reports	33.9%	34.3%	33.2%	33.3%	33.1%	33.2%	33.3%
Total child population	16.8%	16.8%	16.6%	16.5%	16.5%	16.4%	16.4%
Absolute RDI	2.0	2.0	2.0	2.0	2.0	2.0	2.0
<b>White</b>							
Children in investigated reports	48.0%	46.3%	46.9%	46.8%	46.4%	45.4%	45.8%
Total child population	53.6%	53.4%	53.2%	53.1%	53.0%	52.8%	52.8%
Absolute RDI	0.9	0.9	0.9	0.9	0.9	0.9	0.9
<b>Hispanic</b>							
Children in investigated reports	15.1%	16.7%	17.4%	17.4%	17.9%	18.5%	18.0%
Total child population	24.2%	24.3%	24.5%	24.7%	24.8%	24.9%	24.9%
Absolute RDI	0.6	0.7	0.7	0.7	0.7	0.7	0.7

Table 4.A.2 Absolute RDI for Investigated Reports by Region

	2014	2015	2016	2017	2018	2019	2020
<b>Cook</b>							
<b>Black</b>							
Children in investigated reports	52.1%	52.2%	50.5%	50.8%	49.6%	49.2%	50.4%
Total child population	26.3%	26.0%	25.7%	25.3%	25.0%	24.9%	24.9%
Absolute RDI	2.0	2.0	2.0	2.0	2.0	2.0	2.0
<b>White</b>							
Children in investigated reports	18.3%	15.9%	16.9%	16.5%	16.1%	15.7%	16.1%
Total child population	32.0%	32.1%	32.2%	32.4%	32.5%	32.7%	32.7%
Absolute RDI	0.6	0.5	0.5	0.5	0.5	0.5	0.5
<b>Hispanic</b>							
Children in investigated reports	25.5%	28.3%	29.2%	29.4%	30.8%	30.9%	29.3%
Total child population	35.2%	35.3%	35.5%	35.5%	35.5%	35.4%	35.4%
Absolute RDI	0.7	0.8	0.8	0.8	0.9	0.9	0.8
<b>Northern</b>							
<b>Black</b>							
Children in investigated reports	26.8%	26.7%	25.9%	25.9%	26.6%	26.5%	26.0%
Total child population	8.8%	8.8%	8.8%	8.9%	8.9%	9.0%	9.0%
Absolute RDI	3.1	3.0	2.9	2.9	3.0	2.9	2.9
<b>White</b>							
Children in investigated reports	49.0%	47.2%	46.9%	46.4%	45.2%	44.5%	44.7%
Total child population	59.8%	59.3%	58.8%	58.3%	57.8%	57.3%	57.3%
Absolute RDI	0.8	0.8	0.8	0.8	0.8	0.8	0.8
<b>Hispanic</b>							
Children in investigated reports	20.8%	23.0%	24.4%	24.8%	24.8%	25.8%	26.0%
Total child population	25.0%	25.3%	25.7%	26.0%	26.3%	26.6%	26.6%
Absolute RDI	0.8	0.9	1.0	1.0	0.9	1.0	1.0
<b>Central</b>							
<b>Black</b>							
Children in investigated reports	25.2%	26.2%	26.2%	26.5%	26.1%	26.5%	27.0%
Total child population	11.9%	12.1%	12.3%	12.5%	12.5%	12.5%	12.5%
Absolute RDI	2.1	2.2	2.1	2.1	2.1	2.1	2.2
<b>White</b>							
Children in investigated reports	68.8%	67.6%	67.1%	66.6%	67.0%	66.1%	65.1%
Total child population	78.3%	77.9%	77.5%	77.3%	77.0%	76.9%	76.9%
Absolute RDI	0.9	0.9	0.9	0.9	0.9	0.9	0.8
<b>Hispanic</b>							
Children in investigated reports	4.1%	4.7%	5.0%	5.2%	5.5%	5.6%	6.0%
Total child population	7.0%	7.1%	7.3%	7.4%	7.5%	7.6%	7.6%
Absolute RDI	0.6	0.7	0.7	0.7	0.7	0.7	0.8
<b>Southern</b>							
<b>Black</b>							
Children in investigated reports	24.0%	25.8%	24.8%	25.0%	26.0%	25.4%	25.7%
Total child population	15.1%	15.1%	15.1%	15.2%	15.2%	15.1%	15.1%
Absolute RDI	1.6	1.7	1.6	1.6	1.7	1.7	1.7
<b>White</b>							
Children in investigated reports	71.9%	70.0%	70.9%	70.8%	69.8%	70.4%	69.5%
Total child population	79.1%	78.9%	78.8%	78.6%	78.4%	78.3%	78.3%
Absolute RDI	0.9	0.9	0.9	0.9	0.9	0.9	0.9
<b>Hispanic</b>							
Children in investigated reports	2.3%	2.6%	2.9%	2.9%	2.8%	2.8%	3.0%
Total child population	4.3%	4.4%	4.5%	4.7%	4.7%	4.8%	4.8%
Absolute RDI	0.5	0.6	0.6	0.6	0.6	0.6	0.6

## DISPROPORTIONALITY

**Table 4.B.1 Absolute RDI for Protective Custodies**

	2014	2015	2016	2017	2018	2019	2020
<b>Black</b>							
Children in protective custodies	46.0%	45.2%	42.5%	41.3%	41.9%	39.2%	38.5%
Total child population	16.8%	16.8%	16.6%	16.5%	16.5%	16.4%	16.4%
Absolute RDI	2.7	2.7	2.6	2.5	2.5	2.4	2.3
<b>White</b>							
Children in protective custodies	43.9%	42.0%	44.7%	47.2%	49.5%	49.9%	48.8%
Total child population	53.6%	53.4%	53.2%	53.1%	53.0%	52.8%	52.8%
Absolute RDI	0.8	0.8	0.8	0.9	0.9	0.9	0.9
<b>Hispanic</b>							
Children in protective custodies	8.9%	11.7%	11.9%	10.7%	7.7%	9.9%	11.5%
Total child population	24.2%	24.3%	24.5%	24.7%	24.8%	24.9%	24.9%
Absolute RDI	0.4	0.5	0.5	0.4	0.3	0.4	0.5

