

Illinois Subsidized Guardianship Waiver Demonstration

FINAL EVALUATION REPORT

Mark F. Testa
Leslie Cohen
Grace Smith

Children and Family Research Center
School of Social Work
University of Illinois at Urbana-Champaign

In collaboration with

Westat
Rockville, Maryland

Revised
July 2003

**STATE OF ILLINOIS
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
BRYAN SAMUELS, DIRECTOR**

TABLE OF CONTENTS

	Page
OVERVIEW	1
Process Evaluation Summary	4
Cost Neutrality Summary	6
Other Studies.....	7
Independent Evaluation Summary.....	9
INTRODUCTION	10
BACKGROUND	11
Waiver Request and Award	14
Evaluation Design	16
Target Population and Sampling Plan.....	16
PROCESS EVALUATION	24
Preparation for Implementation	25
Rules and Procedures	26
Internal IDCFS Workgroup Process.....	28
Training	30
Direct Services Pre-Guardianship	32
Screening	32
Casework	33
Intensive Short-Term Casework.....	34
Written Agreement.....	35
Guardianship Procedure	35
Review Procedures.....	37
Fair Hearing	37
Monitoring	38
Termination Procedures	38
Legal Permanence	38
Post Guardianship Casework Services	44
Crisis Intervention.....	46
Additional Support.....	46
Home Stability	48
Disruption, Displacement and Dissolution	49
Vacating Guardianship.....	50
Safety	53
Evaluation Process	57
RFP Process	57
Community Participation	58
Research Advisory Group	59

COST-NEUTRALITY ANALYSIS.....61

INDEPENDENT EVALUATION64
Goals64
Institutional Review Board.....65
Consent for Research with Children65
Evaluating the Demonstration67
Characteristics of Study Population.....68
Findings.....69
Implications72

APPENDICES

Appendix A..... Sampling Plan
Appendix B..... Making the Adoption/Guardianship Decision
Appendix C..... Other Studies
Appendix D..... Independent Evaluation, Westat

OVERVIEW

Under section 1130 of the Social Security Act, the Department of Health and Human Services (HHS) is given authority to permit as many as ten States per year to conduct demonstration projects which involve the waiver of certain requirements of titles IV-B and IV-E to facilitate the demonstration of new approaches to the delivery of child welfare services. On July 31, 1995 the Illinois Department of Children and Family Services (IDCFS, the Department) submitted an application to HHS requesting waiver authority to permit a 5-year demonstration of a federally subsidized private guardianship as a permanency option under title IV-E. On September 22, 1996, Illinois became the second state after Delaware to obtain a child welfare waiver.

Between May 1, 1997 and March 31, 2002 local courts transferred 6,822 children from IDCFS custody to private guardianship under the waiver demonstration. In addition, the courts reunified 3,877 children and consummated the adoptions of 14,468 children. For age-eligible children ever assigned to the IV-E waiver demonstration, the combined permanency rate (reunification, adoption, and guardianship) achieved statewide as of March 2002 was 61.1 percent.

Although the demonstration was statewide, the evaluation of the Illinois Subsidized Guardianship Waiver Demonstration was conducted through randomized experiments in three regions of the state: Cook Central region, Peoria sub-region, and the East St. Louis sub-region. The experiments tested the effect of a new policy regime on legal permanence¹ that includes subsidized guardianship and subsidized adoption (demonstration group) as compared to the pre-existing policy regime that was in effect prior to January 1, 1997 and includes subsidized adoption only (cost-neutrality group).

The classical experimental design is the best way to determine causal connections between interventions and outcomes. The cost neutrality (control) group receives the “regular services” of the child welfare system (it is not a “no-treatment” control group). Thus the evaluation studies the effects of the availability of subsidized guardianship relative to the permanency options that would have been available in the absence of the waiver. The evaluation is designed to test several hypotheses regarding the benefits and risks of providing monetary incentives for kinship and foster caregivers to become private guardians. The three key questions addressed are as follows:

- Does the demonstration result in fewer children remaining in long-term foster care with ongoing administrative oversight?

¹ The literature on permanency planning uses the terms “permanence” and “permanency” interchangeably. In this report, we adopt the convention of using “permanence” when the term is used as a noun, e.g. legal permanence, and “permanency” when it is used as a modifier, e.g. permanency planning, permanency goal.

- Does the demonstration result in fewer disrupted placements?
- Does the withdrawal of regular administrative oversight and casework services from the families in the subsidized guardianship program refrain from increasing the rate of indicated subsequent reports of abuse or neglect?

Does the demonstration result in fewer children remaining in long-term foster care with ongoing administration oversight?

For age-eligible children ever assigned to the IV-E waiver prior to January 1, 1999, the combined permanency rate (reunification, adoption, and guardianship) achieved as of March 2002 in the three research sites was 71.8 % in the cost neutrality group (3,470) and 77.9% in the demonstration group (3,287). Comparing the permanency rate in the cost neutrality with the demonstration groups suggests that the availability of guardianship boosted net permanence by 6.1% percent. This net difference is statistically significant at the .02 level. Since key indicators from administrative and survey data show that statistical equivalence was successfully achieved through randomization (Westat 1999), the only substantive difference between the two groups is the intervention. Thus, the higher permanency rate in the demonstration group may be attributed to the availability of subsidized guardianship.

Virtually all of the difference in legal permanence is accounted for by subsidized guardianship, which contributed 16.7 percentage points to the combined permanency rate in the demonstration group. The reunification rate was statistically equivalent in both the cost-neutrality and the demonstration groups (9.7% v. 9.4%). As of March 31, 2002, 25.7 percent of children in the cost neutrality group had aged out or still remained in long-term foster care compared to 19.7% in the demonstration group. This mean difference of 5.9 percent is also statistically significant at the .02 level. Thus it can be concluded that *the Illinois subsidized guardianship waiver demonstration did result in fewer children remaining in long-term foster care with ongoing administrative oversight.*

Even though early returns had suggested that the waiver was also helping to boost adoption rates in the demonstration group, the latest results indicate that adoption in the cost neutrality group (61.6%) has moved ahead of adoptions in the demonstration group (51.8%) by a little under 10 percentage points. While this higher rate of adoption in the cost neutrality group does not wipe away the net 6.1% point advantage that subsidized guardianship adds to the combined permanency rate, it does raise the issue of whether it is acceptable public policy to have greater legal permanencies at the expense of fewer adoptions.

Does the demonstration result in fewer disrupted placements?

Children discharged to the permanent homes of adoptive parents and legal guardians exhibit higher rates of home stability than children who remain in foster care. This is because, in addition to the legal commitment made by permanent caregivers, children in foster care can be moved at the discretion of the child welfare agency while children in legally permanent homes can only be moved by a decision of the court. Thus, the expectation is that children in

the demonstration group will exhibit a higher overall rate of home stability than children in the cost neutrality group.

For age-eligible children ever assigned to the IV-E waiver demonstration prior to January 1, 1999, the proportion who were still living in the same home in which they resided at the time of original assignment in the three research sites was 67.3% in the cost neutrality group and 68.7% in the demonstration group. While children in the cost-neutrality group were slightly more likely to move than children in the demonstration group, this small difference of 1.5 percentage points is not large enough to rule out chance fluctuations as the source of the difference. *Thus it cannot be confidently concluded that the demonstration increased home stability.*

The inability to reject the null hypothesis of no difference in stability rates does raise questions about the importance of legal status for the stability of a child's care. The lack of an intervention effect suggests that the degree of placement stability may be determined by factors that are independent of the legal relationship between the child and caregiver. Analysis by the independent evaluator indicates that kinship is a common denominator that contributes to home stability in both the cost neutrality and demonstration group, regardless of whether the child remains in kinship foster care or the relatives adopt or have the option of subsidized guardianship.

Rates of dissolution of the 6,820 statewide cases that entered subsidized guardianship between April 1997 and March 2002 are low. Only 237 (3.5%) are no longer living in the home of the original guardian: 1.0% are no longer in the home because the guardian died or became incapacitated, and 2.2% children are no longer in the home because the caregiver requested or was relieved of legal responsibility and the guardianship was dissolved. Of all the cases that have disrupted because of death or incapacitation and legal dissolution, 117 or 49% have required that IDCFS be appointed guardian of the child; of the remaining children 73 were appointed a new guardian, 39 were returned to the biological parent, 4 were adopted, and 4 children had no legal guardian appointed.

Does the withdrawal of regular administrative oversight and casework services from the families in the subsidized guardianship program refrain from increasing the rate of indicated subsequent reports of abuse or neglect?

Even though the availability of subsidized guardianship is shown to boost legal permanence and result in no less stability than children denied this permanency option, the concern still remained that children might be at greater risk of harm because of the withdrawal of administrative oversight and casework services and the greater potential access of abusive and neglectful parents to the guardian's home. To evaluate this possibility, children were tracked for reports and indicated findings of abuse and neglect through the IDCFS Child and Neglect Tracking System (CANTS).

For age-eligible children ever assigned to the IV-E waiver demonstration prior to January 1, 1999, the overall proportion who had a subsequent substantiated report of abuse and neglect was 6.1% in the cost neutrality group and 4.7% in the demonstration group. Contrary to

earlier concerns, there were fewer findings of abuse and neglect in the demonstration group than in the cost neutrality group. In fact, subsequent indicated abuse and neglect was lowest among children eventually discharged to private guardians, 3.0% compared to 3.9% for adopted children, 7.7 % for children who aged out or remain in foster care, and 8.8% for children reunified with their birth parents. The small difference between children discharged to private guardians and adopted children is not statistically significant. Thus it can be concluded that *the withdrawal of regular administrative oversight and casework services from the families in the subsidized guardianship program **did not** result in higher rates of indicated subsequent reports of abuse or neglect.*

Process Evaluation Summary

IDCFS officially implemented the Illinois Subsidized Guardianship Demonstration on May 9, 1997 and ran the program through the second quarter of 2002 (June 30). At the start of implementation, more than half (55%) of the 51,761 children in substitute care resided in the homes of relatives (HMR). Rules and Procedures for the Illinois Subsidized Guardianship demonstration went into effect March 1, 1997. The rules and procedures define the eligibility criteria, assessment process, form preparation, and legal steps.

For children to be assessed for guardianship, they must first meet minimum eligibility requirements. Children in relative placements meet minimum eligibility requirements when they have been in the foster care system for one year and in the home of the caregiver for one year. In addition to the time in the system and in home criteria, children in non-relative placements must also be 12 years of age or older to meet basic eligibility. Once minimum eligibility criteria is met, IDCFS policy provides a framework for a more in depth assessment to determine the clinical appropriateness of the option.

Implementation of the program was spearheaded by the Subsidized Guardianship Work Group which met weekly to discuss the issues associated with implementing a new program. One of the largest challenges was training IDCFS and voluntary agency staff. Approximately 80 percent of children under the care and custody of IDCFS are served by voluntary child welfare agencies under purchase of service contracts. After spending two years on waiver-specific training, efforts toward training have been geared toward integrating the subsidized guardianship program into the broader IDCFS training curricula. The work group has also dealt with post-guardianship service issues and on-going support for guardianship families.

Prior to the transfer of guardianship to a relative or foster caregiver, IDCFS is the legal guardian of children placed in its custody pursuant to orders entered in a County Circuit Court. Therefore, relatives caring for minors lack consent for many important functions including health care, signing releases for attendance on school trips, etc. With agreement from the caregiver and approval from IDCFS, the Department's Office of Legal Services files a petition in the Circuit Court to have the caregiver appointed guardian of a minor child who is a ward of the Department. Notice to parents and relatives is given in accordance with the Probate Act under which guardianship is assigned. After the appointment of guardianship, IDCFS is no longer involved with the care, custody, or supervision of the child,

however, the guardianship remains under the jurisdiction of the court until the child reaches the age of 18. The guardianship appointment continues until termination when the child reaches the age of 18, marries, or dies. The guardianship can also terminate upon the death, incapacity, resignation, or removal of a guardian.

To ensure families a smooth and well-informed transition to subsidized guardianship, the Department offers a comprehensive range of services and supports for caregivers entering subsidized guardianship. Services include preliminary screening, family meetings, assistance in applying for subsidized guardianship, and payment of one time court costs and legal fees. A written agreement is prepared that sets out the terms of the Department's commitment to provide support for maintenance of the child and any additional services that the child may require. Agreements must be reviewed and approved by IDCFS prior to the transfer of guardianship. Agreements can include the following: legal fees and court costs to finalize the transfer of guardianship; counseling or therapy costs; medical assistance; payments for physical, emotional, or mental health needs; therapeutic day care; ongoing monthly payments; and work-related day care.

To help support subsidized guardianship homes, the Department assigns a case upon the transfer of guardianship to a worker in the appropriate region of the State. The guardian contacts the worker when difficulties are encountered with private health insurers, community resources, and/or Medicaid. The worker serves as an intake and referral "hub" for any concerns presented by the guardian. When the issues are therapeutic in nature the caseworker can transfer the case to a social worker for further assistance. The social worker can offer brief crisis intervention, community referrals, family preservation services, and phone based assistance and information. If the Post Guardianship Unit feels the family has service needs that cannot be adequately addressed by available resources the case is referred to the guardianship specialist for extra attention. In the event that a guardianship cannot be maintained, because of death or incapacitation of the caregiver or a desire of the family to vacate the guardianship the court must either transfer guardianship to an appropriate adult or re-appoint IDCFS with such responsibility.

To ensure adequate and appropriate service delivery, the guardianship assistance agreement is reviewed every other year on the anniversary date of the transfer of guardianship. Any adjustment in the renewal of the agreement will be based on the child's needs and whether the guardian continues to support the child. The rate of the subsidy will not be diminished as a result of the review, but the rate and/or services can be augmented to meet increased needs of the child when the onset occurred prior to the transfer of guardianship. For disputes that arise in the administration of the Subsidized Guardianship Program, formal administrative review is provided to guardians through fair hearings.

Cost Neutrality Summary

Section 1130 (g) of the Social Security Act requires that the IV-E waiver demonstration be cost neutral. The total amount of federal funds used to support the demonstration project, over the approved project period, shall not exceed the amount of federal funds that would have been expended by the State in the absence of the demonstration.

The terms and conditions specify that the determination of cost neutrality will rely on an analysis of the costs of cases within the control groups. The average allowable IV-E costs of a case in the control group is assumed to estimate the amount that would have been spent on each experimental case in the absence of the demonstration and is used as the baseline for assessing cost neutrality. The total cumulative title IV-E allowable costs for the control groups is divided by the number of cases within those groups, and the result is projected to the universe in the State to determine the amount the State shall be paid in title IV-E funds for the demonstration.

The cumulative mean IV-E expenditure as of March 31, 2002 in the cost neutrality group was \$10,637 per child for foster care maintenance payments and \$7,919 per child for adoption maintenance payments. When multiplied by the 30,781 children ever assigned to the demonstration group times the adjustment factor, a IV-E foster care maintenance claim of \$346.9 million and a IV-E adoption maintenance claim of \$258.3 million is generated. The actual IV-E maintenance costs in the demonstration group were \$349.7 million for foster care and \$135.9 million for adoption. Since the sum of the actual IV-E costs is less than the sum of IV-E maintenance claims, the waiver is cost neutral and shows a surplus of approximately \$113.5 million. On the IV-E administrative side, the calculations show a surplus of approximately \$54.4 million.

It was expected that most of the IV-E surplus would result from administrative savings since the administrative costs after discharging a child to private guardianship are much lower than the administrative costs for maintaining a child in foster care. It turned out, however, that the formula also generated a significant surplus in maintenance payments. This arises from the fact that the percentage of adoptions in the control group was substantially higher than the percentage of adoptions in the demonstration group. Although the permanency gap was closed by guardianships in the demonstration group, these costs are included in the foster care maintenance claims. Therefore, the actual adoption costs for the demonstration group are much lower than the calculated adoption claim derived from the cost-neutrality formula. In addition, the higher average costs for adoption maintenance in the control group reflects the higher IV-E eligibility rate associated with adoption as compared to children in foster care and subsidized guardianship.

Other Studies

During the course of the demonstration, a number of published and unpublished studies were released under the auspices of the Office of the IDCFS Research Director. Following are summaries of these studies that are reproduced in Appendix C:

Testa, M. (2002). ASubsidized Guardianship: Testing an Idea Whose Time Has Finally Come. @ *Social Work Research*, Vol. 26, No. 3, pp. 145-158.

Experimental findings from one of the largest of the federal waiver demonstrations show that the availability of subsidized guardianship as a supplementary permanency option in Illinois significantly elevated permanency rates above the level than would have likely been attained if only subsidized adoption were available. Comparison of the control and experimental groups shows a 6.7 percentage difference in permanency rates that is statistically significant at the .01 level (one-tail test). This effect is demonstrated convincingly for children in kinship care.

This study illustrates the value of combining controlled experimentation with naturalistic observation to improve the validity of scientific inference. While the experimental components established the internal validity of the program effect, the observational components suggested that the external validity of the experimental findings requires some qualification. Whereas extrapolation from experimental groups to observational groups indicate fewer than expected permanencies in Cook County due to underperformance on adoptions, extrapolation outside of Cook County indicates a greater potential for permanency improvements from subsidized guardianships compared to the experimental groups.

The inability of this study to reject the null hypothesis of no difference in stability rates does raise questions about the importance of legal status for the continuity of a child's care. Does this mean that policymakers can be indifferent to whether these stable placements remain part of the formal foster care system or are instead converted into legally permanent arrangements through adoption or guardianship? Full consideration of this issue must await future analysis of the survey data that Westat is collecting on such factors, as kin altruism, child attachment, and caregiver commitment. All things considered equal for the moment, however, legal permanence seems preferable to maintaining children in formal foster care if only for reasons of cost savings and deference to family autonomy.

Testa, M. (2001). AKinship Care and Permanency. @ *Journal of Social Service Research*, Vol. 28(1), pp. 25-43.

Kinship care and permanence are values in tension with one another. On the one hand, research shows that kinship foster placements tend to be more stable and longer lasting than non-related foster placements (Iglehart, 1994; Scannapieco et al., 1997; Wulczyn and Goerge, 1992). In this sense, kinship care and permanence are congruent. On the other hand, research also shows that children in kinship foster care are less likely than children in non-

related foster care to exit the child welfare system through the legal channels of reunification or adoption (Berrick et al., 1994; Testa, 1997; Thornton, 1991). In this sense, kinship care and permanence are incongruent. In response to these conflicting perspectives on kinship care and permanence, a split has arisen over whether kin placement should be favored as a form of permanence in and of itself or instead should be avoided as a barrier to more binding forms of legal permanence (Bartholet, 1999; Williams, 1999). This question is examined using data from Cook County, Illinois. The study uses event history methods to analyze placement histories for 1992-95 cohorts of 23,685 children and a 1994 matched, cross-sectional sample of 1,910 children. It finds that kin placements are more stable than non-kin placements but that the advantage diminishes with lengthier durations of care. Current trends indicate a greater potential for legal permanence with kin than earlier literature has suggested.

Testa, M & Cook, R. (2001). The Comparative Safety, Attachment, and Well-Being of Children in Kinship Adoption, Guardian, and Foster Homes. Paper presented at the Annual Research Conference. Association for Public Policy, Analysis and Management. Washington, DC, November 3, 2001.

Administrative data from the first two years of the demonstration showed that the availability of subsidized guardianship significantly boosted discharge rates of foster children to legally permanent homes without seriously detracting from adoptions. First-round survey responses from kinship caregivers and foster parents, however, suggested that there might be some significant substitution of legal guardianships for adoptions in the future. Responses from 1,211 youth aged 9 to 18 years old and their caregivers in kinship adoption, guardian, and foster homes are compared. The study finds that little would be gained for either the child or the family by holding out for the more legally binding commitment of adoption over guardianship.

On all four qualities of permanence-- intent, continuity, belonging, and respect--children in subsidized guardianship arrangements fared about the same or better as children in adoptive homes: the caregivers of 94.4 % of children who are in the subsidized guardianship program reported that they expected the child to live with them until adulthood. This is also true for 98.1% of children who have been adopted. With respect to actual continuity, 98.9% of children in guardianship as of June 2000 were still living with the caregiver with whom they resided at the time of assignment; 98.5% of children who were adopted were also still living with the same caregiver. Subsidized guardianship also received high marks when it came to evaluating a child's sense of belonging. When asked if a child feels like he or she is a part of the family, 84.8% of the children in subsidized guardianship said that they felt like part of the family all of the time; 85.5% of children who had been adopted said the same. Furthermore, there were no relevant differences in child safety or well-being to suggest that adoption should be preferred strongly over guardianship, once the family's wishes are taken into account.

Testa, M. (2000). Kinship Care and Social Policy. (2000). Pp. 121-136 in *First National Roundtable on Implementing the Adoption and Safe Families Act: Summary of Proceedings*. Englewood, CO: American Humane Association.

The claims that kinship bestows and imposes on people for the care and support of extended family members remains an unsettled issue in both social science and social policy. The lack of scientific consensus is mirrored in public policy. Modern social legislation vacillates between the presumption that kinship is a natural disposition that can be taken for granted and the opposite opinion that it should carry no greater weight than any other social relationship.

The result of the division of opinion is inconsistency in law and confusion in everyday practice about people's basic rights and responsibilities toward each other as family members and as fellow citizens. This article explores these inconsistencies through the historical examination of kinship care policy and practice in Illinois. Through examination of kinship adoption practices and the utilization of subsidized guardianship in Illinois, the article demonstrates that it is possible to build a sensible kinship care policy that makes allowances for the specialized nature of kinship care, minimizes substitution effects, and promotes family autonomy.

Independent Evaluation Summary

Under the terms and conditions of the federal waiver, IDCFS is required to contract with an independent evaluator to conduct a large -scale experimental evaluation of the demonstration. On March 26, 1997, the IDCFS issued a RFP for the evaluation. The proposals were reviewed by a panel consisting of two faculty members from the Children and Family Research Center, two representatives from the African American Family Commission, and two additional academic reviewers. On July 25, 1997 a letter was sent to Westat, a Maryland-based, employee owned research company, informing them of their selection.

The Department's participation in the evaluation is overseen by the Director of The Children and Family Research Center, Dr. Mark F. Testa, as well as a Research Advisory Committee, jointly convened by the Department and the Governor's African American Family Commission (AAFC). The Research Advisory Committee (RAC) was convened by AAFC member, Rosetta Webb, and co-chaired by Dr. Testa and AAFC Executive Director, Terry A. Solomon.

Westat will submit a final evaluation report to the Department in January 2003. The study, using a classical experimental design, assessed measured differences between groups of children randomly assigned to a demonstration group, where subsidized guardianship was available as a permanency option for children, and a cost neutrality group, where only

preexisting options for permanence were allowed. The research questions assessed differences between these two groups to measure the impact of the demonstration.

As the demonstration was implemented in the State, several other questions became apparent. On the Federal level, debates about the quality of non-licensed kin foster care placements began. If they are not as safe or as good for the well-being of the children in there, is it good policy to make these placements permanent using subsidized guardianship? Within the state, a debate between “adoption hawks” and “guardianship doves” ignited as the initiative to complete guardianships began to succeed. Is it good policy to allow children to go into subsidized guardianship, when they could be adopted instead? Is adoption a better outcome for a child and who should make this decision-the caseworker, the family or the court? Although these questions will not be addressed directly by the experiment, the data allows alternative analysis opportunities.

The evaluation design tested the impact of providing the option of subsidized guardianship on permanence. It also allowed analysis on the stability, safety, family functioning and child well-being of children and families in the demonstration. The full report is produced as Appendix D. A summary of the findings is as follows:

- 1) Subsidized guardianship increases permanent placements for children;
- 2) Subsidized guardianships are achieved at the expense of children being adopted;
- 3) Subsidized guardianship effectively protects children at risk of child abuse or neglect;
- 4) The demonstration has not impacted the rate of disruption of permanent placements;
- 5) In measures of well-being, subsidized guardianship and adoption are equivalent placements for children;
- 6) Kin settings are as stable as non-kin placements; if there is weak support network, kin placements are more stable; and
- 7) Kin will adopt.

INTRODUCTION²

It has been 65 years since Hasseltine Taylor introduced the field to the concept of private guardianship as a child welfare resource. Thirty years have elapsed since she first called for a federal demonstration to test the benefits and costs of providing financial subsidies to families who assume private guardianship of dependent and neglected children. In the succeeding three decades, scholars and advocates have echoed her basic recommendations. Finally these calls have been heeded. In the last five years, the United States Department of Health and Human Services (USDHHS) has granted waivers to eight states to mount demonstrations in the use of title IV-E funds to finance subsidized guardianship programs for foster children who otherwise would have remained in public custody.

This report presents final evaluation findings one of the largest of these federal waiver demonstrations: the Illinois Subsidized Guardianship Waiver Demonstration. Since its inception in May of 1997, Illinois courts have transferred (as of March 30, 2002) 6,820 foster children from public custody to the private guardianship of relatives and foster parents. To evaluate the efficacy of this intervention, the Office of the Research Director of the Illinois Department of Children and Family Services (IDCFS) designed a random assignment, field experiment that the Department implemented in three research sites: Cook Central region, Peoria sub-region, and the East St. Louis sub-region. The experimental condition tested is the effect of a new policy regime on legal permanence that includes subsidized guardianship and subsidized adoption (demonstration group) as compared to the pre-existing policy regime that was in effect prior to January 1, 1997 and includes subsidized adoption only (cost-neutrality group).

Through a competitive bid process, the IDCFS selected Westat, Inc. of Rockville, Maryland as its independent evaluator. The evaluation entails a longitudinal study of the status and outcomes of subsidized guardianship on children and families through two waves of data collection: 1) baseline information on children and families, as well as early data on permanency decisions for those who accepted subsidized guardianship or adopted prior to the initial interview and 2) a follow up interview.

Data collection used a mixed mode approach of face-to-face interviews and telephone interviews. Both children and families were interviewed, and data collected included demographic information, case history characteristics, household composition, social integration, services received, role of biological parents, legal issues, presenting problems, attachment status, and client satisfaction with services they have received. Questions were also designed to obtain information about the early months of eligibility. The interviews were conducted by teams of Westat staff and specially trained TANF staff. To collect baseline information on families entering the demonstration or cost-neutrality groups, the caretaker interview was done through a computer assisted personal interview (CAPI), and the

² Sections of this report are excerpted from Testa, M. (2002). ASubsidized Guardianship: Testing an Idea Whose Time Has Finally Come. @ *Social Work Research*, Vol. 26, No. 3, pp. 145-158.

children were interviewed through audio computer assisted self-interviewing (ACASI) using personal laptops and earphones.

BACKGROUND³

After a decade of stability in the number of children in state legal custody, the substitute care population in Illinois swiftly climbed in 1986 from 13,700 to 47,900 in 1995. To handle the rising demand for substitute care in Illinois, IDCFS turned to grandparents, aunts, uncles, and other extended relatives to care for children who had been taken into the legal custody of the State. Extended family networks have long accepted informal responsibility for dependent and neglected children who were unable to be cared for by parents. But the incorporation of relatives into the formal foster care system was a recent development that profoundly altered the dynamics of child placement and permanence in Illinois.

Until the mid-1980's, the informal system of kinship care in Illinois was mostly separate and distinct from the formal foster care system. The State encouraged relative's assuming informal care responsibilities for dependent children through its AFDC program, which recognized a large circle of kin as eligible to receive public assistance for the support of dependent family members. Furthermore, the courts routinely assigned dependent and neglected children to private guardianship of relatives when reunification appeared a remote possibility.

The divisions of substitute care responsibilities between extended families and the State began to blur in the mid-1980's. Ever since the State Supreme Court's ruling, *Youakim v. Miller* (1979), IDCFS had extended full monthly boarding payments to all kinship caregivers regardless of whether they became licensed or not. This generous payment policy made Illinois unique in the nation. But it wasn't until after IDCFS established separate approval standards for relatives that the first stage of sustained kinship foster care growth took off. Between 1986 and 1991, the number of children in kinship foster care rose at an average annual rate of 23 percent from 3,718 children in home of relative (HMR) care to 10,477. The count of the children in non-relative foster care during this same period rose by only 6 percent from 10,016 children to 13,300 children.

The second stage of kinship foster care growth in Illinois began in 1992 after the Cook County Juvenile Court issued an injunction against the Department's alleged practice of cajoling relatives into accepting private guardianship responsibilities for IDCFS wards and thereby suffering a monetary loss. Because grants to relative guardians under AFDC were significantly lower than foster care payments, discharges to private guardianship declined to

³ Sections of this background are based on Testa, M. (1997) @Kinship Foster Care in Illinois.@ Duerr Berrick, J., Barth, R. & Gilbert, N. (Eds). *Child Welfare Research Review, Volume Two* (pp. 101-129). New York: Columbia University Press.

a trickle. With the loss of this discharge path out of substitute care, the backlog of children in long-term foster care started to swell.

At about the same time, the Cook County Public Guardian publicized an Appellate Court ruling that upheld a parent's conviction for neglect for not retrieving her children from the care of a grandparent in a timely fashion. Shortly afterwards, child protection investigators began to indicate so-called "grandmother cases" for a lack of supervision (against the absent parent). This led to a rise in "non-removal placements" of children who were left in the care of the relative who was already caring for them prior to state involvement. Once the child was taken into legal custody, the relative qualified for full foster boarding payments to care for the child. Compared to what those same kin could receive from the Illinois Department of Public Aid, this action increased the amount of state assistance to a family, depending on sibling-group size, by two to six times the amount the family was eligible to receive in the child-only AFDC benefits.

Building on several years of research commissioned by the Department, the Governor announced a sweeping reform of the Illinois HMR program. Implemented in July of 1995, the HMR reform initiated two changes that cut the growth in kinship care intake and stabilized the size of the HMR population.

First, IDCFS stopped taking into protective custody children in pre-existing kinship care arrangements where no protective need existed. Instead, it began to offer these families extended family support services to address the financial and legal authority problems that threatened the stability of the living arrangement.⁴

Second, the Department eliminated the separate approval process for relatives and implemented a single foster home licensing system in which relative were able to participate if they applied and met those standards. The Department continues to place children in unlicensed kinship care if the home passes basic safety and criminal checks. Children in non-licensed kinship care are supported at 100 percent of the AFDC "child only" need standard. This is the minimal income that the State says a family needs to maintain " a livelihood compatible with health and well being" and is 150 percent higher than the TANF grant the IDHS currently pays parents with dependent children.

⁴ Extended Family Support is a state wide program that provides short term supports and services to individuals who are caring for related (child)ren outside of the formal child welfare system. The intensive, short-term support program affords children an opportunity to live with family members instead of becoming part of the formal child welfare system. The program began in the fall of 1995.

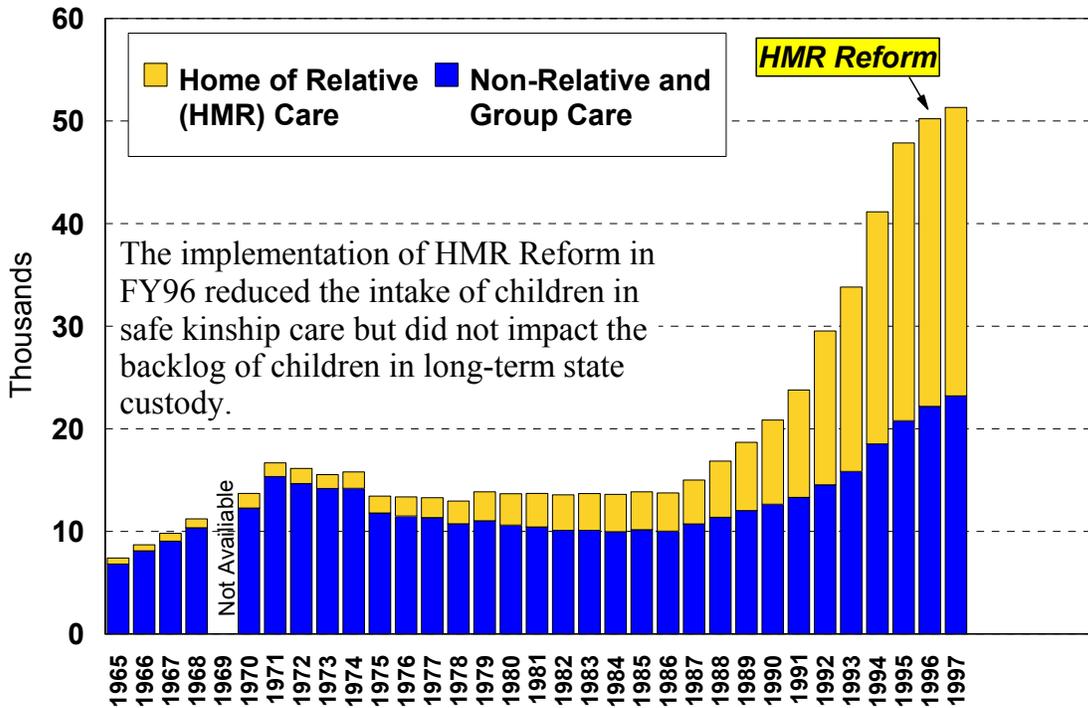


Figure 1

The impact of HMR reform was immediate. During the decade prior to the reform, the state’s HMR program had been growing at an average annual rate of 22 percent—from 3,690 children in June 1985 to 27,071 children in June of 1995. As a result, Illinois far surpassed all other states in the prevalence of formal kinship care: 8.8 kinship placements per thousand in June 1995. The next highest prevalence rate was for New York at 3.6 per thousand and the median was 1.1 per thousand for the 39 states that could provide data on kinship foster placements. After the changes, the annual rate of growth dropped to 2%. As of June 1997, 28,129 children were living with kin under formal placement agreements with the state.

HMR Reform ended the uncontrolled growth in kinship foster care and increased the flexibility of state responses to the varieties of extended family care. Still, the legacy of HMR cases that entered prior to HMR reform continued to be felt. The opening up of the formal foster care system to the informal kinship care population had greatly increased the number of foster children remaining in the long-term foster care of relatives.

Waiver Request and Award

In an effort to address the need for permanence for children placed in the long-term care of relatives, IDCFS submitted a application in July of 1995 to the federal Department of Health and Human Services that requested waiver authority to provide a subsidized private guardianship program (that parallels the adoption subsidy program) to eligible caregivers as an alternative to long term care.

The Illinois Subsidized guardianship Waiver Demonstration was approved on September 22, 1996. It permits the IDCFS to receive federal reimbursement for subsidies paid to relative caregivers and foster parents who assume private guardianship responsibilities for foster children who otherwise would have remained in IDCFS custody. Child welfare professionals have long recognized subsidized guardianship as a sensible and cost-efficient alternative to long-term foster care for children who are unlikely to return home or be adopted because of age, family considerations, or relative preferences. Under the waiver demonstration, IDCFS is able to claim reimbursement for guardianship subsidies and redirect federal monies to support the testing of this alternative permanency option to long-term foster care. The program, which operates state wide, officially began in May of 1997.

Two new initiatives were introduced simultaneously with the subsidized guardianship program that also worked to increase permanency outcomes: 1) performance contracting and 2) the permanency initiative. Beginning in July, 1997, performance contracting changed the way that the IDCFS conducted business with voluntary child welfare agencies by defining desired permanency outcomes and holding the agencies accountable for achieving such outcomes. Performance contracting involves a combination of rewards and penalties designed to encourage the achievement of expected permanency outcomes. Agencies are paid a fixed amount each month per caseload. They are expected to move approximately one-third of the children to permanent placements each year and must accept an equal number of new referrals. Agencies that exceed permanency expectations benefit from lower caseloads without experiencing a reduction in administrative income. On the other hand, agencies that fall short of achieving permanency goals experience higher caseloads without an increase in administrative income. In the event that poor performance becomes evident, the state sanctions such agencies by placing referrals on hold that results not only in a loss of income, but ultimately in a loss of the contract if poor performance continues.

Illinois legislative and administrative changes, which anticipated the federal Adoption and Safe Families Act of 1997 (ASFA), were implemented to ensure expedient movement towards permanence. The Permanency Initiative went into effect on September 1, 1997 in Cook County and the rest of the state on January 1, 1998. The initiative was designed to engage families in the permanency planning process from the moment that temporary custody is taken and includes activities such as extended temporary custody hearings to ensure that all alternatives have been explored before bringing a child into care, family court conferences, and Judges, instead of IDCFS, setting permanency goals after 12 months and every subsequent six months. IDCFS also implemented more stringent guidelines for the completion of initial assessments and service plans supervision, and family meetings. With legal compliance and financial solvency hinging on the successful movement of cases to permanence, subsidized guardianship was an attractive addition to the permanency alternatives. In addition, new monies were made available to provide resources to support families who were reunifying.

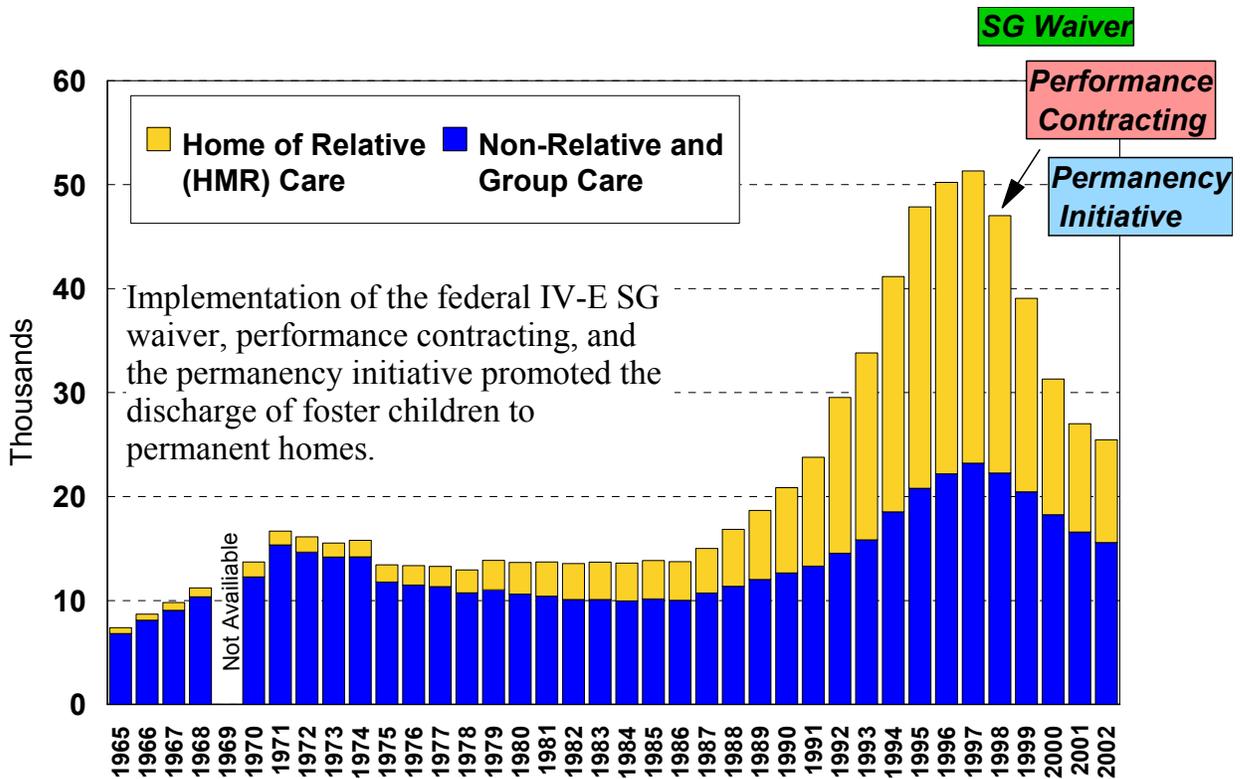


Figure 2

Clearly, these two initiatives and the addition of subsidized guardianship helped Illinois realize a growth in movement of children out of relative and foster care into permanent living arrangements (see Figure 2). The rate of children moved to permanent homes in Illinois increased from 5.3% in FY 1997 to 12% in FY1998 to 22.1% in FY99 to 23.2% in 2000 and 19.6% in 2001.

Although these administrative and legal changes coincide with the implementation of subsidized guardianship, the experimental design of the evaluation is able to accommodate these potential historical threats to internal validity because they equally impact cases assigned to the cost neutrality and demonstration groups. Therefore, any independent impact of the subsidized guardianship demonstration on boosting net permanency rates can be measured by comparing the combined permanency rate in the control group (reunification and adoption) to the combined rate in the experimental group (reunification, adoption and guardianship).

Evaluation Design

The federal request for waiver proposals strongly encourages the use of random assignment. Illinois’ application endorsed this evaluation design to assess the efficacy of the demonstration in achieving program goals. In January of 1997, the IDCFS began randomly

assigning kinship and foster homes to establish statistically equivalent control and experimental groups at assignment (baseline). The efficacy of the program is determined by comparing permanency and stability outcomes using the following post-test only, control group design:

R	X	O ₁
R		O ₂

where R represents homes that have been randomly assigned to either the control or experimental groups; X represents the intervention of subsidized guardianship; O₁ is the first measurement (a post test because it occurs after the intervention); and O₂ is the first measurement of the control group.

Establishing statistical equivalence of experimental and control groups beforehand through random assignment allows for a straightforward assessment of the efficacy of the experimental intervention (internal validity). Since key indicators from administrative and survey data show that statistical equivalence was successfully achieved through randomization, the only substantive difference between the two groups is the intervention. Thus, any significant differences in outcomes with respect to permanence, stability, safety and child well-being may be attributed to the availability of subsidized guardianship.

Target Population and Sampling Plan

At the beginning of the demonstration, any child who had been in IDCFS custody for two or more years and had lived with a relative or foster parent for at least one year was an eligible candidate for the subsidized guardianship program. Later this requirement was revised to one year in IDCFS custody to accommodate the quickened permanency timelines introduced by AFSA and the Illinois Permanency Initiative. This prior period of custody is to allow adequate time to rule out other permanency options and to assess the capacity of the relative or foster caregiver to assume permanent legal responsibility for the child. Subsidized guardianship is reserved for children whose caregiver is willing and able to assume private guardianship responsibilities and for whom other permanency goals, such as reunification and adoption, have been ruled out as acceptable alternatives.

The sampling plan for the Illinois Subsidized Guardianship Waiver Demonstration is reproduced as Appendix A. It was designed by the former Office of the IDCFS Research Director (now merged into the Children and Family Research Center) in consultation with the National Opinion Research Center (NORC). The plan outlines the steps for drawing a sample that would be of sufficient size to permit inferences to be drawn about the cost neutrality and evaluation aspects of the program. Because the cost neutrality analysis and title IV-E claiming calculations require a larger control-group sample than the evaluation, the sample plan was divided into two components: evaluation samples and cost-neutrality sample. Power analysis indicated that the proposed final evaluation sample sizes should be adequate ($\approx .80$) for detecting statistical differences (5% - 10% differences in permanency rates at $\alpha = .05$) for the relative home and combined relative and foster home samples.

But the sample sizes would not provide a desirable level of power for the cost neutrality estimates for the foster home sample. Therefore, a supplementary sample of ever-assigned title IV-E eligible children was drawn to improve the statistical power of the cost neutrality analysis and IV-E claiming calculations.

Table 1 presents the target household completion numbers in the research sites as proposed in the original sampling plan and the actual number of families eligible for assignment to the demonstration as of December 30, 2000. Eligible families consist of

Table 1. — Survey Completion Targets and the Number of Eligible Homes for the IV-E Demonstration in the Research Sites

Research Site	Type of Home	Cost Neutrality (Control)		Demonstration (Experimental)	
		Completion Target	Eligible Homes	Completion Target	Eligible Homes
Cook County	Kinship Homes	995	1,616	995	1,588
	Foster Homes	300	655	300	655
Peoria Sub-Region	Kinship Homes	150	149	150	145
	Foster Homes	150	185	150	187
St. Louis Sub-Region	Kinship Homes	150	127	150	125
	Foster Homes	150	126	150	128
All Sites	Kinship Homes	1,295	1,892	1,295	1,858
	Foster Homes	600	966	600	970
Children per Home		1.8	2.0	1.8	1.9
N of Children		3,411	5,857	3,411	5,427

relative homes and foster homes with at least one child in care who met the threshold criteria of two years in state custody and one year in the continuous care of the family as of two months prior to the date of assignment. These eligible families were randomly assigned to the cost neutrality, demonstration, and IV-E supplementary sample groups.

Although kinship and foster homes are the units of random assignment, the units of federal claiming for IV-E funds are individual children. Using the original criteria of two years in state custody and one year in the continuous custody of the caregiver, there were approximately two (2) children per home, who were eligible for assignment to the waiver demonstration. While all children who met the threshold eligibility conditions and were assigned to the demonstration group are technically eligible for the subsidized guardianship program, the procedures for finalizing guardianship subsidies and claiming federal funds differ between kinship and foster homes depending on the age of the child.

