Five Findings from the 2016 B.H. Monitoring Report

The Children and Family Research Center (CFRC) produces the annual monitoring report of the B.H. Consent Decree, which tracks the performance of the Illinois child welfare system in achieving its stated goals of child safety, permanency, and well-being for children in or at risk of entering foster care. The full report, available on the CFRC website, contains information about Illinois performance on more than 40 measures over the past seven years. This brief highlights five key findings from the latest report, which tracks performance through the end of FY2016.

1. African American Children Overrepresented in Illinois’ Child Welfare System

Racial disproportionality refers to the over- or underrepresentation of children of color in the child welfare system, and this year’s report includes an additional chapter exploring this important topic. We looked at three racial/ethnic groups at five child welfare decision points: investigated maltreatment reports, protective custodies, indicated maltreatment reports, entries into substitute care, and timely exits from substitute care. Results find that African American children are overrepresented at all decision points compared to their proportion of the general population, while Hispanic children are underrepresented. This pattern for African American children is consistent with national patterns and remains largely unchanged over time (Child Welfare Information Gateway, 2016). Regionally, the Southern region has the least disproportionate representation while the Northern region has the greatest disproportionality.

2. Initial Placement in Emergency Shelters Decreases

The percentage of children initially placed in emergency shelters reached its highest point in 2012 (11.5%) (Figure 1) and has since decreased to its lowest point in the past 7 years in 2016 (2.9%). This reduction might be the result of DCFS initiatives to reduce the use of emergency shelters and develop alternative placements for cases where emergency shelters might have been used in the past.

Figure 1. Initial Placement in Emergency Shelters
3. Use of Homelike Settings Increases

Children should stay at home or be placed in homelike settings whenever possible. End-of-year placements in kinship foster homes have risen from 37.7% in 2010 to 44.1% in 2016 (see Figure 2). Meanwhile, the percentage of children in group homes and institutions at the end of the year has decreased from 9.4% in 2015 to 8.4% in 2016. Like the reduction in the use of emergency shelters, these changes may stem from DCFS efforts to increase the use of homelike settings for children.

Figure 2. End-of-Year Placement Types

4. Maltreatment Recurrence Among Intact Families Increases

The B.H. report track 12-month maltreatment recurrence among several different groups of children. One group of particular interest is children that are served in intact family cases after a substantiated maltreatment investigation. Because of their previous maltreatment, these children are at higher risk of future maltreatment than those in the general public, but may be able to remain at home with their caregivers when supportive services are provided. In 2012, 9.1% of children with an initial indicated report experienced maltreatment recurrence within 12 months. This rate has risen to 13.4% of children in 2015 (Figure 3). Even more worrisome, youngest children are at the highest risk: 18.5% of children 0–2 years old experienced maltreatment recurrence in 2015 (Figure 3).

Figure 3. Maltreatment Recurrence Among Intact Families by Age
5. **Maltreatment in Substitute Care Continues to Rise**

Children may be removed from their home following an indicated report to keep them safe from further harm, but maltreatment can occur in substitute care as well. The rate of maltreatment in substitute care declined from 1.9% in 1997 to 1.2% in 2006, but since then, it has doubled (Figure 4). In 2016, 2.4% of children experienced maltreatment in care, the highest rate in the past 20 years. Rates of maltreatment in care worsened in nearly all sub-regions of the state over the past two years, suggesting the increase is cause for statewide concern.

Figure 4. Maltreatment in Substitute Care

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References