Table 4.B.2 Absolute RDI for Protective Custodies by Region

	2014	2015	2016	2017	2018	2019	2020
<b>Cook</b>							
<b>Black</b>							
Children in protective custodies	70.7%	65.6%	66.8%	67.2%	71.9%	66.5%	65.9%
Total child population	26.3%	26.0%	25.7%	25.3%	25.0%	24.9%	24.9%
Absolute RDI	2.7	2.5	2.6	2.7	2.9	2.7	2.6
<b>White</b>							
Children in protective custodies	11.7%	11.3%	11.1%	11.0%	12.5%	12.5%	10.3%
Total child population	32.0%	32.1%	32.2%	32.4%	32.5%	32.7%	32.7%
Absolute RDI	0.4	0.4	0.3	0.3	0.4	0.4	0.3
<b>Hispanic</b>							
Children in protective custodies	15.8%	22.0%	20.9%	20.4%	14.5%	20.1%	21.9%
Total child population	35.2%	35.3%	35.5%	35.5%	35.5%	35.4%	35.4%
Absolute RDI	0.4	0.6	0.6	0.6	0.4	0.6	0.6
<b>Northern</b>							
<b>Black</b>							
Children in protective custodies	40.6%	40.0%	41.9%	43.6%	41.0%	44.3%	37.0%
Total child population	8.8%	8.8%	8.8%	8.9%	8.9%	9.0%	9.0%
Absolute RDI	4.6	4.5	4.8	4.9	4.6	4.9	4.1
<b>White</b>							
Children in protective custodies	44.2%	44.5%	38.7%	41.5%	43.1%	37.9%	41.9%
Total child population	59.8%	59.3%	58.8%	58.3%	57.8%	57.3%	57.3%
Absolute RDI	0.7	0.8	0.7	0.7	0.7	0.7	0.7
<b>Hispanic</b>							
Children in protective custodies	13.8%	13.8%	18.3%	14.8%	14.5%	16.9%	20.0%
Total child population	25.0%	25.3%	25.7%	26.0%	26.3%	26.6%	26.6%
Absolute RDI	0.6	0.5	0.7	0.6	0.5	0.6	0.8
<b>Central</b>							
<b>Black</b>							
Children in protective custodies	36.9%	37.3%	32.5%	30.7%	32.6%	30.4%	31.2%
Total child population	11.9%	12.1%	12.3%	12.5%	12.5%	12.5%	12.5%
Absolute RDI	3.1	3.1	2.6	2.5	2.6	2.4	2.5
<b>White</b>							
Children in protective custodies	59.9%	57.4%	61.8%	63.9%	63.6%	64.2%	62.4%
Total child population	78.3%	77.9%	77.5%	77.3%	77.0%	76.9%	76.9%
Absolute RDI	0.8	0.7	0.8	0.8	0.8	0.8	0.8
<b>Hispanic</b>							
Children in protective custodies	2.4%	4.5%	4.8%	4.2%	3.4%	4.1%	5.4%
Total child population	7.0%	7.1%	7.3%	7.4%	7.5%	7.6%	7.6%
Absolute RDI	0.3	0.6	0.7	0.6	0.4	0.5	0.7
<b>Southern</b>							
<b>Black</b>							
Children in protective custodies	24.3%	24.9%	23.2%	22.5%	21.8%	22.4%	20.9%
Total child population	15.1%	15.1%	15.1%	15.2%	15.2%	15.1%	15.1%
Absolute RDI	1.6	1.6	1.5	1.5	1.4	1.5	1.4
<b>White</b>							
Children in protective custodies	74.3%	71.3%	74.0%	72.1%	75.9%	73.3%	75.9%
Total child population	79.1%	78.9%	78.8%	78.6%	78.4%	78.3%	78.3%
Absolute RDI	0.9	0.9	0.9	0.9	1.0	0.9	1.0
<b>Hispanic</b>							
Children in protective custodies	1.0%	2.5%	2.5%	5.0%	1.6%	3.6%	2.5%
Total child population	4.3%	4.4%	4.5%	4.7%	4.7%	4.8%	4.8%
Absolute RDI	0.2	0.6	0.6	1.1	0.3	0.7	0.5

**DISPROPORTIONALITY**

**Table 4.B.3 Relative RDI for Protective Custodies**

	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
<b>Black</b>							
Children in protective custodies	46.0%	45.2%	42.5%	41.3%	41.9%	39.2%	38.5%
Children in investigated reports	33.9%	34.3%	33.2%	33.3%	33.1%	33.2%	33.3%
Relative RDI	1.4	1.3	1.3	1.2	1.3	1.2	1.2
<b>White</b>							
Children in protective custodies	43.9%	42.0%	44.7%	47.2%	49.5%	49.9%	48.8%
Children in investigated reports	48.0%	46.3%	46.9%	46.8%	46.4%	45.4%	45.8%
Relative RDI	0.9	0.9	1.0	1.0	1.1	1.1	1.1
<b>Hispanic</b>							
Children in protective custodies	8.9%	11.7%	11.9%	10.7%	7.7%	9.9%	11.5%
Children in investigated reports	15.1%	16.7%	17.4%	17.4%	17.9%	18.5%	18.0%
Relative RDI	0.6	0.7	0.7	0.6	0.4	0.5	0.6

Table 4.B.4 Relative RDI for Protective Custodies by Region

	2014	2015	2016	2017	2018	2019	2020
<b>Cook</b>							
<b>Black</b>							
Children in protective custodies	70.7%	65.6%	66.8%	67.2%	71.9%	66.5%	65.9%
Children in investigated reports	52.1%	52.2%	50.5%	50.8%	49.6%	49.2%	50.4%
Relative RDI	1.4	1.3	1.3	1.3	1.4	1.4	1.3
<b>White</b>							
Children in protective custodies	11.7%	11.3%	11.1%	11.0%	12.5%	12.5%	10.3%
Children in investigated reports	18.3%	15.9%	16.9%	16.5%	16.1%	15.7%	16.1%
Relative RDI	0.6	0.7	0.7	0.7	0.8	0.8	0.6
<b>Hispanic</b>							
Children in protective custodies	15.8%	22.0%	20.9%	20.4%	14.5%	20.1%	21.9%
Children in investigated reports	25.5%	28.3%	29.2%	29.4%	30.8%	30.9%	29.3%
Relative RDI	0.6	0.8	0.7	0.7	0.5	0.6	0.7
<b>Northern</b>							
<b>Black</b>							
Children in protective custodies	40.6%	40.0%	41.9%	43.6%	41.0%	44.3%	37.0%
Children in investigated reports	26.8%	26.7%	25.9%	25.9%	26.6%	26.5%	26.0%
Relative RDI	1.5	1.5	1.6	1.7	1.5	1.7	1.4
<b>White</b>							
Children in protective custodies	44.2%	44.5%	38.7%	41.5%	43.1%	37.9%	41.9%
Children in investigated reports	49.0%	47.2%	46.9%	46.4%	45.2%	44.5%	44.7%
Relative RDI	0.9	0.9	0.8	0.9	1.0	0.9	0.9
<b>Hispanic</b>							
Children in protective custodies	13.8%	13.8%	18.3%	14.8%	14.5%	16.9%	20.0%
Children in investigated reports	20.8%	23.0%	24.4%	24.8%	24.8%	25.8%	26.0%
Relative RDI	0.7	0.6	0.8	0.6	0.6	0.7	0.8
<b>Central</b>							
<b>Black</b>							
Children in protective custodies	36.9%	37.3%	32.5%	30.7%	32.6%	30.4%	31.2%
Children in investigated reports	25.2%	26.2%	26.2%	26.5%	26.1%	26.5%	27.0%
Relative RDI	1.5	1.4	1.2	1.2	1.3	1.1	1.2
<b>White</b>							
Children in protective custodies	59.9%	57.4%	61.8%	63.9%	63.6%	64.2%	62.4%
Children in investigated reports	68.8%	67.6%	67.1%	66.6%	67.0%	66.1%	65.1%
Relative RDI	0.9	0.8	0.9	1.0	1.0	1.0	1.0
<b>Hispanic</b>							
Children in protective custodies	2.4%	4.5%	4.8%	4.2%	3.4%	4.1%	5.4%
Children in investigated reports	4.1%	4.7%	5.0%	5.2%	5.5%	5.6%	6.0%
Relative RDI	0.6	1.0	1.0	0.8	0.6	0.7	0.9
<b>Southern</b>							
<b>Black</b>							
Children in protective custodies	24.3%	24.9%	23.2%	22.5%	21.8%	22.4%	20.9%
Children in investigated reports	24.0%	25.8%	24.8%	25.0%	26.0%	25.4%	25.7%
Relative RDI	1.0	1.0	0.9	0.9	0.8	0.9	0.8
<b>White</b>							
Children in protective custodies	74.3%	71.3%	74.0%	72.1%	75.9%	73.3%	75.9%
Children in investigated reports	71.9%	70.0%	70.9%	70.8%	69.8%	70.4%	69.5%
Relative RDI	1.0	1.0	1.0	1.0	1.1	1.0	1.1
<b>Hispanic</b>							
Children in protective custodies	1.0%	2.5%	2.5%	5.0%	1.6%	3.6%	2.5%
Children in investigated reports	2.3%	2.6%	2.9%	2.9%	2.8%	2.8%	3.0%
Relative RDI	0.4	1.0	0.9	1.7	0.5	1.3	0.8