Under the Illinois terms and conditions of the waiver demonstration for receiving guardianship subsidies, a child living in the home of an unrelated foster parent must be at least 12 years of age. Younger children may qualify for subsidized guardianship with a non-relative if they are a sibling of a child 12 years or older who meets all subsidized guardianship requirements or if the worker determines that private guardianship is in the best

interest of the child due to the length of time in the home, the age of the child, the characteristics, responsibilities, and limitations of the caregiver including their health and mobility, or the special needs of the child. The best interest determination must be documented, and the decision must be approved by IDCFS' Guardianship Administrator.

Because of the age restrictions on the procedures for accessing subsidized guardianship, potentially eligible children under the age of 12 in unrelated foster homes were not formally assigned by the Department to the demonstration under after the guardianship was finalized by the court. Younger children in unrelated foster homes were routinely assigned to the cost-neutrality and demonstration groups by the Office of the IDCFS Research Director, but these assignments were never activated on the IDCFS computer systems. Instead, these lists were consulted manually to determine whether younger children were eligible to proceed with the guardianship process. This means that the number of children ever assigned to the demonstration for IV-E claiming purposes is lower than the total number of children potentially eligible for the demonstration.

Table 2 displays the number of children who are potentially eligible for subsidized guardianship as compared to the number of children formally assigned to the demonstration for IV-E claiming purposes. Although there is no age restriction on children placed with kin, the number of children assigned to the demonstration from relative homes is slightly lower than the number of potentially eligible children. This is because during the time lag between random assignment and posting to the computer the child's case may have closed or the child may have moved into a non-related home and hence be age-eligible for the demonstration.

Table 2.—Potentially Eligible Children versus Children Ever Assigned to the Demonstration

Research Site	Type of Home	Cost Neutrality (Control)		Demonstration (Experimental)	
		Eligible Children	Ever Assigned	Eligible Children	Ever Assigned
Cook County	Kinship Homes	3,271	3,015	3,108	2,865
	Foster Homes	1,577	303	1,285	234
Peoria Sub-Region	Kinship Homes	252	215	259	215
	Foster Homes	295	69	308	76
St. Louis Sub-Region	Kinship Homes	233	195	228	198
	Foster Homes	229	37	239	43
All Sites	Kinship Homes	3576	3,425	3,595	3,278
	Foster Homes	2101	409	1832	354
Total		5,857	3,834	5,427	3,630

On April 6, 2000, IDCFS requested approval from DHHS to stop assigning cases to the control group because adequate sample size had been achieved in accordance with the sampling plan. On December 15, 2000, IDCFS received official approval from DHHS to discontinue assigning new cases to the control group.

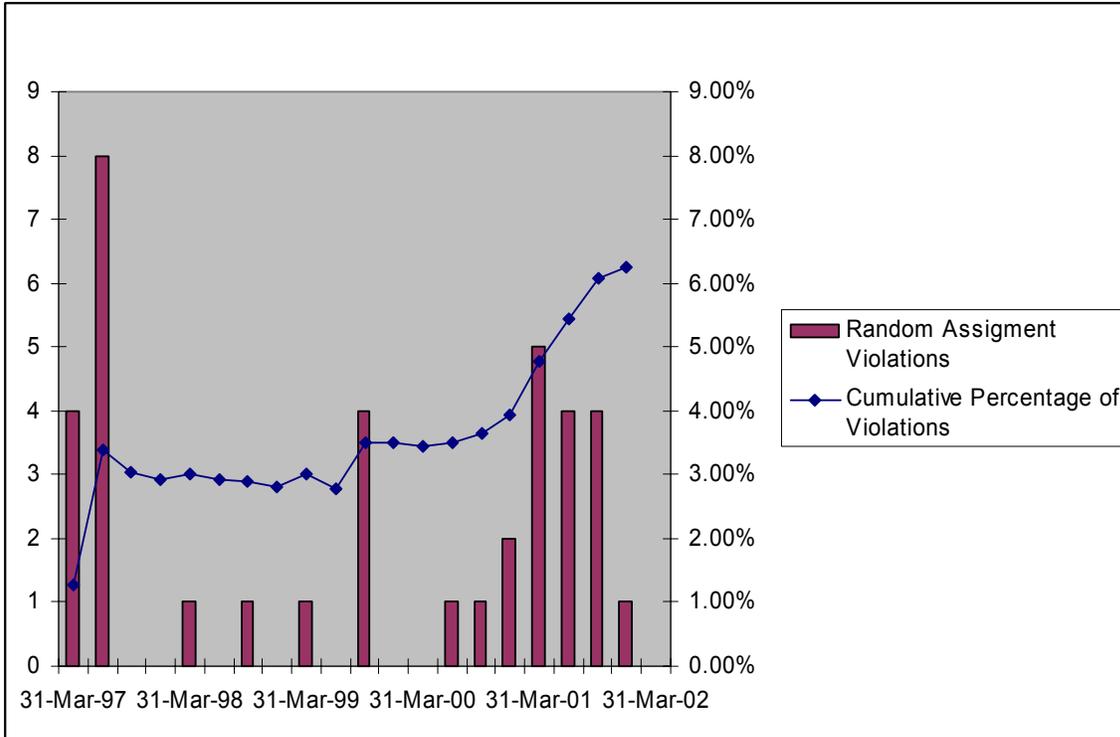


Figure 3 Violations of Random Assignment Rule

With the discontinuation of random assignment, it became very difficult to police violations of the random assignment rule. Figure 3 displays the number of violations that occurred during the course of the demonstration. The line shows the cumulative percentage of violation as a fraction of total guardianships finalized in the evaluation sites

Because violations of random assignment weaken the capacity to draw valid inferences about the causal efficacy of an intervention, it was decided to cap the violation rate at 3.0 percent. This required restricting the analysis to assignments that were made prior to January 1, 2000. After that time, the number of violations exceeds this tolerance limit. Although this decision reduces sample size by approximately 14 percent, limiting the analysis to assignments made prior to January 1, 2000 also allows for a longer follow-up period to assess stability and safety concerns.

In 1998, IDCFS requested and received approval from the federal government to change eligibility criteria so children are eligible for subsidized guardianship after one year in the IDCFS system and one year in the home. The request was precipitated by a change in the Juvenile Court Act requiring the court to set a permanency goal 12 months after entry into the child welfare system. Having eligibility established after one year would allow the court and the caseworker to consider and assign when appropriate the goal of subsidized guardianship. Without established eligibility caseworkers and the court would not be able to seriously consider the viability of the option with families. Under the proposed change, a guardianship subsidy would have become available for a child at an earlier age than the

adoption subsidy, which becomes available to a healthy child at age three. Although the federal government approved the request, the change was not fully implemented in deference to concerns that families would opt for guardianship over adoption for children under the age of three because of the eligibility discrepancy. As a compromise and to ensure quality permanency planning, IDCFS decided to assign children to the cost neutrality and demonstration groups at the 1-year mark, but put their eligibility on hold until they had been in the system for two years. As a result caseworkers could begin discussing and planning for guardianship with families when appropriate in advance of the point at which guardianship can be legally assigned. Although children who enter the system at birth or soon thereafter are eligible for a guardianship subsidy in advance of the adoption subsidy the time difference is not as significant with the maintenance of the two-year in the system eligibility criteria. Finally on July 1, 2001, IDCFS changed eligibility for the subsidized guardianship program from two years in the system to one year in the system. Changes in adoption assistance eligibility beginning on the same date, finally, made it equitable to implement the one-year in the system criterion.

Table 3 displays the characteristics of eligible children for the demonstration, without regard to the age restrictions for children in non-related homes. It shows the characteristics of children at the time of assignment to the experimental and control group, as well as the characteristics of eligible children in the non-research sites and in the IV-E supplementary sample. Table 4 displays these same characteristics of children ever assigned to the demonstration prior to January 1, 2000, which does take into account the age restrictions on children in unrelated foster homes. The data in both tables show that statistical equivalence on major administrative variables was successfully achieved through randomization of the

Table 3.- Children Eligible for Subsidized Guardianship

Characteristics	Demonstration			Cost Neutrality		
	Experimental	Other Eligible	Total	Control	Claims-Only	Total
CHILDREN	5,427	36,602	42,029	5,857	805	6,662
Research Sites:						
Cook Central	80.9%	17.8%	25.9%	82.8%	100.0%	84.9%
Peoria	10.4%	3.6	4.5%	9.3%	na	8.2%
East St. Louis	8.6%	1.2	2.2%	7.9%	na	6.9%
Other Sites	na	77.4%	67.4%	na	na	NA
Mean Age at Case Opening (s.d.)	3.3 (3.7)	4.2 (4.0)	4.1 (4.0)	3.3 (3.6)	2.3 (2.8)	3.2 (3.6)
Gender:						
Female	49.6%	50.2%	50.1%	50.1%	54.3%	50.7%
Male	50.3%	49.7%	49.8%	49.8%	45.7%	49.3%
Missing	0.1%	0.1%	0.1%	0.1%	0.0%	0.1%
Race:						
African American	77.7%	80.9%	80.4%	78.8%	81.9%	79.2%
White	12.9%	14.6%	14.4%	12.4%	10.9%	12.2%
Hispanic	7.4%	3.3%	3.8%	7.3%	6.6%	7.2%
Other race						
Missing	0.7%	0.3%	0.4%	0.2%	0.0%	0.2%
Type of Home:						
Kinship Foster Care	65.4%	62.0%	62.4%	63.5%	1.1%	56.0%
Regular Foster Care	21.6%	25.3%	24.9%	23.3%	47.3%	26.2%
Specialized Foster Care	13.0%	12.7%	12.7%	13.1%	51.6%	17.8%
Placement Seq. (s.d.)	2.8 (2.3)	2.9 (2.5)	2.9 (2.5)	2.8 (2.1)	4.1 (2.3)	2.9 (2.2)
Case Opening Seq. (s.d.)	1.1 (0.3)	1.1 (0.3)	1.1 (0.3)	1.1 (0.3)	1.1 (0.3)	1.1 (0.3)
Initial Placement	32.7%	33.5%	33.4%	32.7%	5.7%	29.4%
Days in Home of Assignment	1,245 (625)	1,442 (804)	1417 (786)	1,285 (685)	1,691 (739)	1,333 (704)
Days in Custody	1,659 (789)	2,023 (995)	1,976 (979)	1,694 (812)	2,405 (872)	1,780 (851)
Sibship Size	2.2 (1.3)	2.3 (1.4)	2.3 (1.4)	2.3 (1.4)	1.8 (0.9)	2.2 (1.3)

Table 4.-Children Ever Assigned to the IV-E Demonstration Prior to January 1, 2000.

Characteristics	Demonstration			Cost Neutrality		
	Experimental	Other Eligible	Total	Control	Claims-Only	Total
CHILDREN	3,630	26,072	29,702	3,834	202	4,036
Research Sites:						
Cook Central	85.4%	20.0%	28.0%	86.5%	100.0%	87.2%
Peoria	8.0%	2.7%	3.4%	7.4%	na	7.0%
East St. Louis	6.6%	1.2%	1.8%	6.1%	na	5.7%
Other Sites	na	76.2%	66.8%	na	na	na
Mean Age at Assignment (s.d.)	7.3 (4.2)	9.1 (4.6)	8.9 (4.6)	7.5 (4.2)	12.2 (2.5)	7.7 (4.2)
Gender:						
Female	50.8%	50.8%	50.8%	50.3%	49.5%	50.3%
Male	49.1%	49.1%	49.1%	49.6%	50.5%	49.7%
Missing	0.1%	0.1%	0.1%	0.1%	0.0%	0.0%
Race:						
African American	81.2%	84.6%	84.1%	82.1%	89.6%	79.2%
White	10.5%	11.5%	11.3%	9.6%	4.5%	12.2%
Hispanic	6.5%	2.9%	3.4%	7.0%	5.9%	7.2%
Other race						
Missing	0.8%	0.4%	0.4%	0.2%	0.0%	0.2%
Type of Home:						
Kinship Foster Care	90.1%	82.3%	83.3%	89.8%	4.0%	85.5%
Regular Foster Care	5.3%	10.4%	9.8%	5.5%	48.5%	7.6%
Specialized Foster Care	4.6%	7.3%	7.0%	4.7%	47.5%	6.9%
Placement Seq. (s.d.)	2.5 (2.2)	2.7 (2.5)	2.7 (2.4)	2.5 (2.0)	3.9 (2.4)	2.5 (2.0)
Case Opening Seq. (s.d.)	1.1 (0.3)	1.1 (0.3)	1.1 (0.3)	1.1 (0.3)	1.1 (0.4)	1.1 (0.4)
Initial Placement	40.8%	40.1%	40.1%	41.2%	7.9%	40.0%
Mean Days in Home Prior to Assignment	963 (501)	1,106 (702)	1,088 (682)	999 (555)	1,691 (857)	1,034 (594)
Mean Days in Custody Prior to Assignment	1,235 (657)	1,505 (897)	1,472 (876)	1,281 (694)	2,522 (966)	1,343 (759)
Sibship Size	2.3 (1.3)	2.5 (1.5)	2.4 (1.5)	2.5 (1.5)	1.9 (1.0)	2.4 (1.4)

control and experimental groups. Focusing on these two groups, approximately equivalent proportions of children (i.e. within the bounds of sampling error) come from the Cook, Peoria, and East St. Louis research sites. The same holds true for the age and gender of the child, race, type of foster home, number of placements and case openings, days in the home and in state custody, and sibling group size. Although the experimental sample was drawn to be representative only of children in the three research sites, the data show that with the obvious exception of region the characteristics of other eligible children are not too dissimilar from the characteristics of the experimental sample. This similarity also extends to most of the variables for eligible children in the cost neutrality groups.

Eligible children in Table 3 (without age restrictions) constitutes the sample frame for the evaluation study, and the children ever assigned to the demonstration in Table 4 (with age restrictions) constitutes the sample for IV-E claiming and cost neutrality analysis. In the process evaluation below, the sample of children ever assigned to the demonstration is analyzed to draw inferences about legal permanence, home stability, and child safety. In the independent evaluation by Westat, Inc., the surveyed sample of eligible children and their caregivers provide the data for analysis.

PROCESS EVALUATION

IDCFS officially implemented the Illinois Subsidized Guardianship Demonstration on May 9, 1997 and ran the program through the second quarter of 2002 (June 30). At the start of implementation, more than half (55%) of the 51,761 children in substitute care resided in the homes of relatives (HMR). IDCFS research and other studies had documented that the special characteristics and dynamics of kinship care made it difficult to move large numbers of children into permanent homes through the established channels of family reunification and adoption. For example, in the case of non-removal placements where the child was already in the relative's home prior to state intervention, the IDCFS confronted the paradoxical situation of having to return a child home who was already "home". And even though this same research showed that many more relatives were willing to consider adoption than previously believed, significant proportions remained uncomfortable with this option. Some families feared becoming embroiled in an adversarial process that pits parents against sons and daughter and siblings against sisters and brothers. Other relatives, especially grandparents, found formal adoption to be an unnecessary bureaucratic encumbrance. They felt that their relationship to the children is already permanently sealed by virtue of their blood ties. Subsidized guardianship adds a legal permanence to the existing family relationship that is less disruptive of customary kinship norms than adoption.

Preparation for Implementation

Even though the official implementation date of the Illinois Subsidized Guardianship Waiver Demonstration is May 9, 1997, planning for the demonstration began shortly after the September 22, 1996 approval date of the waiver application. As a first step to implementation it was necessary to establish the principal foundation on which the rest of the program would be built. As a basic principle, the safety and best interests of the child drive the guardianship program. Decision-making around guardianship must meet a standard of practice similar to that of adoption services and as such is guided by legal and statutory regulations. Given the significant impact of a permanency decision on the lives of children and families, it is important to balance a potential competing set of child, family and state interests.

The following are the legal and statutory requirements that have guided the implementation of subsidized guardianship:

For the Child:

- Right to consent to the arrangement if over 14
- Right to counseling and intervention to address the impact of change
- Right to an account of the impact on relationships with family
- Right to a careful appraisal of the ability of the relative care provider to meet intermediate and longer term needs – services designed to cope with the changes in circumstances
- Right to have special needs taken into account

For the Guardian:

- Right to a process that focuses on strengths not deficits
- Right to a clear presentation of options
- Right to a specialized training on developmental and behavioral issues
- Right to a subsidy for continuation of care arrangement
- Right to an adequate services appeal if denied

For the Parent:

- Right to notice of status change
- Right to counsel
- Right to access to a mediation process for negotiated consents
- Right to be heard in the guardianship proceeding

In addition, changes to the Juvenile Court Act and IDCFS policy in the Fall of 1997 and Winter of 1998 clearly delineated a “hierarchy of permanence” to ensure that children are living in the least restrictive and most appropriate living arrangement. The hierarchy ensures that the most permanent goal is ruled out before the next goal can be pursued. The hierarchy is as follows: return home within 5 months, return home within 12 months, return home pending status hearing, adoption, guardianship, independence, and long –term residential care (home environment not appropriate). The issue of rule out has raised many clinical/practice questions for caseworkers, supervisors, policy makers, and IDCFS attorneys that will be discussed later in the report.

Rules and Procedures

Rules and Procedures for the Illinois Subsidized Guardianship demonstration went into effect March 1, 1997. The rules and procedures define the eligibility criteria, assessment process, form preparation, and legal steps. Subsidized Guardianship was available upon the recommendation of the child's caseworker for those children who met the following criteria:

- The child must have been in the legal custody of the State for two years or more immediately prior to establishing subsidized guardianship;
- The child must have resided with the prospective private guardian (relative caregiver or licensed foster parent) for at least one year immediately prior to establishing the subsidized guardianship. However, the one year placement requirement may be waived for sibling groups when at least one sibling meets all subsidized guardianship requirements;
- Reunification of the child with his or her parents and adoption must have been ruled out as permanency goals despite reasonable efforts having been made to reunite the family or seek adoption of the child;
- The child must have a strong attachment to the prospective guardian and the guardian must have a strong commitment to the child;
- A child living in the home of an unrelated foster parent must be at least 12 years of age. Younger children may qualify for subsidized guardianship with a non-relative if they are a sibling of a child 12 years or older who meets all subsidized guardianship requirements or if the worker determines that private guardianship is in the best interest of the child due to the length of time in the home, the age of the child, the characteristics, responsibilities, and limitations of the caregiver including their health and mobility, or the special needs of the child. The best interest determination must be documented, and the decision must be approved by IDCFS' Guardianship Administrator;
- Parents may consent to the subsidized guardianship arrangement or IDCFS may proceed for a good cause to seek a private guardian without parental consent provided that notice is given of the guardianship petition hearing in accordance with the Probate Act;
- The prospective guardian must have no record of felony convictions;
- A child 14 years of age or older must consent to the subsidized guardianship living arrangement.

Beginning in the Fall of 2001, IDCFS began the process of revising all of the subsidized guardianship and subsidized adoption rules and procedures. The following more clearly and completely delineates the eligibility criteria for subsidized guardianship including such modifications as exceptions to eligibility for sibling groups, death and incapacitation of caregivers, and length of time in the system. Modifications to eligibility that occurred after the acceptance of the original terms and conditions are underlined.

A. For a child to qualify for subsidized guardianship the following criteria must be met:

1) the child is not a member of the control group,

Assignment to the control group can only be changed:

- a. If a child originally assigned to the control group moves into a home with an experimental group assignment, the recently moved siblings will be considered to be eligible after the child or the child's sibling has been living in the home for one year. Before guardianship is legally established, the child will be assigned to the experimental group.
- b. If siblings have received two different assignments while living in different homes, and they move into the same new home where no children have previously received a group assignment, then all children will be eligible for a guardianship subsidy after they have been living in the home for one year. Before guardianship is legally established, all of the children will be assigned to the experimental group; and

2) the child was previously in subsidized guardianship, but the guardian has died; or

3) the child was previously in subsidized guardianship, but due to the mental or physical incapacity of the guardian, the guardian can no longer discharge the responsibilities necessary to protect and care for the child, and guardianship was or will be vacated; or

4) the child who had been adopted and was eligible for subsidized guardianship prior to the adoption, continues to be eligible for subsidized guardianship in the event their adoptive parent is unable to care for them due to the death or total mental or physical incapacity of the adoptive parent; or

5) the child has been in the custody of the State for one year or more immediately prior to establishing subsidized guardianship and is likely to remain in care; and

- a. The child has a strong attachment to the potential guardian and the guardian has a strong commitment to the child; and
- b. The permanency goals of return home and adoption have been ruled out for this child and documented in the case record; and

- c. The child has lived with a relative for at least one year immediately prior to establishing subsidized guardianship, or
- d. The child is 12 years of age or older and has lived with a non-relative for at least one year immediately prior to establishing subsidized guardianship, or
- e. The child is a member of a sibling group for whom guardianship will be transferred together, of which at least one child has resided with the prospective subsidized guardian for at least one year and meets all subsidized guardianship criteria, or
- f. The guardianship of the child will be transferred to a prospective guardian who has previously taken subsidized guardianship of another child born of the same mother or father, or
- g. The child is under 12 years of age, is living with a non-relative, and has no older sibling for whom subsidized guardianship is being considered but is eligible due to the fact that:
 - i. Subsidized guardianship has been determined to be in the child's best interests; and
 - ii. The basis for the decision is documented and approved by the Department Guardianship Administrator or designee.
- h. The parent has consented to the subsidized guardianship arrangement or the Department has good cause to seek a private guardian without consent and will give notice of the guardianship hearing.

Internal IDCFS Work Group Process

The Subsidized Guardianship work group began meeting well in advance of the September 22, 1996 approval date and continues to meet. In the early implementation phases of subsidized guardianship, the work group met weekly to discuss the issues and problems associated with implementing a new program. After the program had been implemented for over one year the work group began to meet bi-monthly as it could handle new issues and problems on a less frequent basis. As of October 1999, the work group met on a quarterly basis and continued to serve as a vehicle for addressing on-going implementation issues and information sharing.

The work group model had been used successfully with several new initiatives within the Department. In this model, members of different divisions throughout the Department are pulled together to discuss implementation issues. Because subsidized guardianship affected several different divisions, it was important for each division to understand how the other divisions were handling implementation. One division's actions affect many others. It was also important for staff to share their experiences with implementation so that the good

ideas/processes would be replicated throughout the state and mistakes avoided. The divisions in the work group included:

- *Office of the Research Director* - Handles negotiations with HHS, coordinates policy decisions through the Directors' Office, manages the random assignment process, coordinates the design and implementation of the Westat, Inc. evaluation, and co-chairs the IDCFS/African American Family Commission Research Advisory Group.
- *Office of Litigation Management* - Handles overall implementation of subsidized guardianship and coordinates actions among all other divisions.
- *Office of Legal Services* - Serves as a liaison with the juvenile courts across Illinois to ensure courts' understanding of subsidized guardianship. Responsible for creating procedures, motions, and the legal process for moving cases into subsidized guardianship. Also responsible for screening cases being prepared for guardianship to ensure appropriateness. IDCFS Office of Legal Services proposed legal structure for establishing subsidized guardianship that is consistent with Illinois Law. They met with States Attorneys, GAL's, and Judges throughout the state to solicit support for the program structure.
- *Regional Staff* – Includes representatives from all Department regions across the state. Generally, regional representation includes permanency staff, who are often responsible for implementation of subsidized guardianship in their region, as well as legal staff. Ensure that the implementation process is going smoothly in their region. Also reports on the progress of moving cases into guardianship at each work group meeting.
- *Administrative Case Review* – Serves as a liaison to all ACR reviewers. Brings ACR issues or concerns to the attention of the work group to be resolved. Also serves as screeners to ensure appropriateness of cases being prepared for subsidized guardianship.
- *Post-Guardianship Unit* – Handles all cases moved into subsidized guardianship. Reviews subsidy amounts every other year. Provides crisis intervention services and resources and referral services to guardianship cases that encounter problems after guardianship has been transferred and IDCFS closes the case.
- *Federal Financial Participation* – Monitors federal claiming issues.
- *Human Service Technologies* – An outside contractor responsible for all subsidized guardianship training and some technical assistance. Also monitors the post-guardianship unit to determine what issues arise after the transfer of guardianship is complete, and works to resolve these issues. Serves as a general trouble-shooter.

- *Private Agency Staff* – Includes administrators from voluntary child welfare agencies with which IDCFS purchase of service contracts. Provide insight into implementation issues impacting private sector cases.

During the work group meetings, these divisions discussed the various issues and problems confronting them with the implementation of subsidized guardianship. The work group served as a forum for problem-solving and continued policy development.

Training

Human Service Technologies (HuTech) of Chicago, Illinois provided the training component of the subsidized guardianship project through June of 2000. They provided the following services to IDCFS:

- Developed of subsidized guardianship for the IDCFS Rule and Procedures manual.
- Created assessment materials used to determine the appropriateness of cases for subsidized guardianship.
- Created and updated training manual for subsidized guardianship training.
- Trained on the subsidized guardianship process.

HuTech trained approximately 4,000 child welfare professionals from December, 1996 to July 2000. In addition to child welfare professionals, HuTech also trained court personnel including IDCFS Office of Legal Services staff, Hearing Officers, States Attorneys, and some foster parents. The training sessions began as a two-day seminar that covered, in detail, both theoretical and technical components of subsidized guardianship. IDCFS and private agencies were asked to send supervisors and lead workers to the two-day training sessions so that they could then educate other team members about the program. In the spring of 1997, HuTech began to offer one-day training sessions for staff that wanted to get trained on subsidized guardianship. The condensed training focused less on the theoretical components of guardianship and permanence, giving more information on the practical steps for moving a case through the guardianship process. In the fall of 1997, HuTech offered one large training session per month to casework and supervisory staff. Approximately 50 registrants attended each monthly session. In addition, HuTech conducted half-day training sessions at their offices. These sessions accommodated approximately 10 persons and afforded staff a lot of individual attention.

Technical assistance to IDCFS and private agencies was an ongoing responsibility of HuTech. The agency offered technical assistance to staff five days a week during normal business hours. Beginning in January of 1998 there was an increase in the number of calls being received by HuTech who was receiving 5 calls a day. Questions from caseworkers and supervisors ranged in complexity; some caseworkers needed to know how to complete the forms and other needed to know how to discuss permanence with families who are reluctant to adopt or assume guardianship. HuTech continued to receive calls from and schedule training sessions with agencies that needed on-site subsidized guardianship training. IDCFS administrators also asked HuTech to contact agencies that had demonstrated poor

performance or who had indicated that they have a specific service need. In the winter and spring on 1998, HuTech targeted 15 private agencies for intensive assistance in moving cases to subsidized guardianship and adoption. The training began with meetings with the agency administrators to ensure that they were in support of the initiative. Immediately following the initial meeting, sessions were held to review cases and identify permanency targets. Structured workdays were facilitated for the completion of family meetings, subsidies, and legal screening. In 1998 and 1999, HuTech provided the same technical assistance for IDCFS regions that were struggling to meet their permanency goals.

HuTech also provided technical assistance training on topics related to subsidized guardianship and permanence, such as completing the subsidy packet or accessing community resources.

Regularly scheduled training sessions for direct service staff were put on hold beginning July of 1999. HuTech took time off to resolve several implementation issues and update training materials to reflect general changes in policy and the law. However, during this time training has continued with IDCFS legal staff, GALs, and adoption attorneys. Information has also been shared with the child welfare community through community forums sponsored by the African American Family Commission.

Because the training manual had not been fully revised, HuTech put together an interim abbreviated training for the months of October-December, 1999. Beginning in January of 2000 a regular schedule of training began for public and private agency staff. The training was offered monthly in Cook County and on a quarterly basis in the downstate regions. Two curriculums were developed one designed specifically for permanency staff who have an increased understanding of the permanency process and one for staff who have not been exposed to the subsidized guardianship program.

As of July 1, 2000 IDCFS eliminated the contract with Human Service Technologies to provide training to IDCFS and private agencies. As of July 1, 2000, IDCFS hired the HuTech staff person to provide such services for the Department and private agencies.

Upon evaluation of the training materials, it was determined that training subsidized guardianship in the absence of other permanency goals no longer met the needs of IDCFS staff and families. Training continues to be conducted as requested by the regions, but most efforts toward training have been geared toward integrating the subsidized guardianship program into the broader training curricula. Much time has been spent reviewing subsidized guardianship material for the foundation and enhanced training for new casework professionals. As of August 2002, all training materials were updated to reflect current rule and procedure and a portion of the manual is being used to provide “enhanced” training to new workers.

The need for training on subsidized guardianship still exists. IDCFS has continued to conduct sporadic trainings for those in need of technical assistance. Trainers have found that high worker and supervisor turnover has hindered the dissemination of information about the subsidized guardianship program among caseworkers. Although rule and procedure are

available to all IDCFS and private agency staff, it does not appear to be used as an educational tool.

In addition, to help families make well-informed permanency decisions IDCFS created a handbook called making the Adoption/Guardianship Decision (See Appendix B). The handbook, first distributed in June, 2000, clearly and comprehensively documents the differences between the two permanency options. The handbook appears to help caregivers make a permanency decision and helps guide caseworker discussions with the family.

Direct Services Pre-Guardianship

The Department offers a comprehensive range of services and supports for relatives entering subsidized guardianship. Services include preliminary screening, assistance in applying for subsidized guardianship, and payment of one time court costs and legal fees. In addition, IDCFS offered a financial incentive through the Family Permanency Initiative to relative caregivers contemplating permanence. The grant provides a one-time \$2,000 payment to unlicensed relative caregivers who adopt or take guardianship of children between June 2002 and September 30, 2002. Incentive was also provided via Independence Facilitation Grants. The grant is available to children who achieve permanence between the ages of 14 and 18 through adoption or guardianship. When the subsidy terminates at age 18, 19, or 21 depending on the child's circumstances, the young adult will receive a \$3,000 grant from IDCFS. The payments are made directly to the former ward in six \$500 installments over a six-month period. The money may assist them as they transition to adulthood and should help pay for education, housing, vocational training, and employment assistance. The grant is available to children who achieved permanence from March 15, 2001-October 31, 2002.

Screening

Until June 2000, the Department's Director of Research compiled a list of all children who appeared to meet the eligibility standards set out above. The list was sent to the Department's Information Services Division (ISD) for review and posted to the computer in accordance with the established sampling plan. Hard copies of the list were distributed as the computer was updated on a quarterly basis. In June 2000, IDCFS began assigning children to the control and experimental groups at the end of each month. A one-month delay process was built in to allow for late placement changes that may affect eligibility. Assignments are currently posted to the IDCFS computer system on a monthly basis, but private agencies still receive printed reports on a quarterly basis. Private agencies that don't have access to the IDCFS computer system can contact their agency performance monitor or the subsidized guardianship specialist or coordinator for more updated eligibility information. In addition, for children not yet assigned, workers can call the Guardianship Specialist or Research Office to get a child's future coding status. Such access allows for better permanency planning. For children who meet eligibility criteria because of an exception to the eligibility criteria, coding occurs only after the subsidized guardianship has been transferred.

Casework

The caseworker contacts the caregiver to schedule a family meeting at which time the caseworker and permanency worker review opportunities to improve permanence for foster children placed in the caregiver's home. The family meeting is an opportunity to bring together family and friends that provide critical support in caring for the child. The caseworker helps to facilitate discussion among the participants who are working together to develop a permanent care plan for the child in care. Prior to meeting with the family the caseworker completes the Caseworker Permanency Planning Checklist to determine if the family, from a professional prospective, is ready to assume permanency responsibilities for the child in care. At the meeting, the caseworker must carefully review all details of adoption and guardianship, as well as the responsibilities of each for the caregiver. The worker first must discuss the option of adoption, as it must be ruled out as an option prior to moving toward subsidized guardianship. It is the worker's responsibility to ensure that the caregiver completely understands the responsibilities associated with subsidized guardianship. There has been concern over the level of familiarity of caregivers with the role and responsibilities of guardianship and as a result permanency specialists are expected to attend at least one meeting where guardianship and other permanency goals are discussed. In addition, caregivers are able to choose an attorney who has been trained on guardianship subsidies to review and clarify the subsidy contract before the transfer of guardianship occurs. IDCFS will cover the cost of such review.

As a part of the assessment process, caseworkers complete the Caregiver Permanency Planning Checklist to document the desires of the caregiver with respect to permanence and the content of the meeting. An adoption and subsidized guardianship handbook is available to relatives who wish to obtain additional information on the program. In addition, information on all permanency options can be found in the Foster Parent Handbook. Upon determination of the appropriateness of subsidized guardianship, the worker will assist the relative in completing the application.

As a part of the process of determining the appropriate goal, the Juvenile Court Act requires that goals be ruled-out in a sequential manner. All goals that appear earlier in the sequence must be ruled-out before choosing to pursue a later goal. For example, reunification must be ruled-out before adoption, adoption must be ruled-out before guardianship, and guardianship must be ruled out before independence can be chosen as the preferred goal. To accomplish rule-out, best practice recommends full disclosure when discussing permanence with a family. To foster the right of self-determination, as well as to engage effectively in concurrent planning, casework professionals should discuss with the caregiver the components and implications of all permanency options so that the caregiver, along with other child and family team members, can make a fully informed decision about which option best meets the needs of the family.

An alternative point of view is that adoption should always be pursued, regardless of the preferences of the family, even if it means removing a child from a stable kinship placement. Adoption is seen as the best option because it is more legally "binding" and less susceptible to dissolution than guardianship, which can be vacated more easily by the court. However,

often, it is in the best interest of the child to rule-out adoption. It is important for caseworkers, as well as legal staff to look at the unique circumstances of family relationships and child and caregiver needs when discussing permanency for families. The worker and the caregiver should be working together to determine why one goal better meets the family's needs and to formulate a response to satisfy the Juvenile Court Acts rule-out requirement.

In the field, there seems to be confusion about who ultimately is responsible for rule out and what constitutes a valid rule-out. Discussions with caseworkers and administrative staff have revealed that casework staff sometimes try to manipulate family choices by withholding information about the full-range of permanency alternatives. Most families only learn about one permanency option (either adoption or guardianship) and the option presented is usually the one that the caseworker has determined in advance to be most appropriate for the family. When asked about this practice, caseworkers who refrain from full disclosure ardently contend that the rule-out requirement in the Juvenile Court Act requires that each goal be presented in a linear fashion and that they cannot discuss guardianship until they are absolutely confident the family will not accept adoption. On the other hand, some caseworkers gloss over the rule-out requirement because they perceive guardianship as better meeting the family's needs or more easily accomplished than termination of parental rights and adoption.

Caseworkers' unilateral control over the sharing of information and determination of whether rule out criteria has been met is contrary to best practice. Families are often in the best position to assess whether guardianship or adoption fits their cultural norms of family belonging, respects their sense of social identity and gives legal authority to existing family relationships. As the data in Table 6 below shows, most families, including kin, are choosing adoption on their own. It is a minority of families who select private guardianship. It is important to note that those families who do choose guardianship look exactly like those who choose adoption on the four qualities of permanence: intent, continuity, social status, and belonging (Appendix C). To date, the evaluation of the Subsidized Guardianship Waiver Demonstration finds little advantage in agencies and the courts delaying the warding of private guardianship in the hopes of encouraging kin to adopt or finding an alternative home to adopt.

Intensive Short Term-Casework

The Department provides the family—including prospective guardian, child, and other household members—with intensive short term counseling, if determined necessary, to assure that all family members understand the benefits and responsibilities of all participants in the Subsidized Guardianship Program. Counseling can also include the biological parent, if appropriate. There has been concern about the level of understanding caregivers' choosing subsidized guardianship have about the responsibilities and entitlements associated with the transfer of guardianship. The handbooks discussed earlier in the report were designed to help caregivers navigate both the decision-making process and responsibilities in the aftermath of the transfer.

Written Agreement

Upon completion of the Subsidized Guardianship Information and Application Form and the Subsidized Guardianship Program-Child's Summary Form, a written agreement is prepared that sets out the terms of the Department's commitment to provide support for maintenance of the child and any additional services that the child may require. Maintenance is set at the same amount that would have been set for an adoption assistance agreement for the child. Agreements must be reviewed and approved by IDCFS prior to the transfer of guardianship and is subject to periodic review. The review has been every other year, but will be changing to once a year to meet Medicaid requirements. It is not intended that the agreement impairs or limits eligibility for any other public benefits. The components of the subsidy may include the following (*italics represent components added since the inception of the program*):

- ✓ Legal fees and court costs to finalize the transfer of guardianship
- ✓ Counseling or therapy costs not payable through other resources
- ✓ Medical assistance under Title XIX of the Social Security Act
- ✓ Payments for physical, emotional, or mental health needs not paid through public resources or private insurance for conditions whose onset was established prior to the transfer of guardianship
- ✓ Therapeutic day care
- ✓ *Ongoing monthly payments of the same amount that would have been received if the child had stayed in foster care until the child reaches age 18, or 19, if the child is still in high school, or 21 when a child has physical, emotional, or mental health needs whose onset occurred prior to the transfer of guardianship. Unlicensed relative caregivers who assume guardianship or adopt receive a subsidy that is equal to the foster care board rate they would have received for the child if they had been licensed.*
- ✓ *As of July 2001, work-related day care. Two years of day care is available for children under the age of three. The day care will come at no cost to the guardian who is working or is in employment related training. If there are two guardians in the home both must be working to receive this benefit or one must be working or in employment related training and the other must be disabled.*

Guardianship Procedure

The Department is the legal guardian of children placed in its custody pursuant to orders entered in a County Circuit Court. Relatives caring for minors lack consent for many important functions including health care, signing releases for attendance on school trips, etc. With agreement from the caregiver and approval from IDCFS, the Department's Office of Legal Services files a petition in the Circuit Court to have the caregiver appointed guardian of a minor child who is a ward of the Department. Appointment as a guardian vests the caregiver with the legal authority to make decisions regarding the care, custody, and supervision of the child.

Parents may give written consent to the appointment of guardianship, or they must be served notice of the petition. Service of the notice may be completed by sending it via certified mail to the last known address of each parent. If the whereabouts of the parent are unknown, notice must be published in a newspaper. If the father is not listed on the birth certificate, notice to him is not required. Extended maternal and paternal relatives are also given notice in accordance with the Probate Act under which guardianship is assigned.

Children who are wards of the Department have an attorney, or Public Guardian, appointed by the Court to represent the child's interests. The Public Guardian will also receive notice of the petition, and will have an opportunity to participate in a hearing on the petition. The order appointing guardianship may be entered upon a finding by a Judge of the Circuit Court that the appointment is in the best interest of the child.

Before IDCFS petitions the court for the transfer of guardianship, attorneys from the Office of Legal Services screen the case for appropriateness and to ensure that all legal protocols and casework responsibilities have been fulfilled. As a part of this practice, the IDCFS attorneys in Cook County have been requiring a written back-up plan documenting who will care for the child in the event that the responsibilities cannot be carried out by the appointed guardian. The back-up plan helps to facilitate the transfer of guardianship to a new caregiver when circumstances necessitate such a move.

After the appointment of guardianship IDCFS is no longer involved with the care, custody, or supervision of the child, however, the guardianship remains under the jurisdiction of the court until the child reaches the age of 18. The guardianship appointment continues until termination when the child reaches the age of 18, marries, or dies. The guardianship can also terminate upon the death, incapacity, resignation, or removal of a guardian.

From 1997 to December 1, 1999 all subsidized guardianship transfers were facilitated in the courtroom of the Presiding Judge of the Child Protection Division of the Circuit Court of Cook County (Calendar 49). Upon approval from the child's guardian ad litem, a case that was ready for subsidized guardianship was moved from the geographic calendar (the child's courtroom of origin) to calendar 49 for the transfer of guardianship. This practice was very beneficial for families and IDCFS because 1) The Presiding Judge was very attentive to the issues surrounding the appropriate assignment of children to subsidized guardianship and 2) IDCFS gained greater insight into the casework, clinical, and legal issues surrounding the transfer of guardianship by observing the transfer process. Because guardianships were only transferred on Tuesday and Thursday afternoons representatives from HuTech and the IDCFS Child Welfare Fact Finding Unit were available to observe transfers and address any unresolved issues that came before the bench.

As of October 1, 1999, there was a change in practice at the juvenile court. As of that date, a case is heard in one courtroom for the life of the case. The practice of transferring cases to new courtrooms/judges for subsidized guardianship, termination, etc. ceased to ensure a continuity of care for families as the case moves from T.C. through to return home, termination of parental rights, guardianship, or case closure. The practice helps ensure that legal decisions are facilitated and made by court-room personnel who are most familiar with

the facts of the case. This policy change did not officially impact subsidized guardianship cases until December 1, 1999.

The change in practice for the transfer of subsidized guardianship impacted the movement of subsidized guardianship cases. Judges with little or no understanding of the program were hesitant to transfer cases to subsidized guardianship utilizing the process adopted by the presiding Judge on calendar 49. In addition, already over crowded schedules left little room to accommodate transfers in a timely manner. Furthermore, the change in practice greatly impacted the transfer of guardianship upon the death or incapacitation of the caregiver and necessitated education of all court-room attorneys and judges about the intricacies of the subsidized guardianship program. Because of a backlog of cases, IDCFS developed procedures to facilitate the review and scheduling of IDCFS cases for the transfer of subsidized guardianship. In addition, the presiding judge held four special court calls in June, 2000 to ensure the movement of backlogged cases before the end of the Department's fiscal year.

In addition, the Private Guardianship Order has been modified by the court since the inception of the program. Guardians are no longer required to get permission from the court to move out of county or state. The court does not feel it is necessary to approve such moves. The caregiver is required by the terms of the subsidy agreement to notify the Department of mailing or residential address changes. Families generally comply with such requirements because it ensures the receipt of the subsidy check.

Review Procedures

The guardianship assistance agreement is reviewed every other year on the anniversary date of the transfer of guardianship. Any adjustment in the renewal of the agreement will be based on the child's needs and whether the guardian continues to support the child. If the youth is between the ages of 18 and 21, the agreement will be renewed upon determination that the youth has a severe emotional disturbance, physical disability, or the youth is completing high school. The rate of the subsidy will not be diminished as a result of the review, but dollars and services can be augmented to meet increased needs of the child when the onset occurred prior to the transfer of guardianship.

Fair Hearing

The Department provides formal administrative review through fair hearings for guardians concerning disputes that arise in the administration of the Subsidized Guardianship Program.

Monitoring

DCFS has consistently submitted all reports to the federal government as outlined in the terms and conditions.

Termination Procedures

On May 13, 2002, IDCFS was granted a temporary extension of project operations until March 1, 2003. This extension will provide DHHS with time to receive and review the Final Evaluation Report as well as for the Secretary to make a determination about a full extension. If an extension is not received, the state has made a commitment to continue to fund the subsidies of children who have participated in the demonstration program. A subsidy will be provided to a guardian until a child turns 18, or 19 if still in high school, or 21 if the child in the program has a physical, emotional, or mental health need whose onset occurred prior to the guardianship transfer. However, no new children will be admitted to the program should the government decide that federal reimbursement dollars will not be made available to states to support the subsidized guardianship program. Procedures will be developed to ensure that, if necessary, that phase down of the program does not disrupt permanence for children in the subsidized guardianship program. If a full extension is received and no amendments are made to the social security act prior to the conclusion of the extension, the State will adhere to the same plan described above to ensure that permanence is maintained for all children participating in the program.

Legal Permanence

Table 5 displays the placement outcomes for all the children ever assigned to the waiver demonstration. As of March 31, 2002, a total of 2,561 or 77.9% of children in the experimental group had moved into permanent homes through adoption, guardianship, or reunification. By comparison a total of 2,490 or 71.8% of children in the control group had moved into permanent homes through adoption or reunification. This legal permanency difference of 6.1 percentage points is statistically significant at the .02 level.

Since key indicators from administrative and survey data show that statistical equivalence was successfully achieved through randomization, the only substantive difference between the two groups is the intervention. Thus, the higher permanency rate in the demonstration group may be attributed to the availability of subsidized guardianship.

Table 5.—Placement Status of Children Ever Assigned to the Illinois Subsidized Guardianship Waiver Demonstration as of March 31, 2002.

Status	Experimental		Control	
	N	%	N	%
Permanent Home	2,561	77.9%	2,490	71.8%
Adoption	1,703	51.8%	2,136	61.6%
Guardianship	548	16.7%	19*	0.5%
Reunification	310	9.4%	335	9.7%
Non-Permanent Home	726	22.1%	980	28.2%
Still in Public Custody	414	12.6%	634	18.3%
Aged Out	235	7.1%	257	7.4%
Other Discharge	77	2.3%	89	2.6%

*Violation of random assignment.

