Instability in Foster Care: Causes and Explanations

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Most Children in Care are Stable

- Illinois children in substitute care for one year who had no more than two placements within a year of removal
Background

- At the request of DCFS and the ACLU, a joint record review of the top multiple-move cases and a matched sample of stable cases.

- The joint record review was conducted by staff from the CFRC Foster Care Utilization Review Program (FCURP) and the Division of Quality Assurance.
Study Questions

• **QUESTION #1:** What distinguishes children who are stable from those who move frequently?

• **QUESTION #2:** Has the CAYIT process minimized moves through improved assessment of needs and prompt provision of recommended services?
CAYIT: Child and Youth Investment Teams

- Implemented in June, 2006
- This study only looks at ‘multiple move’ CAYITs
- Goals: to stabilize out-of-home placements, deliver services sooner, and shorten the lengths of stay for youth in residential placements. This review focused on the first and second of these goals.
Matched Samples

**Study Design**

**Study period:** 7/1/06 – 12/31/07

**MOVER SUBJECTS**
On 7/1/06, **261** cases in foster family and kinship homes which met the multiple move trigger for a CAYIT 
(3 placements within an 18-month period)

**MOVER SELECTION = 61 cases**
The top **11** cases selected, plus an additional **50** randomly selected

**STABLE SUBJECTS**
On 7/1/06, **3,223** cases in foster family and kinship homes which were stable 
(less than 3 placements in 18 months)

**STABLE SELECTION = 61 cases**
61 cases selected from the stable sample, matched

**Matching**

Propensity Score Matching – 122 cases
## Matched Samples

<table>
<thead>
<tr>
<th>Variable</th>
<th>Movers (N = 61)</th>
<th>Matched (N = 61)</th>
<th>Stayers Original (N = 3,233)</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 1 year old</td>
<td>11.5%</td>
<td>13.1%</td>
<td>34.1%</td>
</tr>
<tr>
<td>African-American</td>
<td>55.7%</td>
<td>54.1%</td>
<td>62.3%</td>
</tr>
<tr>
<td>Female</td>
<td>57.4%</td>
<td>50.8%</td>
<td>48.2%</td>
</tr>
<tr>
<td>Cook County</td>
<td>27.9%</td>
<td>23.0%</td>
<td>53.4%</td>
</tr>
<tr>
<td>5+ prior moves</td>
<td>13.1%</td>
<td>13.1%</td>
<td>5.2%</td>
</tr>
<tr>
<td>Child disability noted</td>
<td>11.5%</td>
<td>16.4%</td>
<td>7.1%</td>
</tr>
<tr>
<td>Opened &lt;6 mos.</td>
<td>34.4%</td>
<td>37.7%</td>
<td>16.2%</td>
</tr>
</tbody>
</table>
An Example of the Matching: Two Cases

Mark is:
• Black, 16 years old
• Entered care in July, 1996
• During the 18 months prior to the study period – 1 foster care placements
• Since 7/1/06, -- one placement

Ted is:
• Black, 15 years old
• Entered care in August, 1998
• During the 18 months prior to the study period – 2 foster care placements
• Since 7/1/06, -- five placements
Event History Calendar: Mark

Mark's Event History Calendar

- Age: 16.0
- Goals:
  - CAYIT 1
  - IQ = 80
  - Oppositional defiant disorder, gang affiliations
- Events:
  - (since 3/6/2002) Subsidized Guardianship
  - (since 4/24/2001) HMR8
- Places:
  - Prediction
  - Stable
- Reasons:
  - Review Period

JUL-06 | SEP-06 | DEC-06 | MAR-07 | JUN-07 | SEP-07 | DEC-07 | MAR-08 | JUN-08 | SEP-08 | DEC-08
Event History Calendar: Ted

Ted's Event History Calendar

- **15.0**
  - UIR: behavioral issues
  - (since 6/1/05) FHS FHS11

- **16.0**
  - UIR: criminal act
  - UIR: medical/psychiatric
  - FHS12
  - HMR13

- **17.0**
  - (since 6/26/06) Independence
  - UIR: medical/psychiatric
  - Diagnosis: PTSD; major depressive disorder; GAF 70
  - CAYIT 1
  - IPA15