**DISPROPORTIONALITY**

**Table 4.C.1 Absolute RDI for Indicated Reports**

	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
<b>Black</b>							
Children in indicated reports	34.1%	34.9%	32.8%	33.7%	34.5%	34.2%	35.2%
Total child population	16.8%	16.8%	16.6%	16.5%	16.5%	16.4%	16.4%
Absolute RDI	2.0	2.1	2.0	2.0	2.1	2.1	2.1
<b>White</b>							
Children in indicated reports	46.9%	45.2%	47.1%	47.3%	47.0%	46.1%	44.4%
Total child population	53.6%	53.4%	53.2%	53.1%	53.0%	52.8%	52.8%
Absolute RDI	0.9	0.8	0.9	0.9	0.9	0.9	0.8
<b>Hispanic</b>							
Children in indicated reports	16.9%	17.9%	18.5%	17.4%	16.9%	17.9%	18.5%
Total child population	24.2%	24.3%	24.5%	24.7%	24.8%	24.9%	24.9%
Absolute RDI	0.7	0.7	0.8	0.7	0.7	0.7	0.7



Table 4.C.2 Absolute RDI for Indicated Reports by Region

	2014	2015	2016	2017	2018	2019	2020
<b>Cook</b>							
<b>Black</b>							
Children in indicated reports	50.4%	51.2%	47.7%	51.3%	52.6%	51.8%	53.7%
Total child population	26.3%	26.0%	25.7%	25.3%	25.0%	24.9%	24.9%
Absolute RDI	1.9	2.0	1.9	2.0	2.1	2.1	2.2
<b>White</b>							
Children in indicated reports	17.8%	15.3%	16.9%	15.0%	14.3%	14.4%	14.2%
Total child population	32.0%	32.1%	32.2%	32.4%	32.5%	32.7%	32.7%
Absolute RDI	0.6	0.5	0.5	0.5	0.4	0.4	0.4
<b>Hispanic</b>							
Children in indicated reports	28.3%	31.0%	33.1%	31.2%	30.9%	31.3%	29.5%
Total child population	35.2%	35.3%	35.5%	35.5%	35.5%	35.4%	35.4%
Absolute RDI	0.8	0.9	0.9	0.9	0.9	0.9	0.8
<b>Northern</b>							
<b>Black</b>							
Children in indicated reports	27.5%	28.4%	27.6%	27.8%	28.2%	29.0%	28.0%
Total child population	8.8%	8.8%	8.8%	8.9%	8.9%	9.0%	9.0%
Absolute RDI	3.1	3.2	3.1	3.1	3.2	3.2	3.1
<b>White</b>							
Children in indicated reports	45.5%	44.5%	42.7%	43.2%	44.1%	41.5%	41.1%
Total child population	59.8%	59.3%	58.8%	58.3%	57.8%	57.3%	57.3%
Absolute RDI	0.8	0.8	0.7	0.7	0.8	0.7	0.7
<b>Hispanic</b>							
Children in indicated reports	24.4%	24.8%	27.7%	27.2%	25.6%	27.3%	28.8%
Total child population	25.0%	25.3%	25.7%	26.0%	26.3%	26.6%	26.6%
Absolute RDI	1.0	1.0	1.1	1.0	1.0	1.0	1.1
<b>Central</b>							
<b>Black</b>							
Children in indicated reports	28.6%	29.7%	29.1%	29.5%	28.4%	27.3%	30.2%
Total child population	11.9%	12.1%	12.3%	12.5%	12.5%	12.5%	12.5%
Absolute RDI	2.4	2.5	2.4	2.4	2.3	2.2	2.4
<b>White</b>							
Children in indicated reports	66.1%	64.3%	65.1%	64.3%	65.6%	66.5%	62.6%
Total child population	78.3%	77.9%	77.5%	77.3%	77.0%	76.9%	76.9%
Absolute RDI	0.8	0.8	0.8	0.8	0.9	0.9	0.8
<b>Hispanic</b>							
Children in indicated reports	4.3%	4.8%	4.8%	5.2%	5.1%	5.0%	5.8%
Total child population	7.0%	7.1%	7.3%	7.4%	7.5%	7.6%	7.6%
Absolute RDI	0.6	0.7	0.7	0.7	0.7	0.7	0.8
<b>Southern</b>							
<b>Black</b>							
Children in indicated reports	22.1%	24.3%	23.7%	22.8%	24.4%	23.3%	20.9%
Total child population	15.1%	15.1%	15.1%	15.2%	15.2%	15.1%	15.1%
Absolute RDI	1.5	1.6	1.6	1.5	1.6	1.5	1.4
<b>White</b>							
Children in indicated reports	74.8%	71.1%	72.5%	73.2%	72.2%	73.1%	75.3%
Total child population	79.1%	78.9%	78.8%	78.6%	78.4%	78.3%	78.3%
Absolute RDI	0.9	0.9	0.9	0.9	0.9	0.9	1.0
<b>Hispanic</b>							
Children in indicated reports	2.3%	3.2%	3.0%	3.3%	2.6%	2.8%	2.7%
Total child population	4.3%	4.4%	4.5%	4.7%	4.7%	4.8%	4.8%
Absolute RDI	0.5	0.7	0.7	0.7	0.5	0.6	0.6