Virtually all of the difference in legal permanence is accounted for by subsidized guardianship, which contributed 16.7 percentage points to the combined permanency rate in the demonstration group. The reunification rate was statistically equivalent in both the cost-neutrality and the demonstration groups (9.7% v. 9.4%). As of March 31, 2002, 25.7 percent of children in the cost neutrality group had aged out or still remained in long-term foster care compared to 19.7% in the demonstration group. This mean difference of 5.9 percent is also statistically significant at the .02 level. Thus it can be concluded that *the Illinois subsidized guardianship waiver demonstration did result in fewer children remaining in long-term foster care with ongoing administrative oversight.*

Even though early returns had suggested that the waiver was also helping to boost adoption rates in the demonstration group, the latest results indicate that adoption in the cost neutrality group (61.6%) has moved ahead of adoptions in the demonstration group (51.8%) by a little under 10 percentage points. While this higher rate of adoption in the cost neutrality group does not wipe away the net 6.1% point advantage that subsidized guardianship adds to the combined permanency rate, it does raise the issue of whether it is acceptable public policy to have greater legal permanencies at the expense of fewer adoptions.

Prior literature had led us to believe that subsidized guardianship would be most suitable for relative caregivers. It was purported that most relative caregivers were resistant to the idea of adopting their own kin because their attachment was already sealed by blood ties. Others posited that cultural traditions worked against the formalization of kinship bonds through adoption. But the results of the Illinois demonstration show that relatives are far more willing to adopt their own kin than what previous literature had suggested likely.

Table 6 compares permanency outcomes for children who were originally in the home of a relative at the time of assignment of the demonstration and children who were originally in the home of an unrelated foster parent. Kinship adoptions far exceeded relative guardianships in the experimental group: 54.8% v. 16.7%. In the control group where the subsidized guardianship was officially withheld (despite occasional lapses in the random assignment rule), almost two-thirds (65.1) of the children in relative homes were eventually adopted. This is a far greater proportion of adoptions than had been projected in the original waiver

application to HHS and overturned the prevailing practice wisdom at the time that relatives don't adopt. Illinois' implementation of subsidized guardianship in combination with performance contracting and the quickened legal timetables helped to dispel many of the myths harbored by kin about adoption, such as the lack of ongoing subsidies, the need to alter birth certificates, or prohibitions on birth parents ever visiting the child. Once these misunderstandings were cleared up, relatives were far more willing to consider adoption than previously thought likely.

Despite this greater choice for adoption by kin, the permanency boost associated with guardianship in the experimental group pushed the combined permanency rate above the control group rate by 5.3 percentage points, which is statistically significant at the .05 level. It was anticipated that this permanency advantage would have been larger, but the fact that it wasn't lends credence to the strength of kinship bonds that resulted in the adoption of far more children than anyone had expected.

Table 6.—Placement Status of Children Ever Assigned to the Illinois Subsidized Guardianship Waiver Demonstration as of March 31, 2002, by Type of Care at Time of Assignment

Type of Home Status	Experimental		Control	
	N	%	N	%
Kinship Home	3,038	100.0%	3,165	100.0%
Permanent Home	2,460	81.2%	2,401	75.9%
Adoption	1,660	54.8%	2,059	65.1%
Guardianship	505	16.7%	19	0.6%
Reunification	295	9.7%	323	10.2%
Non-Permanent Home	568	18.8%	764	24.1%
Still in Public Custody	323	10.7%	501	15.8%
Aged Out	179	5.9%	184	5.8%
Other Discharge	66	2.2%	79	2.5%
Foster Home	259	100.0%	564	100.0%
Permanent Home	99	38.3%	89	29.2%
Adoption	43	16.7%	77	25.3%
Guardianship	41	15.8%	0	0.0%
Reunification	15	5.8%	12	3.9%
Non-Permanent Home	160	61.7%	216	70.8%
Still in Public Custody	100	38.6%	133	43.6%
Aged Out	56	21.6%	73	23.9%
Other Discharge	4	1.5%	10	3.3%

The largest boost associated with guardianship turns out to be for children originally placed with non-relatives at the time of assignment to the demonstration. The combined permanency rate in the experimental group exceeded the permanency rate in the control group by 9.1 percentage points. Although this difference is substantively important, the smaller sizes of the foster home samples do not permit us to confidently rule out random sampling fluctuations as the source of the difference.

The difference in permanency rates between kinship and foster homes is confounded by the ages of children because of the age restriction imposed on children in non-related homes. Children ever assigned to the demonstration who originally lived in non-related homes are much older on average than children in kinship homes because children under 12 are not automatically eligible for subsidized guardianship if they are living with non-kin. Table 7 breaks out the permanency outcomes by the age of the children at the time of assignment to the demonstration. As shown in the table, younger children are far more likely to achieve permanence than children who were assigned to the demonstration after age 13. Although older children are far less likely to attain permanence than younger children, it should be noted that the permanency boosts associated with guardianships are approximately the same for both age cohorts: 6.8% for children assigned before age 14 and 6.7% for youth assigned after age 13.

Table 7.—Placement Status of Children Ever Assigned to the Illinois Subsidized Guardianship Waiver Demonstration as of March 31, 2002

Age of Child at Assignment Status	Experimental		Control	
	N	%	N	%
Assigned Before Age 14				
Permanent Home	2,471	83.4%	2,428	76.6%
Adoption	1,661	56.0%	2,094	66.1%
Guardianship	513	17.3%	16*	0.5%
Reunification	297	10.0%	318	10.0%
Non-Permanent Home	494	16.6%	741	23.4%
Still in Public Custody	404	13.6%	611	19.3%
Aged Out	30	1.0%	55	1.7%
Other Discharge	60	2.0%	75	2.4%
Assigned at Age 14 or Older				
Permanent Home	88	27.3%	62	20.6%
Adoption	42	13.0%	42	14.0%
Guardianship	33	10.2%	3*	1.0%
Reunification	13	4.1%	17	5.6%
Non-Permanent Home	234	72.7%	239	79.4%
Still in Public Custody	19	5.9%	23	7.6%
Aged Out	205	63.7%	202	67.1%
Other Discharge	10	3.1%	14	4.7%

*Violation of random assignment.

Despite the equal gains in permanence associated with guardianship for both younger and older children, it had been expected that subsidized guardianship would have assisted many more foster youth between the ages of 14 and 18 years old than what actually was achieved. Considering that the probability of adoption greatly diminishes after a child turns 12 and given that many older children would rather not be adopted because of established ties with their birthparents and siblings, prior research had suggested that the greatest number of guardianships would come from this age cohort. However, the data show that only 10.2% of the older youth entered subsidized guardianship in the experimental group compared to 17.3% of the younger children. Overall, 72.7% of the older children in the experimental group either were still in state custody, or had aged out or been discharged for other reasons.

Assisting older wards toward permanence and concurrently planning for their transition to adulthood continue to pose special challenges for the field. Older wards, who age-out of the child welfare system, often encounter multiple problems including physical and mental health issues, lack of education, lack of job readiness skills and limited social supports, all of which combined present substantial barriers for these youth to becoming productive members of society. DCFS has found that youth, who enter the system at age 12 or older, have a 50 percent chance of aging out the system.

In addition, feedback from youth, caseworkers and caregivers indicates that youth stay in the system because they perceive that permanence is equated with the ‘loss of services’ or ‘missing out’ on access to transition programs. Currently, a number of Chafee Foster Care Independence Program transition programs are available to support youth as they transition from foster care to adulthood. These services are available only to youth who exit the child welfare system at age 18 without a permanent and legal relationship with a family. These transition programs are a significant resource for eligible youth and provide a range of support including a monthly living stipend, medical card and other services for wards. Unfortunately, casework staff and court personnel often counsel youth (as well as caregivers) to remain in care in order to access transition programs and other resources. This advice, while well intentioned, creates a perception that the availability of these services is inherently more valuable than permanence and that the loss of access to certain transition programs is too great a cost compared to the benefits of permanence.

In an effort to address this issue, IDCFS has requested from DHHS, The Permanency for Older Wards Waiver. The waiver will build on the established success of the Illinois Subsidized Guardianship Waiver, which improved permanency outcomes (both adoption and subsidized guardianship) for many children and youth in Illinois. This demonstration will enable Illinois to rigorously evaluate innovative strategies for pursuing permanency for older wards. Specifically, the waiver will enable the State to test the efficacy and impact of the offer of transition programs (post-permanency), currently only available to youth who age out of the child welfare system, to youth who are adopted or enter subsidized guardianship at or after the age of 14.

In order to assess the generalizability of the guardianship demonstration throughout the state, the evaluation was conducted in three sites: Cook County Central Region, Peoria Sub-Region, and St. Louis Sub-Region⁵. Because the two samples outside of Cook County are not of sufficient size to analyze separately, the downstate samples are collapsed together. Table 8 displays permanency outcomes for children who were living in Cook County or downstate regions of Illinois at the time of assignment. The permanency difference between the experimental and control groups is larger in Cook County (6.4%) than downstate (4.1%). Although this permanency difference in downstate Illinois would not be statistically significant under conventional significance tests, the downstate samples are close to the

⁵ A previously published study of the external validity of the guardianship demonstration is reproduced in the Appendix (Testa, M, 2002, ASubsidized Guardianship: Testing an Idea Whose Time Has Finally Come. @ *Social Work Research*, Vol. 26, No. 3, pp. 145-158).

population counts. Therefore the difference isn't subject to random sampling fluctuations to the same degree as a random sample. Nonetheless, the difference is small and raises questions about how well the demonstration was implemented downstate. The utilization of subsidized guardianship is higher in Cook County than in the downstate region (16.9% v. 14.7%) however, this difference is not large enough to question the external validity (generalizability) of the intervention.

Table 8.—Placement Status of Children Ever Assigned to the Illinois Subsidized Guardianship Waiver Demonstration as of March 31, 2002, by Region at Time of Assignment

Type of Home Status	Experimental		Control	
	N	%	N	%
Cook County	2,818	100.0%	3,000	100.0%
Permanent Home	2,221	78.8%	2,171	72.4%
Adoption	1,490	52.9%	1,878	62.6%
Guardianship	477	16.9%	18*	.6%
Reunification	254	9.0%	275	9.2%
Non-Permanent Home	597	21.2%	829	27.6%
Still in Public Custody	357	12.7%	555	18.5%
Aged Out	188	6.7%	211	7.0%
Other Discharge	52	1.8%	63	2.1%
Downstate	469	100.0%	470	100.0%
Permanent Home	338	72.0%	319	67.9%
Adoption	213	45.4%	258	54.9%
Guardianship	69	14.7%	1*	.2%
Reunification	56	11.9%	60	12.8%
Non-Permanent Home	131	27.9%	151	32.1%
Still in Public Custody	66	14.1%	79	16.8%
Aged Out	47	10.0%	46	9.8%
Other Discharge	18	3.8%	26	5.5%

*Violation of random assignment.

Post Guardianship Casework Services

As with the Adoption Assistance program, the Department assigns a case upon the transfer of guardianship to a worker in the appropriate region of the State. The guardian contacts the worker when difficulties are encountered with subsidy payment, private health insurers, community resources, and/or Medicaid. The worker serves as an intake and referral “hub” for any concerns presented by the guardian. In addition, the subsidy is reviewed by this worker every other year. During fiscal year 2003, the review will take place on a yearly basis to comply with Medicaid requirements. When the issues are therapeutic in nature the

caseworker can transfer the case to a social worker for further assistance. The social worker can offer brief crisis intervention, referrals, and phone based assistance and information.

The following are examples of calls received by the Post- Guardianship Unit:

Example One: 8 year old boy living with an Aunt

First Call: The guardian called the Post Guardianship Unit on 2/10/00 to request counseling services for the minor because of negative behavior at school, church and other social events. The case was referred to Metropolitan Family Services for preservation services.

Second Call: The guardian called the Post Guardianship Unit on 2/13/01 to request counseling services for the minor who was on the verge of being expelled from the after school program. The family was referred for mentoring services at Marvin Wright Mentoring Services and also referred for a LAN referral which paid for summer camp for the minor.

Third Call: The guardian called back to the Post Guardianship Unit on 6/4/02 to request a Level of Care Review. The guardian then called back to state that she wanted to put the request on hold because the minor had been in a serious car accident and was on a ventilator in intensive care and had a lacerated kidney, liver and spleen, broken leg and inner cranial brain swelling. The guardian said she would call back when the minor began rehabilitation services to request the Level of Care Review.

Example Two: 17 year old boy living with a non-relative caregiver

The guardian called the Post Guardianship Unit on 1/31/00 to request services for the minor. She stated that the minor had a new friend who was gang involved and that he was being influenced by the friend. The minor had begun to have problems at school and was being physically and verbally aggressive. The guardian requested counseling services, and was referred to Preservation Services at Catholic Charities.

In addition, the following services are available to children who have exited the system through guardianship: education advisors/liasons to support the completion of high school; competitive scholarship program; mentoring; financial assistance and scholarships. For guardianships finalized for children aged 14, housing advocacy and Independence Facilitation Grants are also available. To educate caregivers about the availability of post guardianship services, the department created a handbook called "After the Adoption or Guardianship: One Special Gift Deserves Another" (Appendix B).

One general problem that was brought to the attention of the Post-Guardianship Unit was caregivers' difficulty in accessing medical cards for children when they relocated after guardianship had been transferred. Per the terms, and conditions, Illinois felt that a child's eligibility for a medical card should be determined using a child's IV-E status prior to participation in the Subsidized Guardianship Program. During the program, we learned that some states are using families' current incomes or the children's current income to make eligibility determinations.

According to DHHS, other states are not required to abide by the Terms and Conditions agreed to by Illinois for the Subsidized Guardianship Program. Therefore, other states can define the standards by which they determine income. As result of this issue, The IDCFS Interstate Compact Office has agreed to assist families who are having trouble accessing medical cards by educating caregivers on how to work with Illinois to ensure payment of medical bills. Caregiver's in this situation can request out-of-state providers to enroll as providers in the Illinois Medicaid program or submit medical bills to the state for reimbursement of out of pocket expenses.

Crisis Intervention

The Department offers subsidized guardianship preservation programs for families that are participating in the program. The preservation program parallels those services that are available for adoptive families when the stability of a placement is threatened. Through the guardianship preservation programs families are offered services such as counseling, linkages to community resources. Service from this program typically lasts 6 months to 1 year. In addition, the DCP Child Welfare Fact Finding Unit provides safety notification upon disruption of the placement because of the death or incapacitation of a caregiver. They access necessary CANTS/LEADS and background information. When necessary, the Unit provides brief case management services. The Unit further assists the court process by making case assignment, arranging and/or providing transportation, and other services to ensure expedited action on cases where the guardianship arrangement is disrupting.

Additional Support

HuTech also assisted with the provision of post-guardianship services on behalf of the IDCFS. Until July 2001, HuTech worked with the IDCFS' Post guardianship Unit from May, 1997 to July 2001 to facilitate the transfer of guardianship cases receipt of casework materials, including the subsidy packet. This included follow-up telephone calls and memo's to caseworkers and supervisors regarding cases where materials were not transferred to the post-guardianship unit in a timely manner.

HuTech developed a mechanism for providing quality assurance for families contacting the IDCFS Post-Guardianship Unit with specific service needs. HuTech provided follow-up services to families who need referrals or services which fall outside the scope of the Post-Guardianship Unit's focus. Examples include issues related to SSI, child care, food stamps, after schools programs, etc. Ensuring the quality of care is now the responsibility of the subsidized guardianship specialist who works on site in the post guardianship/adoption unit at IDCFS

Any time a caregiver calls the Post-Guardianship Unit a quality assurance form detailing the nature of call is forwarded to the specialist. If the Post-Guardianship Unit feels that services such as adoption preservation are needed a referral will be made and the specialist will be notified of the action. When the Post Guardianship Unit feels that the subsidized

guardianship case is at risk of disrupting or has service needs that cannot be addressed by the resources available to the Unit, the case is referred to the specialist for extra attention.

The following are examples of complex cases that are referred to the Subsidized Guardianship Specialist:

Example: 16 year old male living with a maternal aunt:

First Call: The guardian called the Post Guardianship Unit on 8/20/01 to request services to help her deal with the behavior problems of the minor. She stated that she did not think that he was a bad child, however, he resisted following her directives. She stated that the minor had a lot of contact with his biological mother and that this may be upsetting him. Also, the minor does not have any male role models in his life. The family was referred to Universal Family Connections for counseling and mentoring services.

Second Call: The guardian called the Post guardianship Unit on 12/18/01 to request to vacate her guardianship of the minor stating that he was disrespectful to her, threatening to her and that she believed that he was in a gang and abusing drugs. The case was referred to the SGS for assessment. The specialist assisted the minor with signing up for Job Corp and was able to encourage the guardian to maintain the relationship while the teen was enrolled in the program. He entered the program in 9/02.

Example: 13 year old girl living with Grandparents:

First Call: The guardian called the Post Guardianship Unit on 7/2/01 to request to vacate the guardianship due to the child's behavior. The minor was not regarding the rules of the home, was leaving the home without permission, and had tantrums and was aggressive with peers and her siblings in the home. The guardian had caught her in her bedroom having sex with a boy that she had let in through the window. The guardian reported that the minor had poor social skills, had no friends and fought with peers. The post worker referred the family to preservation services through Metropolitan Family Services, and also set up a psychiatric assessment to determine the minor's service needs. The minor was also in therapy twice a week.

Second Call: The guardian contacted the Post Guardianship Unit on 1/22/02 to request to vacate her guardianship of the minor. The guardian stated that the minor had been involved in preservation services with Metropolitan Family Services and had made progress, however, had recently been experiencing a deterioration of her behaviors and was belligerent, disrespectful and had become physically aggressive towards her siblings. The case was referred to the SGS for assessment. The SGS helped the guardians make a private arrangement to meet the child's needs. The family admitted the child to Illinois Masonic Residential Center in LaGrange, IL for residential care. The guardians agreed to pay the sliding scale fee with the subsidy money and provide for the living expenses of the minor. The guardians were willing to continue their relationship with the child and participated in services for the child including counseling.

The specialist continues to work with IDCFS Post-Guardianship Unit, IDCFS legal staff to hone procedures for working with families who have contacted the Post-Guardianship Unit

with an identified post service need or with the intent of returning a child in their care to IDCFS. The specialist has worked closely with the Post-Guardianship Unit to implement protocol governing this process and continues to provide technical assistance and oversight in the case management for potentially disruptive placements. A protocol has been developed to handle cases returning to IDCFS and will be discussed in more detail later in the report.

Home Stability

Children discharged to the permanent homes of adoptive parents and legal guardians typically exhibit higher rates of home stability than children who remain in foster care. This is because, in addition to the legal commitment made by permanent caregivers, children in foster care can be moved at anytime at the discretion of the child welfare agency while children in legally permanent homes can only be moved by a decision of the court. Because of the expected higher rate of permanency in the demonstration group, it was expected that home stability would also be higher than for children in the cost neutrality group who were more likely to still be in foster care.

Table 9.—Home Stability of Children Ever Assigned to the Illinois Subsidized Guardianship Waiver Demonstration as of March 31, 2002.

Status	Experimental		Control	
	N	%	N	%
Still in Kin/Foster Home	2,259	68.7%	2,337	67.3%
Adoption	1,497	45.5%	1,868	53.8%
Guardianship	506	15.4%	16*	0.5%
Public Custody	143	4.4%	303	8.7%
Turned 18 in Home	113	3.4%	150	4.3%
Moved from Kin/Foster Home	1028	31.3%	1,133	32.7%
Reunification	310	9.4%	335	9.7%
Other Adoption/Guardianship	248	7.5%	271	7.8%
Replaced into Another Home	470	14.4%	527	15.2%

*Violation of random assignment.

Table 9 presents data on home stability for age-eligible children ever assigned to the IV-E waiver demonstration prior to January 1, 1999. The proportion who were still living in the same home in which they resided at the time of original assignment in the three research sites was 67.3% in the cost neutrality group and 68.7% in the demonstration group. While children in the cost-neutrality group were slightly more likely to move than children in the demonstration group, this small difference of 1.5 percentage points is not large enough to rule out chance fluctuations as the source of the difference. Thus it cannot be concluded that the demonstration increased home stability.

The inability to reject the null hypothesis of no difference in stability rates does raise questions about the importance of legal status for the stability of a child's care. The lack of an intervention effect suggests that the degree of placement stability may be determined by factors that are independent of the legal relationship between the child and caregiver.

Analysis by the independent evaluator indicates that kinship is a common denominator that contributes to home stability in both the cost neutrality and demonstration group, regardless of whether the child remains in kinship foster care or the relatives adopt or have the option of subsidized guardianship.

Disruption, Displacement and Dissolution

Tracking home stability after discharge from foster care has been a challenge for the Department. The process has brought to light the need to update IDCFS tracking systems to measure post-permanency disruptions. The lack of tools to discuss and track activity after legal permanence has become more critical as the Department has more children in the post-permanency sector of the Department than in substitute care. The change in the child welfare population has prompted IDCFS to develop more detailed policy and procedure for this growing segment of children. To assist in this effort, a workgroup was convened to develop definitions so that disruption within the Department could be discussed with some unanimity. The definitions used to discuss a child who no longer resides in the home of the original caregiver are as follows:

Guardianship Disruption occurs when a planned guardianship placement does not prove successful and it may become necessary for the child to be removed from placement before the guardianship is finalized;

Guardianship Dissolution occurs when guardianship is vacated for a reason other than ‘guardianship death/incapacitation’;

Guardianship Displacement occurs when a child is no longer in the physical care of his/her guardian(s), but retains guardianship;

Deceased/Incapacitated Guardian occurs when a caregiver can no longer assume guardianship of a child because the guardian dies or is incapacitated and there is no other guardian;

Post-Guardianship Service occurs when the child remains in the physical custody of the guardian, and the family receives services;

Deceased Guardianship Child occurs when it is no longer necessary for a caregiver to assume the role of guardian because of the death of the child;

Guardianship Conversion to Adoption occurs when the guardian of a child becomes the child’s adoptive parent.

Because the IDCFS system does not have administrative rule and procedure to document such cases, researchers found that there was limited uniformity between regions tracking such occurrences. As a result, the subsidized guardianship research specialist developed a tracking form for state-wide use. The specialist developed a special data base to ensure completeness and accuracy of records. Each region outside of Cook County submits the

information to the specialist on a monthly basis. Cook County submits the records as they are brought to the Subsidized Guardianship/Adoption Subsidy Unit. IDCFS continues to work toward uniform handling of such cases. Codes for such cases will be developed for integration into SACWIS or a request to modify current policy will be submitted. IDCFS also developed policy to address the handling of such cases by IDCFS casework staff and the Office of Legal Services. Rates of dissolution of the 6,820 statewide cases that entered subsidized guardianship between April 1997 and March 2002 are low. Only 237 (3.5%) are no longer living in the home of the original guardian: 1% are no longer in the home because the guardian died or became incapacitated, and 2.2% children are no longer in the home because the caregiver requested or was relieved of legal responsibility and the guardianship was dissolved. Of all the cases that have disrupted because of death or incapacitation and legal dissolution, 117 or 49% have required that IDCFS be appointed guardian of the child; of the remaining children 73 were appointed a new guardian, 39 were returned to the biological parent, 4 were adopted, and 4 children had no legal guardian appointed.

1,275 children in the demonstration sites were discharged from state custody to a subsidized guardian. The Caregivers of 146 of the 1,275 children contacted the Post Adoption-Guardianship Unit to notify the Department of: 1) an intensive service need jeopardizing the stability of the placement; 2) a desire to vacate guardianship; or 3) the death of a guardian. Of the cases requiring intense assistance the Post Unit and the subsidized guardianship specialist were able to maintain 70 children in the home of the original guardian. 25 placements could not be maintained because of the death of the caregiver and an additional 37 cases were vacated because the child or caregivers service issues could not be addressed by the Department. An additional 4 children continue to live away from the home of the guardian pending reunification. Finally, 15 cases on stop pay status closed after payments for children who aged out of the system while on run from their home. Only 26 of the children who are no longer living in the home of the original guardian because of dissolution of the guardianship came back into the custody of the state.

Vacating Guardianship

In the event that guardianship must be vacated, the court must either transfer guardianship to an appropriate adult or re-appoint IDCFS with such responsibility. In instances when the vacating of guardianship is necessary because of death or disability of the guardian, another family member or close family friend is often willing to assume guardianship responsibilities for the child. In a memo dated June 4, 1999 IDCFS requested an amendment to the IV-E waiver agreement for the Subsidized Guardianship Program that would give Illinois the authority to allow the transfer of the subsidy upon the death or incapacity of the guardian. In May 2002, DHHS gave permission to make children assigned to the demonstration group immediately eligible upon the death or incapacitation of their adoptive parent.

In the event that a guardian requests to vacate their guardianship the subsidized guardianship specialist works with the family to try and address the caregivers concerns through services. In the event that the caregiver still wishes to relinquish their guardianship responsibilities the case will be reviewed by IDCFS Office of Legal Services (OLS). If OLS believes that the

placement is no longer in the best interest of the child, IDCFS will file a motion, as a friend of the court, to vacate guardianship. In the event that OLS feels that the placement is in the best interest of the child, a caregiver who wishes to vacate will need to file pro se or obtain legal representation to assist with the vacating process. A caregiver that requests to vacate guardianship without IDCFS approval risks being indicated for neglect.

When a guardianship must be transferred because of the death or incapacitation of the guardian IDCFS OLS assists the family with the process to ensure a smooth transition. The following procedures assist in reviewing care giving arrangements regarding the safety and risk of children and facilitating or handling placement and related payments in the event of the death of a guardian. In most cases, a friend or family member steps forward or can be found who agrees to accept a guardianship appointment or adopt. While the Department completes the guardianship transfer or adoption, the new caregiver may need financial assistance to care for the child. The process of requesting approval of the new subsidy and the issuance of an interim payment to the caregiver is outlined below. This procedure has been implemented and will formally appear in IDCFS Rule and Procedure pending final JCAR approval.

- Following the initial notification, the subsidy payment to the deceased guardian should be stopped with a stop payment effective the date of death. The Subsidy Unit must be notified immediately.
- The Subsidy Unit must complete a subsidy within 2 business days of the “initial call” regarding the death of the guardian.
- When it has been determined that ongoing monthly payments are needed by the caregiver prior to the transfer of guardianship or adoption interim ongoing monthly payments may be made. Interim payments shall not exceed the amount established before the death of the previous guardian. The monthly board payment rate will stay the same.
- The Subsidy Unit must complete a CANTS/LEADS check immediately following the “initial call”. The CANTS is completed on any household member 13 years or old and LEADS on any household member over 18 years old.
- Within 48 hours of the “initial call”, the worker requests a CERAP to be complete by regional Child Welfare staff based on the region where the child(ren) and new caregiver reside.
- When the child will be adopted a referral is made to a contract agency or regional staff to complete a home study/investigative report. Fingerprinting must be completed in order to finalize the adoption when the prospective adoptive parent is not related to the child. When the child will enter another guardianship arrangement a permanency assessment is completed and fingerprinting is not required.

- Upon receipt of the CANTS/LEADS and CERAP, the Subsidy Unit shall:
 - Send the prospective guardian a copy of the Statewide Adoption Attorney Panel List if the guardian chooses to have their subsidy reviewed by an attorney.
 - Give a copy of the results to the agency/worker completing the home study/investigative report if an adoption or agency/worker completing the permanency assessment if it will be guardianship.
 - If any of the results are positive, they must be sent to Regional Counsel to determine if the prospective guardianship transfer can proceed.
- The worker must gather the additional information requested on the DECEASED ADOPTIVE PARENT/ SUBSIDIZED GUARDIANSHIP CHECKLIST. In order to initiate the interim payment, an agreement for assistance must be completed and signed by all parties.
- If the Director's Office approves the interim payment, they will send a copy of the signed/approved checklist to the worker and to the Central Office Client Payment Unit. The interim payment amount will be the previous guardianship rate, which the new subsidy should also reflect.
- The Central Office Client Payment Unit will initiate payment by using the out-of-home service codes payable through the board payment system. The interim payment will begin the date that the agreement is signed by all parties. The interim payment is only valid for up to 6 months, contingent upon the cooperation of the prospective guardian/adoptive parent, that will begin the date the subsidy was signed by all parties.
- Finalize the adoption or transfer of guardianship, once the home study/investigative report or permanency assessment is complete.

It is important to note that the interim payment will cease when the new subsidy becomes effective and that this process will ensure that the child's medical card is sent to the prospective adoptive/guardian's address.

In the event that the guardian becomes incapacitated, documentation must be provided from a duly licensed physician of the guardian's total incapacity. The procedure outlined above will be followed to ensure the safety of the child, however, there will not be interim payments to a new prospective guardian(s) or adoptive parent(s). Ongoing monthly payments will continue to the incapacitated guardian until the transfer of guardianship or the finalization of the adoption.

There have been circumstances where a caregiver who has assumed guardianship responsibilities has wanted to adopt at a later date. When a current subsidized guardian wants to adopt a child for whom they have guardianship under the waiver program, the guardian should contact the appropriate Subsidy Unit. The Subsidy Unit worker will determine whether the biological parent(s) is deceased or have had parental rights terminated voluntarily or involuntarily. If the biological parent(s) are not deceased or have not had parental rights terminated, the worker must determine whether the biological parent(s) will sign a surrender allowing the child's guardian to adopt the child.

The following items should be provided to the appropriate Regional Legal Council:

- A one page memo summarizing the child's history
- Status of the biological parent(s) in relation to death or termination of parental right
- Background check on the caregiver
- Diligent search results
- Worker's recommendation

When Legal Council has approved proceeding to adoption, provide the guardian with the Statewide Adoption Attorney Panel (SAAP) listing and proceed with the adoption process.

Safety

Even though the availability of subsidized guardianship is shown to boost legal permanence and result in no less stability than children denied this permanency option, a concern still remains that children might be at greater risk of harm. This is because of the withdrawal of administrative oversight and casework services and the greater potential access of abusive and neglectful parents to the guardian's home when the foster care case is closed. To help ensure the safety of children in subsidized guardianship homes IDCFS staff persons follow mandated reporting laws. In addition, the Department has developed rules and procedures that govern the vacating and transferring of guardianship responsibilities.

Table 10.—Number of Reports and Indicated Findings of Abuse and Neglect of Children Ever Assigned to the Illinois Subsidized Guardianship Waiver Demonstration as of March 31, 2002

Reports Indicated Finding	Experimental		Control	
	N	%	N	%
Children	3,287	100.0%	3,470	100.0%
Not Reported	2,749	83.6%	2,891	83.3%
Reported	538	16.4%	579	16.7%
Not Reported or Not Indicated	3,179	96.7%	3,326	95.9%
Indicated Finding	108	3.3%	145	4.1%
Reports/ Child (mean/ s.d.)	0.35	1.00	0.38	1.12
Indicated Findings/Child (mean/ s.d.)	0.06	0.35	0.07	0.42
Reports by Source	1,142	100.0%	1,330	100.0%
Mandated Reporters	754	66.0%	835	62.8%
Medical	94	8.2%	100	7.5%
School	188	16.5%	155	11.7%
Social Service	282	24.7%	328	24.7%
DCFS	62	5.4%	73	5.5%
Law Enforcement	124	10.9%	174	13.1%
Child Care Centers	4	0.4%	5	0.4%
Non-Mandated	388	34.0%	495	37.2%
Kin, Friends, & Neighbors	181	15.8%	205	15.4%
Anonymous	176	15.4%	247	18.6%
Other	31	2.8%	43	3.2%
Indicated Findings by Allegation	181	100.0%	258	100.0%
Physical Abuse	28	15.5%	27	10.5%
Sexual Abuse	32	17.7%	25	9.7%
Emotional Abuse	0	0.0%	1	0.4%
Substantial Risk of Injury	76	42.0%	104	40.3%
Blatant Disregard	4	2.2%	1	2.2%
Lack of Supervision	31	17.1%	56	21.7%
Environmental Neglect	10	5.5%	44	17.1%
Post-Adoption or Guardianship	37	20.4%	24	9.3%
Other Time after Assignment	144	79.6%	234	90.7%

To evaluate the possibility of safety differentials, children were tracked for reports and indicated findings of abuse and neglect through the IDCFS Child and Neglect Tracking System (CANTS). Table 10 presents data from this analysis. For age-eligible children ever assigned to the IV-E waiver demonstration prior to January 1, 1999, the proportion who had been reported for abuse and neglect after assignment was 16.4% in the experimental group and 16.7% in the control group. The difference is negligible.

More important than reports is whether the investigation results in the substantiation of a report of abuse or neglect. A substantiated report is one in which a trained investigator finds credible evidence that a suspected incident of maltreatment has indeed occurred. Table 10 shows that 3.3% of children in the experimental group had a substantiated finding of abuse or neglect after assignment compared to 4.1% in the control group. Contrary to earlier concerns, there were no greater safety issues in the experimental group than the control group. In fact, subsequent indicated abuse and neglect was lowest among children eventually discharged to private guardians compared to adopted children (see Figure 4). This small difference between children discharged to private guardians and adopted children is not statistically significant. On the other hand, the safety risks are significantly higher for children who remained in foster care or were reunified with their birth parents: 7.7 % for children who aged out or remain in foster care, and 8.8% for children reunified with their birth parents. Thus it can be concluded that the withdrawal of regular administrative oversight and casework services from the families in the subsidized guardianship program *did not* result in higher rates of indicated subsequent reports of abuse or neglect.

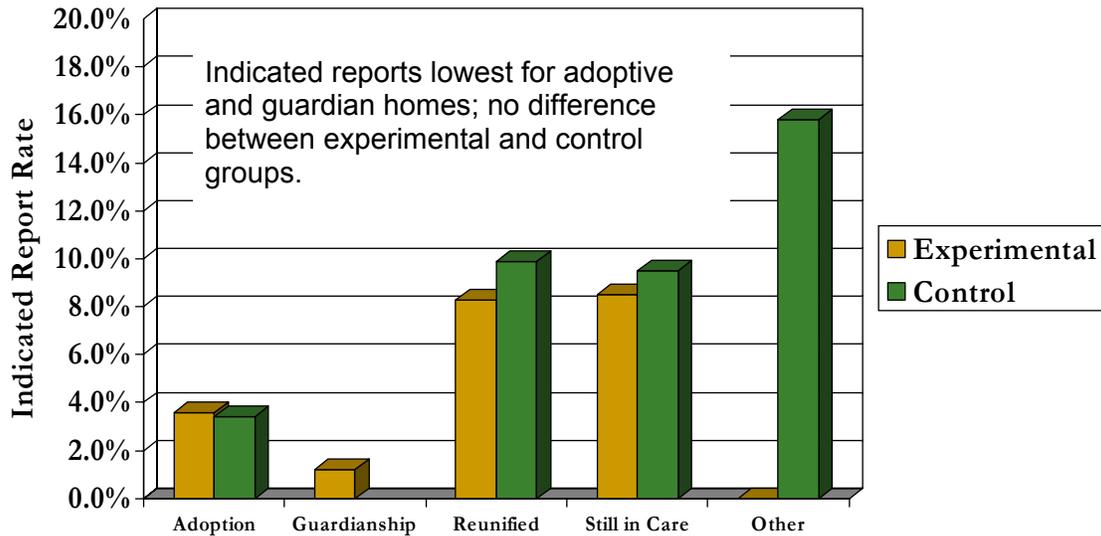


Figure 4

The high percentage of children with reports of abuse and neglect after assignment, despite the fact that 4 out of 5 of them were dismissed, does raise concerns about the conditions of the home into which these children are placed and eventually discharged to permanent care. Over two-thirds of the reports were filed by mandated reporters (see Table 10), with most of these being social service providers, followed by school and law enforcement personnel. For those reports that were founded, over 40 percent were for substantial risk of injury and about 20 percent for inadequate supervision. While a higher percentage of substantiated reports occurred after adoption and guardianship in the experimental group as compared to the control (20.4% v. 9.3%), this imbalance reflects the fact that more children attained permanence and more quickly than children in the

control group. Overall, the rate of indicated maltreatment was no greater in the experimental than in the control group (3.3% v. 4.1%).

Table 11 breaks down substantiated findings by permanency status and the relationship of the perpetrator to the child. The largest category are birth parents who are indicated for a repeat episode of maltreatment following either reunification, trial home placements, or during visitation. The next largest category is other relatives, which reflects the large concentration of kin in the demonstration. However, it should be noted that there are no differences in the distribution of perpetrator’s relationship between the experimental and control group. It can be concluded from the analysis of CANTS data that *the withdrawal of regular administrative oversight and casework services from the families in the subsidized guardianship program DID NOT result in higher rates of indicated subsequent reports of abuse or neglect.*

Table 11.— Indicated Findings of Abuse and Neglect of Ever Assigned Children by Permanency Status and Perpetrator’s Relationship to Child

Status Relationship	Experimental		Control	
	N	%	N	%
Permanency Status	181	100.0%	258	100.0%
Adoption	73	40.3%	84	32.6%
Guardianship	7	3.9%	na	na
Reunification	31	17.1%	47	18.2%
Other Discharge	0	0.0%	21	8.1%
Still in Care	70	38.7%	106	41.1%
Perpetrator’s Relationship to Child	181	100.0%	258	100.0%
Birth Parent	71	39.2%	103	39.9%
Sibling	11	6.1%	10	3.9%
Other Relative	57	31.5%	89	34.5%
Adoptive Parent	6	3.3%	6	2.3%
Foster Parent	15	8.3%	13	5.0%
Parent Substitute	6	3.3%	13	5.0%
School/ Child Care Center	5	2.8%	2	0.8%
Other/ Not Specified	10	5.5%	22	8.6%

Evaluation Process

Under the terms and conditions of the federal waiver, IDCFS is required to contract with an independent evaluator to conduct a large-scale experimental evaluation of the demonstration. On March 26, 1997, the IDCFS issued a RFP for the evaluation. The Director of Research for IDCFS, developed the RFP in consultation with other IDCFS staff, faculty from the Children and Family Research Center at the University of Illinois, and members of the Research Committee of the Governor-appointed African American Family Commission (AAFC). The waiver application to HHS stipulated that AAFC would help the IDCFS convene an advisory group to the waiver demonstration and the Research Center would convene an independent panel to review the proposals and submit recommendations to IDCFS.

RFP Process

Notice of the RFP was published in newspapers and copies were mailed out to over 150 persons and organizations. The IDCFS convened a bidder's conference on April 21, 1997. Approximately 50 people attended the conference, including representatives from the four groups that submitted a bid.

Copies of the bids and instructions for the scoring were sent to members of the review panel. The six-member panel consisted of two faculty members from the Children and Family Research Center, two representatives from the African American Family Commission, and two additional academic reviewers, one from the School of Social Work at Loyola University, and one from the School of Public Health of the University of Illinois at Chicago.

The review panel met as a group on July 17, 1997. Each reviewer discussed their rankings of the proposal and discussed each of the proposal's strengths and weaknesses. The rankings were based on the following scoring criteria as contained in the RFP:

- Soundness of Approach (30 points)
- Participation of Local Community Groups (30 points)
- Qualifications of Firm and Staff (20 points)
- Cost Effectiveness (20 points)

The review panel was unanimous in scoring the Westat proposal as best. In fact, all six reviewers gave identical rankings: (1) Westat, (2) NORC, (3) King Technologies, and (4) Hamilton Life. Westat is an employee-owned research firm, founded in 1961 and headquartered in Rockville, Maryland. Westat has significant experience in the substantive and technical areas necessary to conduct multi-site program evaluations and data surveys as required for the subsidized guardianship waiver evaluation. On July 25, 1997 a letter was sent to Westat informing them of their selection.

Community Participation

The Westat research project also involved the following community organization: Center for New Horizons of Chicago, Tri-County (Peoria) Urban League, Inc., and Volunteers of America of East St. Louis. The role of the community organizations was (1) to provide feedback on the study design and instrument development, (2) hire, train, and supervise TANF recipients to participate in the data collection, and (3) provide space for TANF and Westat field staff to conduct field interviews. The role of the community providers is pivotal to the project for the following reasons:

Project Legitimacy-Selecting community partners who are leaders in their respective communities and have a historic presence provides the project with standing and legitimacy to the community members and other community leaders. Partners participation in developing the study design and instrument provides a knowledge base that will enhance sensitivity to community issues and add to the legitimacy of the findings. In addition, community partners have board and staff members that reflect the composition of the study population.

Illinois Experts on Kinship Care-Community partners, as providers of HMR (kinship care) in Illinois, know the “system” and its unique features. This knowledge has been critical to expanding the understanding of the context in which services are delivered, but has been invaluable in getting cooperation from other agencies and participants.

TANF Identification, Training, and Supervision-Community partners work with the economically disadvantaged families and therefore, were positioned to recruit and assist in the training and supervision of qualified adult TANF recipients to work on the project.

Continuity-Community partners provide continuity and a link to the community that cannot be guaranteed through IDCFS leadership or government appointees. The stability has been critical in conducting the survey that so heavily depends on community participation over an extended time.

It was anticipated that the subcontractors would initiate start-up in January of 1998 and begin data collection in March of 1998. However, as a result of sampling changes, the work plan was revised and interviews began in July of 1998.

Discussions about recruitment of TANF recipients as interviewers were conducted. Each site chose a different strategy for recruitment. Centers for New Horizons conducted general community outreach through the city agencies in their community. A thorough two-week job skills training course was provided by Centers to all new hires. The Urban League recruited from within their agency programs for adults. Volunteers of America recruited from a particular agency in the community that provides work skills training for welfare-to-work recipients.

Research Advisory Group

The Department's participation in the evaluation is overseen by the IDCFS Research Director, Dr. Mark F. Testa. A Research Advisory Committee was jointly convened by the Department and the Governor's African American Family Commission, Executive Director, Terry A. Solomon. The Commission received a grant from the Department to staff the Committee, facilitate participation of community based-service providers and consumers, and insure that the research would be culturally relevant and sensitive.

RAC also did the following: (1) served as knowledgeable representatives of the Subsidized Guardianship research who are able to respond to questions especially from the African American community and/or be able to make proper referrals for more information when necessary; 2) reviewed and commented on minutes and other materials; 3) participated in Subsidized Guardianship meetings; and 4) traveled to committee meetings as needed.

The RAC held its first meeting on October 23, 1997 at the African American Family Commission offices. Discussions were primarily focused on the impact subsidized guardianship may have on the African American Community; identifying expedient and effective ways to educate workers and families about subsidized guardianship; and identifying solutions to barriers in moving children into private guardianship.

In addition, Westat provided an overview of their corporation and presentation on the questions and design portion of the study. Two very critical aspects of this study are: 1) determining how subsidized guardianship will effect children's well-being and the dynamics of those family situations; and 2) determining whether or not the involvement of the state is more or less helpful in stabilizing families.

The Research Advisory Committee held its second meeting on February 6, 1998 in Chicago. Mark Testa, IDCFS Research Director, reviewed the sampling plan approved by HHS and provided data on the number of children assigned to the demonstration. Concerns were raised regarding the Permanency Initiative, which is based on federal law requiring states to terminate parental rights of children who have been in care longer than 15 months out of 22 months, unless the child is in kinship care. It was suggested that subsidized guardianship literature should be updated and the information package be made more appealing to the reader.

The Implementation Subcommittee first met January 21, 1998. The purpose of the Subcommittee is to help IDCFS get information out to the community about subsidized guardianship. Members discussed the slower than expected pace of enrollment in the program. Three possible explanations were offered: (1) family perception and barriers created by the system, (2) lack of child care for children, and (3) issues related to independent living. Several strategies to educate families about subsidized guardianship were addressed, including a fact sheet outlining the benefits, mailing information, brochures, community forums, and enrollment approach based on the medical case management model. The committee also met on April 26, 1998, June 18, 1998, and August 18, 1998 to discuss barriers to adoptions and subsidized guardianship. Beginning in August of 1998, separate

implementation committee meetings were held in the demonstration regions so that region specific issues could be addressed. In Chicago meetings were held in October and November of 1998, February and June of 1999, and June, August, October, and November of 2000, and February, March, April, October, and November of 2001. Meetings in Peoria were held in August, and November of 1998, February, June, August, and November of 1999, June and September of 2000, and January of 2001. In addition, meetings were held in East St. Louis in November of 1998 September of 1999, September of 2000, and February 2001.

The Methods Subcommittee first met on January 20, 1998. Members reviewed the draft of the “Children in Household and Youth Interview” surveys developed by Westat. The Subcommittee recommended the following: 1) address risks that the children are not facing, 2) focus more on the informal community network system, 3) develop questions that address various guardianship arrangements, 4) licensing violations and confidentiality issues regarding substance abuse and corporal punishment, 5) family values and expectations for educational achievement, and 6) greater sensitivity that reflects an understanding of where the children live. The committee met on an as needed basis: November 23, 1998; June 4, 1999; July 20, 1999; October 13, 1999; March 10, 2000; April 13, 2000.

In addition, The RAC has also convened on May 28, 1998, September 23, 1998, December 10, 1998, March 26, 1999, June 25, 1999 and September 23, 1999, December 10, 1999, March 30, 2000, June 30, 2000, September 30, 2000, December 7, 2000, March 22, 2001, September 20, 2001, December 6, 2002, and March 27, 2002. The RAC continued to work to ensure that the design and implementation of this demonstration project supported then safety, permanence, and well-being of wards of the state.