**Prediction**

**Placements**
- FHS16

**Reasons**
- Ch ran away to grandmother's home
- FP requested removal due to events/emergencies in FP's life: Ch's not getting along with FM's boyfriend
- Ch's behavioral problems: also concern for FP
- Ch self-placed with MGM

**Review Period**

- Jul-06
- Sep-06
- Dec-06
- Mar-07
- Jun-07
- Sep-07
- Dec-07
- Mar-08
- Jun-08
- Sep-08
- Dec-08
Findings – Study Question #1

The caregiver is the key to stability. Key factors:

• Willingness to commit to permanence contributes to stability
  • 93% of caregivers were committed to permanency in the stable group versus the mover group (42%)

• Relative caregivers are linked to stability
  • More children in the stable group (67%) lived with a relative than in the mover group (26%)
Findings – Study Question #1

Additional key factors:

• **Children’s mental health plays a role**
  - Children in the mover population were more likely to have a clinical diagnosis than the children in the stable population (51% versus 16%)

• **Permanency is more likely in stable homes**
  - Children in the stable population were more likely to achieve permanency than children in the mover population (33% versus 8%)
Findings – Study Question #1

Distribution of reasons for moves during the review period:

<table>
<thead>
<tr>
<th>Placement Move Reasons</th>
<th>Mover Group, N=197</th>
<th>TOTAL, N=201</th>
</tr>
</thead>
<tbody>
<tr>
<td>System- or Policy-Related</td>
<td>26%</td>
<td>26%</td>
</tr>
<tr>
<td>Foster Family-Related</td>
<td>36%</td>
<td>35%</td>
</tr>
<tr>
<td>Child Behavior-Related</td>
<td>34%</td>
<td>33%</td>
</tr>
</tbody>
</table>

Note. Only four moves occurred in the stable group during the review period: two were system or policy-related, one was foster family-related, and one was child behavior-related.
Findings – Study Question #1

Primary reasons for system-related moves (26%):

- 30% moved to temporary placement
- 25% moved to be placed with sibling(s) or due to the behavior of a sibling
- 23% moved to attain permanency in a new home
- 13% moved due to treatment needs changing
  - Of concern was the incidence of psychiatric hospitalization of very young children in the Rockford sub-region (6, ages 4-8)
Findings – Study Question #1

Primary reasons for foster parent-related moves (36%):

- 52% due to inappropriate behavior of the foster parent
  - Of these, 57% of moves were related to physical and/or sexual abuse allegations involving the foster home
- 48% because foster parent requested move of the child due to changes in their life situation
Findings – Study Question #1

Primary reasons for child behavior-related moves (33%):

• Some noted patterns:
  • Child behavior problems developed *after* experiencing instability
  • Child behavior problems were a manifestation of an intense but time-limited period of distress and acting out
  • Child behavior that appeared in the record as developmentally appropriate sparked removal request
    • Of concern was the incidence of foster parents requesting the removal of children due to the child’s sexual orientation or exploration
Findings – Study Question #1

Top 11 Mover Cases:

- 48% of moves related to child behavior problems
- 30% of moves were system-related
- 13% of moves were foster parent-related
**Findings – Study Question #2**

45 children in the sample were referred for a CAYIT (37%). 41 of those children were from the “mover” group. Of the 61 mover cases, 33% did not have a CAYIT.

CAYIT:

- Did not lead to stability in the mover group
- Occurred just after the child was placed into a new home
  - 86% recommended that the child remain in the same home
- Infrequently recommended a level of care adjustment (13%)
Findings – Study Question #2

CAYIT:

• Services recommended were usually received (72%)
• Mental health services were most often recommended (28%)
• Services for the foster parents were rarely recommended (2%)
Recommendations

- Additional research to understand characteristics of successful caregivers
- Evaluate foster parent recruitment and support to successfully manage needs of current population
Recommendations

- Ensure provision of individualized services to foster parents through the CAYIT process

- Impact of previous instability should be clinically considered more closely when making system-related placement changes
Recommendations

- Evaluate the timing of CAYITs intended to address the stability of multiple-movers

- Conduct an in-depth review of policy surrounding the timely transfer of services from one SOC provider to the next
Recommendations

- Evaluate and clarify:
  - Involvement of traumatized children in placement decision-making
  - Training and matching of caregivers to children who are LGBTQ
  - The use and impact of psychiatric hospitalization of very young children
Questions?

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