**DISPROPORTIONALITY**

**Table 4.C.3 Relative RDI for Indicated Reports**

	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
<b>Black</b>							
Children in indicated reports	34.1%	34.9%	32.8%	33.7%	34.5%	34.2%	35.2%
Children in investigated reports	33.9%	34.3%	33.2%	33.3%	33.1%	33.2%	33.3%
Relative RDI	1.0	1.0	1.0	1.0	1.0	1.0	1.1
<b>White</b>							
Children in indicated reports	46.9%	45.2%	47.1%	47.3%	47.0%	46.1%	44.4%
Children in investigated reports	48.0%	46.3%	46.9%	46.8%	46.4%	45.4%	45.8%
Relative RDI	1.0	1.0	1.0	1.0	1.0	1.0	1.0
<b>Hispanic</b>							
Children in indicated reports	16.9%	17.9%	18.5%	17.4%	16.9%	17.9%	18.5%
Children in investigated reports	15.1%	16.7%	17.4%	17.4%	17.9%	18.5%	18.0%
Relative RDI	1.1	1.1	1.1	1.0	0.9	1.0	1.0

Table 4.C.4 Relative RDI for Indicated Reports by Region

	2014	2015	2016	2017	2018	2019	2020
<b>Cook</b>							
<b>Black</b>							
Children in indicated reports	50.4%	51.2%	47.7%	51.3%	52.6%	51.8%	53.7%
Children in investigated reports	52.1%	52.2%	50.5%	50.8%	49.6%	49.2%	50.4%
Relative RDI	1.0	1.0	0.9	1.0	1.1	1.1	1.1
<b>White</b>							
Children in indicated reports	17.8%	15.3%	16.9%	15.0%	14.3%	14.4%	14.2%
Children in investigated reports	18.3%	15.9%	16.9%	16.5%	16.1%	15.7%	16.1%
Relative RDI	1.0	1.0	1.0	0.9	0.9	0.9	0.9
<b>Hispanic</b>							
Children in indicated reports	28.3%	31.0%	33.1%	31.2%	30.9%	31.3%	29.5%
Children in investigated reports	25.5%	28.3%	29.2%	29.4%	30.8%	30.9%	29.3%
Relative RDI	1.1	1.1	1.1	1.1	1.0	1.0	1.0
<b>Northern</b>							
<b>Black</b>							
Children in indicated reports	27.5%	28.4%	27.6%	27.8%	28.2%	29.0%	28.0%
Children in investigated reports	26.8%	26.7%	25.9%	25.9%	26.6%	26.5%	26.0%
Relative RDI	1.0	1.1	1.1	1.1	1.1	1.1	1.1
<b>White</b>							
Children in indicated reports	45.5%	44.5%	42.7%	43.2%	44.1%	41.5%	41.1%
Children in investigated reports	49.0%	47.2%	46.9%	46.4%	45.2%	44.5%	44.7%
Relative RDI	0.9	0.9	0.9	0.9	1.0	0.9	0.9
<b>Hispanic</b>							
Children in indicated reports	24.4%	24.8%	27.7%	27.2%	25.6%	27.3%	28.8%
Children in investigated reports	20.8%	23.0%	24.4%	24.8%	24.8%	25.8%	26.0%
Relative RDI	1.2	1.1	1.1	1.1	1.0	1.1	1.1
<b>Central</b>							
<b>Black</b>							
Children in indicated reports	28.6%	29.7%	29.1%	29.5%	28.4%	27.3%	30.2%
Children in investigated reports	25.2%	26.2%	26.2%	26.5%	26.1%	26.5%	27.0%
Relative RDI	1.1	1.1	1.1	1.1	1.1	1.0	1.1
<b>White</b>							
Children in indicated reports	66.1%	64.3%	65.1%	64.3%	65.6%	66.5%	62.6%
Children in investigated reports	68.8%	67.6%	67.1%	66.6%	67.0%	66.1%	65.1%
Relative RDI	1.0	1.0	1.0	1.0	1.0	1.0	1.0
<b>Hispanic</b>							
Children in indicated reports	4.3%	4.8%	4.8%	5.2%	5.1%	5.0%	5.8%
Children in investigated reports	4.1%	4.7%	5.0%	5.2%	5.5%	5.6%	6.0%
Relative RDI	1.0	1.0	1.0	1.0	0.9	0.9	1.0
<b>Southern</b>							
<b>Black</b>							
Children in indicated reports	22.1%	24.3%	23.7%	22.8%	24.4%	23.3%	20.9%
Children in investigated reports	24.0%	25.8%	24.8%	25.0%	26.0%	25.4%	25.7%
Relative RDI	0.9	0.9	1.0	0.9	0.9	0.9	0.8
<b>White</b>							
Children in indicated reports	74.8%	71.1%	72.5%	73.2%	72.2%	73.1%	75.3%
Children in investigated reports	71.9%	70.0%	70.9%	70.8%	69.8%	70.4%	69.5%
Relative RDI	1.0	1.0	1.0	1.0	1.0	1.0	1.1
<b>Hispanic</b>							
Children in indicated reports	2.3%	3.2%	3.0%	3.3%	2.6%	2.8%	2.7%
Children in investigated reports	2.3%	2.6%	2.9%	2.9%	2.8%	2.8%	3.0%
Relative RDI	1.0	1.2	1.0	1.1	0.9	1.0	0.9

**DISPROPORTIONALITY**

**Table 4.D.1 Absolute RDI for Substitute Care Entries**

	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
<b>Black</b>							
Children entering substitute care	44.5%	45.5%	43.5%	41.4%	41.6%	39.6%	39.5%
Total child population	16.8%	16.8%	16.6%	16.5%	16.5%	16.4%	16.4%
Absolute RDI	2.6	2.7	2.6	2.5	2.5	2.4	2.4
<b>White</b>							
Children entering substitute care	45.8%	43.1%	45.6%	48.0%	50.2%	51.1%	48.9%
Total child population	53.6%	53.4%	53.2%	53.1%	53.0%	52.8%	52.8%
Absolute RDI	0.9	0.8	0.9	0.9	0.9	1.0	0.9
<b>Hispanic</b>							
Children entering substitute care	8.6%	10.4%	10.3%	10.0%	7.4%	8.6%	10.7%
Total child population	24.2%	24.3%	24.5%	24.7%	24.8%	24.9%	24.9%
Absolute RDI	0.4	0.4	0.4	0.4	0.3	0.3	0.4