The RAC has also been responsible for convening community forums to keep the community informed about developments related to the subsidized guardianship program. The first forum was held on October 23, 1997 at the Abraham Lincoln Center to introduce RAC to child welfare providers. The 40+ persons in attendance received introductory information about the study and the role of Westat. In addition, Dr. Robert Hill identified the implications of the program on African-American families.

On February 6, 1998 another community forum was held at the Abraham Lincoln Center titled “Subsidized Guardianship: A Permanency Option”. The forum was designed to discuss the use of subsidized guardianship as a vehicle for meeting performance goals. The next community forum was held at the same location on March 20, 1998 and addressed performance contracting issues and it interface with the subsidized guardianship program.

RAC held a community forum in Peoria on May 28, 1998 to introduce the advisory council to the downstate regions. Forums were also held in East St. Louis on September 23, 1998 (Subsidized Guardianship: A Permanency Option) and December 10, 1998 (Legal Considerations) On June 25, 1999 a community forum was held in Peoria to address practice issues related to subsidized guardianship. Forums were held in Chicago on September 9 and December 10 and in E. St. Louis on September 23, 1999. The forums were designed to present preliminary research findings from Westat and enhance the community’s understanding of the program. In June 2000, a forum entitled, “ Research Findings: Training

Issues for Child Welfare Staff and Caregivers,” was held in Peoria. On December 7, 2000 and March 22, 2001 additional forums were held on the availability of post-permanency services. On September 20, 2001 a forum was held entitled, “Subsidized Guardianship-A Final Look.”

The final forums were held on December 5 and 6. The forums, held at the Public Guardians Office and at a community agency, addressed the following child welfare related issues: the subsidized guardianship waiver evaluation and policy update; post guardianship services; differences between adoption and guardianship; Chafee Independent Living Act; and the Federal 426 Training Waiver.

COST-NEUTRALITY ANALYSIS

Section 1130 (g) of the Social Security Act requires that the IV-E waiver demonstration be cost neutral. The total amount of federal funds used to support the demonstration project, over the approved project period, shall not exceed the amount of federal funds that would have been expended by the State in the absence of the demonstration.

The terms and conditions specify that the determination of cost neutrality will rely on an analysis of the costs of cases within the control groups. The average allowable IV-E costs of a case in the control group is assumed to estimate the amount that would have been spent on each experimental case in the absence of the demonstration and is used as the baseline for assessing cost neutrality. The total cumulative title IV-E allowable costs for the control groups is divided by the number of cases within those groups, and the result is projected to the universe in the State to determine the amount the State shall be paid in title IV-E funds for the demonstration.

Cost neutrality is determined from the average title IV-E cost per control group case which is calculated by dividing the cumulative title IV-E costs for control cases by the 3,539 children ever assigned to the control group. During the claiming process, it was discovered that children who had been adopted after being assigned to either the waiver’s control or experimental group lost their assignment in the IDCFS data system. This resulted from the Department’s practice of opening a new adoption case under a new identification number and retiring the old identification in order to protect client confidentiality. Consequently costs accumulated under the new identification number were not being tied back to the appropriate assignment group. Because of the change in identification number, their post-adoption costs were being erroneously excluded from the cumulative title IV-E average cost calculations, which artificially depressed the size of the average IV-E cost for the control group more than the experimental group. The IDCFS completed a review of all children who had adopted to determine the child’s assignment group prior to adoption. This assignment is carried over to adoption cases and both pre- and post-adoption costs are reflected in cost claims and cost neutrality calculations.

Table 12 contains data pertinent to the cost neutrality calculations. The demonstration group is composed of two sub-groups: 1) the sample of children selected for evaluation in the research sites (experimental group) and 2) all remaining children in the balance of the state who met the eligibility criteria for consideration for subsidized guardianship. The control group is also composed of two sub-samples: 1) the sample of children selected for evaluation in the research sites (control group), and 2) a supplementary sample to increase the statistical power of analysis of federal IV-E claims for children in non-related foster homes.

Because control group cases were drawn from only three areas of the State (Cook County Central Region, Peoria Sub-Region, and East St. Louis Sub-Region, IDCFs and HHS agreed upon an adjustment factor prior to the implementation date to ensure that the control group counties were representative of the entire State. Based on an analysis of costs prior to the implementation of May 7, 1997, it was agreed that the adjustment factors for maintenance and administrative costs would be 1.0595 and 1.0, respectively.

The following steps outline the procedure for calculating cost-neutrality:

- 1) Calculate the average title IV-E cost per control group case by dividing the cumulative title IV-E costs for control cases by the number of ever-assigned control cases.
- 2) Multiply the average derived in step (1) above by the number of ever-assigned demonstration cases. Multiply this amount by the adjustment factor. The result is the cumulative cost for the experimental cases as calculated above.
- 3) The cumulative demonstration cost will be equal to the cumulative allowable title IV-E maintenance and administrative cost for the control cases plus the cumulative cost for the demonstration cases as calculated above.

Plugging in the factors from Table 0 into the above steps yields the following calculations: the cumulative mean IV-E expenditure as of March 31, 2002 in the cost neutrality group was \$10,637 per child for foster care maintenance payments and \$7,919 per child for adoption maintenance payments, which when multiplied by the 30,781 children ever assigned to the demonstration group times the 1.0595 adjustment factor generates a IV-E foster care maintenance claim of \$346.9 million and a IV-E adoption maintenance claim of \$258.3 million. The actual IV-E maintenance costs in the demonstration group were \$349.7 million for foster care and \$135.9 million for adoption. Since the sum of the actual IV-E costs is less than the sum of IV-E maintenance claims, the waiver is cost neutral and shows a surplus of approximately \$113.5 million. On the IV-E administrative side, the calculations show a surplus of approximately \$54.4 million.

Table 12.-- Cost Neutrality Factors for Children Ever Assigned to the Illinois Subsidized Guardianship Demonstration as of March 31, 2002

Factors	Demonstration			Cost Neutrality		
	Experi- mental	Other Eligible	Total	Control	Claims-Only	Total
CHILDREN	3,212	27,569	30,781	3,345	194	3,539
As of March 31, 2002						
Still in Care:	19.5%	24.0%	22.4%	25.3%	55.0%	26.8%
Kinship Care	9.7%	10.3%	10.2%	13.4%	5.6%	12.9%
Regular Foster Care	3.4%	4.1%	4.0%	4.1%	17.8%	4.8%
Specialized Foster Care	2.4%	2.9%	2.9%	3.6%	15.0%	4.2%
Congregate Care	1.4%	1.8%	1.7%	1.4%	5.0%	1.6%
Independent Living	1.3%	2.8%	2.6%	1.2%	6.7%	1.5%
Other	1.3%	2.1%	2.0%	1.6%	4.9%	1.8%
Discharged from Care:	80.5%	76.0%	76.6%	74.7%	45.0%	73.2%
Adopted	47.0%	35.1%	36.6%	55.8%	32.8%	54.5%
Guardianship	15.3%	20.7%	20.0%	0.6%	0.0%	0.5%
Reunified	11.1%	10.1%	10.2%	11.5%	3.3%	11.1%
Kinship Care	4.0%	1.5%	1.8%	3.8%	0.0%	3.6%
Independent Living	2.0%	6.1%	5.6%	1.5%	7.2%	1.8%
Other	1.1%	2.5%	2.4%	1.5%	1.7%	1.7%
Mean Days in Foster Care After Assignment (s.d.)	721 (483)	831 (536)	816 (531)	813 (512)	1,029 (601)	824 (519)
Mean Days in Adoption After Assignment (s.d.)	474 (585)	333 (521)	351 (532)	534 (569)	299 (506)	521 (569)
Mean Days in Guardian-ship After Assignment (s.d.)	136 (360)	203 (431)	194 (424)	6.1 (94)	0.0	5.8 (92)
Mean IV-E Eligible Foster & Guardianship Claims			\$11,362			\$10,637
Mean IV-E Adoption Claims			\$4,515			\$7,919
Mean IV-E Eligible Foster Care Administrative Claims			\$9,879			\$11,022
Mean IV-E Adoption Administrative Claims			\$1,094			\$1,740

It was expected that most of the IV-E surplus would result from administrative savings since the administrative costs after discharging a child to private guardianship are much lower than the administrative costs for maintaining a child in foster care. It turned out, however, that the formula also generated a significant surplus in maintenance payments. This arises from the fact that the percentage of adoptions in the control group (54.5%) was substantially higher than the percentage of adoptions in the demonstration group (36.6%). Because the costs associated with the 20% of guardianships in the demonstration group are included in the

foster care maintenance claims, the actual adoption costs for the demonstration group are much lower than the calculated adoption claim derived from the cost-neutrality formula. The higher average costs for adoption maintenance in the control group also reflects the higher IV-E eligibility rate associated with adoption as compared to children in foster care and subsidized guardianship.

It must be noted that the permanency percentages for control and demonstration groups for the cost neutrality calculations cannot be compared to draw inferences about program effectiveness. The two groups are not statistically equivalent. Only the control and experimental groups in the research sites are appropriate comparison groups. By design, the control group is younger and has shorter lengths of stay than the demonstration groups that are formed outside of the research sites. This was done to maximize the chances that children in the research sites would be age eligible for all follow-up waves of the interviews and to ensure that newer foster care cases were adequately represented in the evaluation.

INDEPENDENT EVALUATION

Goals

The purpose of the “Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration: Illinois Family Study is to determine if subsidized guardianship is an effective way to move children to permanent, safe, stable living situations. It tested the benefits and risks of offering subsidies to kinship and regular foster parents who become private guardians. The evaluation can be found in its entirety in Appendix D.

The evaluation of the Subsidized Guardianship demonstration includes a hypothesis-testing evaluation and a process evaluation. The process evaluation obtained information about the implementation of subsidized guardianship necessary to understanding the context of the demonstration in each study site. The hypothesis-testing phase provided reliable estimates of the net impact of providing the option of subsidized guardianship on permanence, subsequent abuse and neglect reports, family functioning, and child well-being; and answered the following questions:

- Does the demonstration result in fewer children remaining in long-term foster care with ongoing administrative oversight?
- Does the demonstration result in fewer disrupted placements?
- Does the demonstration help families make long-term commitments to the child(ren) and increase the child(ren)’s perception that they are part of a stable family?

- Does withdrawal of regular administrative oversight and casework services from the families in the subsidized guardianship program increase the rate of subsequent reports of abuse and neglect?

Institutional Review Board

In May of 1998, Westat submitted a request to the Institutional Review Board to request approval of their research. All research involving human subjects or the use of confidential data must be reviewed by the Department's Institutional Review Board (IRB) and approved by the Department. Human Subjects include children for whom the department is legally responsible, families and children receiving Department services, foster parents, adoptive parents, and Department staff, grantees, and contractors. After making revisions to the consent form suggested by the guardianship administrator's office, the IRB approved the research study by majority vote on July 20, 1998.

Review and acceptance by the IRB does not constitute consent for research participation, nor does it assure that consent for research participation will be granted for children for whom the Department has legal responsibility. Acceptance by the review board only indicates that the research was found to adequately protect the rights of human subjects as presented to the Review Board. Research investigators are responsible for obtaining consent to participate from all subjects who are 18 years of age and older and from parents who retain guardianship of any children to be involved in the research, this includes children who are who are under temporary custody of the Department. For children for whom the Department has guardianship, consent must be obtained from the Department's guardianship administrator or authorized agent.

After IRB approval and prior to interviewing children, Westat needed to obtain informed consent from the children's parents (if the children are in the temporary custody of the state) or from the guardianship administrator (if the children are under the guardianship of the state) to conduct interviews with children. Caseworkers and foster parents were used as a resource to assess the child's ability to participate in the study, but did not have the legal authority to grant consent for participation. In the event that prospective participants were aged 14 and older, consent was also obtained from the adolescent.

Consent for Research with Children

It was necessary to obtain consents for 2,549 children to participate in the data collection process. To obtain the consents the following procedure was followed:

- I. The researchers sent a letter/form to each child's caseworker describing the nature of the interview that was going to be conducted. In addition, the letter/form requested 1) verification of the child's legal status, and 2) an assessment of any potential harm that might come to the child as a result of participating in the study.

The letter/form directed the caseworker to send the responses to the IDCFS Office of Research within two business days via facsimile.

- A. If the form was returned indicating that the child is not under the guardianship of the IDCFS, the Office of Research advised the researcher the Guardianship Administrator could not execute consent for the child to participate in the Westat study.
 - B. If the form was returned reflecting that the child is under the legal guardianship of IDCFS and that participation in the study would not put the child at risk of harm, the Office of research forwarded the completed form to the Office of the guardian for execution of the consent.
 - C. If the form was returned reflecting that the child is under the guardianship of IDCFS and that the child would be at risk if he/she participated in the interview process, the Office of the Research staff contacted the caseworker to determine the specific nature of the objection to the child's participation.
 1. If upon clarification, the caseworker withdrew any objection to the child's participation, the Office of Research Staff forwarded the completed form (with notes detailing the resolution of the objection) to the Office of the Guardians for execution of the consent. The Guardian forwarded all executed consents to the researchers.
 2. If the caseworker maintained that participation in the study would be detrimental to the child even upon clarification from Office of Research staff, the explanation of the objection was forwarded to the Office of the Guardian who advised the researchers that no consent would be granted for the child.
 - D. Once the researcher received an executed consent, he/she contacted the caseworker to schedule an interview with the child.
- II. Office of Research staff advised the researchers when workers did not respond to the initial request for information. The researcher sent another copy of the form to the caseworker no sooner than 10 days after the first request was sent.
 - III. If no response was received from the caseworker after the second request was sent, The Office of Research staff advised the researcher to send another request for information to the Regional Administrator (DCFS) or Executive Director (Private Agency) along with a memo from the Guardianship Administrator requesting prompt compliance with the request.
 - IV. If no response was received after the completion of Step III, the Office of Research sent a letter to the foster parent about the study to determine whether participation would be detrimental to the child. Any information obtained was shared with the Office of the Guardian, and the Guardian made the final decision about the child's participation.

The Guardianship Administrator retains the right to grant or withhold consent to any ward's participation in a research project regardless of the assessment of the caseworker or foster parent. The researcher was not allowed under any circumstances to contact directly the

caseworker or foster parent for information about the child's participation in the study. If contact with these individuals needed to be made prior to obtaining consent from the Guardianship Administrator, it was attempted by personnel from the IDCFS Office of Research.

Evaluating the Demonstration

The IV-E waiver required a formal evaluation of the program. DCFS contracted with Westat and its community partners, Centers for New Horizons, Volunteers of America, and the Tri-County Urban League to conduct the evaluation.

Study Purpose. The study evaluated whether subsidized guardianship improved permanency outcomes for children by examining how subsidized guardianship was implemented, for whom it was most effective, and what factors within the child welfare system and the larger service delivery environment facilitated or inhibited program success.

It was hypothesized that the introduction of the subsidized guardianship option results in fewer children remaining in long-term foster care without detracting from the number of children being adopted. The effect of subsidized guardianship on child stability, safety, and well-being is also of paramount importance.

Study Design. The evaluation used the classical experimental design, which is required to establish causal connections between interventions and outcomes. The State designed a random assignment experiment that assigned all eligible children to either a demonstration group or a cost neutrality group. The children and families were randomly assigned over a 2-year period and included those families eligible to become guardians as of October 1, 1996.⁶

Children eligible for the evaluation lived in one of three geographic regions of the Illinois DCFS: Cook Central Region, East St. Louis Sub-region, or the Peoria Sub-region. Those in the demonstration group were provided the option of subsidized guardianship, while those in the cost neutrality group were provided only the preexisting permanency options in effect prior to January 1997.

A two-step random sampling process was used to select the survey households. First households were assigned and then children were selected within the households. The assignments were performed for eight quarterly periods starting on October 31, 1996 and ending on September 30, 1998.

⁶ Eligibility criteria for subsidized guardianship include: a child must have been in legal custody of the state for 2 years or more and the child must have lived with a prospective guardian for at least 1 year prior to establishing the guardianship. Households then became eligible based on the eligibility of the children. Regulations were modified to allow consistency with State and Federal permanency regulations requiring a permanency plan within 1 year of legal custody with the state. To avoid inconsistency with adoption subsidy guidelines which do not allow a subsidized adoption for children under the age of three, it was decided to allow designation of eligibility after 1 year in foster care, but the agreement cannot be finalized until a child has been in care for 2 years.

The study used a longitudinal design with two rounds of data collection on the status and outcomes of the children and caregivers. The first round, completed in the spring of 1999 provided baseline information on families and children as well as early information on permanency decisions. Both caregivers and children over age 8 were interviewed during the period of July 1998 through spring of 1999.⁷ The second round of data collection was conducted during the period of June 2000 to February 2001. The follow-up interview provides information for this report on the outcomes of families who have been in the demonstration for 2 to 4 years.

Caregivers were interviewed using a combination of computer-assisted in-person and telephone interviews. Children were interviewed in-person with an audio computer-assisted self-interview (ACASI). Westat's three local community-based partners, Centers for New Horizons, Tri-County Urban League and the East St. Louis Office of the Volunteers of America of Illinois, helped manage the data collection for the demonstration. These community partners acted as local advisers for their site and identified, hired, trained and supervised Temporary Assistance to Needy Families (TANF) recipients as field associates to conduct the ACASI child interviews.

A Research Advisory Committee (RAC) convened by the African American Family Commission and DCFS provided ongoing input into the design of the data collection instruments and implementation of the research. The RAC, comprised of representatives from the community, service agencies, DCFS and the court, ensures that the research reflects an understanding of the groups and communities being studied.

This report presents the final results from the second round of interviews. Only children whose caregivers were interviewed during the initial round were included in the interviews. The results in this report include information about 1,541 caregivers and 2,869 children living in their homes. Data provided by children over 8 years old is based on 1,072 child interviews.

Characteristics of the Study Population

The demonstration and cost neutrality groups were similar in their demographic characteristics. The average age of the caregivers was 51 for both groups; they were predominantly female (94 percent) and African American (78 percent). Most were unmarried (60 percent).

The caregiver's employment status, education, and earnings were also similar for caregivers in the two groups. Less than half (47 percent) were employed full or part time. Thirty-six percent of caregivers did not graduate from high school and about one-quarter of the

⁷ Preliminary findings from the baseline data collection are found in the Westat report, [Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration: Preliminary Findings](#).

caregivers' education ended with high school graduation. Another one-quarter of all caregivers had attended college and around 10 percent had graduated from college. Forty-two percent of caregivers reported household earnings of less than \$20,000; 30 percent had household earnings of \$20,000 and \$40,000 a year; and more than one-quarter (28 percent) reported household incomes of more than \$40,000 per year.

The households interviewed at followup had a total of 2,869 sampled children. There were no differences between the demonstration and cost neutrality groups on demographic characteristics of the children. The child study population at followup was split evenly between female and male. The majority of children were African American (85 percent). The average age was 10 and the median age was 9. Thirty-five percent of the children were reported to have physical, emotional or learning disabilities at the time of the followup interview.

Findings

The evaluation was designed to test the impact of providing the option of subsidized guardianship on permanency, stability, subsequent abuse and neglect reports, family functioning, and child well-being. The findings on the key research questions are addressed below.

Does subsidized guardianship increase permanent placements for children in foster care without detracting from the number of children being adopted? The overall rates of permanency were higher for children in the demonstration group than for children in the cost neutrality group both at the time of the initial interview and at follow-up. This translates into fewer children remaining in long-term foster care with ongoing administrative oversight for those in the demonstration group. However, at the time of the follow-up interview, subsidized guardianship had begun to supplant adoption, resulting in fewer children in the demonstration group being adopted.

At the time of the follow-up interview, 74 percent of children in the demonstration group were in permanent placements, compared to 70 percent of children in the cost neutrality group ($p < .001$). Guardianship not only increased the percent of children moving to permanency, it also sped up the rate of permanency. For those children in the demonstration group the relative rate of achieving permanency is 25 percent higher. The difference in permanency rates was greatest for older children, ages 6 to 13. Providing the option of subsidized guardianship clearly paved the way for obtaining permanency for older children. While providing the option of subsidized guardianship did increase the overall permanency rates for children in the demonstration group, it also supplanted adoption for the demonstration group. At the time of the initial interview there were no significant differences between the adoption rates for children in the demonstration (28 percent) and cost neutrality (28 percent) groups. However, at follow-up, there was significant difference between the adoption rate for the demonstration group (53 percent) and the comparison group (59 percent).

For the demonstration group, where subsidized guardianship was an option, the majority of caregivers still selected adoption over guardianship—in fact, adoption was selected over guardianship 3 to 1. Still, offering subsidized guardianship as an option did decrease the number of adoptions in the demonstration group. Nevertheless, younger children were still more likely to be adopted. The question then becomes whether selecting guardianship over adoption results in different outcomes for children.

To what extent does subsidized guardianship effectively protect children’s safety? One concern that the subsidized guardianship demonstration raises is whether children will be placed at greater risk of harm once they are no longer part of the child welfare system, and regular administrative oversight and casework services are withdrawn from the family. Safety was measured first by looking at administrative reports of child abuse and neglect that followed an adoptive or guardian placement. There were very few reports for children in adoptive or guardian placements and there was no difference in the percentage of reports for children in the two groups. Secondly, in the child interview, children were asked questions about their feelings of safety in their homes and reports of physical punishment. On issues of safety, there were no significant differences between the demonstration and cost neutrality groups or between children who had been adopted and those in guardianship. Together, the administrative data on children in the sample and reports by the children themselves indicated that the safety of children in the demonstration group was not compromised.

Does the demonstration help families make long-term commitments to the child(ren) and increase the child(ren)'s perception that they are part of a stable family? *What impact does the subsidized guardianship demonstration have on the well-being of children and their families.* For children sampled for the study, stability was measured in two different ways: From a stability index created from questions in the caregiver interview about the child, and through children’s response to questions about their feelings of stability and belonging in their homes.

According to data from the caregiver interview, more children in guardianship experienced high stability (56 percent) than did children in the adoption group (48 percent). Both children who had been adopted and those in guardianship reported high levels of stability. Ninety-three percent of children in both groups said that they thought they would be living with their caregiver in the following year and similar percentages of children (92 percent for subsidized guardianship and 89 percent for adoption) said that they feel like part of the family all or most of the time.

We found no difference in well-being between children in the demonstration group and those in the cost neutrality group from information reported in either the caregiver interview or the child interview. We also found no difference between children in guardianship and those who had been adopted in the well-being measures of emotional health, physical health, or disability. Children in guardianship were less likely to exhibit anti-social behaviors than children who had been adopted. However, caregivers reported that children who were adopted had better school performance than children who were in guardianship. Measures of well-being from the child interview found no overall differences in well-being between children who had been adopted and those in guardianship.

Providing the option of guardianship gave families more opportunities to achieve permanency without having a negative impact on well-being.

Does the demonstration result in fewer disrupted placements?

According to the Illinois administrative data system, most children who had been adopted or entered subsidized guardianship remained in those placements at the time of the follow-up interview. However, there were a very small percentage of children (1%) who had moved out of their permanent placement for a variety of reasons. The weighted total number of disruptions was just 99 (based on an unweighted total of 38). Similar percentages of disruptions occurred within the cost neutrality (1.1%) and demonstration (1.2%) groups. Nearly two thirds (60%) of the guardianship disruptions resulted from the dissolution of the placement, most at the request of the caregiver. In contrast, most of the adoption disruptions (78%) resulted from the death or incapacitation of the caregiver.

How is the demonstration implemented and operated for the cost neutrality and demonstration groups? *How are the goals and objectives of the subsidized guardianship demonstration perceived by supervisory and casework staff in DCFS and private agencies?*

The rules and regulations for the demonstration went into effect March 1, 1997. At that time, eligibility criteria, assessment procedures, forms and legal steps were put into place. Human Service Technologies (HuTech) provided the training and technical assistance for the guardianship initiative. Training began in September 1996 and focused on adoption, permanency planning, and how guardianship fit into the permanency alternatives for families. Trainers noted a slow “buy in” by many public and private agency personnel. Some agency caseworkers expressed concern that pushing families toward guardianship and adoption detracts from reunification efforts. DCFS decided it was necessary to launch a concerted effort in January 1998 to encourage the use of the subsidized guardianship option.

There were conflicting attitudes about the use of subsidized guardianship versus adoption. The conflict was most pronounced among public agency staff and court hearing officers. Hearing officers expressed concern that subsidized guardianship was not as permanent as adoption. In addition, many felt that the adoption rule-out would not be followed and some children, appropriate for adoption, might be referred for subsidized guardianship. Some were concerned that the initiative would be used by caseworkers to move cases to permanency more quickly without focusing on the best interest of the child. This was particularly a concern for young children who historically have had a better chance of being adopted.

Others in the court system voiced strong support for the subsidized guardianship initiative. Proponents of subsidized guardianship saw it as a permanency option for children unlikely to be adopted, providing a means of more quickly dealing with the backlog of child welfare cases. Court personnel believed that the initiative allowed children to remain with relative caregivers without the intra-family problems that might arise when parental rights need to be terminated. Supporters also thought that subsidized guardianship provided a means to ensure that services documented in the subsidy agreement would be continually available to families, even after a child was permanently placed and there was not agency oversight.

Initially there was skepticism among foster parents about the subsidized guardianship initiative. Among those interviewed, there was a lack of trust that the program would continue for those enrolled past the 5-year waiver. Some thought the State wanted primarily to save money, rather than promote stability and permanency. However, as the initiative progressed some of this skepticism abated, as evidenced by interview data with caregivers and discussions with agency staff.

As more families accepted guardianship, the need for post-guardianship services became more pronounced. At the start of the demonstration, the need for post-guardianship services was not fully anticipated by DCFS and very limited services were provided. Later in the demonstration, the State created a continuum of services to assist both post-adoption and post-guardianship families using a combination of DCFS units and contracted services with private agencies. A hotline for information and referrals provided listings of community services. DCFS contracted with ten private agencies to directly provide intensive home-based case management and treatment for families at risk of disruption. Preservation workers described aging guardians and guardians of emotionally disturbed teenagers as families particularly vulnerable to disruption unless services were provided to help shoulder the burden of raising the children.

Implications

These findings suggest a number of implications for future policy considerations and service delivery. Beyond the findings, the data collected raised several new questions and highlighted aspects of the demonstration that provide useful lessons for replicating the initiative. Three of the most important themes are:

1. Subsidized guardianship supports increased permanency for children in foster care

Subsidized guardianship does what Illinois policymakers expected it to do. It increases the rate of permanency and provides an additional option for families who do not want to or cannot consider adoption. Although subsidized guardianship did supplant adoptions in the demonstration group, the availability of subsidized guardianship did not affect the rate of adoption, only the number of children available for adoption.

Subsidized guardianship was especially successful with older children who are typically more difficult to place in adoptive homes or who are not interested in breaking their legal ties with their birth parents. In the demonstration, younger children were still more likely to be adopted. For those concerned that adoption should be the first choice for younger children, monitoring of this trend is necessary. If a higher percentage of younger children begin to exit through

subsidized guardianship, it will be important to determine whether this is a result of family interest or systemic barriers to completing adoption.

2. The child welfare system must translate this new alternative into practice and philosophy

Philosophy must be carefully crafted into clear and consistent policy and procedures. Several areas identified during the evaluation include: the interpretation of the adoption rule-out; preparing families for permanency; and, effective implementation strategies.

The adoption rule-out. The adoption rule-out as defined in DCFS policy, gives priority to the advantages of the legally binding nature of adoption. Adoption must be explored and eliminated as a possibility before subsidized guardianship can be considered. Interpretation of the adoption rule-out varies by region, child welfare position, and personal values. The question of who should rule out adoption—caseworkers, the court or the family—is a lingering one for the state to consider.

Underlying this question are issues of how to define permanency and whether permanency should be decided by families, the courts, or caseworkers. From the child and caregiver perspective, subsidized guardianship is just as permanent as adoption. There were no differences between the demonstration and cost neutrality groups in the number of children who thought that they would continue to live with their caregiver in the next year. The great majority (90 percent) of the children in each group shared the belief that their home was a stable one.

Caseworkers were not as clear. Their attitudes were mixed. It appears that caseworkers still perceive adoption to be the preferred permanency alternative, but there is uncertainty about the effect of the options on children. While a clear majority of the workers agreed that guardianship is as permanent for children as adoption, an even greater percentage believed that adoption gives greater security than guardianship. It appears that workers place greater value on the relationship created by adoption, although they do not necessarily believe that adoption is more permanent. This uncertainty complicates the application of the adoption rule out policy.

There were also differing opinions among court officials. For example, outside the Chicago area, the court can complete a guardianship in 1 month, while the process of terminating parental rights in preparation for adoption takes a minimum of 6 months. Judges interviewed expressed comfort with this “fast-track” alternative to adoption, as long as caseworkers carefully “ruled out” adoption as an option for the family. Other court representatives, especially hearing officers in Cook County, suggested that ‘adoption rule out’ was not necessary, since subsidized guardianship should stand alone as a permanency option. The churning of philosophy between individual families, caseworkers and court needs conformity.

Families must be prepared for permanency, while the children are still in foster care. To help insure the success of subsidized guardianship and adoption, families need preparation prior to discharging a child from state custody. In focus groups with caseworkers, many spoke of needing training in getting families ready for permanency. Some families, especially those that had been in the system for many years were caught off guard after permanency. They were surprised that caseworkers would no longer visit the home. Some agencies reported that families were calling them for continued services. While families wanted to have children maintain contact with birth parents some were concerned about maintaining children's safety. DCFS directed the families to post-guardian services, a contract handled by other agencies. However, counseling and discussion about accessing community resources and handling other crises must begin while the DCFS is actively involved with children in the state's custody. This "independent living" training for families needs to be emphasized as part of caseworkers' responsibility for foster care cases.

The subsidy agreement for adoption or guardianship outlines family and Department expectations. Preparation for permanency culminates with this agreement. The subsidy agreement serves as a vital tool to transition the family into permanency. It describes the subsidy amount and delineates any services the child is eligible for after the case is closed. Families and caseworkers need a comprehensive understanding of developing subsidy agreements, how to work together to include necessary provisions, and how to prepare for future needs. One component of the agreement allows for establishing directions for standby guardianship, if necessary. Standby guardianship allows a continuous transfer of the custody of the child in the event the caregiver is unable to continue care for the child. This is particularly critical in maintaining stability for children placed with older guardians.

Effective implementation strategies. DCFS took a very inclusive approach with the implementation of subsidized guardianship. For oversight, a coordinating committee was set up with representatives of the different units at DCFS, as well as representatives from each region participating in the demonstration. In addition, a Research Advisory Committee (RAC) was established at the time of submission of the proposal to the Federal Government. The RAC, received a budget from DCFS to follow and advise the implementation of the demonstration. The RAC set up two committees to explore implementation and evaluation issues.

The RAC was a fast connection to and from the child welfare community. Invitees from DCFS, universities, community agencies and caregivers participated. The researchers were invited to sit on the committee so that evaluation efforts were consistent with community values and communicated changes in demonstration procedures and to capture feedback from casework staff, court personnel and caregivers. Forums were held periodically in all three sites of the demonstration to get feedback from private agencies, caregivers and regional DCFS staff about how the demonstration was proceeding. This pressure encouraged DCFS to keep the

community advised of procedural changes and fine tune operations throughout the process. The Commission took leadership in promoting the distribution of up to date descriptive information about subsidized guardianship, emphasizing its difference from adoption. A locality or state that attempts such a major shift must allocate staff and dollar resources for the implementation.

3. Enduring success will require an appropriate network of post-placement services

The tremendous increase in permanencies, both adoptions and subsidized guardianships, requires continued availability and access to services for the families created by these options. The service needs of families do not stop when permanency is obtained. After-care service provisions are increasingly important to prevent dissolution of subsidized guardianship and adoption. The state has put their emphasis on both specialized preservation services for families at risk of breaking up and on services provided through local area networks (LANs). LANs were developed and funded throughout the state so communities could individualize services offered, based on the other resources available in the community.

First, consider the group of older caregivers. Thirteen percent of all caregivers were reported to be over 65 years of age. The age of caregivers for children in subsidized guardianship is significantly greater than those of children adopted. For children adopted or who completed subsidized guardianship early in the demonstration, standby guardianship was not emphasized. Later in the initiative, it was discussed more broadly and, according to many court personnel, invoked more often. As caregivers age, health concerns can become more serious or chronic and may affect placement stability. Co-guardianships were also considered by some courts, allowing two family members to share the responsibility. One possibility is to explore contacting families who completed permanency early on in the demonstration to discuss the option of adding a standby guardian to the agreement.

Children adopted and in subsidized guardianship were identified by caregivers as having special needs, 34 percent in both groups. Emotional health and anti-social behaviors were particularly apparent with teenagers. While for many, the subsidy agreement included the promise of services; these services were restricted to pre-existing conditions. Better identification of these needs prior to developing the agreement and a mechanism for providing subsequent services for new problems might prevent dissolution for both adopted and guardianship families.

Practice has assumed that children in permanent placements will have continual support after they reach the age of majority. Several notes of caution appear in the interview data with caregivers. Around a quarter of caregivers that adopted children disagreed that “you are responsible for adopted children after age 18.” Half of subsidized guardians disagreed that “you are responsible for children in subsidized guardian after age 18.” These answers suggest that transition services for youth should be offered to all youth, regardless of their plan or placement.

Moreover, the economically disadvantaged status of most caregivers, regardless of type of placement, reveals that these families may need to receive many vital services. In short, public policies should be designed to enhance the positive functioning of children in a variety of living arrangements by providing strong social and economic support, lessening the chance of dissolution of permanent placements.

Appendix A

Sampling Plan

**Appendix A: Differences Between the Demonstration and Cost Neutrality Groups for Children
Interviewed with ACASI**

Table A-1. Demographics by assignment group

	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Gender		
Male	47	48
Female	53	52
Total %	100%	100%
Age of Child		
9 to 10 years	28	29
11 to 14 years	50	51
15 to 18 years	23	20
Total %	100%	100%
Average Age	12.4	12.3
Weighted N	1,900	2,200
Unweighted N	489	528

Table A-2. Living arrangements by assignment group

	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Child lives with kin*	67	65
Weighted N	1,900	2,200
Unweighted N	487	526
Child's report of relationship of caregiver to child		
Grandmother	44	49
Grandfather	2	2
Mother	12	11
Father	3	3
Aunt	19	15
Uncle	<1	<1
Caregiver	20	20
Total %	100%	100%
Weighted N	1,900	2,200
Unweighted N	489	528
Length of time with caregiver according to DCFS		
< 1 year	5	4
1 year to less than 2 years	5	6
2 years to less than 5 years	25	29
5 years to less than 8 years	41	37
8 years or more	25	24
Total %	100%	100%
Average length of time	6.0 years	5.8 years
Weighted N	1,700	2,100
Unweighted N	477	517

Note: Percentages may not total 100 percent due to rounding.

*Percentages include only affirmative response.

Table A-3. Foster care children’s feelings about permanency by assignment group

Feelings about permanency	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Want current home to be permanent	71	74
Weighted N	600	800
Unweighted N	139	179
Why want home to be permanent		
I would be safe	93	87
I would have someone I can depend on	80	84
I would be part of the family	85	75
I would be with my brothers and sisters	59	66
I wouldn’t have to move anywhere	68	64
I wouldn’t have a caseworker anymore	50	49
Some other reason	29	39
Weighted N	400	600
Unweighted N	95	131
Why do not want home to be permanent		
I want to live with my mother or father	61	66
I wouldn’t get to see my mother or father as often as I want to	26	36
I don’t want to live with [current caregiver]	24	44
I wouldn’t live with my brothers or sisters	16	28
I don’t feel safe here	7	19
Some other reason	58	54
Weighted N	200	200
Unweighted N	45	46

Note: Multiple responses were allowed and percentages include only affirmative responses.

Table A-4. Stability by assignment group

Stability in living arrangements	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Lived with same family for past year	94	96
Weighted N	1,900	2,200
Unweighted N	489	528
Someone else moved into the household	27	30
Weighted N	1,900	2,200
Unweighted N	488	521
Changed schools in the past year	30	36
Weighted N	1,900	2,200
Unweighted N	484	518
Think will live with caregiver next year	90	90
Weighted N	1,800	2,100
Unweighted N	476	517
If not caregiver, who will be living with next year^a		
Parent(s)	49	43
Another relative	26	20
Foster parent	12	28
Someone else	24	15
By self alone	16	29
Weighted N	300	200
Unweighted N	64	48

Note: Percentages include only affirmative responses.

^aMultiple responses were allowed.

Table A-5. Feelings about current living arrangements by assignment group

Feelings about living arrangements	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Like people live with all or most of the time	87	85
Feel like part of the family all or most of the time	90	91
Weighted N	1,900	2,200
Unweighted N	487	526

Note: Percentages include affirmative responses.

Table A-6. Safety issues by assignment group

Safety	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Adults in home ever hit or spank child		
Never	69	61
Hardly ever	17	23
Sometimes	9	12
Often	6	4
Total %	100%	100%
Weighted N	1,900	2,200
Unweighted N	483	524
	19	16
Hitting ever leaves a mark*		
Weighted N	600	800
Unweighted N	150	190
Ever scared of someone in the home*	10	7
Weighted N	1,900	2,100
Unweighted N	485	521
Adults in home ever hit each other*	4	5
Weighted N	1,900	2,200
Unweighted N	484	521
Child can count on caregiver to make sure no one hurts him/her*	96	96
Weighted N	1,900	2,200
Unweighted N	485	526
Child can count on other adults in home to make sure no one hurts him/her^{1*}	95	88
Weighted N	1,300	1,300
Unweighted N	342	326
Child feels safe in neighborhood when outside		
All of the time	47	49
Most of the time	31	25
Sometimes	15	17
Hardly ever	3	4
Never	4	4
Total %	100%	100%
Weighted N	1,900	2,200
Unweighted N	487	527

¹Includes only cases where the child says there are other adults living in the home.

*Percentages include only affirmative responses. $X^2=5.83, p<.05$

Table A-7. Well being by assignment group

Well being scale	Assignment group	
	Demonstration Mean	Cost neutrality Mean
Self-efficacy (4 pt. scale, 1=greater efficacy)	1.70	1.75
Weighted N	1,800	2,100
Unweighted N	467	505
Depression (4 pt. scale, 1=less depression)	1.70	1.73
Weighted N	1,900	2,100
Unweighted N	476	509
Connectedness to the community (12 pt scale, 0=no connection)	6.45	6.56
Weighted N	1,900	2,200
Unweighted N	489	528

Table A-8. Social support by assignment group

Social support scale	Assignment group	
	Demonstration Mean	Cost neutrality Mean
Support from caregiver (5 pt. scale, 1=more support)	1.74	1.72
Weighted N	1,900	2,100
Unweighted N	485	519
Support from others in home (5 pt. scale, 5=more support)	4.35	4.21
Weighted N	1,300	1,300
Unweighted N	342	326
Support from family outside the home (5 pt. scale, 5=more support)	4.48	4.48
Weighted N	1,600	1,900
Unweighted N	422	461
Support from friends (5 pt. scale, 1=more support)	1.89	1.90
Weighted N	1,700	2,000
Unweighted N	446	486

Table A-9. Physical health by assignment group

Physical health	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Child's description of health		
Excellent	62	62
Good	31	33
Fair	6	4
Poor	1	<1
Total %	100%	100%
Weighted N	1,900	2,200
Unweighted N	488	525
	9	8
Child is sick a lot*		
Weighted N	1,900	2,200
Unweighted N	489	524
Child has been to the doctor in the past year*	84	82
Weighted N	1,800	2,100
Unweighted N	472	507
Child has been to the dentist in the past year*	78	74
Weighted N	1,800	2,100
Unweighted N	473	506
Child usually has enough food to eat*	98	99
Weighted N	1,900	2,200
Unweighted N	489	525

*Percentages include only affirmative responses.

Table A-10. Substance abuse by assignment group

Substance abuse	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Child has ever smoked a cigarette	17	15
Weighted N	1,900	2,200
Unweighted N	484	522
Child has ever drank alcohol	12	10
Weighted N	1,900	2,200
Unweighted N	482	521
Child has ever used illegal drugs	4	4
Weighted N	1,900	2,200
Unweighted N	486	527

Note: Percentages only include affirmative responses.

Table A-11. Caregiver’s relationship with child’s biological mother

Relationship with biological mother	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Caregiver ever sees or talks to biological mother*	75	75
Weighted N	1,600	1,900
Unweighted N	425	466
	88	87
Caregiver and mother get along OK		
Weighted N	1,500	1,800
Unweighted N	410	445

Note: Percentages only include affirmative responses.

*Cases where child says biological mother is deceased (or does not know if the mother is alive or deceased) are excluded.

Table A-12. Child’s relationship with biological mother

Relationship with biological mother	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Child ever sees biological mother	79	78
Weighted N	1,700	2,000
Unweighted N	437	473
Does fun things with mother		
All or most of the time	64	58
Sometimes	20	26
Hardly ever	7	6
Never	8	10
Total %	100%	100%
Weighted N	1,300	1,500
Unweighted N	336	369
Talks to mother about important things in child’s life		
All or most of the time	61	60
Sometimes	16	22
Hardly ever	7	5
Never	15	13
Total %	100%	100%
Weighted N	1,300	1500
Unweighted N	337	368
Child is afraid of mother		
All or most of the time	2	3
Sometimes	3	5
Hardly ever	5	7
Never	89	86
Total %	100%	100%
Weighted N	1,300	1,500
Unweighted N	340	367

Note: Cases where child says biological mother is deceased (or does not know if the mother is alive or deceased) are excluded.

Table A-13. Caregiver and child's relationship with biological father

Relationship with biological father	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Caregiver ever sees or talks to biological father*	50	50
Weighted N	1,400	1,600
Unweighted N	359	382
Caregiver and father get along OK	77	73
Weighted N	1,200	1,500
Unweighted N	326	354

Note: Percentages include only affirmative responses.

* Cases where child says biological father is deceased (or does not know if the father is alive or deceased) are excluded.

Table A-14. Child's relationship with biological father

Relationship with biological father	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Child ever sees biological father^a	63	57
Weighted N	1,400	1,600
Unweighted N	368	389
Does fun things with father		
All or most of the time	55	56
Sometimes	21	28
Hardly ever	6	5
Never	18	11
Total %	100%	100%
Weighted N	900	1,000
Unweighted N	229	212
Talks to father about important things in child's life		
All or most of the time	45	49
Sometimes	23	27
Hardly ever	9	7
Never	24	17
Total %	100%	100%
Weighted N	900	1,000
Unweighted N	228	212
Child is afraid of father		
All or most of the time	4	4
Sometimes	4	6
Hardly ever	5	10
Never	87	81
Total %	100%	100%
Weighted N	900	1,000
Unweighted N	230	211

Note: Cases where child says biological father is deceased (or does not know if the father is alive or deceased) are excluded.

Appendix B

Statistical Analysis

Appendix B: Statistical Analysis

Survival Analysis

Survival analysis (using SAS PROC PHREG) was used to identify child characteristics that predict the relative rate at which children in the subsidized guardianship demonstration achieve permanency (reunification, adoption, or subsidized guardianship).

To understand the results of the survival analysis it is necessary to review how the assignment to the demonstration was implemented. Starting in the calendar quarter ending with September 1996, all children who met the requirements for subsidized guardianship from three DCFS regions were identified and information about those children was extracted from the DCFS computer system. From that set, a stratified random sample of children was selected for the demonstration. The strata were defined by combinations of DCFS region and type of foster care. In addition, the probability of selecting a child decreased as the age of the child increased. As a result, older children are under-represented in the demonstration. Children assigned to the demonstration were randomly assigned to be eligible for or not eligible for subsidized guardianship. The information on whether a child was assigned to the demonstration and, if so, whether the child was to be eligible for subsidized guardianship, was then posted on the DCFS computer system.

Subsidized guardianship had not been offered prior to the time of the first quarter sample. As a result, the sample from the first quarter included children who may have been in foster care for much longer than the required two-year minimum or may have been with their provider for much longer than the required one-year minimum.

For the following four calendar quarters (quarters 2 through 5) the same procedure was used to select children for the demonstration. However, only children who met the requirements for subsidized guardianship within the previous quarter were identified for sampling. As a result, the number of children assigned to the demonstration in the first quarter sample was much greater than the number in the later quarters. For quarters 6, 7, and 8, DCFS decided to assign all children who met the requirements for subsidized guardianship to the demonstration rather than selecting a sample. Therefore, older children are not under-represented for these quarters.

A subsample of the children in the demonstration was selected for data collection through interviews with the child's provider and the child (if over 8). The results from those interviews are discussed in other sections of this report. The data for the survival analysis came from administrative records and cover all children assigned to the demonstration.