Table 4.D.2 Absolute RDI for Substitute Care Entries by Region

	2014	2015	2016	2017	2018	2019	2020
<b>Cook</b>							
<b>Black</b>							
Children entering substitute care	72.1%	66.6%	68.0%	65.9%	73.6%	69.1%	65.3%
Total child population	26.3%	26.0%	25.7%	25.3%	25.0%	24.9%	24.9%
Absolute RDI	2.7	2.6	2.6	2.6	2.9	2.8	2.6
<b>White</b>							
Children entering substitute care	11.5%	11.9%	12.5%	12.1%	11.3%	11.7%	12.2%
Total child population	32.0%	32.1%	32.2%	32.4%	32.5%	32.7%	32.7%
Absolute RDI	0.4	0.4	0.4	0.4	0.3	0.4	0.4
<b>Hispanic</b>							
Children in indicated reports	14.7%	20.4%	18.8%	21.5%	13.8%	18.9%	21.2%
Total child population	35.2%	35.3%	35.5%	35.5%	35.5%	35.4%	35.4%
Absolute RDI	0.4	0.6	0.5	0.6	0.4	0.5	0.6
<b>Northern</b>							
<b>Black</b>							
Children entering substitute care	39.2%	41.9%	44.2%	42.4%	38.5%	44.6%	42.0%
Total child population	8.8%	8.8%	8.8%	8.9%	8.9%	9.0%	9.0%
Absolute RDI	4.5	4.8	5.0	4.8	4.3	4.9	4.7
<b>White</b>							
Children entering substitute care	43.4%	43.8%	38.5%	44.1%	45.3%	39.4%	39.7%
Total child population	59.8%	59.3%	58.8%	58.3%	57.8%	57.3%	57.3%
Absolute RDI	0.7	0.7	0.7	0.8	0.8	0.7	0.7
<b>Hispanic</b>							
Children entering substitute care	16.2%	12.7%	16.3%	13.0%	15.3%	15.4%	17.6%
Total child population	25.0%	25.3%	25.7%	26.0%	26.3%	26.6%	26.6%
Absolute RDI	0.6	0.5	0.6	0.5	0.6	0.6	0.7
<b>Central</b>							
<b>Black</b>							
Children entering substitute care	37.0%	39.5%	35.9%	33.2%	33.7%	31.3%	32.5%
Total child population	11.9%	12.1%	12.3%	12.5%	12.5%	12.5%	12.5%
Absolute RDI	3.1	3.3	2.9	2.7	2.7	2.5	2.6
<b>White</b>							
Children entering substitute care	60.5%	55.6%	59.4%	62.3%	62.8%	64.6%	61.7%
Total child population	78.3%	77.9%	77.5%	77.3%	77.0%	76.9%	76.9%
Absolute RDI	0.8	0.7	0.8	0.8	0.8	0.8	0.8
<b>Hispanic</b>							
Children entering substitute care	1.6%	4.4%	4.2%	3.6%	3.0%	3.0%	4.8%
Total child population	7.0%	7.1%	7.3%	7.4%	7.5%	7.6%	7.6%
Absolute RDI	0.2	0.6	0.6	0.5	0.4	0.4	0.6
<b>Southern</b>							
<b>Black</b>							
Children entering substitute care	23.2%	25.3%	22.8%	24.0%	22.4%	23.1%	20.2%
Total child population	15.1%	15.1%	15.1%	15.2%	15.2%	15.1%	15.1%
Absolute RDI	1.5	1.7	1.5	1.6	1.5	1.5	1.3
<b>White</b>							
Children entering substitute care	75.5%	71.8%	74.1%	71.5%	75.1%	72.3%	76.3%
Total child population	79.1%	78.9%	78.8%	78.6%	78.4%	78.3%	78.3%
Absolute RDI	1.0	0.9	0.9	0.9	1.0	0.9	1.0
<b>Hispanic</b>							
Children entering substitute care	1.1%	2.3%	2.9%	4.2%	1.9%	3.8%	2.8%
Total child population	4.3%	4.4%	4.5%	4.7%	4.7%	4.8%	4.8%
Absolute RDI	0.3	0.5	0.6	0.9	0.4	0.8	0.6

**DISPROPORTIONALITY**

**Table 4.D.3 Relative RDI for Substitute Care Entries**

	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
<b>Black</b>							
Children entering substitute care	44.5%	45.5%	43.5%	41.4%	41.6%	39.6%	39.5%
Children in indicated reports	34.1%	34.9%	32.8%	33.7%	34.5%	34.2%	35.2%
Relative RDI	1.3	1.3	1.3	1.2	1.2	1.2	1.1
<b>White</b>							
Children entering substitute care	45.8%	43.1%	45.6%	48.0%	50.2%	51.1%	48.9%
Children in indicated reports	46.9%	45.2%	47.1%	47.3%	47.0%	46.1%	44.4%
Relative RDI	1.0	1.0	1.0	1.0	1.1	1.1	1.1
<b>Hispanic</b>							
Children entering substitute care	8.6%	10.4%	10.3%	10.0%	7.4%	8.6%	10.7%
Children in indicated reports	16.9%	17.9%	18.5%	17.4%	16.9%	17.9%	18.5%
Relative RDI	0.5	0.6	0.6	0.6	0.4	0.5	0.6

Table 4.D.4 Relative RDI for Substitute Care Entries by Region

	2014	2015	2016	2017	2018	2019	2020
<b>Cook</b>							
<b>Black</b>							
Children entering substitute care	72.1%	66.6%	68.0%	65.9%	73.6%	69.1%	65.3%
Children in indicated reports	50.4%	51.2%	47.7%	51.3%	52.6%	51.8%	53.7%
Relative RDI	1.4	1.3	1.4	1.3	1.4	1.3	1.2
<b>White</b>							
Children entering substitute care	11.5%	11.9%	12.5%	12.1%	11.3%	11.7%	12.2%
Children in indicated reports	17.8%	15.3%	16.9%	15.0%	14.3%	14.4%	14.2%
Relative RDI	0.6	0.8	0.7	0.8	0.8	0.8	0.9
<b>Hispanic</b>							
Children entering substitute care	14.7%	20.4%	18.8%	21.5%	13.8%	18.9%	21.2%
Children in indicated reports	28.3%	31.0%	33.1%	31.2%	30.9%	31.3%	29.5%
Relative RDI	0.5	0.7	0.6	0.7	0.4	0.6	0.7
<b>Northern</b>							
<b>Black</b>							
Children entering substitute care	39.2%	41.9%	44.2%	42.4%	38.5%	44.6%	42.0%
Children in indicated reports	27.5%	28.4%	27.6%	27.8%	28.2%	29.0%	28.0%
Relative RDI	1.4	1.5	1.6	1.5	1.4	1.5	1.5
<b>White</b>							
Children entering substitute care	43.4%	43.8%	38.5%	44.1%	45.3%	39.4%	39.7%
Children in indicated reports	45.5%	44.5%	42.7%	43.2%	44.1%	41.5%	41.1%
Relative RDI	1.0	1.0	0.9	1.0	1.0	0.9	1.0
<b>Hispanic</b>							
Children entering substitute care	16.2%	12.7%	16.3%	13.0%	15.3%	15.4%	17.6%
Children in indicated reports	24.4%	24.8%	27.7%	27.2%	25.6%	27.3%	28.8%
Relative RDI	0.7	0.5	0.6	0.5	0.6	0.6	0.6
<b>Central</b>							
<b>Black</b>							
Children entering substitute care	37.0%	39.5%	35.9%	33.2%	33.7%	31.3%	32.5%
Children in indicated reports	28.6%	29.7%	29.1%	29.5%	28.4%	27.3%	30.2%
Relative RDI	1.3	1.3	1.2	1.1	1.2	1.1	1.1
<b>White</b>							
Children entering substitute care	60.5%	55.6%	59.4%	62.3%	62.8%	64.6%	61.7%
Children in indicated reports	66.1%	64.3%	65.1%	64.3%	65.6%	66.5%	62.6%
Relative RDI	0.9	0.9	0.9	1.0	1.0	1.0	1.0
<b>Hispanic</b>							
Children entering substitute care	1.6%	4.4%	4.2%	3.6%	3.0%	3.0%	4.8%
Children in indicated reports	4.3%	4.8%	4.8%	5.2%	5.1%	5.0%	5.8%
Relative RDI	0.4	0.9	0.9	0.7	0.6	0.6	0.8
<b>Southern</b>							
<b>Black</b>							
Children entering substitute care	23.2%	25.3%	22.8%	24.0%	22.4%	23.1%	20.2%
Children in indicated reports	22.1%	24.3%	23.7%	22.8%	24.4%	23.3%	20.9%
Relative RDI	1.0	1.0	1.0	1.1	0.9	1.0	1.0
<b>White</b>							
Children entering substitute care	75.5%	71.8%	74.1%	71.5%	75.1%	72.3%	76.3%
Children in indicated reports	74.8%	71.1%	72.5%	73.2%	72.2%	73.1%	75.3%
Relative RDI	1.0	1.0	1.0	1.0	1.0	1.0	1.0
<b>Hispanic</b>							
Children entering substitute care	1.1%	2.3%	2.9%	4.2%	1.9%	3.8%	2.8%
Children in indicated reports	2.3%	3.2%	3.0%	3.3%	2.6%	2.8%	2.7%
Relative RDI	0.5	0.7	1.0	1.3	0.7	1.4	1.1

**DISPROPORTIONALITY**

**Table 4.E.1 Absolute RDI for Children in Intact Family Services**

	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
<b>Black</b>							
Children in intact family services	32.6%	30.0%	26.8%	28.4%	30.9%	26.9%	28.9%
Total child population	16.8%	16.8%	16.6%	16.5%	16.5%	16.4%	16.4%
Absolute RDI	1.9	1.8	1.6	1.7	1.9	1.6	1.8
<b>White</b>							
Children in intact family services	48.2%	48.0%	51.6%	52.1%	51.3%	54.1%	51.2%
Total child population	53.6%	53.4%	53.2%	53.1%	53.0%	52.8%	52.8%
Absolute RDI	0.9	0.9	1.0	1.0	1.0	1.0	1.0
<b>Hispanic</b>							
Children in intact family services	17.5%	20.7%	20.6%	18.3%	16.9%	17.6%	18.6%
Total child population	24.2%	24.3%	24.5%	24.7%	24.8%	24.9%	24.9%
Absolute RDI	0.7	0.8	0.8	0.7	0.7	0.7	0.7



Table 4.E.2 Absolute RDI for Children in Intact Family Services by Region

	2014	2015	2016	2017	2018	2019	2020
<b>Cook</b>							
<b>Black</b>							
Children in intact family services	47.0%	41.9%	39.1%	41.2%	45.5%	40.2%	40.0%
Total child population	26.3%	26.0%	25.7%	25.3%	25.0%	24.9%	24.9%
Absolute RDI	1.8	1.6	1.5	1.6	1.8	1.6	1.6
<b>White</b>							
Children in intact family services	17.1%	16.9%	18.6%	19.2%	15.1%	18.1%	17.7%
Total child population	32.0%	32.1%	32.2%	32.4%	32.5%	32.7%	32.7%
Absolute RDI	0.5	0.5	0.6	0.6	0.5	0.6	0.5
<b>Hispanic</b>							
Children in intact family services	32.6%	38.5%	41.2%	36.9%	37.8%	38.6%	39.8%
Total child population	35.2%	35.3%	35.5%	35.5%	35.5%	35.4%	35.4%
Absolute RDI	0.9	1.1	1.2	1.0	1.1	1.1	1.1
<b>Northern</b>							
<b>Black</b>							
Children in intact family services	27.3%	26.4%	21.2%	26.6%	30.0%	26.0%	26.8%
Total child population	8.8%	8.8%	8.8%	8.9%	8.9%	9.0%	9.0%
Absolute RDI	3.1	3.0	2.4	3.0	3.4	2.9	3.0
<b>White</b>							
Children in intact family services	48.3%	45.9%	45.3%	44.1%	45.4%	46.0%	43.0%
Total child population	59.8%	59.3%	58.8%	58.3%	57.8%	57.3%	57.3%
Absolute RDI	0.8	0.8	0.8	0.8	0.8	0.8	0.8
<b>Hispanic</b>							
Children in intact family services	22.7%	26.2%	31.3%	28.2%	23.0%	26.7%	28.5%
Total child population	25.0%	25.3%	25.7%	26.0%	26.3%	26.6%	26.6%
Absolute RDI	0.9	1.0	1.2	1.1	0.9	1.0	1.1
<b>Central</b>							
<b>Black</b>							
Children in intact family services	28.6%	26.9%	26.6%	28.0%	26.5%	23.5%	27.1%
Total child population	11.9%	12.1%	12.3%	12.5%	12.5%	12.5%	12.5%
Absolute RDI	2.4	2.2	2.2	2.2	2.1	1.9	2.2
<b>White</b>							
Children in intact family services	66.5%	67.9%	69.3%	66.9%	67.6%	70.9%	65.2%
Total child population	78.3%	77.9%	77.5%	77.3%	77.0%	76.9%	76.9%
Absolute RDI	0.8	0.9	0.9	0.9	0.9	0.9	0.8
<b>Hispanic</b>							
Children in intact family services	4.2%	4.7%	3.8%	4.6%	5.3%	4.8%	6.9%
Total child population	7.0%	7.1%	7.3%	7.4%	7.5%	7.6%	7.6%
Absolute RDI	0.6	0.7	0.5	0.6	0.7	0.6	0.9
<b>Southern</b>							
<b>Black</b>							
Children in intact family services	19.8%	17.7%	18.0%	14.9%	20.2%	16.9%	21.1%
Total child population	15.1%	15.1%	15.1%	15.2%	15.2%	15.1%	15.1%
Absolute RDI	1.3	1.2	1.2	1.0	1.3	1.1	1.4
<b>White</b>							
Children in intact family services	77.1%	78.4%	77.9%	81.5%	76.4%	79.3%	75.6%
Total child population	79.1%	78.9%	78.8%	78.6%	78.4%	78.3%	78.3%
Absolute RDI	1.0	1.0	1.0	1.0	1.0	1.0	1.0
<b>Hispanic</b>							
Children in intact family services	2.9%	3.6%	3.3%	3.0%	3.1%	3.2%	2.9%
Total child population	4.3%	4.4%	4.5%	4.7%	4.7%	4.8%	4.8%
Absolute RDI	0.7	0.8	0.7	0.6	0.7	0.7	0.6