There was a delay of several months from when the data for children that met the requirements for subsidized guardianship was extracted from the DCFS computer system to when the list of those assigned to the demonstration was available to DCFS caseworkers. For the survival analysis, the date at which a child was “assigned to the demonstration” was the date on which the information that a child had been or not been assigned to have the option of subsidized guardianship was posted on the DCFS computer system and was available to DCFS caseworkers. A child's situation might have changed between when the child's data was extracted from the DCFS system and when the assignment to the demonstration was posted back on the system. There were 8,079 children sampled for the demonstration. After removing children who had achieved permanency after their data was extracted from the DCFS computer system but before the assignment to the demonstration and removing a relatively small number of children who were no longer eligible for subsidized guardianship or who had missing data for some variables used in the analysis, there were 5,799 children available for the survival analysis.

The variables used in the survival model are:

- **YearsAtRisk**: the dependent variable, otherwise referred to as Time, the time in years from the date of assignment to the date of permanency, the child's 18th birthday, or Marsh 31,2002 (the date of the administrative data file), whichever is earlier. Children who had not achieved permanency by age 18 or the last date in the administrative data were treated as censored.
- **Censored**: 1 if the time variable (YearsAtRisk) is censored (no permanency achieved or 18th birthday reached before permanency), otherwise 0. Used as the censoring variable for overall permanency.
- **SGH**: 1 for a subsidized guardianship outcome, otherwise zero. Used as the censoring variable when modeling subsidized guardianship.
- **ADO**: 1 for adoption, otherwise zero. Used as the censoring variable when modeling adoption.
- **Age**: modeled using two variables, AgeA = age at assignment to the demonstration. AgeB = Max (0, Age – 10). The combination of these two variables models age

effects as a linear trend with a change in slope at age 10. Age 10 was selected as the change point based on several preliminary analyses.

- Race: The child's race, coded as white, black, and other represented by two dummy variables: WH = 1 if white, 0 if black, and -1 if other race; BL = 1 if black, 0 if white, and -1 if other race.
- Gender: Male = 1 if male and -1 if female.
- Quarter of Assignment: represented by a dummy variable (Q1 = 1 if the child was assigned in the first quarter, else Q1 = -1) and a continuous variable for a linear trend over time (AssignQ = Sample quarter - 1. AssignQ ranged from 0 to 7).
- Group: Group = 1 if the child was eligible for subsidized guardianship and Group = -1 if the child was not eligible for subsidized guardianship.
- Prior: Prior time in foster care was calculated as follows: Calculate Pcare = (Date at assignment - Date at first placement in foster care)/(Date at assignment - Date at birth). For all children with the same age, rank Pcare from smallest to largest. Prior is a relative rank of Pcare, ranging from 0 for less prior care than all other children of the same age to 1 for more prior care than all children of the same age. For the presentation of results, the prior time variable was categorized as "Less prior care" (Prior <= 0.5) and "More prior care" (Prior > 0.5).
- HMR: HMR = 1 if the child was in the home of a relative (HMR) at the time of assignment, otherwise HMR = -1.
- DCFS Region: Region was represented by two variables, ESL = 1 for region 4A (East St. Louis), 0 for region 1B (Peoria) and -1 for region 6C (Chicago). PEO = 1 for region 1B, 0 for region 4A, and -1 for region 6C.

The children in the analysis are clustered in the sense that children from the same family or with the same provider may have similar experiences and will not be independent, as assumed by survival analysis. Under reasonable assumptions, the clustering will affect the standard error estimates of the parameters (and the associated p-values). SAS PROC PHREG provides the COVS(AGGREGATE) option to obtain estimates of the standard errors and p-values corrected for the clustering.⁸ For the survival analysis results described below, the clusters were defined by family. In a preliminary analysis, similar results were obtained when using clusters defined by provider. Because the COVS() option does not work with time dependent variables the steps described in the next paragraph were used to identify the final model.

⁸ Using the COVS option, PHREG calculates a sandwich estimator of the variance-covariance matrix

The best model was identified by including all main effects and two-way interactions in a model for predicting the rate of achieving permanency, adoption, or subsidized guardianship. Chi-square tests, using the COVS() option, were defined to assess the significance of each main effect or interaction. Sequentially, the least significant interaction and/or main effect was removed from the model and the model was refit until all effects were significant at the 5% level. However, main effects that were not significant at the 5% level were not removed if they were part of an interaction that was significant at the 5% level. When a factor was removed, all variables associated with the factor were removed. For example: race was represented by two variables (WH and BL) and quarter of assignment was represented by two variables (Q1 and AssignQ). The interaction of race and quarter of assignment was represented by four variables (WH*Q1, WH*AssignQ, BL*Q1, and BL*AssignQ). If the interaction of race by assignment quarter was not significant, all four variables were removed from the model. This factor was retained if it was significant at the 5% level. In effect, the final model was obtained by a manual stepwise elimination of non-nested factors.

For any factors or interactions that were significant at the 5% level, a time dependent factor (Time*(variables for the factor or interaction)) was added to the model. Because the COVS() option does not work with time dependent variables, the COVS() option was removed. With the COVS() option removed, the "nominal significance" of a factor as estimated by PHREG is generally more significant than the correct value (when using the COVS() option). Starting with the model with the time-dependent factors, factors were sequentially removed until all remaining factors were either significant at the 1% nominal level or were nested within other factors that were significant at the nominal 1% level. Because all factors in the model were significant at the 5% level before adding the time dependent terms, it appears reasonable to consider all terms in the final model as significant at the 5% level. Significance levels in the tables below should be considered approximate.

Table B-1 shows the parameters that are significant at the nominal one percent level when predicting rate of achieving permanency. Table B-2 shows the parameters that are significant at the nominal one percent level when predicting adoption rate, and Table B-3 shows the parameters that are significant at the nominal one percent level when predicting rate of accepting subsidized guardianship. When modeling subsidized

guardianship, the analysis was restricted to children who were offered subsidized guardianship.

The model results are presented using survival plots (SAS PROC LIFETEST). For the survival plots, continuous variables were recoded to categorical variables to present the results. Age at assignment was recoded to: 2 to 5, 6 to 9, 10 to 11, 12 to 13, and 14 to 17. Time in foster care prior to assignment was recoded to "Less prior care" (Prior \leq 0.5) and "More prior care" (Prior $>$ 0.5). Although the effect of sample quarter was anticipated to be primarily a difference between the first quarters and later quarters, the survival plots suggested that the differences were between the first three quarters and quarters 4 through 7. The curve for quarter 8 was more similar to that for the first three quarters than the later quarters. However, there were relatively few respondents assigned in quarter 8. To be more consistent with the model assumptions (assuming a trend over time), the quarter 8 results were grouped with the later quarters, creating a category for quarters 4 through 8.

Table B-1. Factors that are significant at the nominal one percent level when predicting permanency.

Factor	Chi-Square	DF	Pr > ChiSq	Variable	Estimate	Std Err	Chi-Square	Pr > ChiSq
Group	54.03	1	<.0001	Group	0.1107	0.0151	54.03	<.0001
Age	10.01	2	0.0067	AgeA	0.0296	0.0128	5.33	0.0210
				AgeB	-0.1184	0.0374	10.01	0.0016
AssignQtr	159.06	2	<.0001	Q1	0.1407	0.0580	5.88	0.0153
				AssignQ	0.2413	0.0254	90.58	<.0001
Prior	15.06	1	0.0001	Prior	0.4459	0.1149	15.06	0.0001
HMR	23.60	1	<.0001	HMR	0.2294	0.0472	23.60	<.0001
Time*Age	86.90	2	<.0001	Time*AgeA	-0.0319	0.0062	26.26	<.0001
				Time*AgeB	-0.0379	0.0204	3.44	0.0635
Time*AssignQtr	100.30	2	<.0001	Time*Q1	-0.0372	0.0278	1.80	0.1799
				Time*AssignQ	-0.1039	0.0141	54.48	<.0001
Time*Prior	12.60	1	0.0004	Time*Prior	-0.1970	0.0555	12.60	0.0004

Table B-2. Factors that are significant at the nominal one percent level when predicting adoption.

Factor	Chi-Square	DF	Pr > ChiSq	Variable	Estimate	Std Err	Chi-Square	Pr > ChiSq
TAge	20.74	2	<.0001	AgeA	-0.5749	0.1622	12.57	0.0004
				AgeB	-0.1372	0.0675	4.13	0.0422
TAssignQ	132.22	2	<.0001	Q1	0.2757	0.0705	15.29	<.0001
				AssignQ	0.2971	0.0307	93.65	<.0001
TPrior	41.80	1	<.0001	Prior	0.8821	0.1364	41.80	<.0001
THMR	12.71	1	0.0004	HMR	-7.0849	1.9873	12.71	0.0004
TAge_HMR	12.54	1	0.0004	AgeA_HMR	0.5660	0.1598	12.54	0.0004
Treg_Age	17.56	4	0.0015	PEO_AgeA	0.0457	0.0237	3.71	0.0541
				PEO_AgeB	-0.0139	0.0763	0.03	0.8552
				ESL_AgeA	-0.0764	0.0258	8.74	0.0031
				ESL_AgeB	0.0175	0.0904	0.04	0.8469
Treg	38.68	2	<.0001	PEO	-0.3752	0.1701	4.87	0.0274
				ESL	0.9099	0.1684	29.21	<.0001
TXAge	5.23	2	0.0731	Time*AgeA	0.1902	0.0895	4.51	0.0336
				Time*AgeB	-0.0332	0.0273	1.47	0.2246
TXAssignQ	79.10	2	<.0001	Time*Q1	-0.0735	0.0328	5.01	0.0252
				Time*AssignQ	-0.1198	0.0166	52.33	<.0001
TXPrior	27.96	1	<.0001	Time*Prior	-0.3467	0.0656	27.96	<.0001
TXHMR	7.30	1	0.0069	Time*HMR	3.0208	1.1182	7.30	0.0069
TXAge_HMR	6.66	1	0.0098	Time*AgeA_HMR	-0.2292	0.0888	6.66	0.0098
TXreg	15.95	2	0.0003	Time*PEO	0.0283	0.0550	0.26	0.6068
				Time*ESL	-0.1777	0.0619	8.24	0.0041

Table B-3. Factors that are significant at the nominal one percent level when predicting subsidized guardianship.

Factor	Chi-Square	DF	Pr > ChiSq	Variable	Estimate	Std Err	Chi-Square	Pr > ChiSq
TAge	17.31	2	0.0002	AgeA	0.1454	0.0438	11.01	0.0009
				AgeB	-0.1100	0.1038	1.12	0.2892
TAssignQ	5.49	2	0.0643	Q1	0.2055	0.1904	1.16	0.2805
				AssignQ	-0.0134	0.0837	0.03	0.8727
THMR	0.01	1	0.9328	HMR	0.0165	0.1960	0.01	0.9328
TAssignQ_HMR	10.31	2	0.0058	Q1_HMR	-0.1591	0.1902	0.70	0.4028
				AssignQ_HMR	0.0754	0.0835	0.81	0.3670
TXAge	15.37	2	0.0005	Time*AgeA	-0.0105	0.0190	0.30	0.5809
				Time*AgeB	-0.1127	0.0522	4.67	0.0308

Logistic Regression

For the round 2 respondents, logistic regression was used to assess whether the difference in permanency between the demonstration and cost-neutrality group was statistically significant after adjusting for age. For this analysis, age was defined as age at assignment, as in the survival analysis. However, about one-quarter of the respondents had no date at which their assignment was posted to the DCFS computer system. For these children the age at assignment was based on the quarter of assignment. Age categories, used in the logistic regression, were defined as: 2 to 5, 6 to 9, 10 to 11, 12 to 13, and 14 to 17. The dependent variable is a flag indicating whether the child had achieved permanency at the time of the follow-up interview (coded as "Y" and "N"). The KidGrp variable equaled one for the cost-neutrality group and two for the demonstration group. The model was fit using WesVar. Portions of the WesVar output follow.

Table B-3. Logistic regression results

MODEL(S):	perm = kidgrp agecat[5] perm = kidgrp
NUMBER OF REPLICATES :	50
MODEL :	perm = kidgrp agecat[5]
Class Variable Index :	agecat.1 : 10 to 11 agecat.2 : 12 to 13 agecat.3 : 14 to 17 agecat.4 : 2 to 5 agecat.5 : 6 to 9
MISSING :	2 (UNWEIGHTED) 9.196735 (WEIGHTED)
NONMISSING :	2725 (UNWEIGHTED) 8069.803265 (WEIGHTED)
Success = records with dependent value equal to	Y : 1927 (UNWEIGHTED) 5696.447762 (WEIGHTED)
Failure = records with dependent value equal to	N : 798 (UNWEIGHTED) 2373.355503 (WEIGHTED)
ITERATIONS REQUIRED FOR FULL SAMPLE :	5
MAXIMUM ITERATIONS FOR REPLICATE SAMPLE :	5
-2 LOG LIKELIHOOD FOR FULL SAMPLE :	9042.11889
-2 LOG LIKELIHOOD FOR MODEL CONTAINING INTERCEPT ONLY :	9777.13008

PARAMETER	PARAMETER	STANDARD ERROR	TEST FOR H0:	
	ESTIMATE	OF ESTIMATE	PARAMETER=0	PROB> T
INTERCEPT	0.7917	0.5136	1.5414	0.1296
kidgrp	0.2634	0.1232	2.1387	0.0375
agecat.1	-0.3441	0.4260	-0.8077	0.4232
agecat.2	-1.4565	0.2751	-5.2938	0.0000
agecat.3	-2.0697	0.2318	-8.9277	0.0000
agecat.4	0.0557	0.4012	0.1389	0.8901

TEST	F VALUE	NUM. DF	DENOM. DF	PROB>F
OVERALL FIT	25.0699	5	45	0.0000
kidgrp	4.5742	1	49	0.0375
agecat[5]	28.3019	4	46	0.0000

Appendix C

Other Studies

OTHER STUDIES

Testa, M. (2002). Subsidized guardianship: Testing an idea whose time has finally come. *Social Work Research*, 26(3), 145-158.

Testa, M. (2001). Kinship care and permanency. *Journal of Social Service Research*, 28(1), 25-43.

Testa, M., & Cook, R. (2001). The Comparative safety, attachment, and well-being of children in kinship adoption, guardian, and foster homes. Paper presented at the Annual Research Conference. Association for Public Policy, Analysis and Management. Washington, DC, November 3, 2001.

Testa, M. (2000). Kinship care and social policy. In *First National Roundtable on Implementing the Adoption and Safe Families Act: Summary of Proceedings* (pp. 121-136). Englewood, CO: American Humane Association.

Appendix D

EVALUATION OF THE
ILLINOIS SUBSIDIZED GUARDIANSHIP
WAIVER DEMONSTRATION

by

WESTAT, INC.

Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration

Final Report

Revised May 2003

Prepared by:

Westat

1650 Research Boulevard
Rockville, MD 20850-3195

Prepared for:

Illinois Department of Children and Family Services
100 West Randolph, 6th Floor
Chicago, Illinois 60601

EVALUATION OF THE
ILLINOIS SUBSIDIZED GUARDIANSHIP
WAIVER DEMONSTRATION

FINAL REPORT

Revised May 2003

Prepared by:

Westat
1650 Research Boulevard
Rockville, MD 20850-3195

Prepared for:

Illinois Department of Children and Family Services
100 West Randolph, 6th Floor
Chicago, Illinois 60601

TABLE OF CONTENTS

EXECUTIVE SUMMARY	E-1
1. STUDY OVERVIEW	1-1
1.1 Introduction	1-1
1.2 Study Design	1-2
1.2.1 Research Questions	1-3
1.2.2 Sample Design	1-4
1.2.3 Data Collection.....	1-7
1.2.4 Response Rates.....	1-9
1.2.5 Data Collection Challenges.....	1-12
1.2.6 Data Collection Instruments.....	1-14
2. IMPLEMENTATION	2-1
2.1 Historical Review of Kinship Foster Care.....	2-1
2.2 Subsidized Guardianship.....	2-5
2.3 Training	2-8
2.4 Perceptions About and Support for the Subsidized Guardian Initiative.....	2-11
2.5 Post-Guardianship Services.....	2-17
3. CHARACTERISTICS OF CHILDREN AND CAREGIVERS.....	3-1
3.1 Caregiver Characteristics.....	3-1
3.2 Child Characteristics.....	3-4
3.3 Summary.....	3-6
4. PERMANENCY AND DECISIONMAKING.....	4-1
4.1 Permanency Rates and Plans	4-1
4.2 Stability and Safety.....	4-6
4.3 Caseworker Interactions with Caregivers.....	4-7
4.4 Caregiver Beliefs About Permanency and Knowledge of Permanency Options... 4-9	
4.4.1 Caregiver Opinions About Adoption and Raising Children	4-9
4.4.2 Knowledge About Adoption	4-12
4.4.3 Knowledge of Differences Between Adoption and Guardianship	4-13
4.5 Rate of Achieving Permanency from Survival Analysis.....	4-15
4.5.1 Overall Rates of Achieving Permanency	4-20
4.5.2 Rate of Adoption.....	4-26
4.5.3 Rate of Entering Subsidized Guardianship	4-32
4.5.4 Summary	4-35
5. PERMANENCY, STABILITY AND SAFETY FROM THE CHILD’S PERSPECTIVE.....	5-1
5.1 Comparisons Between the Demonstration and Cost Neutrality Groups.....	5-2
5.1.1 Demographics	5-2
5.1.2 Permanency	5-4
5.1.3 Stability	5-6
5.1.4 Safety	5-7
5.1.5 General Well-Being	5-8

TABLE OF CONTENTS (CONTINUED)

5.1.6	Summary and Conclusion About Differences Between the Demonstration and Cost Neutrality Groups	5-9
5.2	Comparisons Between the Subsidized Guardianship and Adoption	5-9
5.2.1	Demographics	5-10
5.2.2	Permanency	5-11
5.2.3	Safety	5-13
5.2.4	Relationship with Biological Parents	5-14
5.2.5	Child’s Relationship with Caregiver and Others in the Household	5-20
5.2.6	General Well-Being	5-22
5.2.7	Conclusion.....	5-24
6.	THE ROLE OF SUPPORT NETWORKS	6-1
6.1	Subsidized Guardianships Versus Adoption	6-2
6.2	Kin Status Versus Demographic Characteristics and Socio-Economic Status	6-8
6.3	Kin Status Versus Stability and Well-Being	6-10
6.4	Social Support.	6-13
6.5	Conclusions	6-14
7.	FINDINGS AND IMPLICATIONS.....	7-1
7.1	Findings	7-1
7.2	Implications	7-5
7.2.1	Subsidized Guardianship Supports Increased Permanency for Children in Foster Care	7-5
7.2.2	The Child Welfare System Must Translate This New Alternative Into Practice and Philosophy	7-5
7.2.3	Enduring Success Will Require an Appropriate Network of Post-Placement Services	7-10
APPENDIX A: Differences Between the Demonstration and Cost Neutrality Groups for Children Interviewed with ACASI		A-1
APPENDIX B: Survival Analysis		B-1

TABLE OF CONTENTS (CONTINUED)

LIST OF TABLES

Table 1-1	Caregiver response rates	1-10
Table 1-2	Response rates - Child ACASI interviews	1-10
Table 2-1	Work experience and training	2-10
Table 2-2	Completed training in subsidized guardianship by completed subsidized guardianships	2-10
Table 2-3	Knowledge about subsidized guardianship	2-13
Table 2-4	Accuracy of knowledge	2-14
Table 2-5	Accuracy of knowledge by experience and training	2-14
Table 2-6	Selected attitudes about adoption and guardianship	2-16
Table 3-1	Distribution of caregiver's age, sex, and race by assignment group	3-2
Table 3-2	Distribution of caregiver's marital, employment, and education status by assignment group	3-3
Table 3-3	Distribution of caregiver's household income by assignment group	3-4
Table 3-4	Distribution of child's sex, race, and age by assignment group	3-5
Table 3-5	Children's disabilities by assignment group	3-6
Table 4-1	Child's placement status by assignment group at the end of the initial and followup interviews	4-2
Table 4-2	Permanency plans by assignment group at the time of the initial interview	4-3
Table 4-3	Child's placement status by planned permanency	4-5
Table 4-4	Permanency plans by assignment group at follow-up interview	4-5
Table 4-5	Percentage of children whose caregiver felt pressured into adopting at the time of the followup interview by assignment group	4-8
Table 4-6	Percentage of children whose caregiver felt pressured into permanency at the time of the followup interview by assignment group	4-8

TABLE OF CONTENTS (CONTINUED)

LIST OF TABLES (CONTINUED)

Table 4-7	Caregivers' level of agreement with statements about adoption at followup by permanency status	4-10
Table 4-8	Caregivers' level of agreement with statements about adoption at followup by subsidized guardianship vs. adoption.....	4-12
Table 4-9	Percentage of children whose caregiver believed that the adoption statements were true by permanency status at follow-up interview.....	4-13
Table 4-10	Percentage of children whose caregiver agreed with the statements about adoption and guardianship at followup by permanency status.....	4-14
Table 4-11	Distribution of children in the survival analysis.....	4-18
Table 5-1	Living arrangements	5-3
Table 5-2	Length of time with caregiver.....	5-4
Table 5-3	Permanency status by assignment group	5-4
Table-5-4	Foster care children's reasons why they want their current home to be permanent .	5-5
Table-5-5	Foster care children's reasons why they do not want their current home to be permanent.....	5-6
Table 5-6	Child's identification of alternate living plan	5-7
Table 5-7	Demographics and living arrangements by status.....	5-10
Table 5-8	Feelings about current living arrangements by status.....	5-11
Table 5-9	How things have changed since guardianship or adoption by permanency status.....	5-12
Table 5-10	Safety issues by permanency status: Physical punishment.....	5-13
Table 5-11	Safety issues by permanency status: Other punishment	5-14
Table 5-12	Caregivers' relationship with child's biological parents.....	5-15
Table 5-13	Caregivers' relationship with child's biological parents: Kin vs. nonkin.....	5-16
Table 5-14	Child's relationship with biological mother: Kin	5-17

TABLE OF CONTENTS (CONTINUED)

LIST OF TABLES (CONTINUED)

Table 5-15	Child’s relationship with biological father: Kin	5-18
Table 5-16	Child’s relationship with biological mother: Kin	5-19
Table 5-17	Child’s relationship with biological father: Kin	5-20
Table 5-18	Child’s relationship with caregiver	5-21
Table 5-19	Social support inside and outside home	5-21
Table 5-20	School performance	5-22
Table 5-21	Prevalence of pregnancy for children ages 12 and older	5-23
Table 5-22	Prevalence of alcohol and illegal substance use for children ages 12 and older....	5-23
Table 5-23	Prevalence of risk behaviors by permanency status: All children	5-24
Table 6-1.	Demographic characteristics by permanency status.....	6-2
Table 6-2	Socio-economic status by permanency status.....	6-3
Table 6-3	Child stability by permanency status	6-4
Table 6-4	Child well-being by permanency status	6-5
Table 6-5	Educational performance by permanency status.....	6-7
Table 6-6	Kinship status by permanency status	6-8
Table 6-7	Demographic characteristics by kinship status	6-9
Table 6-8	Socio-economic status by kinship status.....	6-10
Table 6-9	Child stability by kinship status	6-10
Table 6-10	Child well-being by kinship status.....	6-11
Table 6-11	Educational performance by kinship status	6-12
Table 6-12	Child stability by social support	6-13
Table 6-13	Child stability by kinship status in high support families	6-14
Table 6-14	Child stability by kinship status in low support families	6-14

TABLE OF CONTENTS (CONTINUED)

LIST OF TABLES (CONTINUED)

Table A-1 Demographics by assignment group..... A-1

Table A-2 Living arrangements by assignment group A-2

Table A-3 Foster care children’s feelings about permanency by assignment group..... A-3

Table A-4 Stability by assignment group..... A-4

Table A-5 Feelings about current living arrangements by assignment group..... A-4

Table A-6 Safety issues by assignment group A-5

Table A-7 Well being by assignment group..... A-6

Table A-8 Social support by assignment group A-6

Table A-9 Physical health by assignment group..... A-7

Table A-10 Substance abuse by assignment group..... A-7

Table A-11 Caregiver’s relationship with child’s biological mother..... A-8

Table A-12 Child’s relationship with biological mother..... A-9

Table A-13 Caregiver and child’s relationship with biological father A-9

Table A-14 Child’s relationship with biological father..... A-10

Table B-1 Factors that are significant at the 1% level when predicting permanencyB-5

Table B-2 Factors that are significant at the 1% level when predicting adoptionB-5

Table B-3 Factors that are significant at the 1% level when predicting subsidized guardianship.....B-6

Table B-4 Logistic regression results.....B-7

TABLE OF CONTENTS (CONTINUED)

LIST OF FIGURES

Figure 4-1 Overall percentage of children achieving permanency versus time since assignment to the demonstration 4-19

Figure 4-2 Permanency for children eligible for and not eligible for subsidized guardianship 4-21

Figure 4-3 Permanency versus age at assignment 4-22

Figure 4-4 Permanency versus assignment quarter 4-23

Figure 4-5 Permanency by length of time in foster care prior to assignment..... 4-24

Figure 4-6 Permanency for children in, or not in, the home of a relative (HMR)..... 4-25

Figure 4-7 Adoption by assignment quarter 4-27

Figure 4-8 Adoption by prior time in foster care..... 4-28

Figure 4-9 Adoption by age at assignment for Chicago and Peoria 4-29

Figure 4-10 Adoption by age at assignment for East St. Louis 4-30

Figure 4-11 Adoption by age and whether the child lives in the home of relative at assignment..... 4-31

Figure 4-12 Subsidized guardianship by age..... 4-33

Figure 4-13 Subsidized guardianship by HMR and assignment quarter 4-34

Executive Summary

Like many states, Illinois experienced a tremendous increase in the growth of foster care and the use of relative foster care providers from 1986 to 1995. The number of children in formal relative care grew sevenfold, with more than half of the children in foster care residing in the homes of relatives.

Since 1995, the Illinois Department of Children and Family Services (DCFS) has implemented several policy initiatives to increase permanent living arrangements for children. One initiative involved submitting a waiver application in July 1995 to the U.S. Department of Health and Human Services to provide subsidized guardianship as an alternative to long-term custody when adoption is not a feasible option. Subsidized guardianship provides a means to assume parental responsibility and authority without severing parental rights. The key goal of the subsidized guardianship initiative is to improve permanency outcomes for a selected group of children in the care and custody of the State through a redesign of services, policy, and financing.

In September 1996, Illinois obtained a Title IV-E child welfare waiver allowing DCFS to receive Federal reimbursement for a guardianship subsidy program. The program parallels the adoption subsidy program by subsidizing the cost of care provided by relative caregivers and foster parents who assume private guardianship responsibilities of foster children, who otherwise would have remained in DCFS custody.

Evaluating the Demonstration

The IV-E waiver required a formal evaluation of the program. DCFS contracted with Westat and its community partners, Centers for New Horizons, Volunteers of America, and the Tri-County Urban League to conduct the evaluation.

Study Purpose. The study evaluated whether subsidized guardianship improved permanency outcomes for children by examining how subsidized guardianship was implemented, for whom it was most effective, and what factors within the child welfare system and the larger service delivery environment facilitated or inhibited program success.

It was hypothesized that the introduction of the subsidized guardianship option results in fewer children remaining in long-term foster care without detracting from the number of children

being adopted. The effect of subsidized guardianship on child stability, safety, and well-being is also of paramount importance.

Study Design. The evaluation used the classical experimental design, which is required to establish causal connections between interventions and outcomes. The State designed a random assignment experiment that assigned all eligible children to either a demonstration group or a cost neutrality group. The children and families were randomly assigned over a 2-year period and included those families eligible to become guardians as of October 1, 1996.⁹

Children eligible for the evaluation lived in one of three geographic regions of the Illinois DCFS: Cook Central Region, East St. Louis Sub-region, or the Peoria Sub-region. Those in the demonstration group were provided the option of subsidized guardianship, while those in the cost neutrality group were provided only the preexisting permanency options in effect prior to January 1997.

A two-step random sampling process was used to select the survey households. First households were assigned and then children were selected within the households. The assignments were performed for eight quarterly periods starting on October 31, 1996 and ending on September 30, 1998.

The study used a longitudinal design with two rounds of data collection on the status and outcomes of the children and caregivers. The first round, completed in the spring of 1999 provided baseline information on families and children as well as early information on permanency decisions. Both caregivers and children over age 8 were interviewed during the period of July 1998 through spring of 1999.¹⁰ The second round of data collection was conducted during the period of June 2000 to February 2001. The follow-up interview provides information for this report on the outcomes of families who have been in the demonstration for 2 to 4 years.

Caregivers were interviewed using a combination of computer-assisted in-person and telephone interviews. Children were interviewed in-person with an audio computer-assisted self-interview (ACASI). Westat's three local community-based partners, Centers for New Horizons, Tri-County Urban League and the East St. Louis Office of the Volunteers of America of Illinois, helped manage the data collection for the demonstration. These community partners acted as

⁹ Eligibility criteria for subsidized guardianship include: a child must have been in legal custody of the state for 2 years or more and the child must have lived with a prospective guardian for at least 1 year prior to establishing the guardianship. Households then became eligible based on the eligibility of the children. Regulations were modified to allow consistency with State and Federal permanency regulations requiring a permanency plan within 1 year of legal custody with the state. To avoid inconsistency with adoption subsidy guidelines which do not allow a subsidized adoption for children under the age of three, it was decided to allow designation of eligibility after 1 year in foster care, but the agreement cannot be finalized until a child has been in care for 2 years.

¹⁰ Preliminary findings from the baseline data collection are found in the Westat report, [Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration: Preliminary Findings](#).

local advisers for their site and identified, hired, trained and supervised Temporary Assistance to Needy Families (TANF) recipients as field associates to conduct the ACASI child interviews.

A Research Advisory Committee (RAC) convened by the African American Family Commission and DCFS provided ongoing input into the design of the data collection instruments and implementation of the research. The RAC, comprised of representatives from the community, service agencies, DCFS and the court, ensures that the research reflects an understanding of the groups and communities being studied.

This report presents the final results from the second round of interviews. Only children whose caregivers were interviewed during the initial round were included in the interviews.

Characteristics of the Study Population

The demonstration and cost neutrality groups were similar in their demographic characteristics. The average age of the caregivers was 51 for both groups; they were predominantly female (94 percent) and African American (78 percent). Most were unmarried (60 percent).

The caregiver's employment status, education, and earnings were also similar for caregivers in the two groups. Less than half (47 percent) were employed full or part time. Thirty-six percent of caregivers did not graduate from high school and about one-quarter of the caregivers' education ended with high school graduation. Another one-quarter of all caregivers had attended college and around 10 percent had graduated from college. Forty-two percent of caregivers reported household earnings of less than \$20,000; 30 percent had household earnings between \$20,000 and \$40,000 a year; and more than one-quarter (28 percent) reported household incomes of more than \$40,000 per year.

The households interviewed at followup had a total of 2,869 sampled children. There were no differences between the demonstration and cost neutrality groups on demographic characteristics of the children. The child study population at followup was split evenly between female and male. The majority of children were African American (85 percent). The average age was 10 and the median age was 9. Thirty-five percent of the children were reported to have physical, emotional or learning disabilities at the time of the followup interview.

Findings

The evaluation was designed to test the impact of providing the option of subsidized guardianship on permanency, stability, subsequent abuse and neglect reports, family functioning, and child well-being. The findings on the key research questions are addressed below.

Does subsidized guardianship increase permanent placements for children in foster care without detracting from the number of children being adopted? The overall rates of permanency were higher for children in the demonstration group than for children in the cost neutrality group both at the time of the initial interview and at followup. This translates into fewer children remaining in long-term foster care with ongoing administrative oversight for those in the demonstration group. However, at the time of the followup interview, subsidized guardianship had begun to supplant adoption, resulting in fewer children in the demonstration group being adopted.

The best way to see the effect of introducing subsidized guardianship as a permanency option is to see its impact on children over time. For those children in the demonstration group, the relative rate of achieving permanency is 25 percent higher than the children in the cost neutrality group.

To what extent does subsidized guardianship effectively protect children's safety? One concern that the subsidized guardianship demonstration raises is whether children will be placed at greater risk of harm once they are no longer part of the child welfare system, and regular administrative oversight and casework services are withdrawn from the family. Safety was measured first by looking at administrative reports of child abuse and neglect that followed an adoptive or guardian placement. There were very few reports for children in adoptive or guardian placements and there was no difference in the percentage of reports for children in the two groups. Secondly, in the child interview, children were asked questions about their feelings of safety in their homes and reports of physical punishment. On issues of safety, there were no significant differences between the demonstration and cost neutrality groups or between children who had been adopted and those in guardianship. Together, the administrative data on children in the sample and reports by the children themselves indicated that the safety of children in the demonstration group was not compromised.

Does the demonstration help families make long-term commitments to the child(ren) and increase the child(ren)'s perception that they are part of a stable family? *What impact does the subsidized guardianship demonstration have on the well-being of children and their*

Appendix D

families? For children sampled for the study, stability was measured in two different ways: From a stability index created from questions in the caregiver interview about the child, and through children's response to questions about their feelings of stability and belonging in their homes.

According to data from the caregiver interview, more children in guardianship experienced high stability (56 percent) than did children in the adoption group (48 percent). Both children who had been adopted and those in guardianship reported high levels of stability. Ninety-three percent of children in both groups said that they thought they would be living with their caregiver in the following year and similar percentages of children (92 percent for subsidized guardianship and 89 percent for adoption) said that they feel like part of the family all or most of the time.

We found no difference in well-being between children in the demonstration group and those in the cost neutrality group from information reported in either the caregiver interview or the child interview. We also found no difference between children in guardianship and those who had been adopted in the well-being measures of emotional health, physical health, or disability. Children in guardianship were less likely to exhibit anti-social behaviors than children who had been adopted. However, caregivers reported that children who were adopted had better school performance than children who were in guardianship. Measures of well-being from the child interview found no overall differences in well-being between children who had been adopted and those in guardianship.

Providing the option of guardianship gave families more opportunities to achieve permanency without having a negative impact on well-being.

Does the demonstration result in fewer disrupted placements? According to the Illinois administrative data system, most children who had been adopted or entered subsidized guardianship remained in those placements at the time of the followup interview. Overall, there were very few disruptions with less than 1 percent of children moving out of their permanent placement. Similar percentages of disruption occurred within the cost neutrality (1.1%) and demonstration groups (1.2%).

How is the demonstration implemented and operated for the cost neutrality and demonstration groups? *How are the goals and objectives of the subsidized guardianship demonstration perceived by supervisory and casework staff in DCFS and private agencies?*

The rules and regulations for the demonstration went into effect March 1, 1997. At that time, eligibility criteria, assessment procedures, forms and legal steps were put into place.

Appendix D

Human Service Technologies (HuTech) provided the training and technical assistance for the guardianship initiative. Training began in September 1996 and focused on adoption, permanency planning, and how guardianship fit into the permanency alternatives for families. Trainers noted a slow “buy in” by many public and private agency personnel. Some agency caseworkers expressed concern that pushing families toward guardianship and adoption detracts from reunification efforts. DCFS decided it was necessary to launch a concerted effort in January 1998 to encourage the use of the subsidized guardianship option.

There were conflicting attitudes about the use of subsidized guardianship versus adoption. The conflict was most pronounced among public agency staff and court hearing officers. Hearing officers expressed concern that subsidized guardianship was not as permanent as adoption. In addition, many felt that the adoption rule-out would not be followed and some children, appropriate for adoption, might be referred for subsidized guardianship. Some were concerned that the initiative would be used by caseworkers to move cases to permanency more quickly without focusing on the best interest of the child. This was particularly a concern for young children who historically have had a better chance of being adopted.

Others in the court system voiced strong support for the subsidized guardianship initiative. Proponents of subsidized guardianship saw it as a permanency option for children unlikely to be adopted, providing a means of more quickly dealing with the backlog of child welfare cases. Court personnel believed that the initiative allowed children to remain with relative caregivers without the intra-family problems that might arise when parental rights need to be terminated. Supporters also thought that subsidized guardianship provided a means to ensure that services documented in the subsidy agreement would be continually available to families, even after a child was permanently placed and there was not agency oversight.

Initially there was skepticism among foster parents about the subsidized guardianship initiative. Among those interviewed, there was a lack of trust that the program would continue for those enrolled past the 5-year waiver. Some thought the State wanted primarily to save money, rather than promote stability and permanency. However, as the initiative progressed some of this skepticism abated, as evidenced by interview data with caregivers and discussions with agency staff.

As more families accepted guardianship, the need for post-guardianship services became more pronounced. At the start of the demonstration, the need for post-guardianship services was not fully anticipated by DCFS and very limited services were provided. Later in the demonstration, the State created a continuum of services to assist both post-adoption and post-guardianship families using a combination of DCFS units and contracted services with private

agencies. A hotline for information and referrals provided listings of community services. DCFS contracted with ten private agencies to directly provide intensive home-based case management and treatment for families at risk of disruption. Preservation workers described aging guardians and guardians of emotionally disturbed teenagers as families particularly vulnerable to disruption unless services were provided to help shoulder the burden of raising the children.

Implications

These findings suggest a number of implications for future policy considerations and service delivery. Beyond the findings, the data collected raised several new questions and highlighted aspects of the demonstration that provide useful lessons for replicating the initiative. Three of the most important themes are:

1. Subsidized guardianship supports increased permanency for children in foster care

Subsidized guardianship does what Illinois policymakers expected it to do. It increases the rate of permanency and provides an additional option for families who do not want to or cannot consider adoption.

Subsidized guardianship was especially successful with older children who are typically more difficult to place in adoptive homes or who are not interested in breaking their legal ties with their birth parents. In the demonstration, younger children were still more likely to be adopted. For those concerned that adoption should be the first choice for younger children, monitoring of this trend is necessary. If a higher percentage of younger children begin to exit through subsidized guardianship, it will be important to determine whether this is a result of family interest or systemic barriers to completing adoption.

2. The child welfare system must translate this new alternative into practice and philosophy

Philosophy must be carefully crafted into clear and consistent policy and procedures. Several areas identified during the evaluation include: the interpretation of the adoption rule-out; preparing families for permanency; and, effective implementation strategies.

The adoption rule-out. The adoption rule-out as defined in DCFS policy, gives priority to the advantages of the legally binding nature of adoption. Adoption must be explored and eliminated as a possibility before subsidized guardianship can be considered. Interpretation of the adoption rule-out varies by region, child welfare position, and personal values. The question of who should rule out adoption—caseworkers, the court or the family—is a lingering one for the state to consider.

Appendix D

Underlying this question are issues of how to define permanency and whether permanency should be decided by families, the courts, or caseworkers. From the child and caregiver perspective, subsidized guardianship is just as permanent as adoption. There were no differences between the demonstration and cost neutrality groups in the number of children who thought that they would continue to live with their caregiver in the next year. The great majority (90 percent) of the children in each group shared the belief that their home was a stable one.

Caseworkers were not as clear. Their attitudes were mixed. It appears that caseworkers still perceive adoption to be the preferred permanency alternative, but there is uncertainty about the effect of the options on children. While a clear majority of the workers agreed that guardianship is as permanent for children as adoption, an even greater percentage believed that adoption gives greater security than guardianship. It appears that workers place greater value on the relationship created by adoption, although they do not necessarily believe that adoption is more permanent. This uncertainty complicates the application of the adoption rule out policy.

There were also differing opinions among court officials. For example, outside the Chicago area, the court can complete a guardianship in 1 month, while the process of terminating parental rights in preparation for adoption takes a minimum of 6 months. Judges interviewed expressed comfort with this “fast-track” alternative to adoption, as long as caseworkers carefully “ruled out” adoption as an option for the family. Other court representatives, especially hearing officers in Cook County, suggested that ‘adoption rule out’ was not necessary, since subsidized guardianship should stand alone as a permanency option. The churning of philosophy between individual families, caseworkers and court needs conformity.

Families must be prepared for permanency, while the children are still in foster care. To help insure the success of subsidized guardianship and adoption, families need preparation prior to discharging a child from state custody. In focus groups with caseworkers, many spoke of needing training in getting families ready for permanency. Some families, especially those that had been in the system for many years were caught off guard after permanency. They were surprised that caseworkers would no longer visit the home. Some agencies reported that families were calling them for continued services. While families wanted to have children maintain contact with birth parents some were concerned about maintaining children’s safety. DCFS directed the families to post-guardian services, a contract handled by other agencies. However, counseling and discussion about accessing community resources and handling other crises must begin while the DCFS is actively involved with children in the state’s custody. This “independent living” training for families needs to be emphasized as part of caseworkers’ responsibility for foster care cases.

The subsidy agreement for adoption or guardianship outlines family and Department expectations. Preparation for permanency culminates with this agreement. The subsidy agreement

serves as a vital tool to transition the family into permanency. It describes the subsidy amount and delineates any services the child is eligible for after the case is closed. Families and caseworkers need a comprehensive understanding of developing subsidy agreements, how to work together to include necessary provisions, and how to prepare for future needs. One component of the agreement allows for establishing directions for standby guardianship, if necessary. Standby guardianship allows a continuous transfer of the custody of the child in the event the caregiver is unable to continue care for the child. This is particularly critical in maintaining stability for children placed with older guardians.

Effective implementation strategies. DCFS took a very inclusive approach with the implementation of subsidized guardianship. For oversight, a coordinating committee was set up with representatives of the different units at DCFS, as well as representatives from each region participating in the demonstration. In addition, a Research Advisory Committee (RAC) was established at the time of submission of the proposal to the Federal Government. The RAC, received a budget from DCFS to follow and advise the implementation of the demonstration. The RAC set up two committees to explore implementation and evaluation issues.

The RAC was a fast connection to and from the child welfare community. Invitees from DCFS, universities, community agencies and caregivers participated. The researchers were invited to sit on the committee so that evaluation efforts were consistent with community values and communicated changes in demonstration procedures and to capture feedback from casework staff, court personnel and caregivers. Forums were held periodically in all three sites of the demonstration to get feedback from private agencies, caregivers and regional DCFS staff about how the demonstration was proceeding. This pressure encouraged DCFS to keep the community advised of procedural changes and fine tune operations throughout the process. The Commission took leadership in promoting the distribution of up to date descriptive information about subsidized guardianship, emphasizing its difference from adoption. A locality or state that attempts such a major shift must allocate staff and dollar resources for the implementation.

3. Enduring success will require an appropriate network of post-placement services

The tremendous increase in permanencies, both adoptions and subsidized guardianships, requires continued availability and access to services for the families created by these options. The service needs of families do not stop when permanency is obtained. After-care service provisions are increasingly important to prevent dissolution of subsidized guardianship and adoption. The state has put their emphasis on both specialized preservation services for families at risk of breaking up and on services provided through local area networks (LANs). LANs were

Appendix D

developed and funded throughout the state so communities could individualize services offered, based on the other resources available in the community.

First, consider the group of older caregivers. Thirteen percent of all caregivers were reported to be over 65 years of age. The age of caregivers for children in subsidized guardianship is significantly greater than those of children adopted. For children adopted or who completed subsidized guardianship early in the demonstration, standby guardianship was not emphasized. Later in the initiative, it was discussed more broadly and, according to many court personnel, invoked more often. As caregivers age, health concerns can become more serious or chronic and may affect placement stability. Co-guardianships were also considered by some courts, allowing two family members to share the responsibility. One possibility is to explore contacting families who completed permanency early on in the demonstration to discuss the option of adding a standby guardian to the agreement.

Children adopted and in subsidized guardianship were identified by caregivers as having special needs, 34 percent in both groups. Emotional health and anti-social behaviors were particularly apparent with teenagers. While for many, the subsidy agreement included the promise of services; these services were restricted to pre-existing conditions. Better identification of these needs prior to developing the agreement and a mechanism for providing subsequent services for new problems might prevent dissolution for both adopted and guardianship families.

Practice has assumed that children in permanent placements will have continual support after they reach the age of majority. Several notes of caution appear in the interview data with caregivers. Around a quarter of caregivers that adopted children disagreed that “you are responsible for adopted children after age 18.” Half of subsidized guardians disagreed that “you are responsible for children in subsidized guardian after age 18.” These answers suggest that transition services for youth should be offered to all youth, regardless of their plan or placement.

Moreover, the economically disadvantaged status of most caregivers, regardless of type of placement, reveals that these families may need to receive many vital services. In short, public policies should be designed to enhance the positive functioning of children in a variety of living arrangements by providing strong social and economic support, lessening the chance of dissolution of permanent placements.

1 STUDY OVERVIEW

1.1 Introduction

Informal and formal kinship care arrangements play an important role in living arrangements for children. The Census Bureau estimates that 1.5 million children are living in grandparent-headed households with no parent present in the home (US Bureau of the Census, 1997). This total does not include the children being raised by aunts, uncles, siblings, or other relatives. Kinship care has increasingly become an arrangement that operates within the formal child welfare system. It is estimated that more than one-fourth of the children in the out-of-home care system are in kinship care arrangements (Child Welfare League of America, 1996). The growth in kinship care in Illinois is consistent with this national trend. The number of children in formal kinship care grew sevenfold over 10 years. At the start of the waiver, more than half of the children in the Illinois foster care system resided in the homes of relatives. Although some relatives are willing to consider adoption, it is believed that many kin caregivers are reluctant to participate in the termination of parental rights due to the potential for family conflict or because they believe formal adoption is unnecessary among family members.

Subsidized guardianship provides a means for kin to assume parental responsibility and authority without permanently severing parental rights. However, there are major financial and legal barriers to transferring guardianship responsibilities from the state to relatives. To provide the option of subsidized guardianship, the Illinois Department of Children and Family Services (DCFS) submitted a waiver application in July 1995 to the Federal Department of Health and Human Services (DHHS) to provide subsidized guardianship as an alternative to long-term custody when adoption is not a feasible alternative.

In September 1996, Illinois obtained a Title IV-E child welfare waiver. The Illinois Subsidized Guardianship Waiver Demonstration permits DCFS to receive Federal reimbursement for a guardianship subsidy program which parallels the adoption subsidy program. This program subsidizes the cost of care by relative caregivers and foster parents who assume private guardianship responsibilities for foster children who otherwise would remain under DCFS guardianship. As part of the waiver, a formal evaluation of the program was conducted. DCFS

contracted with Westat and its community partners, Centers for New Horizons, Volunteers of America, and the Tri-County Urban League, to conduct the evaluation.

The overall purpose of the evaluation was to test the feasibility of offering subsidized guardianship as a permanency option and to examine its effect on the safety, permanency of care, and well-being of children and their families. The study uses a treatment (demonstration) and control (cost neutrality) group experimental design to develop the net impact estimates for the introduction of a subsidized guardianship program into the child welfare delivery system. While the subsidized guardianship program was implemented throughout the state, the experiment was conducted in three geographical regions—Cook Central Region, East St. Louis Sub-Region, and Peoria County. Westat and its partners conducted two waves of interviews on a sample of caregivers and children from these regions.

1.2 Study Design

The key goal of the subsidized guardianship program is to improve permanency outcomes for a selected group of children in the care and custody of the state through a redesign of services, policy, and financing. When reunification with parents is not feasible, the caregiver may be able to continue to provide a safe, stable, nurturing home for the child through legal guardianship. Adoption by kin has sometimes been problematic as a plan for permanence in the child welfare system. Some kin have been reluctant to pursue it because of its potential impact on their relationship with the child’s birth parents, or they view it as unnecessary because of existing family relationships. Subsidized guardianship offers a permanent, legal relationship without severing parental ties or changing family relationships.

Illinois’ subsidized guardianship program is to be cost neutral to the Federal government. The study assessed whether subsidized guardianship could improve permanency outcomes. This was accomplished by examining how subsidized guardianship was implemented, for whom it was most effective, and the factors within the child welfare system and the larger service delivery environment that facilitated or inhibited program success. The classic experimental design used in this study is the best way to determine causal connections between interventions and outcomes. The cost neutrality group received the “regular services” of the child welfare system—it was not

a no-treatment control group. Thus, we studied the effects of the experimental services relative to services that would have been provided in the absence of the subsidized guardianship option.

1.2.1 Research Questions

The evaluation provided reliable estimates of the net impact of providing the option of subsidized guardianship on permanency, stability, subsequent abuse and neglect reports, family functioning, and child well-being. The following research questions and hypotheses guided the evaluation.

Does the demonstration result in fewer children remaining in long-term foster care with ongoing administrative oversight? Subsidized guardianship was designed as a permanency option for caregivers unable or unwilling to adopt children in their care. We hypothesize that providing caregivers with another permanency option reduces the number of children in the demonstration group who remain in long-term foster care, relative to the cost neutrality group. A related question is whether the guardianship option supplants the number of families who choose adoption. The effect of guardianship on the rate of adoption is assessed by comparing the adoption rate in the demonstration group to that in the cost neutrality group.

To what extent does subsidized guardianship effectively protect children's safety? *Does the withdrawal of regular administrative oversight and caseworker services from the families in the subsidized guardianship program increase the rate of subsequent abuse and neglect reports?* One concern that the subsidized guardianship demonstration raises is whether children are placed at greater risk of harm once they are no longer part of the child welfare system, and regular administrative oversight and casework services are withdrawn from the family. Some of this concern is based on much apprehension of the nature of the original risk to the children. In Illinois, actual physical or sexual abuse accounts for less than 20 percent of indicated reports. The majority of substantiated reports are due to lack of supervision and risk of physical injury.

Does the demonstration help families make long-term commitments to the child(ren) and increase the child(ren)'s perception that they are part of a stable family? *What impact does the subsidized guardianship demonstration have on the well-being of children and their families?* Subsidized guardianship awards caregivers legal responsibility for children until the

children are 18 years of age. Many children residing with kinship caregivers do live with their caregivers for long periods of time, regardless of whether their relationships have been made legally permanent. However, we hypothesize that caregivers' willingness to make children's living arrangements legally permanent results in a greater sense of stability, security, and belonging among children. Additionally, it is necessary to determine if caregivers and children perceive guardianship as being as stable as adoption, and whether there are differences in the commitments made across guardianship, adoption, and foster care groups. If there is no difference between adoption and guardianship, and guardianship increases the number of children in permanent relationships, more children overall will experience a sense of stability.

Does the demonstration result in fewer disrupted placements? We hypothesize that disruption rates for adoptive and subsidized guardianship rates are similar, leading to similarly low rates of disruption in the demonstration and cost neutrality groups.

How is the demonstration implemented and operated for the cost neutrality and demonstration groups? *How are the goals and objectives of the subsidized guardianship demonstration perceived by supervisory and casework staff in DCFS and private agencies? What effect has training had on the implementation of the subsidized guardianship program?* The attitudes of caseworkers and their supervisors may influence the acceptance and promotion of subsidized guardianship as a viable permanency option. Understanding the parameters of program implementation provides the context for interpreting study results.

1.2.2 Sample Design

The subsidized guardianship demonstration was implemented statewide. To evaluate the effectiveness of the demonstration the state designed a random assignment experiment that assigned all eligible children from three geographic regions to either a demonstration or cost neutrality group. Those in the demonstration group were provided the option of subsidized guardianship, while those in the cost neutrality group were provided the regular services and permanency options in effect in Illinois prior to January 1997. Eligibility criteria for subsidized guardianship included: (1) a child must have been in legal custody of the state for 2 years or

Appendix D

more immediately prior to establishing guardianship,¹¹ and (2) the child must have lived with the prospective guardian for at least 1 year immediately prior to establishing the guardianship. Households then become eligible based on the eligibility of the children. For the evaluation, eligible children were only those living in one of three geographical regions of Illinois: Cook Central Region, East St. Louis Sub-Region, or Peoria County. Through the National Opinion Research Center (NORC), a sampling plan and randomization procedures were implemented which assigned children to either the demonstration or cost neutrality groups. Children and families were randomly assigned over a 2-year period and included those families eligible as of January 1, 1997, through December 31, 1998. The survey results include households and children who were assigned through September 1998.

The survey design has a stratified sample of households and a cluster sample of children within households. From those households eligible for the study, we used a two-step random-sampling process to select the households to be included in the interviews. An additional sampling step selected children within the households for detailed data collection.

The first step in the random sampling process was to divide the eligible households into three groups:

1. Those assigned to the randomized study, which included those offered guardianship and those in the cost neutrality group.
2. Those assigned to a cost control group unrelated to the randomized study. These households were not offered guardianship.
3. The remainder who had subsidized guardianship as an option.

The assignments described above were performed for eight quarterly periods starting on October 31, 1996, and ending on September 30, 1998. NORC performed assignments for the first six quarters under contract to DCFS. Westat performed the assignments for the last two quarters.

For the assignments performed by NORC, the providers were divided into strata defined by type of foster care and DCFS region. Each provider was assigned a foster care type by DCFS. The possible foster care types were relative care, foster care, and specialized foster care. For each stratum, DCFS set the number of households to be assigned to the randomized study. In addition,

¹¹ Midway through the study the state changed eligibility from being in legal custody for 2 years to 1 year.

Appendix D

the age of the oldest subsidized guardianship-eligible child within each household at the time of the assignment was determined. The households were selected with decreasing probability as the age of the oldest child increased to maximize the number of children in the sample eligible for guardianship who would still be under the age of 19 at the time of the follow-up interview.

The sample in the first quarter was much larger than for subsequent quarters. Subsidized guardianship was established shortly before the first quarterly sample. Therefore, the first sample included many providers with children who had lived in the foster home for more than the minimum time for subsidized guardianship eligibility. For subsequent quarters, the sample included only providers who were not previously sampled and who had children who had become eligible in only the previous quarter.

For the last two quarters, there was concern about not having enough eligible providers for the randomized study. Therefore, for the assignments performed by Westat, all eligible providers were assigned to the randomized study.

The second step of the random sampling process selected households for data collection. In order to get more information about subsidized guardianship, all households with children who were in subsidized guardianship were included for data collection. Therefore, some of the households included in data collection were those eligible for guardianship but not part of the cases randomized for the study.¹²

Up to this point, the random assignment and selection applied to the sampling of households. However, the primary focus of the study is on children. Children older than age 8 completed an interview themselves. Proxy information about children younger than 8 years old was collected from the caregiver.¹³

To obtain as much information as possible directly from the children, they were selected from the sampling household for the detailed interviews such that:

1. There was a high probability of selecting a child in subsidized guardianship;

¹² Subsidized guardianship cases not randomly assigned were only included in analysis comparing adoption and subsidized guardianship. They were not included in the cost neutrality vs. demonstration group analyses.

¹³ Caregivers were also asked about children over 8 years old.

Appendix D

2. Children older than 8 years at the time of the interview had a higher probability of selection than children younger than 9; and
3. No more than three subsidized guardianship-eligible children were selected from each household.

The random selection of households for data collection and children for detailed data collection was performed at three times and included households assigned in:

1. Quarters 1 through 6, excluding those from quarter 6 with only eligible children under age 9 (October 1996 – March 1998);
2. Quarter 7 and including those from quarter 6 with only eligible children under 9 (April – June 1998); and
3. Quarter 8 (July – September 1998).

Because the sampled households were randomly selected, sampling weights can be used to draw conclusions about all of the households assigned to the randomized study. For a household or child, the base sampling weight is the inverse of the probability of selection and is, in a statistical sense, the number of households or children represented by the sampled household or child. The base sampling weights have also been adjusted to account for nonresponse and used to draw conclusions about all households in the sampling frame. The weighted survey results are estimates for those households and children represented by the respondents. In general, the weighted results are a better approximation to the final study results than the unweighted results, as they take into account the clustering effect of children living in the same household.

1.2.3 Data Collection

Data collection involved a longitudinal study. Data were collected on the status and outcomes of the children and caregivers with whom they lived at two points in time. The first wave of data collection, initially scheduled to run from July through December of 1998, collected baseline information on families and children as well as early data on permanency decisions for those who accepted subsidized guardianship or adopted prior to the initial interview. Both caregivers and children were interviewed. Due to special data collection challenges discussed in section 1.2.5 below, data collection for the baseline interview was extended through the spring of 1999. The second round of data collection for the final follow-up interview was originally

Appendix D

scheduled for 2001 to collect outcome data on permanency and child well-being. The date for the follow-up interview was moved forward to the summer of 2000. This was done to provide more immediate data about the subsidized guardianship program, as policy decisions about the direction of the program had to be made before analyses on the data from a 2001 interview could be completed. The follow-up interview in 2000 provided information on the outcomes of families who had been in the demonstration for 2 to 4 years.

Westat partnered with three local community-based agencies to manage the data collection effort for the demonstration: Centers for New Horizons in Cook County, the Tri-County (Peoria) Urban League, Inc., and the East St. Louis office of the Volunteers of America. These community partners played three important roles in the demonstration. First, they served in an advisory capacity to provide feedback on the study design and instrument development. Second, they provided information on the implementation of the guardianship demonstration in the communities they served. Third, they identified, screened, hired, and supervised Temporary Assistance to Needy Families (TANF) recipients to work as field associates to help conduct the child interviews.

A Research Advisory Committee (RAC), convened by the African-American Family Commission and DCFS and composed of representatives from the community, service agencies, DCFS, and the court, provided ongoing input into the design of the data collection instruments and the implementation of the research. The RAC and community agencies provided an excellent vehicle for ensuring that the research reflected an understanding of the community being studied. The RAC met quarterly throughout the study to discuss pertinent research issues and to organize community forums at each of the three sites to keep the local communities informed about the guardianship demonstration and the evaluation.

Baseline interviews were conducted with caregivers identified by the state as legally responsible for the care of the children in the demonstration and with sampled children ages 9 and older. Caregivers were interviewed using a combination of in-person and telephone interviews, and children were interviewed in-person with an audio computer-assisted self-interview (ACASI). Caregivers whose families had been randomly assigned to the demonstration or cost neutrality groups from October 1 to December 30, 1997, were interviewed at baseline by Westat interviewers using a computer-assisted personal interview (CAPI). Families who became eligible for the demonstration in 1998 were interviewed by a computer-assisted telephone interview

Appendix D

(CATI). We found no differences in data quality for CAPI versus CATI methods of administration.

Field associates hired and supervised by Westat's community partners set up the laptop computer for the child interviews. For the baseline interview, Westat interviewers were paired with field associates so the teams could conduct the caregiver and child interviews simultaneously in the families' homes. In practice, the logistics of scheduling interviews around the schedules of four to five individuals (the Westat interviewer, the field associate, the caregiver, and one or two children) necessitated some child interviews being conducted at a later date than the caregiver interview. Based on our multi-mode experiences for the baseline, we decided that the second caregiver interview could be effectively conducted by CATI. This led to a change in procedures for the follow-up interview. Field associates and Westat interviewers were no longer paired. Instead, Westat interviewers continued to be responsible for the caregiver interview. They tracked caregivers, identified changed caregivers, and completed the interview by telephone. Once the caregiver interview was completed, field associates contacted the households to conduct in-person interviews with the children over 8 years old.

Additionally, the caseworkers of sampled children were asked to complete a self administered questionnaire on their perceptions of and experiences with subsidized guardianship and adoption. For each child in the sample, we identified the current worker (as of June 1999) from administrative data. If a child had already exited care, we identified the caseworker that worked with the child prior to the child's exit. If the last worker was no longer employed at the child agency, we substituted the child's previous worker. We constructed sampling weights to draw conclusions about the sample of children selected for the study. The analysis was conducted on the children and their associated caseworkers. It is not representative of all caseworkers in DCFS and the private agencies.

1.2.4 Response Rates

Caregivers. As discussed in Section 1.2.2, the sample design includes both children assigned to the demonstration and cost neutrality groups and the households (caregivers) in which the children are residing. Of the 8,522 children in the sample frame, 8,079 were selected for the study sample for data collection. At the time of selection, the children lived in 3,786 households

(caregivers). We present the response rates by caregiver, consistent with the logistics of how we fielded the interviews. Interviews with 2,268 caregivers were completed in the first round of data collection. Of the originally sampled 3,786 caregivers, approximately 20 percent no longer had at least one of the originally assigned children in their homes. For the second interview, only those cases where a caregiver had been interviewed during the first round were targeted for follow-up data collection. If a caregiver changed between the first and second rounds, the new caregiver was interviewed. Table 1-1 provides the response rates for caregivers for both rounds of data collection. Overall, 67 percent of eligible caregivers were interviewed at baseline.¹⁴ At followup, interviews with 87 percent of the caregivers of children included in the baseline interview were completed. New caregivers added between rounds 1 and 2 numbered 607. There was no significant difference in response rates between the demonstration and cost neutrality groups.

Table 1-1. Caregiver response rates

	Baseline Interview		Followup Interview	
	Demonstration	Cost Neutrality	Demonstration	Cost Neutrality
Original Sample	1922	1864	--	--
Added Caregivers	375	391	--	--
Total Cases Fielded	2297	2255	1483	1364
Ineligible Cases	-549	-616	-342	-302
Total In Scope Sample	1748	1639	1141	1062
Completed Cases	1183 (68%)	1085 (66%)	998 (88%)	915 (86%)

Children. Children over 8 years old were asked to complete an ACASI interview. 1223 interviews were completed at baseline. For the followup interview, only those children whose caregiver completed a baseline interview were included. 1072 interviews were completed. Table 1-2 provides the response rates for children for both rounds of data collection. Overall, 57 percent of the children over 8 were completed at baseline and 62 percent at followup. Children who aged out of the foster care system or were 19 or older at the time of the followup interview were not interviewed. As with the caregivers, there was no difference in response rates between the demonstration and cost neutrality groups.

Table 1-2. Response rates – Child ACASI interview

	Baseline Interview		Followup Interview	
	Demonstration	Cost Neutrality	Demonstration	Cost Neutrality
Original Sample	1330	1310	984	994
Ineligible Cases	-230	-274	-128	-130
Total In Scope	1100	1036	856	864
Completed Cases	618 (56%)	605 (58%)	544 (64%)	528 (61%)

¹⁴ Ineligible cases included those where the caregiver had moved out of the study area, or had been replaced by another caregiver, or did not speak English; where the child was being cared for by an institution, or where the caregiver was a duplicate of another caregiver already in the study.

Caseworkers. We mailed surveys to 1184 caseworkers in November 1999. Starting in January 2000, field associates at Centers for New Horizons called non-responding caseworkers to encourage them to complete the survey. A total of 615 caseworkers (52%) returned completed surveys. Five caseworkers explicitly refused to complete the survey, and 186 caseworkers had left their agencies. The majority of the staff turnovers were private agency caseworkers.

Non-Response Adjustment. As described above, a set of sampling weights was created to weight the information from the responding children up to all children assigned to the demonstration. These sampling weights adjust for non-response, taking into account the fact that different groups of children have different probabilities of responding. The weight for each responding child can be thought of as the number of similar children represented by that child.¹⁵

Assuming all sampled children respond to the survey, the sampling weights are determined by the sample design, i.e., how the sample of children was selected. The sum of the sampling weights is equal to the number of children in the population from which the sampled children were selected. When some children do not respond to the survey, the sum of the sampling weights for the responding children is less than the number of children in the population. Assuming that each child has the same probability of responding is equivalent to assuming that the non-respondents are like the respondents. Using this assumption, the adjusted sampling weights can be calculated by scaling up the sampling weights for the respondents so that the total of the adjusted weights equals the number of children in the population. However, if the probability of responding is not the same for all children, the weighted survey values may provide biased estimates of the corresponding population values. Therefore, logistic regression was used to determine if different groups of children had different probabilities of responding and to identify factors that predict the probability of responding. Administrative data, which included information about responding and non responding children was used to run the regression. The results of the logistic regression were then used to adjust the sampling weights for non-response to minimize any possible bias in the survey estimates.¹⁶

¹⁵ The set of weights includes the “full sample” weight, used to calculate the estimate from the survey data, and multiple “replicate weights” used to calculate the precision of the survey estimate.

¹⁶ Because different numbers of children responded for the round 1 and round 2 interviews and the ACASI interviews, different sets of weights were created for each round of data collection and for the ACASI interviews. Similar sets of weights were also created to weight the information from the responding providers up to all providers assigned to the demonstration. An additional set of weights were created to weight up to all children and all providers in the DCFS regions covered by the demonstration. For answering questions about the effect of offering or not offering subsidized guardianship the appropriate set of weights must be used corresponding to the data used for the analysis and the population to which the inference is to be made.

1.2.5 Data Collection Challenges

This study presented several data collection challenges which necessitated extending the field period for the baseline interview to complete a sufficient number of caregiver and child interviews. The first challenge was the accuracy of the address information provided by the state. This information was incorrect for about 25 percent of the cases. Although new data were provided by the state as they became available, lags in the reporting of changes in addresses or caregivers by the private agencies (who were responsible for 70 percent of the cases) meant that these newer state data files often were still not current. Several processes were put in place to try to locate families who had moved, including standard tracing techniques such as directory assistance and canvassing neighbors, as well as contacting agencies about individual cases and asking agencies to provide updated lists of the current caregiver names and addresses for all sampled children in their agency.

A second challenge to efficient data collection was the state's required consent procedure. The state has a guardianship administrator's office that is responsible for all children in the legal custody of the state. Prior to giving permission to interview a child, this office required that the state be satisfied that the interview would not distress or hurt the child. To meet this requirement, letters were sent out in July 1998 to the caseworkers of each child to be interviewed asking whether an interview would be harmful. As individual confirmations by caseworkers were returned, interview materials were produced for that child and his or her caregiver. This procedure often resulted in delays of several months before cases could be fielded. For over 200 families (about 350 children), caseworkers had still not responded 7 months after the initial request, despite repeated follow up. For these cases, the state gave Westat permission to contact the caregivers about interviewing the children—provided Westat added an additional data collection step. In this step, the Westat interviewers read a form to the caregivers asking whether the interview would be harmful to their children. If the caregiver said the interview would be harmful, only the caregiver was interviewed. Before conducting follow-up interviews, caseworkers of children still in foster care were recontacted to gain permission to conduct the second interview.

A third challenge in data collection was the dispersion of cases across a larger geographic area than anticipated. Many of the cases in Peoria and East St. Louis were in surrounding towns as far away as 2 hours by car. Some of the cases in Cook Central were also located in outlying

Appendix D

Chicago suburbs more than 60 miles from the boundaries of Cook Central. Travel to these outlying regions proved time consuming to the interviewers, particularly when addresses were not always correct.

A fourth data collection challenge was the practice of pairing Westat interviewers and field associates to complete the interviews in the caregiver's home at the same time. While some pairs worked well together and completed most of their interviews in pairs, other pairs were rarely able to coordinate their schedules with each other and with the respondents to be at the home at the same time. Consequently, many caregivers were interviewed first, and the field associates were required to visit the home at a later date to complete the child interview. In some cases, the field associates found the families had moved before they could complete the child interview. As described above, this led to changing procedures for the follow-up interview.

A fifth challenge was identifying changed caregivers. At the time of the baseline interview, approximately 20 percent of the children were living with caregivers other than those they had been assigned to at the time of random assignment. By the time of the followup interview, a similar percent had changed caregivers. Tracking these changes and locating the new caregiver also affected the final response rates.

Given these data collection challenges, many families were not interviewed as early in the field period as initially designed, and the field period had to be extended. Many families who were enrolled in the demonstration in January through June of 1997 were interviewed approximately 18 months after they became eligible for guardianship (in the demonstration group), so the initial interview not only collected baseline information but collected information on families' plans 18 months after becoming eligible for guardianship. Because a number of families were not interviewed until close to 18 months after being enrolled in the demonstration, a planned 18-month interim CATI for caregivers was eliminated from the data collection schedule. For families that became eligible for the demonstration in 1998, the final follow-up interview encompasses information from the period of 18 months after enrollment in the demonstration through the date of the interview.

1.2.6 Data Collection Instruments

To assess change over time, caregiver and child instruments included the same questions for the baseline and follow-up interviews. The caregiver instrument addressed the issues of household composition, agency services received, the placement history of all sampled children, caregiver interest in and knowledge about adoption and the subsidized guardianship program, permanency planning, children's school performance, children's physical and mental health, caregiver's physical and mental health and sources of support, family dynamics (including interactions with the child's biological parents), and household finances. The caregiver interview was pre-tested with a sample of relative foster parents in Chicago before all questions were finalized. The caregiver interview took an average of 70 minutes to complete. Telephone interviews used the same instrument.

The child interview addressed the children's relationships with the caregiver and others in the home, relationships with biological parents and other family members outside the home, connectedness with the community, school attendance and performance, physical and mental health, self-efficacy, services received, and feelings about permanency. The instrument was developed and pretested using focus groups and individual interviews with foster care children in Chicago to explore conceptual issues and test question wording and the usability of the ACASI. The child interview was self-administered, with a computer voice reading the questions and response options as they appeared in print on the screen. Children selected their answers by pressing a touch-sensitive screen on the laptop computer. The field associates were responsible for setting up the laptop computer for the child, instructing the child in the use of the tutorial, and monitoring the child's successful completion of the tutorial. At the conclusion of the tutorial, the field associate placed headphones on the child so the child could complete the interview in privacy. The child interview took an average of 35 minutes to complete. Only children whose caregivers completed an interview were interviewed.

The caseworker instrument explored caseworker values and training with respect to permanency options such as adoption and subsidized guardianship. It also gathered information about the worker's education, work experience and caseload size.

Appendix D

Finally, administrative data were also used to obtain information about the length of time children spent in care, child abuse and neglect substantiations, and disruptions from adoption and subsidized guardianship.

The following chapters present the results of the surveys as well as information collected through site visits and in-person interviews with agency and court staff. Chapter 2 describes the implementation of the subsidized guardianship program and caseworkers' opinions of and experience with the program. Chapter 3 presents the demographic characteristics of caregivers and children included in the demonstration. Chapter 4 describes how the demonstration effected permanency rates and caregivers' decisions about permanency. Chapter 5 details permanency, stability, and safety from the children's perspective. Chapter 6 examines the role of support networks and kin in decisions about permanency and outcomes for children and families. A summary of findings is presented in Chapter 7.

2 IMPLEMENTATION

This chapter provides a brief review of kin care in the Illinois foster care system, the impetus for developing a subsidized guardianship program, a brief overview of the program, and some of the implementation challenges that have been faced.

2.1 Historical Review of Kinship Foster Care

From 1984 to 1986, there was equilibrium in the Illinois foster care system with admissions equaling discharges at around 7,200 children for each year. Then, like many other states, Illinois saw a rapid increase in its foster care population from 1986 to 1995. Just as in New York and California, the growth was clearly connected to the increase in children in relative care and a growth in foster care placements in the urban centers, primarily Cook County in Illinois (Goerge, Wulczyn, and Harden, 1994).

The rapid increase in Illinois's foster care population was the result of a combination of two trends: A moderate increase in admissions coupled with declining numbers of discharges each year. First admissions increased to over 12,000 per year by 1993, while there was a corresponding decrease in discharges to about 6,600 children per year (Wulczyn and Goerge, 1993). DCFS attributes the growth in the foster care population not only to poverty and drug abuse, but also specifically to policy decisions that took place in the early 1990s. These include DCFS' decision to take legal control and change the legal status of children in Home of Relative (HMR) or extended family care, and the court injunction to stop DCFS from encouraging relatives to accept private guardianship (DCFS Memorandum, 1997). With 50 percent of the caredays in 1993 being used by HMR, it was clear that any initiative to decrease the foster care population needed to address the kinship care population.

Policy Direction in Response to Increased Foster Care Population. DCFS took several policy steps to deal with the tremendous growth in the foster care population and kinship care, particularly since the mid-1990s. Initiatives described here address both admissions and discharge dynamics.

Appendix D

In 1995, Illinois implemented the HMR plan. The plan made legislative changes in the definition of neglect—the grounds for which many children were removed for placement. Leaving a child in care of relatives without an adequate care plan was no longer grounds for indicating neglect and formal entry into the system. Instead, a child safety assessment would be conducted to ensure a child’s safety. If the child was already living with a relative with no allegation against the relative and there were minimal or no protective needs, the child was not considered neglected and was not made a ward of the state. Instead, relatives could receive an Aid to Families with Dependent Children (AFDC), “child only” grant. If a child became a DCFS ward and was placed in a non-licensed relative home, then the relative would be paid the AFDC standard-of-need rate.¹⁷ If the relative’s home was licensed, then the foster care rate would be paid.

Policy action was also taken to increase the rates of discharge of children in relative care. Illinois created a program, Delegated Relative Authority (DRA), to continue Title IV-E eligibility for a group of kinship families that no longer needed continuous state intervention. A new category of staff was created with caseloads of 80 families, similar to the ratio of licensing units. Minimum supervision was provided, but families were able to receive their same level of foster care payment, and the state would continue to receive IV-E maintenance and Medicaid payments. Due to a lack of interest, particularly by private agencies, the DRA is no longer used as a viable option.

Starting in 1996, admissions to foster care began to slow. To encourage significant reductions in the number of children in foster care, DCFS introduced four initiatives: Purchase of service redesign, performance contracting, the permanency initiative, and the Title IV-E Federal waiver for subsidized guardianship. With the implementation of these initiatives, the number of children in foster care—and specifically those in relative care—dropped dramatically. In June 1996, the number of children in HMR care was 27,873 (DCFS, March 2001). By March 2002, the number of children in HMR care had declined to 9,715, a decrease of 65 percent.

Purchase of service (POS) redesign. POS redesign was implemented in Cook County in early 1996. POS redesign was implemented to clarify and strengthen the role of community agencies in the delivery of services to children and their families. With the POS redesign, DCFS

¹⁷The passage of the Welfare Reform Act (1997), replaced AFDC with TANF.

Appendix D

removed DCFS staff from their role as POS case managers and reassigned a small number of them as private agency monitors. DCFS also reconfigured its mix of service provision by public and private agencies, with responsibility for approximately 70 percent of the caseload given to the private agencies. Private agency caseloads grew from 24 percent of the total caseload in July 1989 to nearly 80 percent by June 1999. Prior to the redesign, there were essentially two caseworkers for each case placed with a private agency, the private agency worker and the DCFS case manager. The new monitoring teams were established to monitor the performance of private agencies and not individual cases. They were responsible for monitoring private agency performance with respect to such issues as court attendance, placement decisions, and administrative case review attendance.

The intent of this initiative was to ameliorate the delays in transferring cases to private agencies, improve the monitoring of private agencies, and provide incentives to agencies to be responsive to community needs. The POS redesign also set the stage for the implementation of performance-based contracting. Performance based contracting and the permanency initiative were introduced simultaneously with the subsidized guardianship program to increase permanency outcomes.

Performance-based contracting. Performance contracting, was announced in 1997 as a new contracting initiative for the public and private foster care agencies. It changed the way that DCFS conducted business with private child welfare agencies by defining desired permanency outcomes and holding agencies accountable for achieving such outcomes. It is used as a mechanism to accelerate the discharge of children from long-term foster care. Performance contracting involves a combination of rewards and penalties designed to encourage positive permanency outcomes. Agencies are paid a fixed amount each month per worker's caseload. They are expected to move approximately one-third of the children to permanent placements each year and must accept an equal number of new referrals. Agencies that exceed permanency expectations benefit from lower caseloads without a reduction in administrative income. However, agencies that do not meet permanency goals experience higher caseloads without an increase in administrative income. If an agency exhibits poor performance, state sanctions are given by placing referrals on hold. This results in a loss of income, and if poor performance continues, a loss of the contract.

Appendix D

As part of performance contracting, DCFS reduced the number of children in each caseworker's caseload. From a budgeted average of 25 children per worker at the beginning of the initiative, DCFS reduced the standard to 22.5, starting in FY2000. Caseworkers now have more time to spend with each child and family, especially to plan permanency.

Initial discussions with public and private agency staff identified some concerns that families were being pressured into permanency arrangements. Due to the pressures of performance contracting, some caseworkers were telling foster parents they must adopt or accept guardianship, or DCFS would take the children out of their home.

The permanency initiative. With the advent of the Federal Adoption and Safe Families Act, DCFS implemented legislative changes affecting permanency planning for children. The permanency initiative went into place in Cook County as of September 1, 1997, and throughout the entire state as of January 1, 1998. The purpose of the initiative was to quickly engage families in the reunification process when their children were placed with the DCFS and to set new time limits for permanency decisions. In essence the Act requires that a permanency hearing be held at 12 months at which time the judge will set a permanency goal. A child in protective custody is to be monitored every 6 months after the permanency hearing. The new permanency initiative outlined various steps to be taken by caseworkers, supervisors, and the courts to help families move toward permanency. These included an extended temporary custody hearing to review case plans, a comprehensive assessment completed on the family within 21 days, weekly supervisory meetings with the caseworker, development of service plans at 30 days following the temporary custody hearing, and a court family conference.

Rules for the administrative case review process were also modified to meet the new permanency timeframes and move the 12-month permanency hearing to the courts. Some concerns were raised by public and private agency staff that the permanency initiative did not provide adequate time to work toward reunification and that families were going to be pushed into permanency decisions too quickly.

2.2 Subsidized Guardianship

In July 1995, DCFS submitted a IV-E waiver application to the Federal DHHS to expand alternatives for permanency for children in long-term care. In September 1996, Illinois was selected by DHHS to provide subsidized guardianship as a permanency alternative for children in care for over 2 years.

The demonstration initiative provides Illinois with a platform to further decrease foster care caseloads. The challenge is to balance the needs of the state system to protect children, bring down costs, and bolster stability and permanency for children in and moving out of foster care. DCFS believes that it can accomplish the goal of greater permanency for children with subsidized guardianships as an additional tool.

The subsidized guardianship initiative is based on the premise that the special characteristics of kinship foster care inhibit children from moving into permanent homes through the established permanency options of reunification and adoption. To date, research has indicated that relatives are often uncomfortable with adoption. It is an option that is seen as an adversarial process that has parents working toward terminating their son's or daughter's parental rights. It's a particularly difficult decision for older children who have the right to accept or reject a permanency goal. On the other hand, some children in kin foster homes were already living there prior to the state's taking custody. In these instances, children who are already "home" would be returned home. There is also the belief that many relatives already believe that having their grandchild, niece, or nephew in the home is permanent, and there is no need to engage in a bureaucratic process to make it permanent.

Guidelines for subsidized guardianship. The rules and regulations for the subsidized guardianship demonstration went into effect March 1, 1997, and they define the eligibility criteria, assessment process, forms preparation, and legal steps.

A child's caseworker can recommend subsidized guardianship for children who meet the following criteria:

Appendix D

- The child has to have been in legal custody of the state for 2 or more years prior to being eligible for guardianship.
- The child must have lived with the prospective guardian at least 1 year prior to being eligible for guardianship.
- Both reunification of the child with his or her parents and adoption must be ruled out as permanency goals for the child before guardianship is to be offered.
- A child must be 12 years old to be considered for subsidized guardianship in the home of an unrelated foster parent. This rule can be waived if it is in the best interest of the child as determined by the caseworker and approved by the DCFS Guardianship Administrator. Workers may deem guardianship is in the best interest of a younger child due to the length of time in the home, the characteristics of the caregiver, or the special needs of the child. An exception may also be sought for children under 12 if they have a sibling 12 or older in the same household who meets the subsidized guardianship requirements.
- Parents may consent to subsidized guardianship or DCFS may proceed for good cause to seek a private guardianship without parental consent. If DCFS proceeds without parental consent, notice must be given of the petition hearing.
- The prospective guardian must have no record of felony convictions.
- A child 14 years of age or older must consent to the subsidized guardianship living arrangement.

With the advent of new state permanency regulations, the guardianship rules were modified to allow children to be eligible after 1 year in legal custody of the state. However, this change created conflict with the adoption regulations, which do not allow subsidized adoptions to take place unless a child is at least 3 years old. Because the change could create a situation in which children under 3 years of age could become eligible for guardianship before being eligible for adoption, subsidized guardianship eligibility is established after 1 year but not implemented until a child has been in care for 2 years.¹⁸

The new regulations translated into additional administrative tasks and activities. Procedural changes and eligibility determination required additional paperwork. Staff interviewed indicated that preparation for these new tasks was insufficient, which caused delays in determining eligibility and getting the program off the ground. Those interviewed stressed the importance of planning for the impact that paperwork and system changes have on service

¹⁸ On July 1, 2002 the criteria for an adoption subsidy changed, requiring that a child had to be one year of age. At this time, the on year/one year rule for subsidized guardianship was also implemented.

Appendix D

delivery. They suggested that if more time had been given to prepare the community for the initiative, agency staff and families would have been brought on board more quickly.

Some of the more salient issues affecting the initial implementation of subsidized guardianship are summarized below. The survey with caseworkers provides information for this discussion. As described in Chapter 1, we surveyed current caseworkers of sampled child about their background characteristics, professional training and attitudes about subsidized permanency of children, especially subsidized guardianship. We present the background characteristics of the workers here as context.¹⁹

Caseworker characteristics. Seventy-one percent of the children's workers in this survey identified themselves as caseworkers or case managers, 11 percent identified themselves as supervisors and 18 percent identified themselves as performing the functions of both positions. About the same proportion of children's caseworkers (85 percent) and supervisors (87 percent) worked in private agencies, while 75 percent of the workers who identified with both positions worked in the private sector.

Forty percent of the supervisors were male, compared to only one-fifth of the caseworkers (18 percent) and those in both functions (20 percent). Two-fifths (39 percent) of the supervisors were 40 years of age or older, compared to 17 percent of the caseworkers and 44 percent of the workers with both functions. Two-thirds (66 percent) of the supervisors were white, compared to 46 percent of the caseworkers and 36 percent of the workers with both functions. As expected, supervisors had much higher educational attainment than other workers. Ninety-five percent of the supervisors had graduate degrees, compared to only 15 percent of the caseworkers and 24 percent of the workers with both functions.

Worker's position is important, when considering who got trained first and best. Training is presented in the next section.

¹⁹ These demographics describe the characteristics of the children's caseworkers. Because a caseworker can represent more than one child, these data do not capture all DCFS or private workers, just those that served the sampled children.

2.3 Training

Training for caseworkers began in September 1996, at the onset of the demonstration, and focused on adoption, permanency planning, and how subsidized guardianship fit into the permanency options for families.²⁰ Besides the theoretical aspects of subsidized guardianship, the training provided information on how to implement the program, including rules and procedures, filling out the paperwork, subsidy, and court proceedings. The training consisted of a 2-day session for lead caseworkers, supervisors, and administrators, with the intent that those trained would educate other team members about the program. By the spring of 1997, the training was condensed to a 1-day session focusing on the practical steps of subsidized guardianship, with the hope that stressing the “nuts and bolts” would reach more staff. Everyone who attended training received a manual. The original manual was revised in spring 1997, with addenda sent out periodically. DCFS also provided a hotline where caseworkers and supervisors could call with questions about subsidized guardianship.

Trainers interviewed felt that it might have been better to split the first training into two sessions, one focusing on the theoretical and the second on the practical aspects, once some of the implementation details had been worked out. This was especially true with respect to the court due to regional differences in court requirements. Training began before workers even had distribution lists for who was eligible for guardianship. Therefore, the training could not be immediately applied. Workers also felt overwhelmed by the number of system-wide changes that were occurring and the fact that training for each new initiative needed to be scheduled around the same time.

In January 1998, a concerted effort was made to push the implementation of subsidized guardianship. Training efforts were targeted to 15 agencies to provide intensive help on getting cases to move toward permanency. The training began with meetings with administrators to get them to “buy” into the process. These meetings were followed by ongoing meetings with staff to review cases and identify permanency targets for cases. As cases were assessed as appropriate for subsidized guardianship, caseworkers were urged to set up meetings with families. After family meetings were conducted, subsidized guardianship and legal screening packet workdays were scheduled to help get the subsidy paperwork completed.

²⁰ Human Service Technologies (HuTech) provided the initial training and technical assistance component of the subsidized guardianship project.

Appendix D

Trainers indicated that ongoing obstacles to training workers included getting workers to refer to the written resources provided to them, having agencies identify workers who need training, supervisors not always taking an active role in their caseworkers' cases, and the number of system-wide changes that workers experienced.

DCFS distributed informational materials about subsidized guardianship to most workers, but many did not have training by early 1999. In the caseworker survey, we asked each child's worker about training. Workers who performed both functions as caseworkers and supervisors had more training in subsidized guardianship (76 percent) than caseworkers (43 percent) or supervisors (46 percent). On the other hand, supervisors (85 percent) were more likely to complete subsidized guardianship cases than caseworkers (55 percent) or workers (65 percent) who had both functions. As shown in Table 2-1, most workers in each group had some experience completing an adoption. Regardless of their position, workers were similarly likely to receive subsidized guardianship manuals and guidelines.

Table 2-1. Work experience and training

Work Experience and Training	Total	Caseworker	Both	Supervisor
Completed Training in Subsidized Guardianship^a				
Yes	49	43	76	46
No	51	57	24	54
Total %	100%	100%	100%	100%
Weighted N	13,400	9,400	2,600	1,500
Unweighted N	2,315	1,655	416	244
Completed Adoption Cases				
Yes	87	86	91	89
No	13	14	9	11
Total %	100%	100%	100%	100%
Weighted N	13,400	9,300	2,600	1,500
Unweighted N	2,319	384	416	248
Completed Subsidized Guardianship^b				
Yes	60	55	65	85
No	40	45	35	15
Total %	100%	100%	100%	100%
Weighted N	13,400	9,400	2,600	1,500
Unweighted N	2,319	1,655	416	248
Received Guardianship Manuals				
Yes	70	70	76	59
No	30	30	24	41
Total %	100%	100%	100%	100%
Weighted N	13,200	9,300	2,400	1,500
Unweighted N	2,273	1,623	394	256

^a $X^2=33.57$, $p=.001$ ^b $X^2=16.93$, $p=.001$

Workers who were trained in subsidized guardianships were more likely to complete subsidized guardianship cases than those who did not receive this training (see Table 2-2). Seven out of ten (71 percent) workers who were trained in subsidized guardianship completed subsidized guardianship cases, compared to only five out of ten workers (51 percent) who did not receive subsidized guardianship training.

Table 2-2. Completed training in subsidized guardianship by completed subsidized guardianship cases

Completed Subsidized Guardianship Cases^a	Received Training in Subsidized Guardianship	
	Yes	No
Yes	71	51
No	29	49
Total %	100%	100%
Weighted N	6,700	6,800
Unweighted N	1,143	1,194

^a $X^2= 19.87$, $p<.001$

2.4 Perceptions About and Support for the Subsidized Guardian Initiative

Initially there was skepticism among foster parents about the subsidized guardianship program. According to those interviewed, there was a lack of trust that the guardianship program would last beyond the 5-year waiver and that the subsidy would be continued. Some foster parents believed that the purpose of the initiative was to save money, not to promote stability and permanency. As the initiative has continued, some of the skepticism has abated, as seen by the number of foster parents who have decided to participate in the program.

There were also misperceptions about the parameters of the guardianship program. In our initial discussions with public and private agency staff, we heard that guardians did not always have a firm understanding of the program. For example, some guardians did not realize that a caseworker would not continue making home visits and others were confused about what post-guardianship services would be available.

Some eligible families were not informed about the guardianship program. This was evidenced by interview data as well as reports by agency staff. A letter to all guardianship-eligible foster parents with an explanation of the program had been planned since the program began, but experienced many delays. In June 2000, DCFS published a finalized version of Making the Adoption/Guardianship Decision: A Guide for Families. The booklet is a thorough summary of resources and services available for adoption and subsidized guardianship to help families determine which permanency option is right for them.

Public and private agency staff were also initially confused about the subsidized guardianship program, particularly regarding the availability of post-guardianship services. Post guardianship services do not include tutoring, or respite care.²¹ Yet, in our interviews, some staff reported that these services would still be available to caregivers. Others workers believed that services that were still available (e.g., graduation fees, scholarships and payment for college) were no longer available for families who had chosen guardianship. Some of this confusion may have been due to changes in policy about college payment and scholarships. However, it also identifies the need for ongoing training and circulation of updated manual materials, especially as

²¹ As of July 1, 2002 subsidies include day care for children under three if the only caregiver works.

new caseworkers are hired by agencies. In 1999, DCFS published a guide for staff and families that summarized available resources for both post-adoptive and post-guardianship families.²²

Knowledge about subsidized guardianship. We asked workers about their knowledge of subsidized guardianship in the caseworker survey. In order to assess the workers' knowledge about subsidized guardianship, they were asked to agree or disagree with the following five statements:

1. A caseworker will continue to make visits to the home to check on how things are going.
2. A subsidized guardian will be able to get counseling or other services directly from the foster care agency.
3. A subsidized guardian will be legally responsible for the care and supervision of the child.
4. A subsidized guardian can make school, medical, and out-of-state travel decisions for the child without first having to get permission from DCFS.
5. A subsidized guardian could easily give back guardianship to the state if things don't work out.

There was strong agreement among the workers about the correctness of statements three and four. However, workers appeared to be most divided about statement five, that a subsidized guardian could easily give back guardianship to the state (see Table 2-3). Nearly half of the study children's caseworkers indicated they believed that a guardianship could be easily given back to the state. In-person interviews with agency and court staff also identified this concern about the "permanency" of subsidized guardianship. There was concern that the option was not as permanent as adoption because it was not legally binding. Responses to both the survey and the in-person interviews indicate a need for further clarification of the parameters of subsidized guardianship.

²² DCFS published a revised guide, Post Adoption and Guardianship Services 2000 in July 2000.