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**Table 4.E.3 Relative RDI for Children in Intact Family Services**

	2014	2015	2016	2017	2018	2019	2020
<b>Black</b>							
Children in intact family services	32.6%	30.0%	26.8%	28.4%	30.9%	26.9%	28.9%
Children in indicated reports	34.1%	34.9%	32.8%	33.7%	34.5%	34.2%	35.2%
Relative RDI	1.0	0.9	0.8	0.8	0.9	0.8	0.8
<b>White</b>							
Children in intact family services	48.2%	48.0%	51.6%	52.1%	51.3%	54.1%	51.2%
Children in indicated reports	46.9%	45.2%	47.1%	47.3%	47.0%	46.1%	44.4%
Relative RDI	1.0	1.1	1.1	1.1	1.1	1.2	1.2
<b>Hispanic</b>							
Children in intact family services	17.5%	20.7%	20.6%	18.3%	16.9%	17.6%	18.6%
Children in indicated reports	16.9%	17.9%	18.5%	17.4%	16.9%	17.9%	18.5%
Relative RDI	1.0	1.2	1.1	1.0	1.0	1.0	1.0

Table 4.E.4 Relative RDI for Children in Intact Family Services by Region

	2014	2015	2016	2017	2018	2019	2020
<b>Cook</b>							
<b>Black</b>							
Children in intact family services	47.0%	41.9%	39.1%	41.2%	45.5%	40.2%	40.0%
Children in indicated reports	50.4%	51.2%	47.7%	51.3%	52.6%	51.8%	53.7%
Relative RDI	0.9	0.8	0.8	0.8	0.9	0.8	0.7
<b>White</b>							
Children in intact family services	17.1%	16.9%	18.6%	19.2%	15.1%	18.1%	17.7%
Children in indicated reports	17.8%	15.3%	16.9%	15.0%	14.3%	14.4%	14.2%
Relative RDI	1.0	1.1	1.1	1.3	1.1	1.3	1.2
<b>Hispanic</b>							
Children in intact family services	32.6%	38.5%	41.2%	36.9%	37.8%	38.6%	39.8%
Children in indicated reports	28.3%	31.0%	33.1%	31.2%	30.9%	31.3%	29.5%
Relative RDI	1.1	1.2	1.2	1.2	1.2	1.2	1.3
<b>Northern</b>							
<b>Black</b>							
Children in intact family services	27.3%	26.4%	21.2%	26.6%	30.0%	26.0%	26.8%
Children in indicated reports	27.5%	28.4%	27.6%	27.8%	28.2%	29.0%	28.0%
Relative RDI	1.0	0.9	0.8	1.0	1.1	0.9	1.0
<b>White</b>							
Children in intact family services	48.3%	45.9%	45.3%	44.1%	45.4%	46.0%	43.0%
Children in indicated reports	45.5%	44.5%	42.7%	43.2%	44.1%	41.5%	41.1%
Relative RDI	1.1	1.0	1.1	1.0	1.0	1.1	1.0
<b>Hispanic</b>							
Children in intact family services	22.7%	26.2%	31.3%	28.2%	23.0%	26.7%	28.5%
Children in indicated reports	24.4%	24.8%	27.7%	27.2%	25.6%	27.3%	28.8%
Relative RDI	0.9	1.1	1.1	1.0	0.9	1.0	1.0
<b>Central</b>							
<b>Black</b>							
Children in intact family services	28.6%	26.9%	26.6%	28.0%	26.5%	23.5%	27.1%
Children in indicated reports	28.6%	29.7%	29.1%	29.5%	28.4%	27.3%	30.2%
Relative RDI	1.0	0.9	0.9	1.0	0.9	0.9	0.9
<b>White</b>							
Children in intact family services	66.5%	67.9%	69.3%	66.9%	67.6%	70.9%	65.2%
Children in indicated reports	66.1%	64.3%	65.1%	64.3%	65.6%	66.5%	62.6%
Relative RDI	1.0	1.1	1.1	1.0	1.0	1.1	1.0
<b>Hispanic</b>							
Children in intact family services	4.2%	4.7%	3.8%	4.6%	5.3%	4.8%	6.9%
Children in indicated reports	4.3%	4.8%	4.8%	5.2%	5.1%	5.0%	5.8%
Relative RDI	1.0	1.0	0.8	0.9	1.0	1.0	1.2
<b>Southern</b>							
<b>Black</b>							
Children in intact family services	19.8%	17.7%	18.0%	14.9%	20.2%	16.9%	21.1%
Children in indicated reports	22.1%	24.3%	23.7%	22.8%	24.4%	23.3%	20.9%
Relative RDI	0.9	0.7	0.8	0.7	0.8	0.7	1.0
<b>White</b>							
Children in intact family services	77.1%	78.4%	77.9%	81.5%	76.4%	79.3%	75.6%
Children in indicated reports	74.8%	71.1%	72.5%	73.2%	72.2%	73.1%	75.3%
Relative RDI	1.0	1.1	1.1	1.1	1.1	1.1	1.0
<b>Hispanic</b>							
Children in intact family services	2.9%	3.6%	3.3%	3.0%	3.1%	3.2%	2.9%
Children in indicated reports	2.3%	3.2%	3.0%	3.3%	2.6%	2.8%	2.7%
Relative RDI	1.2	1.1	1.1	0.9	1.2	1.2	1.1

**DISPROPORTIONALITY**

**Table 4.F.1 Absolute RDI for Remaining in Care Longer Than 36 Months**

	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
<b>Black</b>				
Children in care longer than 36 months	52.2%	51.3%	52.5%	48.7%
Total child population	16.8%	16.8%	16.6%	16.5%
Absolute RDI	3.1	3.1	3.2	2.9
<b>White</b>				
Children in care longer than 36 months	38.3%	37.7%	37.8%	39.8%
Total child population	53.6%	53.4%	53.2%	53.1%
Absolute RDI	0.7	0.7	0.7	0.7
<b>Hispanic</b>				
Children in care longer than 36 months	8.6%	9.8%	9.2%	10.9%
Total child population	24.2%	24.3%	24.5%	24.7%
Absolute RDI	0.4	0.4	0.4	0.4