Table 2-3. Knowledge about subsidized guardianship

Knowledge about Guardianship	Total
A caseworker will continue to make visits to the home to check on how things are going.	
True	12
False	88
Total %	100%
Weighted N	13,400
Unweighted N	2,311
A subsidized guardian will be able to get counseling or other services directly from the foster care agency.	
True	30
False	70
Total %	100%
Weighted N	13,300
Unweighted N	2,302
A subsidized guardian will be legally responsible for the care and supervision of the child.	
True	98
False	2
Total %	100%
Weighted N	13,400
Unweighted N	2,317
A subsidized guardian can make school, medical, and out-of-state travel decisions for the child without first having to get permission from DCFS.	
True	97
False	3
Total %	100%
Weighted N	13,400
Unweighted N	2,245
A subsidized guardian could easily give back guardianship to the state if things don't work out.	
True	44
False	56
Total %	100%
Weighted N	13,000
Unweighted N	2,283

Impact of work experience and training. What effect did work experience and training have on the accuracy of knowledge? The first four questions, shown in Table 2-3, were combined into an index. As shown in Table 2-4, 63 percent of all workers answered all four questions correctly, while 37 percent had 1-3 questions correct. As shown in Table 2-5, workers who felt

Appendix D

they were more prepared for assessing or completing subsidized guardianships answered more questions correctly than workers who felt less prepared.

Table 2-4. Accuracy of knowledge

Accuracy of Knowledge	Total
1-3 questions correct	37
All four questions correct	63
Total %	100%
Weighted N	13,400
Unweighted N	2,314

Table 2-5. Accuracy of knowledge by experience and training

Experience and Training	1-3 correct	4 correct	Unweighted N	Weighted N
Feel prepared in assessing appropriateness of case for adoption ^a				
Less prepared	52	48	100%(329)	1,700
More prepared	37	63	100%(1891)	11,000
Feel prepared in assessing appropriateness of case for subsidized guardianship ^b				
Less prepared	63	37	100%(513)	2,900
More prepared	33	67	100%(1709)	9,900
Feel prepared for completing cases for subsidized guardianship ^c				
Less prepared	49	51	100%(641)	3,700
More prepared	35	65	100%(1447)	8,500
Completed subsidized guardianship ^d				
Yes	34	66	100%(1414)	8,200
No	48	52	100% (919)	5,300

^a $X^2=5.06, p<.05$

^b $X^2=27.77, p<.001$

^c $X^2=6.50, p<.01$

^d $X^2=11.75, p<.001$

Attitudes toward subsidized guardianship. Some agencies have been slow to embrace the guardianship project. Some agency staff indicated that pushing families toward guardianship and adoption detracted from providing reunification services. Others believed guardianship was not as permanent an option as adoption, and therefore not a good alternative.

Appendix D

The conflict around guardianship versus adoption was most pronounced among some public agency staff and court hearing officers. Hearing officers who opposed guardianship viewed it as a way for caseworkers to lighten their caseloads without focusing on the best interests of the child.

There is a philosophical disagreement of the "permanence" of the subsidized guardianship relationship as it compares to adoption. Some public agency staff and hearing officers believe that, with subsidized guardianship, families have a "way out," and can easily return custody of the children to the state. There is also concern that subsidized guardianship may supplant adoption. Furthermore, there is a concern that there are inadequate procedural safeguards in place and that inappropriate referrals to guardianship may occur when the child could have been adopted. These concerns are particularly strong for younger children who historically have a better chance of being adopted.

These opinions are contrasted by others in the court system who voice strong support for the subsidized guardianship initiative. The proponents of subsidized guardianship see it as a permanency option for children unlikely to be adopted. They believe it provides a means of more quickly dealing with the backlog of child welfare cases. Furthermore, it allows children to remain with relative caregivers without the intra-family problems that can arise when parental rights need to be terminated. Finally, it ensures that some services may be continually available to families through post-guardianship services, even after a child has been permanently placed.

Those who were supportive of subsidized guardianship spoke of the pivotal role of the 'adoption rule out.' The revised decision guide for families states that "families who do not want the birth parents rights to be terminated or who are hopeful that the birth family will ultimately get the child back, can "rule out adoption" and consider subsidized guardianship."²³ However, there are conflicting opinions about adoption rule out. For example, outside the Chicago area, the court can complete a guardianship in 1 month, while the process of terminating parental rights in preparation for adoption takes a minimum of 6 months. Judges interviewed expressed comfort with this "fast-track" alternative to adoption, as long as caseworkers carefully "ruled out" adoption as an option for the family. Other court representatives suggested that 'adoption rule out' was not necessary, since subsidized guardianship should stand alone as a permanency option.

²³ "Making the Adoption/Guardianship Decision" Published by DCFS, 6/2000

The question of who should rule out adoption—caseworkers, the court or the family—is a lingering one for the state to consider.

Workers attitudes about adoption vs. guardianship. In order to assess the attitudes of caseworkers about adoption and guardianship, the caseworker survey inquired about a wide range of issues related to these two types of placement. Because of the continuing debate in the field about the relative merits of adoption and guardianship, we asked the workers the following two questions that specifically sought to gauge their preference for one type of placement over another: (1) “guardianship is as permanent for children as adoption”; and (2) “adoption gives children greater security than guardianship even if they are related by blood.”

To probe this issue further, responses to these two questions were combined. Workers who agreed with the first question and disagreed with the second were coded as valuing guardianship equally with adoption. But workers who disagreed with the first question and agreed with the second were coded as preferring adoption over guardianship. Those who either agreed to both or disagreed to both were classified as having mixed responses (see Table 2-6).

Table 2-6. Selected attitudes about adoption and guardianship

Attitudes about Adoption/Guardianship	Total
Guardianship is as permanent for children as adoption	
Agree	64
Disagree	36
Total %	100%
Weighted N	13,300
Unweighted N	2,318
Adoption gives children greater security than guardianship even if they are related by blood	
Agree	72
Disagree	28
Total %	100%
Weighted N	13,400
Unweighted N	2,318
Index	
Prefer adoption over guardianship	30
Mixed responses	47
Value guardianship equal with adoption	22
Total %	100%
Weighted N	13,400
Unweighted N	2,320

While a clear majority of the workers agreed that guardianship is as permanent for children as adoption, an even greater percentage believed that adoption gives greater security than guardianship. It appears that workers place greater value on the relationship created by adoption, even though they do not necessarily believe that adoption is more permanent. When looking at the two questions in combination, a slightly higher percentage of the caseworkers can be identified as preferring adoption over guardianship. However, 47 percent of the respondents gave mixed responses. It appears that workers still perceive adoption to be the preferred permanency alternative, but there is uncertainty about the effect of the options on children. This uncertainty complicates the application of the adoption rule out policy.

2.5 Post-Guardianship Services

Post-guardianship services may well play a critical role in the long-term effect of guardianship on children and families. In general, concern was expressed that caregivers' knowledge of services is inadequate, proper attention is not being paid to identifying service needs in the subsidy agreement, and caseworkers have limited knowledge of the availability of community resources.

Services for post-adoptive and post-guardianship families can either be included in the subsidy agreement signed at finalization or accessed from DCFS as new child and family needs arise. Intensive services, such as counseling, therapeutic day care and need for residential care, must be included in the agreement. Otherwise, DCFS directly supports only limited intervention services for families after guardianship. These services are targeted at families at risk of disruption.

The delivery of post-guardianship services changed during the demonstration period. At the start of the demonstration, the need for post-guardianship services was not fully anticipated by DCFS. Beginning in May 1997, HuTech, the organization which conducted the initial training on guardianship, provided some limited post-guardianship services along with the DCFS post-guardianship unit. It became HuTech's responsibility to intervene with families having problems with children in their homes and to help families identify services to prevent disruptions. Usage of these services was limited also by private agency and DCFS staff's newness with the service needs of families in post-guardianship.

Appendix D

Later in the demonstration, the state modified most existing adoption service contracts to create a continuum of services to assist both post-adoption and post-guardianship families using a combination of DCFS units and contracted services with private agencies. A hotline for information and referrals provides listings of community services. In many cases, families are referred to local area networks (LANS) of community and preventive services funded by DCFS in regions around the state. For families, at risk of break-up, the DCFS now contracts with ten private agencies to directly provide intensive home-based case management and treatment.²⁴

Preservation workers described several types of families that are referred for assistance, including uninformed families, aging guardians, and guardians of teenagers. They consider uninformed families a direct result of untrained workers. Families who have been reliant on a worker's case management of child problems, are surprised that there is no one and no funding available to help with new problems. Preservation workers also expressed concern about elderly caregivers, especially those with chronic and severe health problems, who have accepted guardianship status. They also were concerned about teenagers who entered guardianship status as younger children. Will families be prepared to deal with the difficulties of adolescence and problems such as running away and poor anger management? They warned that the possibility of increased disruptions should be monitored closely as the demonstration continued and children and caregivers aged.

As the program continues, other issues are continuously being identified. One of the first problems that arose was that the guardianship subsidy was being counted against a family's food stamp allocation. This has been adjusted. Staff also indicated a concern that children in guardianship are not automatically eligible for inheritance, unlike an adopted child.

Another concern has been that subsidy agreements are written before some problems are identified and families may be faced with unexpected problems years later. All service needs covered by the subsidized guardianship agreement must be based on pre-existing conditions identified before guardianship is finalized. Staff in the public guardian's office were particularly concerned about how future residential placement needs could be accommodated. It was suggested that the subsidy agreement include potential service needs so that agreements would not need to be modified at a later date. Many families need the reassurances that services will be

²⁴ The state reports that additional services have been added over the year as the "post"-custody children have grown to outnumber the children in state's care.

Appendix D

available to address emotional and behavioral problems that have roots in early experiences of abuse, neglect and abandonment but are not manifest until the child enters the pre-teen or teen years.

Many of the issues identified by discussions with agency staff were reiterated by caregivers during the interviews. The next chapters present the findings from the interview data.

3 CHARACTERISTICS OF CHILDREN AND CAREGIVERS

Before addressing the research questions associated with the demonstration, it is important to understand the population studied. This chapter presents an overall description of the demographic characteristics of the caregivers and children in the demonstration. The information reflects the status of households ranging 2 to 4 years after assignment into the demonstration. The information presented in this chapter is based on caregiver accounts from interviews completed from the summer of 2000 through winter 2001. The findings are based on interviews with 1,541 caregivers. Overall, there were no significant differences between the demonstration and cost neutrality groups on any of the demographic variables assessed.²⁵

3.1 Caregiver Characteristics

The weighted total of 4,300 caregivers interviewed at followup were divided almost evenly between the demonstration and cost neutrality groups (49 percent and 51 percent, respectively). Table 3-1 presents a breakdown of age, gender, and race by assignment group. No differences were found across groups on any of these characteristics. The average age of the caregivers was 51 for both groups; they were predominantly female (95 percent demonstration and 94 percent cost neutrality) and African American (77 percent demonstration and 79 percent cost neutrality). In both groups, around 12 percent of caregivers were 65 years of age or older.

²⁵ Baseline characteristics were presented in the interim report. At that time there also were no significant differences between the demonstration and cost neutrality groups on any of the variables assessed.

Table 3-1. Distribution of caregiver's age, sex and race by assignment group

Characteristics	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Caregiver's age		
25 – 34	8	7
35 – 44	22	24
45 – 54	33	29
55 – 64	26	27
65 – 74	10	11
75 and older	1	2
Total %	100%	100%
Weighted N	2,100	2,200
Unweighted N	729	728
Mean Age	51	51
Median Age	51	51
Caregiver's sex		
Male	5	6
Female	95	94
Total %	100%	100%
Weighted N	2,100	2,200
Unweighted N	735	735
Caregiver's race		
African American	77	79
White	18	17
Hispanic	4	3
All Others	<1	<1
Total %	100%	100%
Weighted N^a	2,100	2,200
Unweighted N	735	735

^a Weighted Ns have been rounded to nearest 100.

As shown in Table 3-2, there was no difference between the caregivers in the demonstration and cost neutrality groups by marital status. Overall, a substantial minority of the caregivers were married (40 percent in both the demonstration and cost neutrality groups), while one-fifth were single. Nearly equal percentages were divorced (19 percent demonstration and 17 percent cost neutrality) and widowed (16 percent demonstration and 18 percent cost neutrality). The caregiver's employment status was also similar for caregivers in the two groups. Nearly one-half (49 percent demonstration and 46 percent cost neutrality) were employed full or part time. One-fifth of the caregivers were retired at the time of the followup interview. Just over one-quarter were unemployed and not look for work (26 percent demonstration and 28 percent cost neutrality) while very few were unemployed and looking for work (6 percent demonstration and 7 percent cost neutrality). In regards to highest educational level reached, about one-quarter of the caregivers had just completed high school or GED, with no difference between assignment groups. Another one-quarter of all caregivers had attended college while around 10 percent had graduated from college.

Table 3-2. Distribution of caregiver's marital, employment, and education status by assignment group.

Characteristics	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Caregiver's marital status		
Married	40	40
Divorced	19	17
Separated	7	6
Widowed	16	18
Single	19	20
Other	<1	<1
Total%	100%	100%
Caregiver's employment status		
Full time	37	33
Part time	12	13
Retired	19	20
Unemployed, not looking for work	26	28
Unemployed, looking for work	6	7
Total %^a	100%	100%
Caregiver's completed education level		
Grades 1–12	35	36
High school graduate	23	26
GED	1	2
Vocational school	<1	2
Attended college	26	24
Graduated college	12	9
Other	2	1
Total %	100%	100%
Weighted N^a	2,100	2,200
Unweighted N	735	735

^a Weighted Ns have been rounded to nearest 100.

As shown in Table 3-3, about 42 percent of caregivers in both groups reported household earnings of \$20,000 or less, with the greatest percentage of households earning between \$20,000 and \$40,000 a year (31percent demonstration and 29 percent cost neutrality). More than one-quarter of the caregivers reported household incomes of more than \$40,000 per year (28 percent in both the demonstration and cost neutrality groups).

Table 3-3. Distribution of caregiver's household income by assignment group

Caregiver's household income	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Less than \$1,000	<1	---
\$1,000 - \$2,499	1	1
\$2,500 - \$4,999	2	1
\$5,000 - \$9,999	13	12
\$10,000 - \$19,999	26	28
\$20,000 - \$39,999	31	29
\$40,000 - \$59,999	12	12
\$60,000 or more	8	8
Unknown	8	8
Total %	100%	100%
Weighted N^a	2,200	2,200
Unweighted N	736	736

^a Weighted Ns have been rounded to nearest 100.

3.2 Child Characteristics

The households interviewed at followup had a total of 2,727 sampled children in the cost neutrality and demonstration groups. Table 3-4 presents the distribution of gender, race, and age for children. There were no differences between the demonstration and cost neutrality groups for any of these characteristics. The study population at followup was split evenly between female and male. The majority of children were African American (84 percent in the demonstration group and 85 percent in the cost neutrality group). The average age at assignment was ten and the median age was nine.

Table 3-4. Distribution of child's sex, race, and age by assignment group

Characteristics	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Sex		
Female	50	51
Male	50	49
Total %	100%	100%
Weighted N	3,900	4,100
Unweighted N	1,360	1,366
Race		
African American	84	85
White	11	9
Hispanic	4	5
Other	1	1
Total %	100%	100%
Weighted N	3,900	4,100
Unweighted N	1,350	1,362
Age^a		
3-5	17	13
6-9	38	39
10-12	22	24
13-15	15	15
≥16	9	9
Total %	100%	100%
Mean Age	10	10
Median Age	9	9
Weighted N^a	3,900	4,100
Unweighted N	1,360	1,366

^a Weighted Ns have been rounded to nearest 100.

As shown in Table 3-5, similar percentages of children in the two groups were reported to have physical, emotional, or learning disabilities at the time of the followup interview (35 percent demonstration and 36 percent cost neutrality).

Table 3-5. Children’s disabilities by assignment group

Physical, emotional, or learning disabilities	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Yes	35	36
No	65	64
Total %	100%	100%
Weighted N^a	3,900	4,100
Unweighted N	1,340	1,354

^a Weighted Ns have been rounded to nearest 100.

3.3 Summary

This chapter presented an overall description of the caregivers and children in the cost neutrality and demonstration groups for those with completed followup caregiver interviews. Comparing groups on a limited set of demographic characteristics found no differences between the demonstration and cost neutrality groups for either caregivers or children.

To understand the impact that the introduction of subsidized guardianship had on permanency for children, it is necessary to assess permanency rates in the two assignment groups, the stability and safety of children in the demonstration, and other details about caregiver decision-making and opinions about permanency options. The following chapter provides findings on these issues.

4 PERMANENCY AND DECISIONMAKING

The subsidized guardianship program was structured to give caregivers who were unable or unwilling to adopt children in their care another permanency option. It was expected that the demonstration would increase the number of children achieving permanency in the demonstration group relative to the cost neutrality group. Thus, one of the goals of the evaluation of the demonstration was to determine the net impact of providing subsidized guardianship on permanency. To this end, the overall effectiveness of the subsidized guardianship program was examined by addressing one of the study's primary research questions: "Does the demonstration result in fewer children remaining in long-term foster care with ongoing administrative oversight?" Further, the evaluation assessed whether the option of guardianship affected people's decision to adopt.

The analyses in this chapter are based on administrative data from the state of Illinois and data from the initial and followup interviews with caregivers. The first section tracks the changes in overall permanency rates and permanency plans from the time of the initial interview through the followup interview (Section 4.1). The stability and safety of children in the demonstration are examined in the following section (Section 4.2). Details on how caregivers interacted with their caseworkers are provided next (Section 4.3). Then, caregiver's beliefs about permanency and knowledge of permanency options are described (Section 4.4). Finally, the rate of achieving permanency using survival analysis is presented (Section 4.5).

4.1 Permanency Achieved and Permanency Planned

In this section, we examine if study children have achieved permanency and, if not, what is the family's intended plan for permanency. We use both administrative and interview data to test the hypothesis that the availability of subsidized guardianship increases permanency for children. The administrative data identifies the permanency status of all children in the demonstration and cost neutrality groups, while the sample produces an estimate of that difference²⁶. We conducted both analyses, with consistent results. The introduction of subsidized guardianship increases permanency for children at the end of our initial interview (February, 1999) and at the end of the final followup interview (January, 2001).

²⁶ With the administrative data, permanency can be measured at various points in time.

The administrative data show more children in the demonstration group than the comparison group achieving permanency through adoption, reunification or subsidized guardianship at both points in time. (See Table 4.1) At the time of the initial interview, in the demonstration group 40 per cent of children have achieved permanency, compared to 35 per cent in the comparison group.²⁷ At the time of the followup interview, the difference, had narrowed to four percentage points, but the percent achieving permanency increased for both groups (74% demonstration, 70% cost neutrality).

Table 4-1. Child's placement status by assignment group at the end of the initial and followup interviews

Placement Status	End of Initial Interview		End of Followup Interview	
	Demonstration (%)	Cost Neutrality (%)	Demonstration (%)	Cost Neutrality (%)
Foster Care	60	65	26	30
Adoption	28	28	53	59
Guardianship	5	<1 ^b	11	<1
Reunification ^a	7	6	10	10
Total	100%	100%	100%	100%
<i>N</i> ^c	3,938	4,141	3,938	4,141

^a The percentage of children reunified does not reflect the actual reunification rate because children in the sample had to be in care at least 2 years to be eligible for the study. The majority of children are reunited after being in care a short time.

^b While technically there should not be any guardianships in the cost neutrality group, there were some violations such that a few children in the cost neutrality group were allowed to enter subsidized guardianship.

^c The total N includes children in the evaluation under 12 not living with kin. Under the Waiver's terms and conditions, this subset of children is excluded from IDCFS's calculations for claiming purposes. Excluding these children from the table results in a permanency difference of six percent at the time of the follow-up interview.

The administrative data provides information on the population from which a sample was drawn to conduct interviews. As discussed earlier, the number of children for whom we have interview data is 1,676 demonstration children and 1,735 cost neutrality children.²⁸ While the administrative data provide information on the whole population from which the sample was drawn, we also examined the results for just the survey respondents. The results are consistent.²⁹ At the time of the initial interview, 39 percent demonstration and 33 percent cost neutrality children had achieved permanency (compared to 40 and 35 percent in the administrative data).³⁰ By the end of the followup interview the percent of the

²⁷ $p \leq .001$ for both time periods.

²⁸ This includes children in the cost neutrality and demonstration groups, and those eligible for subsidized guardianship but not part of the experiment.

²⁹ The confidence interval around permanency difference in the initial interview data is 1.7 to 11.3 percent. At the followup interview it is -.55 to 9.77 percent. The administrative data results fall within these intervals at both points in time.

³⁰ $P \leq .05$

interviewed population reaching permanency increased to 73 percent for the demonstration and 68 percent for the cost neutrality group (compared to 74 and 70 percent in the administrative data).³¹

The best way to see the effect of introducing subsidized guardianship as a permanency option is to see its impact on children over time. For those children in the demonstration group the relative rate of achieving permanency is 25 percent higher than the children in the cost neutrality group (see further discussion in Section 4.5 on survival analysis).

A secondary research question was whether subsidized guardianship supplanted adoption in the demonstration group. The data reveal that the narrowing of the permanency difference between the demonstration and cost neutrality groups is concentrated within adoption. As Table 4-1 shows, the percentages of adopted children were the same for the two groups at the time of the initial interview (28 percent). At followup, there was a 6 point difference in the adoption percentages. While 59 percent of the cost neutrality children had been adopted, only 53 percent of the children in the demonstration group had been adopted. This pattern suggests that at some point after the initial interview guardianship started to supplant adoption within the demonstration group.

For those children still in foster care, caregivers were asked about their intentions for permanency for children at the initial and followup interviews. The interview data is used to compare the permanency plans for children that had not yet exited to permanency, at each point in time.

Permanency Plans. When the caregivers were interviewed in the initial interview, they were asked a series of questions about guardianship and adoption in an effort to determine how many caregivers planned to make the child’s living situation permanent. Table 4-2 shows the result.

Table 4-2. Permanency plans by assignment group at the time of the initial interview^a

Permanency Plans	Demonstration (%)	Cost Neutrality (%)
SG or adopt	59	58
Neither SG or adopt	5	9
Not decided/not asked	36	33
Total	100%	100%
Weighted N	2,500	2,800
Unweighted N	1,055	1,176

^a $X^2=6.91, p<.05$

³¹ $p=.08$ The followup interview estimate is only marginally significant due to a smaller sample size, leading to less precision. To get a more precise assessment of the difference in permanency rates for cost neutrality and demonstration children, we added age to the predictive model. Taking age into account, assignment group (difference in permanency rate between the demonstration and cost neutrality group) is significant, $p\leq.05$. As discussed in Section 4.5, the rate of children going into permanency differs across age.

Appendix D

Overall, there were not any notable differences by assignment group in the caregiver's plans for permanency for those children who were not living in a permanent arrangement at the time of the initial interview. The interview questions asked caregivers of eligible children about the permanency options independently, even though in practice adoption must be ruled out before guardianship can be considered. For children who had not been reunified, adopted, or entered the guardianship program, caregivers for many of the children indicated that they had plans to either enter the guardianship program or adopt the child. Caregivers for 59 percent of the children in the demonstration group and 58 percent of the children in the cost neutrality group said that they had decided to become the child's guardian or adopt the child (Table 4-2). Within the demonstration group, the 59 percent of children whose caregivers planned permanency includes 29 percent who were to adopt, 16 percent who were planning to enter the subsidized guardianship program, and 14 percent who indicated that they were going to do both.

It is also interesting to look at planned permanency to see how many caregivers followed through with their plans to either adopt or enter the subsidized guardianship program (Table 4-3). Overall, caregivers who indicated in the initial interview that they planned to adopt or enter subsidized guardianship followed through with their stated intentions. Among children in the cost neutrality group whose caregivers planned to adopt, 80 percent of them had been adopted by the time of the followup interview. For children in the demonstration group, a total of 79 percent of those whose caregivers planned permanency were in permanent living arrangements at the time of the followup interview, including 61 percent who had been adopted and 18 percent who had entered subsidized guardianship. For children in both groups whose caregivers had indicated that they would not adopt or enter the guardianship program at the time of the initial interview, few of them were in permanent arrangements at followup. Overall, 16 percent of the children in the cost neutrality group whose caregivers had initially said they would not adopt had actually been adopted. In the demonstration group, among children whose caregivers indicated that they would not make the child's placement permanent, 12 percent had been adopted and 7 percent had entered guardianship.

There were also some children whose caregivers had not decided about permanency options or who had not been asked about permanency plans at the time of the initial interview. The findings here reveal that overall these caregivers were not as likely to make the child's living arrangement permanent. A substantial minority of the children whose caregivers had not been asked about their permanency options or had not decided about them remained in foster care at followup (32 percent demonstration and 40 percent cost neutrality). At the same time, there was some permanency among this group. For children in the cost neutrality group whose caregivers had not been asked or not decided at the time of the initial interview, more than one-half (51 percent) were subsequently adopted. Similarly, among the same

group of children in the demonstration group, 51 percent had been adopted and 7 percent had entered subsidized guardianship at followup.

Table 4-3. Child's placement status by planned permanency

Placement status at followup	Demonstration			Cost Neutrality		
	Planned to enter SG or Adopt (%)	No Plan (%)	Not Decided/ Not Asked (%)	Planned to Adopt (%)	No Plan (%)	Not Decided/ Not Asked (%)
Foster Care	20	75	32	19	81	40
Adopt	61	12	51	80	16	51
Guardianship	18	7	7	---	---	<1
Reunify	<1	6	10	<1	3	8
Total	100%	100%	100%	100%	100%	100%
Weighted N	2,100	100	1,700	2,200	300	1,700
Unweighted N	745	38	563	780	92	563

At the time of the followup interview, caregivers of children who were still in foster care were also asked about future permanency plans (Table 4-4). In the demonstration group, caregivers for a majority of children (54 percent) indicated that they had plans to adopt or enter the subsidized guardianship program, compared to just over one third (39 percent) for the cost neutrality group. This difference in planned permanency at the time of the followup interview was statistically significant, suggesting that the option of subsidized guardianship encouraged more caregivers in the demonstration group to make a commitment to at least one of the permanency goals. There was also a notable difference between the two groups in the percentage who had not decided or not been asked about permanency options. It was much more common for the caregivers of children in the cost neutrality group to be undecided or uninformed about permanency compared to the demonstration group (47 percent v. 32 percent).

Table 4-4. Permanency plans by assignment group at the time of the followup interview^a

Permanency Plans	Demonstration (%)	Cost Neutrality (%)
SG or adopt	54	39
Neither SG or adopt	14	14
Not decided/not asked	32	47
Total	100%	100%
Weighted N	1100	1,300
Unweighted N	368	431

^a $X^2=8.22, p<.05$

Analyses of the initial interview data revealed that many of the caregivers who said they were going to adopt or enter subsidized guardianship followed through with their plans. Similar analyses of the followup interview data looked at the expected rate of permanency based on the caregiver's stated

plans. The difference in overall permanency remains the same when those children who are already permanent are grouped with those whose caregivers indicated that they planned to either adopt or enter into subsidized guardianship.

4.2 Stability and Safety

While the evidence shows that children in the demonstration group achieved more permanency than children in the cost neutrality, it also important to look at stability and safety to assess the success of the demonstration.

For children sampled for the study, stability was measured by looking at disruptions from permanent placements. Disruptions were defined as cases where the child was no longer in the care of the guardian or adoptive parent because of death or incapacitation of the caregiver, dissolution of the placement due to a finding of child abuse or neglect or to meet the child's mental, emotional, or behavioral needs. Children whose placement status changed because they entered independent living, they aged out of the system, or they were briefly displaced from the caregiver before returning to the placement were not counted as having had disrupted placements. Overall, there were very few disruptions. According to the IDCFS administrative data system, most children who had been adopted or entered subsidized guardianship remained in those placements at the time of the followup interview. However, there were a very small percentage of children (1%) who had moved out of their permanent placement for a variety of reasons. The weighted total number of disruptions was just 99 (based on an unweighted total of 38). Further, similar percentages of disruptions occurred within the cost neutrality (1.1%) and demonstration (1.2%) groups. Nearly two thirds (60%) of the guardianship disruptions resulted from the dissolution of the placement. In contrast, most of the adoption disruptions (78%) resulted from the death or incapacitation of the caregiver.

Another important issue is whether the withdrawal of regular administrative oversight and casework services from the families in the subsidized guardianship program increased the risk of harm to the children. For this analysis, safety was measured by looking at subsequent reports of abuse or neglect found in IDCFS's administrative data system. Overall, there were very few child abuse and neglect reports for children in adoptive or guardianship placements. Among children in permanent placements (adoption or subsidized guardianship) less than 1 percent of the children sampled for the study had a report after their placement (a weighted total of just 4 children). Given the relative safety of all sampled, it appears that the availability of subsidized guardianship was not detrimental to the safety of children in the demonstration group. Children in the two groups were equally safe.

4.3 Caseworker Interactions with Caregivers

In evaluating the demonstration, another area of importance is whether caregiver's decisions about permanency were influenced by interactions with their caseworkers. For example, the overall difference in permanency between the demonstration and the cost neutrality groups may be related to differences in how often the caseworker discussed the permanency options with the caregivers in each group or whether the caregivers felt pressured by the caseworker to make the child's living situation permanent.

The followup interview asked caregivers about meetings and discussions with caseworkers about permanency. Analyses revealed that the availability of subsidized guardianship encouraged more discussions of the specific permanency options for caregivers of children in the demonstration group. For 65 percent of the children in the demonstration group, their caregivers reported that they had discussed adoption or subsidized guardianship with their caseworker in the past year. This compares to just 41 percent of the cost neutrality group.³² When viewed in the context of higher overall permanency rates for children in the demonstration group, it appears that more discussion about permanency for caregivers of children in the demonstration group may be related to increased permanency for the demonstration group.

Permanency was also examined in the context of how caseworkers presented the permanency options to caregivers. The followup interview asked caregivers several questions about whether they felt pressured to make the child's living situation permanent. All caregivers who had discussed adoption with their caseworker in the year prior to the followup interview were asked two questions about how their caseworker discussed adoption with them. The first question asked the caregivers if they felt pressured by their caseworker to become the child's adoptive parent. The second question asked the caregivers if the caseworker had told them that if they did not become the adoptive parent then they might not be able to remain the foster parent. Table 4-5 shows the caregiver responses to these questions for children in the cost neutrality and demonstration groups. The caregivers for 23 percent of the children in the demonstration group indicated that they had felt pressured into pursuing adoption based on a positive response to either of the two questions. The caregivers for children in the cost neutrality group felt pressured about adoption much more often (37 percent). Further analyses revealed that kin caregivers were pressured about adoption nearly as often as non-kin caregivers. Caregivers for 31 percent of children in kin placements reported feeling pressured about adoption compared to 29 percent of children in non-kin placements.

³² T-value=6.28, p<.001.

Table 4-5. Percentage of children whose caregiver felt pressured into adopting at the time of the followup interview by assignment group^a

Child's caregiver felt pressured	Demonstration (%)	Cost Neutrality (%)
Yes	23	37
No	77	63
Total	100%	100%
Weighted N	2900	3,700
Unweighted N	1,019	1,211

^a $X^2=4.67$, $p<.05$

For children in the demonstration group, the caregivers were asked similar questions about pressure from their caseworker to enter the subsidized guardianship program and about being told that if they did not become the guardian they might not be able to remain the foster parent. Again, these questions were only asked of caregivers who said that they had discussed guardianship with their caseworker in the last year. Overall, caregivers for 38 percent of the children in the demonstration group indicated that they felt pressured into pursuing subsidized guardianship. Looking at pressure to enter subsidized guardianship by the child's kinship status shows that there were no statistically noteworthy differences between children living in kin or non-kin placements.

Table 4-6 shows whether the caregiver felt any pressure to make the child's living arrangement permanent. For the cost neutrality group this meant whether they had felt pressure to adopt, while for the demonstration group this meant pressure to adopt, pressure to enter subsidized guardianship, or both. As the table shows, the percentages were nearly the same in both groups with slightly more than one-third of caregivers indicating that they did feel pressured into making the child's living situation permanent. The pressure to become permanent was also examined by the child's kinship status. Again, caregivers for children in kinship and non-kinship placements reported feeling pressured about permanency in nearly equal percentages.

Table 4-6. Percentage of children whose caregiver felt pressured into permanency at the time of the followup interview by assignment group.

Child's caregiver felt pressured	Demonstration (%)	Cost Neutrality (%)
Yes	38	37
No	62	63
Total	100%	100%
Weighted N	3,500	3,700
Unweighted N	1,257	1,211

4.4 Caregiver Beliefs About Permanency and Knowledge of Permanency Options

The findings described in the earlier section indicate that once the program was underway there were differences in the overall permanency rates between the demonstration and cost neutrality groups and that these difference remained throughout the demonstration. Further, at the time of the initial interview, the percentage of adopted children was nearly equal between the groups but the demonstration group had higher overall permanency because of the additional permanency option of guardianship. At followup, the difference in the overall permanency rates remained although the adoption percentages were unequal, with a larger percentage of children in the cost neutrality group being adopted. It is helpful to look at information from the followup interview about caregivers' beliefs about adoption and raising children, knowledge about adoption, and knowledge of the difference between adoption and guardianship to help understand their decisions about permanency.

4.4.1 Caregiver Opinions About Adoption and Raising Children

In order to understand caregiver's beliefs about adoption and raising children, caregivers were asked to indicate their level of agreement with a series of statements during the followup interview. In this section, their responses are examined. An initial series of analyses divided children into two groups: Children who were permanent at the time of the followup interview and children who were not. As shown in Table 4-7, caregivers of children in permanent living arrangements (reunified, adopted, or in guardianship) differed from those in foster care on several of the different statements about adoption and raising children. Caregivers of children in permanent living arrangements were more likely to agree that "Adoption is best no matter how old the child" (77 percent v. 68 percent). Overall, few caregivers agreed with the statement "You are too old to adopt." However, there was a trend for caregivers of children in permanent living arrangements to agree with the statement somewhat less often than caregivers of children in foster care (8 percent v. 12 percent). It was also less common for caregivers of children in permanent living arrangements to agree with the statement "Adoption takes too long." While 40 percent of caregivers of children in permanent placement agreed with this statement, many more caregivers of children who remained in foster care agreed (51 percent). Caregivers of children in permanent living situations also agreed less often with the statement "Children who must be removed from their birth parents should be placed with relatives rather than non-relatives" than did caregivers of children in foster care (63 percent v. 70 percent). Finally, fewer caregivers of children in permanent placements agreed that "Families have a moral duty to take care of their own kin regardless of whether government pays for the cost of care" than did caregivers of children in foster care (56 percent v. 64 percent).

Table 4-7. Caregivers' level of agreement with statements about adoption at followup by permanency status

Adoption statements	Permanent		Foster Care	
	Agree	Disagree	Agree	Disagree
Adoption is really best only for young children.	37	63	36	64
Adoption by a relative stirs up too much trouble in the family.	24	76	27	73
Adoption is best no matter how old the child. ^a	77	23	68	32
You are too old to adopt. ^b	8	92	12	88
Adoption takes too long. ^c	40	60	51	49
Adoption is really only for children who aren't related to you.	7	93	7	93
Adoption gives children greater security even if they are related by blood.	91	9	88	12
Children who must be removed from their birth parents should be placed with relatives rather than non-relatives. ^d	63	37	70	30
Families have a moral duty to take care of their own kin regardless of whether government pays for the cost of care. ^e	56	44	64	36
Placement in foster care for children should be the last resort only after efforts have been made to place children with their kin.	84	16	86	14
Weighted N	8,100		5,600	
Unweighted N	1,804		1,064	

^a $X^2=6.02$, $p<.05$ ^b $X^2=3.12$, $p<.10$ ^c $X^2=5.78$, $p<.05$ ^d $X^2=4.88$, $p<.05$ ^e $X^2=7.33$, $p<.01$

Appendix D

More differences emerged when comparing caregiver opinions within the permanent group. Table 4-8 provides the caregiver's level of agreement with the statements about adoption for children who had been adopted and for those who had entered subsidized guardianship. Caregivers of children in subsidized guardianship agreed with the statement that "adoption is best no matter how old the child" considerably less often than caregivers of adopted children (64 percent v. 79 percent). Since the beginning of the demonstration, it was thought that subsidized guardianship was a good permanency option for certain individuals who felt that they were too old to adopt. Not surprisingly, this sentiment is stronger for caregivers of children in the demonstration group. When asked about whether they were too old to adopt, caregivers for 15 percent of the children in guardianship agreed, while caregivers for only 7 percent of adopted children agreed with the statement. Similarly, it was much more common for caregivers of children in guardianship to agree that "Adoption is really only for children who aren't related to you" than it was for caregivers of adopted children (16 percent v. 5 percent). While there was generally a high level of agreement with the statement that "adoption gives children greater security even if they are related by blood," caregivers of children in subsidized guardianship agreed less often than caregivers of adopted children (82 percent v. 92 percent). Caregivers of children in subsidized guardianship were much more likely to agree with the statement "Children who must be removed from their birth parents should be placed with relatives rather than non-relatives" than were caregivers of adopted children (76 percent v. 62 percent). Finally, when caregivers were asked about whether "Placement in foster care for children should be the last resort only after efforts have been made to place children with their kin" it was somewhat more common for caregivers of children in guardianship to agree with this statement than it was for caregivers of adopted children (93 percent v. 83 percent). This difference is not surprising since there are fewer kin caregivers in the adoption group.

Table 4-8. Caregivers level of agreement with statements about adoption at followup by subsidized guardianship vs. adoption

Adoption statements	Subsidized Guardianship		Adoption	
	Agree	Disagree	Agree	Disagree
Adoption is really best only for young children.	44	56	36	64
Adoption by a relative stirs up too much trouble in the family.	28	72	24	76
Adoption is best no matter how old the child. ^a	64	36	79	21
You are too old to adopt. ^b	15	85	7	93
Adoption takes too long.	46	54	42	58
Adoption is really only for children who aren't related to you. ^c	16	84	5	95
Adoption gives children greater security even if they are related by blood. ^d	82	18	92	8
Children who must be removed from their birth parents should be placed with relatives rather than non-relatives. ^e	76	24	62	38
Families have a moral duty to take care of their own kin regardless of whether government pays for the cost of care.	60	40	55	45
Placement in foster care for children should be the last resort only after efforts have been made to place children with their kin. ^f	93	7	83	17
Weighted N	1,300		7,600	
Unweighted N	319		1,657	

^a $X^2=10.07$, $p<.01$

^b $X^2=10.99$, $p<.001$

^c $X^2=12.01$, $p<.001$

^d $X^2=6.18$, $p<.05$

^e $X^2=7.19$, $p<.01$

^f $X^2=10.69$, $p<.001$

4.4.2 Knowledge About Adoption

At the followup interview, caregivers were also asked about their knowledge of how adoption worked. Overall, there were differences in caregiver's understanding of adoption by whether or not the child was in a permanent living arrangement for only one of the adoption statements. Caregivers of children who were not permanent at followup more often thought that after adoption the caseworker continues to make home visits compared to caregivers of children who were already permanent (40 percent v. 21 percent).³³

³³ $X^2=22.46$, $p<.001$.

Appendix D

Looking within the permanent group, caregivers of adopted children were compared to caregivers of children in subsidized guardianship. Table 4-9 shows that the two groups were very similar except for the last statement. Caregivers of children in subsidized guardianship were much more likely to believe that it was easy to give the child back to the state if the adoption did not work out compared to caregivers of adopted children (37 percent v. 24 percent).

Table 4-9. Percentage of children whose caregiver believed that the adoption statements were true at the time of the followup interview by permanency status

Adoption statement	Subsidized Guardianship		Adoption	
	True	False	True	False
Your caseworker continues to make visits to your home to check on how things are going.	22	78	21	79
You will automatically continue to get the services you have been getting.	62	38	64	36
You are legally responsible for the care and supervision of the children.	99	1	99	1
You can make school, medical, and out-of-state travel decisions for the children.	98	2	97	3
You can easily give the child back to the state if things don't work out. ^a	37	63	24	76
Weighted N	1,300		7,600	
Unweighted N	319		1,657	

^a $X^2=4.82$, $p<.05$

4.4.3 Knowledge of Differences Between Adoption and Guardianship

Caregivers in the demonstration group were asked about their agreement with a series of statements about the differences between adoption and guardianship. When the responses of caregivers of children in permanent living arrangements were compared to the responses of children still in foster care, there were no statistically significant differences in how caregivers responded to these statements. However, when looking within the permanent group differences did emerge depending on whether the child had entered subsidized guardianship or had been adopted.

Table 4-10 shows the caregiver's level of agreement with the different statements by permanency status. For children in the demonstration group, caregivers of children in subsidized guardianship were more likely to agree with the statement that "Subsidized guardianship and adoption are just as permanent" than were caregivers of adopted children (76 percent v. 55 percent). Likewise, more

Appendix D

caregivers of guardianship children agreed that “Children believe subsidized guardianship and adoption are just as permanent” than did caregivers of adopted children (81 percent v. 67 percent). Similarly, more caregivers of children in the demonstration group agreed that “Subsidized guardianship and adoption are both permanent” than did caregivers of adopted children (69 percent v. 56 percent). While most caregivers in the demonstration group agreed that “Adoption is more permanent than guardianship because children can take your name,” there were differences depending on permanency status. For 88 percent of the demonstration group children in subsidized guardianship, their caregiver agreed with the statement. This compares to 96 percent of demonstration group children who had been adopted.

Table 4-10. Percentage of children whose caregiver agreed with the statement about adoption and guardianship at followup by permanency status

Statement about adoption or guardianship	Subsidized Guardianship		Adoption	
	Agree	Disagree	Agree	Disagree
Subsidized guardianship and adoption are just as permanent. ^a	76	24	55	45
Children believe subsidized guardianship and adoption are just as permanent. ^b	81	19	67	33
Subsidized guardianship and adoption are both permanent. ^d	69	31	56	44
You can give up an adopted child as easily as a child for whom you are a guardian?	22	78	17	83
Adoption is more permanent than guardianship because children can take your name. ^c	88	12	96	4
You are responsible for adopted children after age 18.	68	32	72	28
You are responsible for children in subsidized guardianship after age 18.	50	50	48	52
Weighted N	1,300		7,600	
Unweighted N	319		1,657	

^a $X^2=15.22, p<.01$

^b $X^2=6.04, p<.05$

^c $X^2=7.33, p<.01$

^d $X^2=4.69, p<.05$

4.5 Rate of Achieving Permanency From Survival Analysis

While the previous sections in this chapter mainly focused on results from the survey, this section is based on administrative data. Permanency outcomes and child characteristics were extracted from the administrative data for all children assigned to the demonstration. Survival analysis was then used to identify factors that are significant predictors of the rate of achieving permanency, or equivalently, the time between the assignment date and the date when permanency was achieved. For the survival analysis, the assignment date is the date at which the assignment status (i.e., whether the child is eligible for or not eligible for subsidized guardianship) was posted on the DCFS computer system and was available to DCFS caseworkers.³⁴

The reader is reminded that the sample was drawn over 8 calendar quarters (from October 1996 to July 1998). The first quarter sample included a backlog of children that were newly eligible for subsidized guardianship because the program had recently started. The samples in subsequent quarters were smaller and only included children that had become eligible for subsidized guardianship in the previous three months. In the first five quarters a subsample of children was selected for interviews. In the last three quarters, all newly eligible children were selected for interviews. Appendix B provides additional details about the data and the survival analysis.

Survival analysis, as applied to the data for the demonstration, models the rate at which children achieve permanency.³⁵ The following illustrates how the rate of achieving permanency is calculated. Consider two groups of children, those eligible or not eligible for subsidized guardianship. For each of these two groups calculate, the percentage of children that achieve permanency in the first year. If a higher percentage of children who were eligible for subsidized guardianship achieve permanency than for children who were not eligible for subsidized guardianship, then the rate at which children achieve permanency (in the first year) is greater for children eligible for subsidized guardianship than those not eligible for subsidized guardianship. A similar calculation can be made for the second year, calculating the number of children achieving permanency during the second year as a percentage of the number of children who had not achieved permanency as of the beginning of the second year. The rate of achieving permanency in the second year may be different than the rate from the first year. This illustration uses a

³⁴ For this section, children eligible for subsidized guardianship includes only those children assigned to the demonstration group and posted as eligible to the DCFS computer system. Caseworkers were required to check the system for eligibility prior to offering subsidized guardianship as an option to a family.

³⁵ There were 8,079 children sampled for the demonstration. After removing children who had achieved permanency after their data was extracted from the DCFS computer system but before the assignment to the demonstration and removing a relatively small number of children who were no longer eligible for subsidized guardianship or who had missing data for some variables used in the analysis, there were 5,799 children available for the survival analysis.

Appendix D

period of a year. The survival analysis calculates the rate of achieving permanency over shorter time periods.