**Table 4.F.2 Absolute RDI for Remaining in Care Longer Than 36 Months by Region**

	2014	2015	2016	2017
<b>Cook</b>				
<b>Black</b>				
Children in care longer than 36 months	73.8%	71.0%	74.4%	68.8%
Total child population	26.3%	26.0%	25.7%	25.3%
Absolute RDI	2.8	2.7	2.9	2.7
<b>White</b>				
Children in care longer than 36 months	10.9%	11.4%	10.6%	10.3%
Total child population	32.0%	32.1%	32.2%	32.4%
Absolute RDI	0.3	0.4	0.3	0.3
<b>Hispanic</b>				
Children in care longer than 36 months	13.8%	16.7%	14.7%	20.4%
Total child population	35.2%	35.3%	35.5%	35.5%
Absolute RDI	0.4	0.5	0.4	0.6
<b>Northern</b>				
<b>Black</b>				
Children in care longer than 36 months	44.2%	40.5%	48.8%	48.5%
Total child population	8.8%	8.8%	8.8%	8.9%
Absolute RDI	5.0	4.6	5.5	5.5
<b>White</b>				
Children in care longer than 36 months	41.2%	43.0%	36.3%	40.1%
Total child population	59.8%	59.3%	58.8%	58.3%
Absolute RDI	0.7	0.7	0.6	0.7
<b>Hispanic</b>				
Children in care longer than 36 months	14.5%	12.5%	14.1%	11.5%
Total child population	25.0%	25.3%	25.7%	26.0%
Absolute RDI	0.6	0.5	0.5	0.4
<b>Central</b>				
<b>Black</b>				
Children in care longer than 36 months	42.5%	44.5%	42.0%	37.8%
Total child population	11.9%	12.1%	12.3%	12.5%
Absolute RDI	3.6	3.7	3.4	3.0
<b>White</b>				
Children in care longer than 36 months	55.1%	51.7%	55.2%	58.0%
Total child population	78.3%	77.9%	77.5%	77.3%
Absolute RDI	0.7	0.7	0.7	0.8
<b>Hispanic</b>				
Children in care longer than 36 months	1.5%	3.4%	2.2%	3.0%
Total child population	7.0%	7.1%	7.3%	7.4%
Absolute RDI	0.2	0.5	0.3	0.4
<b>Southern</b>				
<b>Black</b>				
Children in care longer than 36 months	28.8%	28.7%	25.8%	25.5%
Total child population	15.1%	15.1%	15.1%	15.2%
Absolute RDI	1.9	1.9	1.7	1.7
<b>White</b>				
Children in care longer than 36 months	70.3%	68.6%	70.2%	69.4%
Total child population	79.1%	78.9%	78.8%	78.6%
Absolute RDI	0.9	0.9	0.9	0.9
<b>Hispanic</b>				
Children in care longer than 36 months	0.9%	2.4%	4.0%	5.1%
Total child population	4.3%	4.4%	4.5%	4.7%
Absolute RDI	0.2	0.5	0.9	1.1

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**Table 4.F.3 Relative RDI for Remaining in Care Longer Than 36 Months**

	2014	2015	2016	2017
<b>Black</b>				
Children in care longer than 36 months	52.2%	51.3%	52.5%	48.7%
Children entering substitute care	44.5%	45.5%	43.5%	41.4%
Relative RDI	1.2	1.1	1.2	1.2
<b>White</b>				
Children in care longer than 36 months	38.3%	37.7%	37.8%	39.8%
Children entering substitute care	45.8%	43.1%	45.6%	48.0%
Relative RDI	0.8	0.9	0.8	0.8
<b>Hispanic</b>				
Children in care longer than 36 months	8.6%	9.8%	9.2%	10.9%
Children entering substitute care	8.6%	10.4%	10.3%	10.0%
Relative RDI	1.0	0.9	0.9	1.1

Table 4.F.4 Relative RDI for Remaining in Care Longer Than 36 Months by Region

	2014	2015	2016	2017
<b>Cook</b>				
<b>Black</b>				
Children in care longer than 36 months	73.8%	71.0%	74.4%	68.8%
Children entering substitute care	72.1%	66.6%	68.0%	65.9%
Relative RDI	1.0	1.1	1.1	1.0
<b>White</b>				
Children in care longer than 36 months	10.9%	11.4%	10.6%	10.3%
Children entering substitute care	11.5%	11.9%	12.5%	12.1%
Relative RDI	1.0	1.0	0.8	0.9
<b>Hispanic</b>				
Children in care longer than 36 months	13.8%	16.7%	14.7%	20.4%
Children entering substitute care	14.7%	20.4%	18.8%	21.5%
Relative RDI	0.9	0.8	0.8	1.0
<b>Northern</b>				
<b>Black</b>				
Children in care longer than 36 months	44.2%	40.5%	48.8%	48.5%
Children entering substitute care	39.2%	41.9%	44.2%	42.4%
Relative RDI	1.1	1.0	1.1	1.1
<b>White</b>				
Children in care longer than 36 months	41.2%	43.0%	36.3%	40.1%
Children entering substitute care	43.4%	43.8%	38.5%	44.1%
Relative RDI	1.0	1.0	0.9	0.9
<b>Hispanic</b>				
Children in care longer than 36 months	14.5%	12.5%	14.1%	11.5%
Children entering substitute care	16.2%	12.7%	16.3%	13.0%
Relative RDI	0.9	1.0	0.9	0.9
<b>Central</b>				
<b>Black</b>				
Children in care longer than 36 months	42.5%	44.5%	42.0%	37.8%
Children entering substitute care	37.0%	39.5%	35.9%	33.2%
Relative RDI	1.1	1.1	1.2	1.1
<b>White</b>				
Children in care longer than 36 months	55.1%	51.7%	55.2%	58.0%
Children entering substitute care	60.5%	55.6%	59.4%	62.3%
Relative RDI	0.9	0.9	0.9	0.9
<b>Hispanic</b>				
Children in care longer than 36 months	1.5%	3.4%	2.2%	3.0%
Children entering substitute care	1.6%	4.4%	4.2%	3.6%
Relative RDI	0.9	0.8	0.5	0.8
<b>Southern</b>				
<b>Black</b>				
Children in care longer than 36 months	28.8%	28.7%	25.8%	25.5%
Children entering substitute care	23.2%	25.3%	22.8%	24.0%
Relative RDI	1.2	1.1	1.1	1.1
<b>White</b>				
Children in care longer than 36 months	70.3%	68.6%	70.2%	69.4%
Children entering substitute care	75.5%	71.8%	74.1%	71.5%
Relative RDI	0.9	1.0	0.9	1.0
<b>Hispanic</b>				
Children in care longer than 36 months	0.9%	2.4%	4.0%	5.1%
Children entering substitute care	1.1%	2.3%	2.9%	4.2%
Relative RDI	0.8	1.1	1.4	1.2







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