The dependent factors used to predict the rate of achieving permanency are:

- Age: Child's age when assigned to the demonstration;
- Race: The child's race, coded as white, black, and other;
- Gender;
- Quarter of Assignment (1 to 8);
- Group: "Experimental" group if the child was eligible for subsidized guardianship or "Cost-neutrality" group if the child was not eligible for subsidized guardianship;
- Prior time in foster care: Relative length of time in foster care prior to assignment to the demonstration. For the presentation of results, the prior time variable was categorized as "Less prior care" (less prior care than at least half of the children of the same age) and "More prior care" (more prior care than half of the children of the same age)³⁶;
- HMR: A flag indicating if the child was in the home of a relative (HMR) or non relative (non-HMR) at the time of assignment to the demonstration; and
- DCFS Region

These factors describe the child just prior to assignment to the demonstration. Whether the child is eligible for or not eligible for subsidized guardianship is an experimental condition imposed as part of the demonstration. An important research question is what difference the option of subsidized guardianship (group) makes to the rate of achieving permanency. The effect of group may depend on the child's characteristics (age, race, etc.).

Quarter of assignment is included in the model because there may be differences in the rate of achieving permanency that are due to how the demonstration and the subsidized guardianship program were implemented over time. In particular:

- The subsidized guardianship program was new in the first quarter. The implementation of the program may have changed over time as caseworkers and families got familiar with the requirements;
- Children assigned in the first quarter may have been in foster care or with their current provider longer than children assigned in later quarters; and

³⁶ For the survival analysis, prior time in foster care is a continuous variable from 0 to 1.

Appendix D

- There may have been changes in foster care environment over time. Possible factors that might change the foster care environment include economic trends and changes in state or federal regulations, including changes in the welfare system.

The survival model considered all main effects and all two-way interactions of the factors listed above. A main effect refers to differences in the rate of achieving permanency that are associated with a single factor, independent of other factors. For example, differences in the rate of achieving permanency between children eligible for subsidized guardianship and those not eligible for subsidized guardianship is a main effect if that difference exists regardless of the other factors. Interactions refer to differences associated with one factor where the magnitude of the difference depends on the level of another factor. For example, the rate at which children from different ages achieve permanency may depend on whether the child started in the home of a relative at assignment or not. This is equivalent to saying that the rate at which children in HMR or non-HMR care achieve permanency depends on the age of the child. When a main effect or two-way interaction was significant, a time dependent term was added to the model to see if the rate of achieving permanency was constant over time or depended on the time since being assigned to the demonstration (see Appendix B for more details).

Table 4-15 summarizes characteristics of the 5,799 children used in the survival analysis. Most of the children (92 percent) were in the home of a relative at the time of assignment. Roughly half were eligible for subsidized guardianship as part of the demonstration. Sixty-one percent were assigned in the first assignment quarter. Although the children range in age from 2 through 17, the number of children in the higher ages falls off compared to lower ages. This pattern in part reflects that older children had a lower probability of being assigned to the demonstration in the first five quarters. Over half of the children (52 percent) were a combination of black, assigned in the first quarter, and in HMR care at the time of assignment. Thus the analysis results describe this subgroup better than other subgroups. Most of the children (58 percent) achieved permanency through adoption. Nine percent achieved permanency through subsidized guardianship. Ten percent achieved permanency through reunification.³⁷ Roughly one quarter of the children in the analysis did not achieve permanency before the end of the data collection or before age 18.

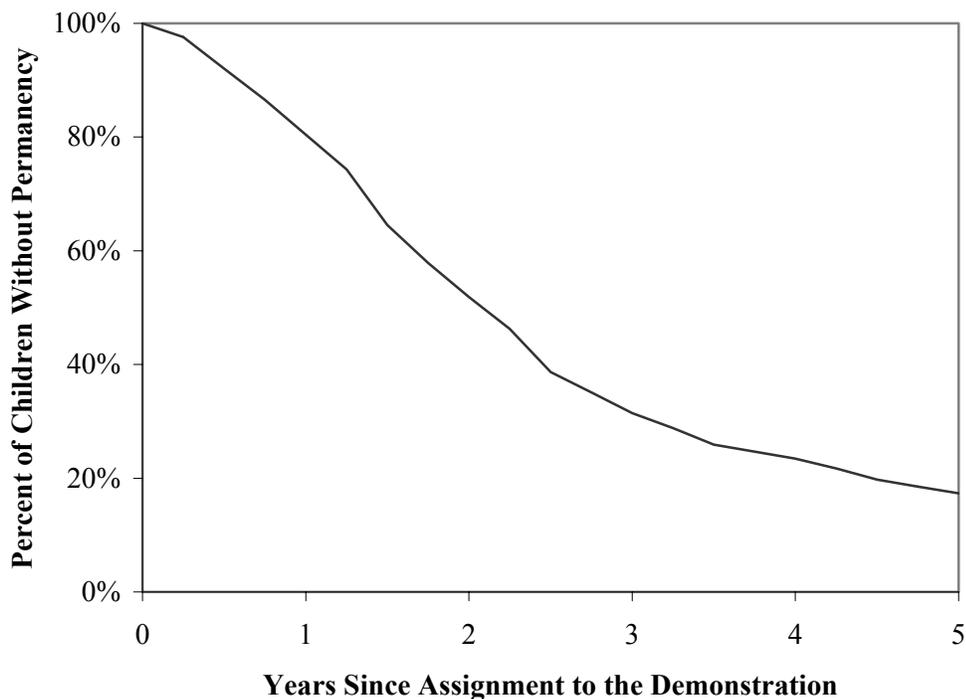
³⁷ Many children are reunified before they meet the two-year eligibility for subsidized guardianship. The overall rate for reunification in Illinois is much higher.

Table 4-11. Distribution of children in the survival analysis.

Variable	Value	Number	Percent
Age at assignment			
	2	685	11.8
	3	528	9.1
	4	501	8.6
	5	544	9.4
	6	509	8.8
	7	470	8.1
	8	433	7.5
	9	383	6.6
	10	303	5.2
	11	277	4.8
	12	483	8.3
	13	220	3.8
	14	190	3.3
	15	120	2.1
	16	93	1.6
	17	60	1.0
Race			
	African-American	4,841	83.5
	White	507	8.7
	Other	451	7.8
Care at assignment			
	Non-HMR	437	7.5
	HMR	5,362	92.5
Eligible for Subsidized Guardianship			
	No	2,969	51.2
	Yes	2,830	48.8
Gender			
	Female	2,914	50.3
	Male	2,885	49.8
Calendar quarter of assignment			
	1	3,542	61.1
	2	299	5.2
	3	512	8.8
	4	305	5.3
	5	208	3.6
	6	315	5.4
	7	525	9.1
	8	93	1.6
DCFS Region			
	Peoria (1B)	391	6.7
	East St. Louis (4A)	303	5.2
	Chicago (6C)	5,105	88.0
Type of permanency (outcome)			
	Adoption	3,365	58.0
	Reunification	582	10.0
	Subsidized Guardianship	496	8.6
	Not achieved in study period	1,356	23.4

The parameter estimates from the survival analysis are shown in the appendix along with a detailed discussion of the variables used. Because the parameters can be difficult to interpret, the analysis results are shown using survival plots. Figure 4-1 shows a survival plot for all children in the analysis. The horizontal axis is the time between assignment to the demonstration and permanency (adoption, reunification, or subsidized guardianship). The vertical axis is the percentage of children that have not yet achieved permanency. At time zero all children have just been assigned to the demonstration. After two years, roughly half of those children have been placed in a permanent home. After five years, three quarters of the children have achieved permanency and one-quarter of the children have not.

Figure 4-1. Overall percentage of children achieving permanency versus time since assignment to the demonstration



The survival analysis identifies factors that are significant predictors of the rate of achieving permanency. Each of the factors that are significant in the survival analysis can be presented in a survival plot to illustrate the association between the factor and the rate of achieving permanency. For example, to show the effect of being eligible for subsidized guardianship on the rate of achieving permanency, a survival plot will have two curves, one for children eligible for subsidized guardianship and one for children not eligible for subsidized guardianship. This plot is shown in Figure 4-2 in the following section. Children eligible for subsidized guardianship achieve permanency at a faster rate than children

not eligible for subsidized guardianship. Therefore, in a fixed period of time (such as two years) a higher percentage of children who were eligible for subsidized guardianship achieve permanency than otherwise. Conversely, of those eligible for subsidized guardianship, a lower percentage have **not** achieved permanency than for those not eligible for subsidized guardianship. Since the plot shows the percentage of children that have **not** achieved permanency, **higher rates of achieving permanency are associated with lower curves in the survival plot.**

There is a subtle difference between the results of the survival analysis and the results shown in the survival plots. The parameters in the survival analysis measure the effect of a factor on the rate of achieving permanency, **after** controlling for the effect of all other factors in the model. The survival analysis curves show the differences in the overall survival due to a factor while **including** the effect of all other factors. As a result, the survival analysis curves can be misleading. In the discussion below, the survival analysis curves that are presented all illustrate the differences that were found to be significant in the survival model. However, the survival plot may only approximate the magnitude of the difference.

The following sections discuss the results when modeling the overall rate of achieving permanency, the rate of adoption, and the rate of accepting subsidized guardianship.

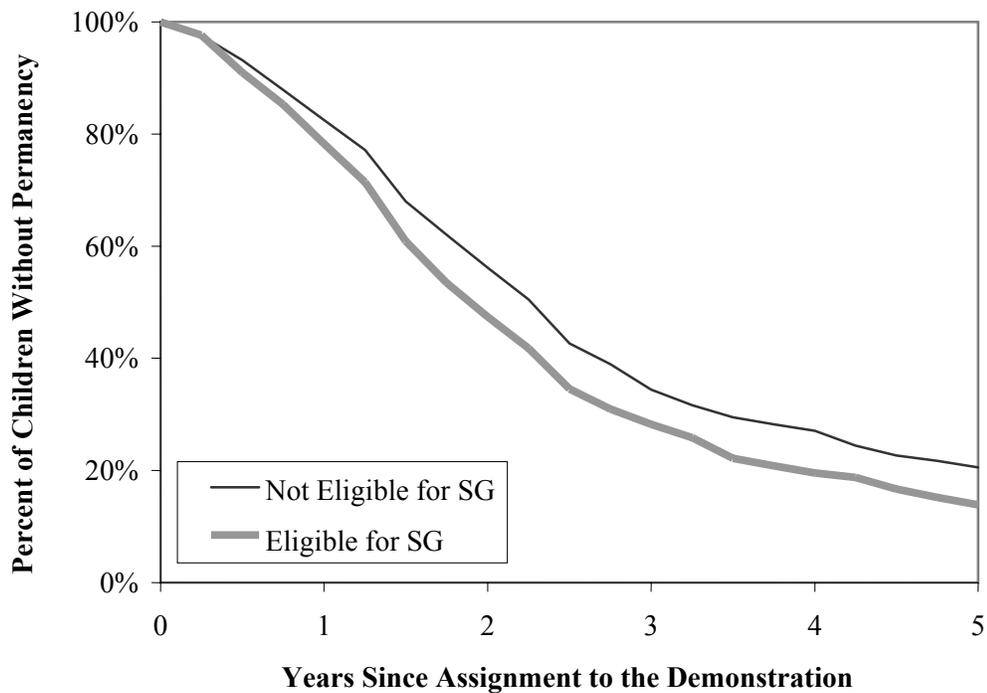
4.5.1 Overall Rate of Achieving Permanency

The model for predicting the rate of achieving permanency (adoption, reunification, or subsidized guardianship) identified the following factors as significant predictors:

- Whether subsidized guardianship was an option to the child;
- The age of the child when assigned to the demonstration;
- The quarter the child was assigned to the demonstration;
- The time in foster care prior to assignment to the demonstration; and
- For children age 12 and older, whether the child was in the home of a relative at the time of assignment.

Figures 4-2 through 4-6 use survival plots to illustrate the differences associated with the significant factors. Figure 4-2 illustrates the relative rates of achieving permanency for children eligible and not eligible for subsidized guardianship. Children who were eligible for subsidized guardianship achieved permanency at a higher rate than those who were not. This can be seen in the plot because the curve for children eligible for subsidized guardianship (SG) is lower than the curve for children not eligible for subsidized guardianship. Based on the parameter estimates, the rate at which children eligible for subsidized guardianship achieved permanency was about 1.25 times³⁸ greater than for children not eligible for subsidized guardianship. This increased rate applies generally to all children, independent of other factors in the model.

Figure 4-2. Permanency for children eligible for and not eligible for subsidized guardianship



³⁸ With a confidence interval from 1.18 to 1.32.

Figure 4-3 illustrates the effects of age on rate of achieving permanency. The rate of achieving permanency decreases with increasing age, corresponding to lower curves in the figure for the younger children and higher curves for older children.

Figure 4-3. Permanency versus age at assignment.

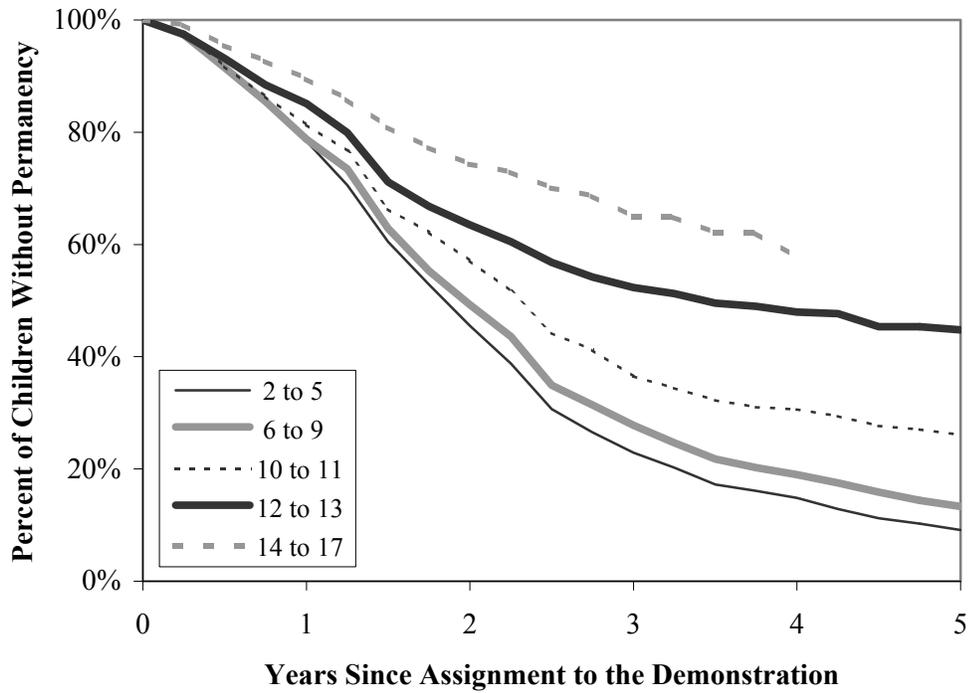


Figure 4-4 illustrates the effects of assignment quarter on the rate of achieving permanency. In the first two years after assignment, children assigned to the study in the first three quarters had a lower rate of achieving permanency than children assigned in later quarters. After two years the rates change such that after three years the percentage of children with permanency is the same regardless of whether the child was assigned earlier or later to the demonstration.

Figure 4-4. Permanency versus assignment quarter

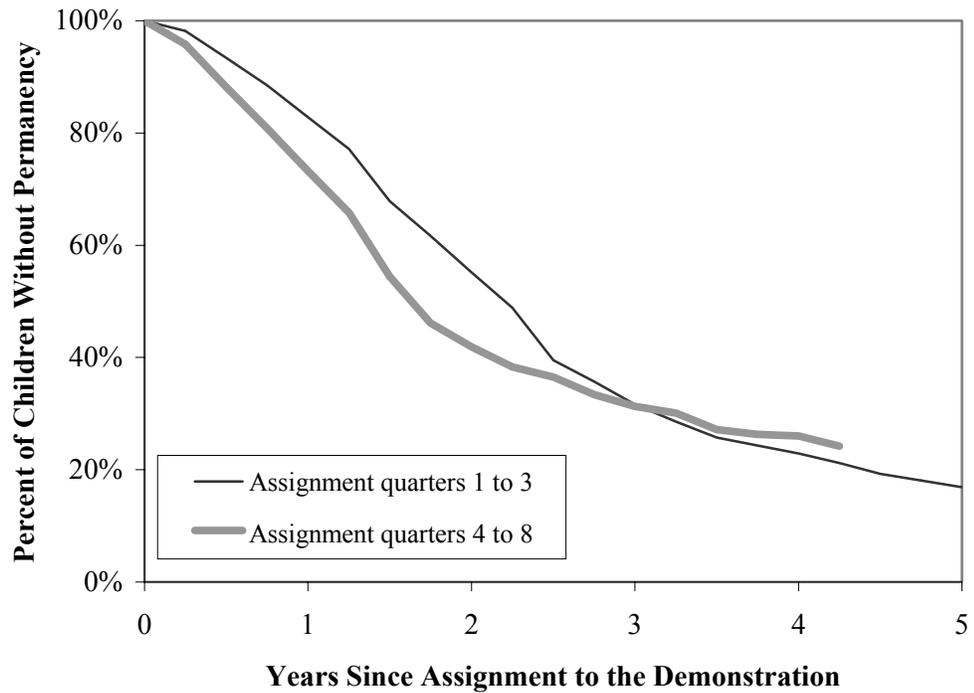
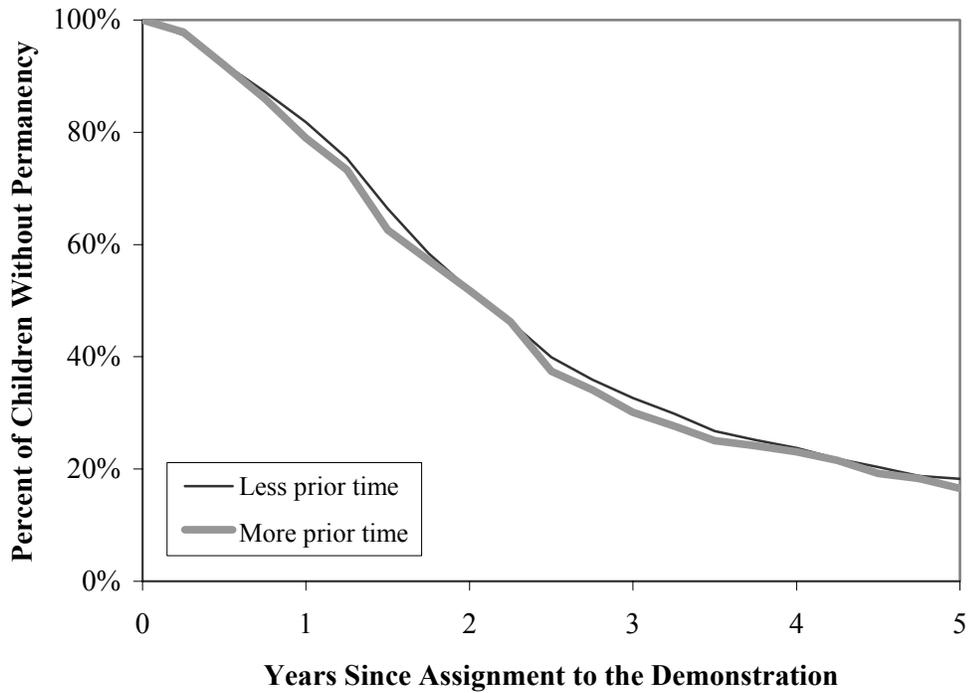


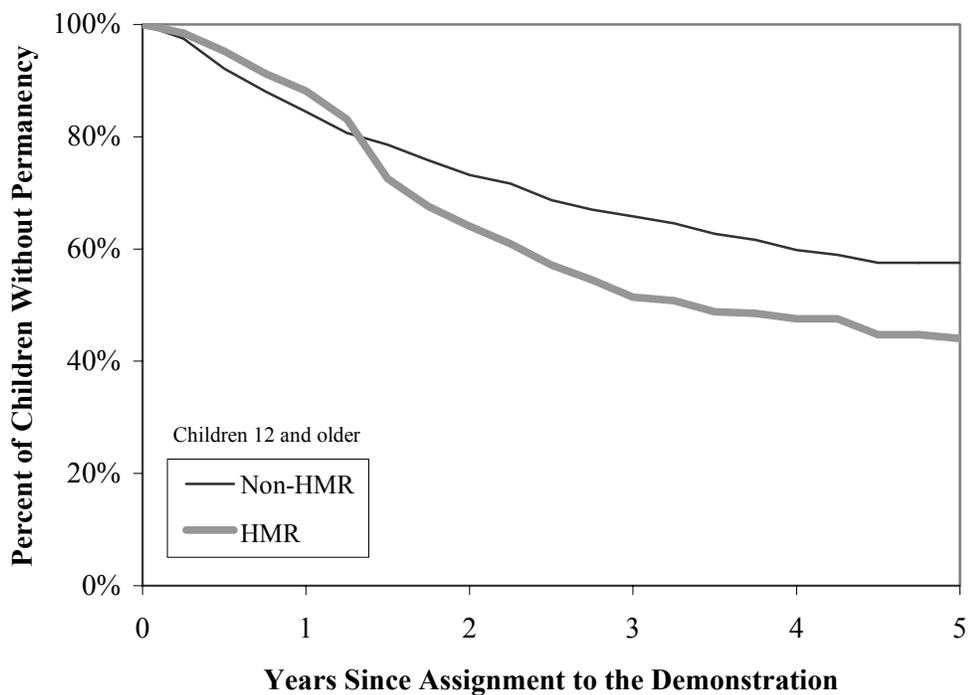
Figure 4-5 illustrates the effect of time in foster care prior to assignment on the rate of achieving permanency. Although the differences in the figure are relatively small, they are statistically significant. Children with more prior time in the foster care system at the time of assignment have a somewhat higher rate of achieving permanency than those with less prior time in foster care.

Figure 4-5. Permanency by length of time in foster care prior to assignment



For children age 12 or older, Figure 4-6 shows the rate of achieving permanency by provider type (HMR, non-HMR). In general, children placed in the home of a relative (HMR) achieve permanency at a higher rate than children not in the home of a relative. However, the difference is first seen in the second year after being assigned to the demonstration. Whether a child is in the home of a relative makes a difference starting at age 12 (children in non-HMR homes are not eligible for subsidized guardianship until age 12). Therefore the data for Figure 4-6 is restricted to children 12 and older.

Figure 4-6. Permanency for children in, or not in, the home of a relative (HMR)



Overall, the rate at which children achieve permanency is higher for children eligible for subsidized guardianship, higher for younger children, higher for children placed in relatives' homes, and slightly higher for children who have been in the foster care system for a longer time prior to assignment to the study. Although there are differences related to the quarter of assignment, those differences disappear after three years. Differences by quarter of assignment may depend on factors such as 1) the backlog of children who became eligible for subsidized guardianship in the first quarter, 2) experience with the program over time, and 3) changes in the population of foster children over time. Therefore, differences related to the quarter of assignment are difficult to interpret.

4.5.2 Rate of Adoption

The adoption rate is one component of the rate of achieving permanency. In this group of children, adoption is much more common than either reunification or subsidized guardianship. Because subsidized guardianship is the primary alternative to adoption, an important analysis objective is to determine if offering the option of subsidized guardianship affects the rate of adoption. For this analysis the rate of adoption at any specific time applies to all children for whom adoption is still an option, excluding those that have been reunified or have accepted subsidized guardianship prior to that time.

The survival analysis model for predicting the rate of adoption identified the following factors as significant predictors:

- Assignment quarter;
- Time in foster care prior to assignment to the demonstration;
- The interaction of child's age and DCFS region; and
- The interaction of child's age and placement type at the time of assignment to the demonstration (HMR).

Appendix D

Figures 4-7 through 4-11 use survival plots to illustrate the differences in adoption rates associated with the significant factors. Figure 4-7 shows the percent of children adopted versus time for two different groups of children, those assigned to the demonstration in the first three quarters and those assigned in later quarters. Initially the rate of adoption is higher for children assigned to the demonstration in the later quarters, resulting in a lower percentage of children who have not been adopted in the first two years after assignment. By two and a half years after assignment, the rates change such that there is no difference among assignment quarters in the percentage of children that has been adopted.

Figure 4-7. Adoption by assignment quarter

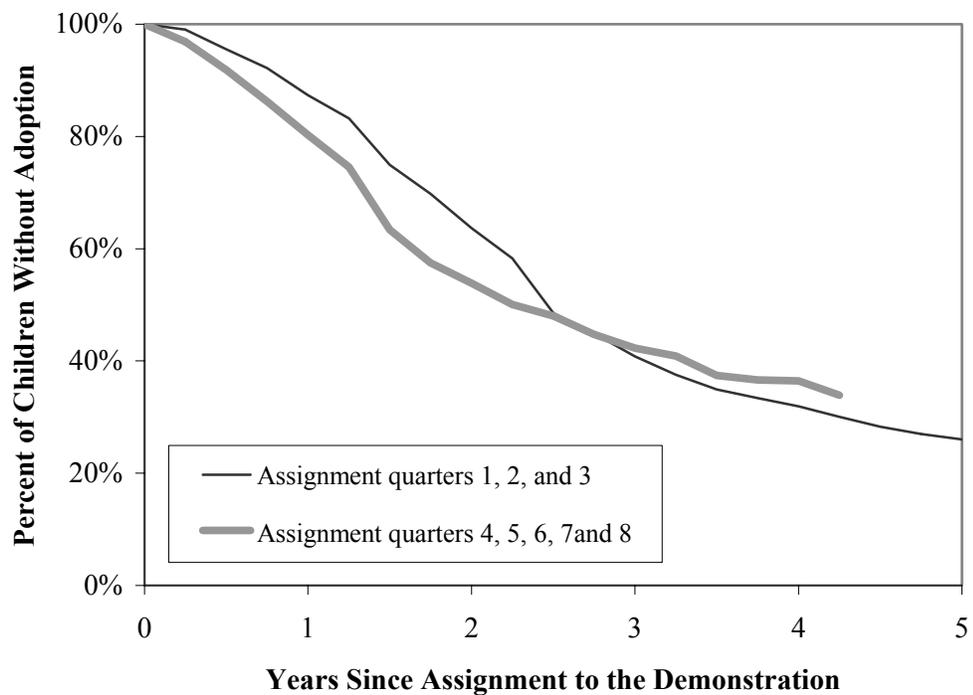
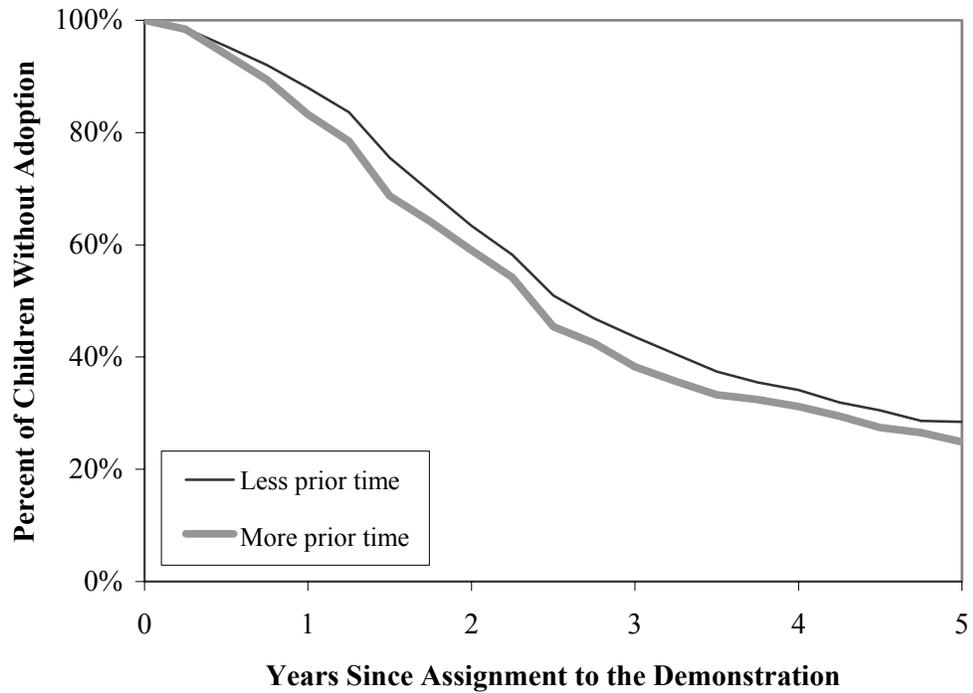


Figure 4-8 illustrates the relative rates of adoption by prior time in foster care. Children with more prior time in foster care tended to be adopted at a higher rate (corresponding to a lower curve in the figure) than children with less prior time in foster care.

Figure 4-8. Adoption by prior time in foster care



Figures 4-9 and 4-10 illustrate the effects of the child’s age on the adoption rate. The adoption rate is greater for younger children than older children. As age increases, the adoption rate decreases resulting in fewer adopted children and more children not adopted in older age groups. The adoption rate depends on the interaction of age and DCFS region. The difference between regions is due primarily to the difference between East St. Louis and the other two regions in the study. Figure 4-9 shows data for regions 6C and 1B (Chicago and Peoria) combined. Figure 4-10 shows data for region 4A, East St. Louis. Differences in adoption rate by age were greater in East St. Louis than in Peoria and Chicago.

Figure 4-9. Adoption by age at assignment for Chicago and Peoria

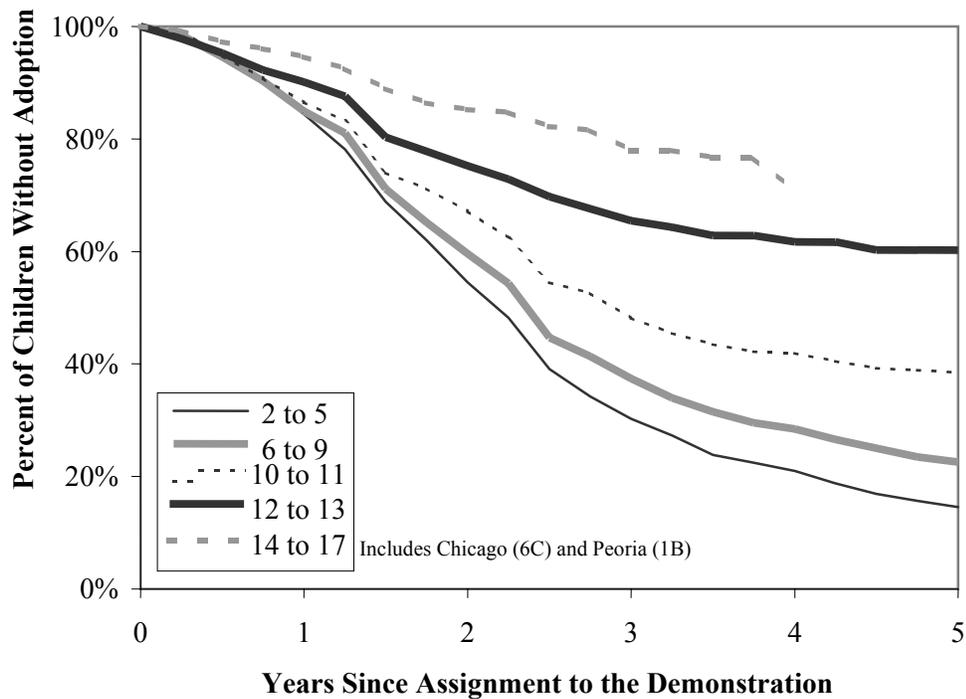
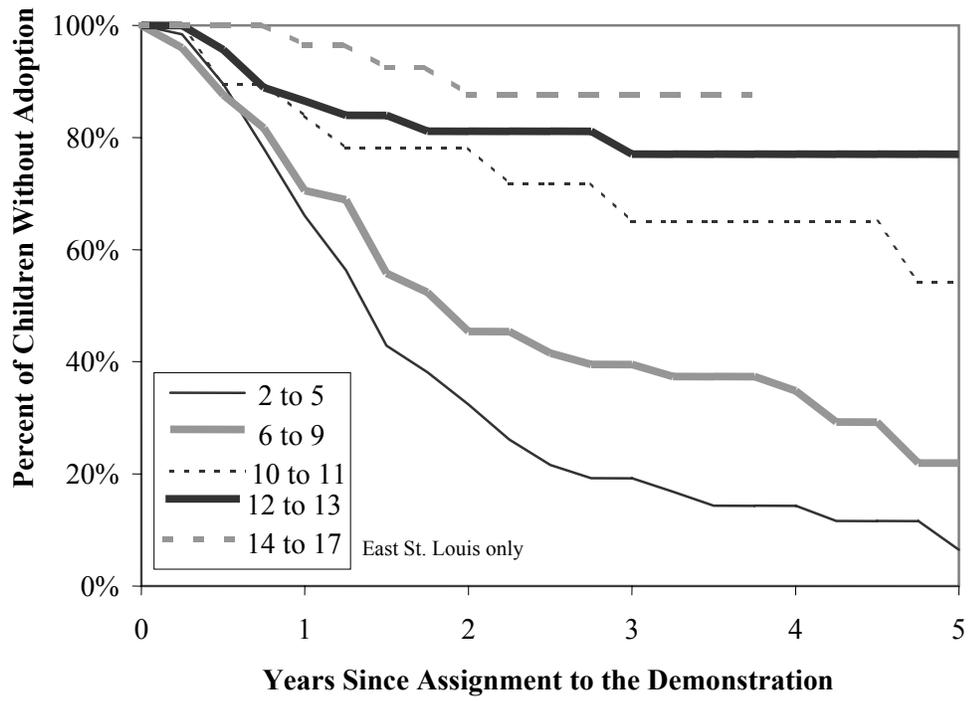
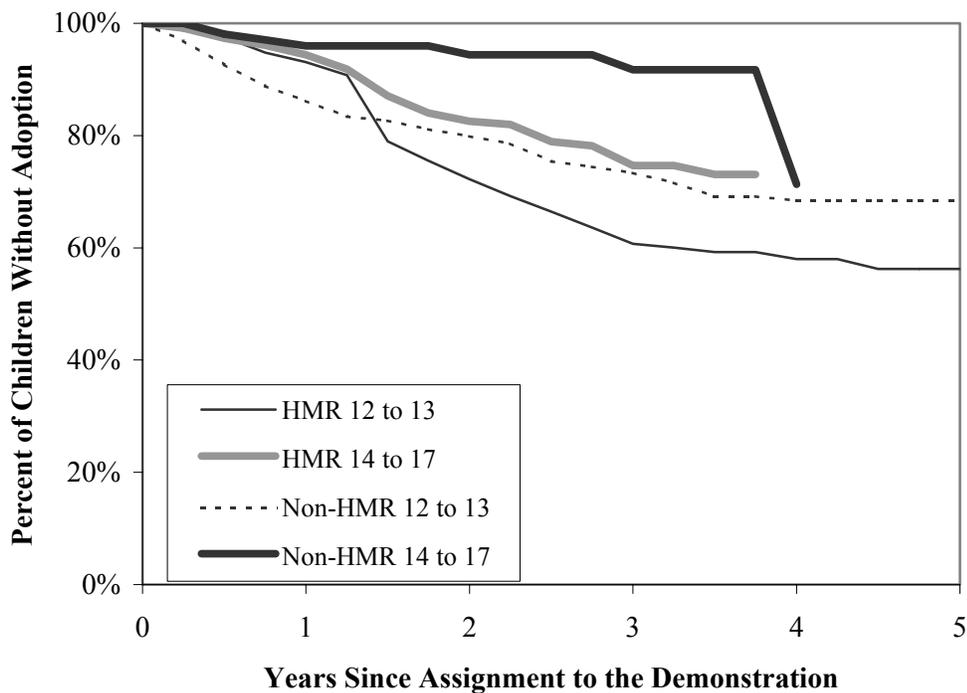


Figure 4-10. Adoption by age at assignment for East St. Louis



For children age 12 or older, Figure 4-11 illustrates the adoption rate versus the interaction of age at assignment and whether the child is in the home of a relative. Children living in the home of a relative have a higher rate of adoption (a generally lower curve in the survival plot) than children not living in the home of a relative. The rate of adoption differs somewhat by age, with older children having a lower rate of adoption, particularly for older children not in the home of a relative.

Figure 4-11. Adoption by age and whether the child lives in the home of relative at assignment



The term in this survival analysis model for the effect of eligibility for subsidized guardianship is not statistically significant and was therefore removed from the model. Removing the term from the model in effect assumes that the adoption rate for children eligible for subsidized guardianship is the same rate as for those not eligible for subsidized guardianship. An assumption that the adoption rate is the same for those eligible for and not eligible for subsidized guardianship does not mean that the total number or percentage of adoptions is the same for the two groups. Using approximate numbers from the survival analysis data, of 3,000 children not eligible for subsidized guardianship, about 1,800, or 60 percent, were adopted. Of 3,000 children eligible for subsidized guardianship, about 500 accepted subsidized guardianship. Of the remaining 2,500 children, about 1,500 were adopted, or about

60 percent. In both cases about 60% of the children that did not accept subsidized guardianship were adopted. The corresponding conclusion from survival analysis is that the rates of adoption are the same in both groups.

4.5.3 Rate of Entering Subsidized Guardianship

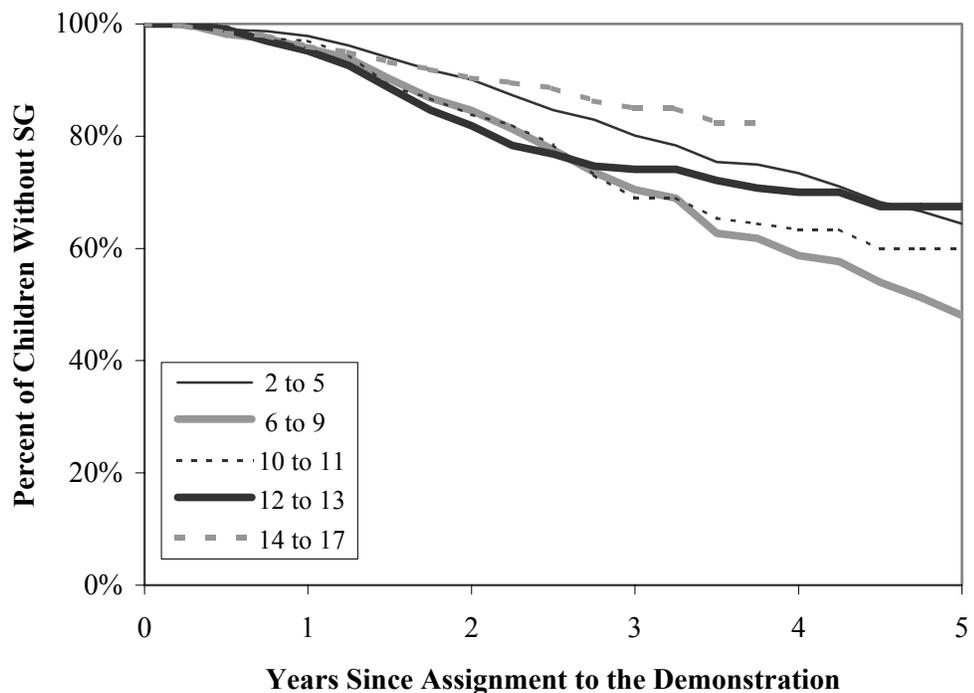
The rate at which children enter subsidized guardianship is one component of the rate of achieving permanency. For children eligible for subsidized guardianship, survival analysis was used to identify factors that predict when subsidized guardianship is accepted. The model for predicting the rate of entering subsidized guardianship identified the following factors as significant predictors:

- Age of the child at the time the child was assigned to the demonstration; and
- For children age 12 and older, the interaction of HMR and the quarter the child was assigned to the demonstration.

Figure 4-12 illustrates the relative rates of achieving permanency through subsidized guardianship for children in different age groups. The plots illustrate the following patterns identified using the survival model:

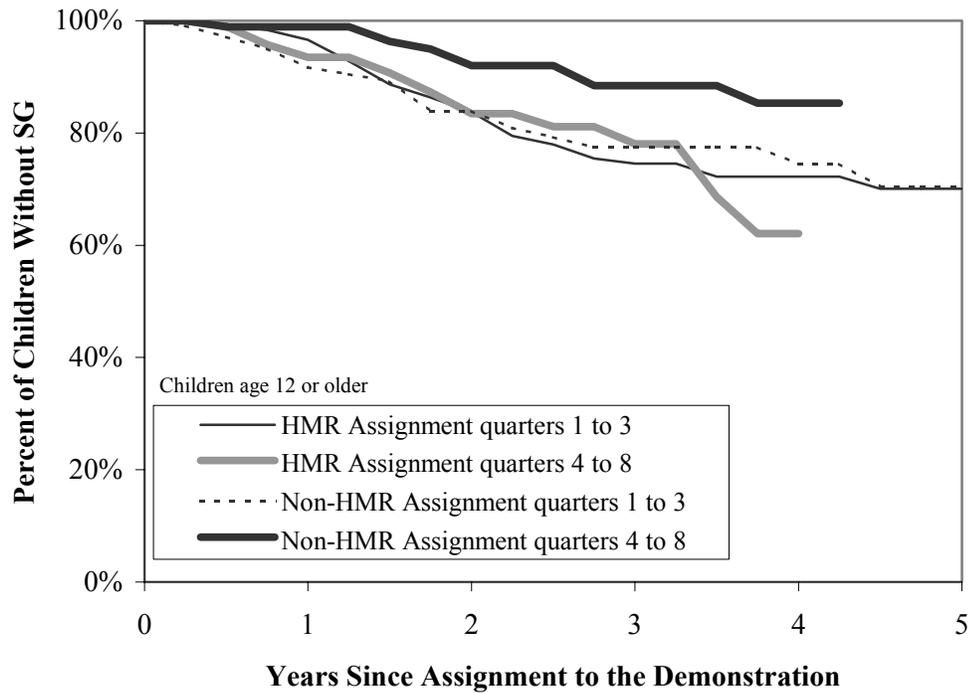
- In general, the rate of accepting subsidized guardianship is lowest for the youngest and oldest age groups (ages 2 to 5 and 14 to 17) and higher for children between 6 and 13 years old at assignment; and
- The rate of accepting subsidized guardianship changes over time, decreasing for older age groups compared to younger groups.

Figure 4-12. Subsidized guardianship by age



For children age 12 and older, Figure 4-13 illustrates the relative rate of accepting subsidized guardianship versus whether the child was living in the home of a relative and assignment quarter. There is little difference in the rate of accepting subsidized guardianship among children assigned in the first three quarters or living in the home of a relative. However, children assigned in later quarters and not living in the home of a relative have a lower rate of accepting subsidized guardianship.

Figure 4-13. Subsidized guardianship by HMR and assignment quarter



4.5.4 Summary of the survival analysis results

The rate of achieving permanency increased by about 25 percent when subsidized guardianship was an option. At the same time the rate of adoption was unaffected by the availability of subsidized guardianship. The rate of adoption gets multiplied by the number of children still in foster care to calculate the number of children adopted in any time period. The number of children still in foster care was lower when subsidized guardianship was an option. Therefore, there were fewer children adopted when subsidized guardianship was an option compared to when subsidized guardianship was not an option.

The greatest differences in the rate of achieving permanency are associated with differences in the child's age. For overall permanency and for adoption (a large component of overall permanency) similar patterns are seen for different age groups, with younger children achieving permanency or adoption faster than older children. The age patterns for subsidized guardianship are different, with somewhat lower rates of accepting subsidized guardianship for the oldest and youngest age groups (2 to 5 and 14 to 17) compared to children between 6 and 14. Because adoption rates are much higher for younger children than older children, younger children predominantly go into adoption. Subsidized guardianship becomes more important as age increases.

For children age 12 or older, children in the home of a relative achieve permanency (overall, adoption, or subsidized guardianship) at a higher rate than children not in the home of a relative. The permanency outcome for a child may also depend on the quarter in which the child was assigned to the demonstration or the age of the child. Increased length of time in foster care prior to assignment to the demonstration is also associated with somewhat higher rates of adoption and permanency.

5 PERMANENCY, STABILITY AND SAFETY FROM THE CHILD'S PERSPECTIVE

A key element of the subsidized guardianship story is how the children themselves view subsidized guardianship and adoption and the impact these permanency options have on their lives. We interviewed children using an audio computer-assisted self-interview (ACASI). The second round interview sample included 1720 children and a total of 1072 interviews were conducted. Children who were included in the round 2 sample were all children ages 9 to 18 whose caregivers were interviewed during the initial round. Some children (N=103) interviewed during round 1 were not included in the round 2 interview. These children were excluded because they were over the age of 18 at the time of the second interview.

The round 2 sample of 1720 children included 615 additional children who had not been interviewed during the first round. Some of these children were too young at the time of the round 1 interview but were 9 or older at the time of the second interview. In addition, we interviewed up to three sampled children in each household in the round 2 interview. For round 1, a maximum of two children per household were interviewed. The total weighted N for comparisons between the demonstration and cost neutrality groups is 4,100 with 1,900 children in the demonstration group and 2,200 children in the cost neutrality group.³⁹

Using a controlled experiment as the evaluation design allows us to examine differences between the demonstration and cost neutrality group that arise as a result of offering the option of subsidized guardianship to families in the demonstration group. Because a key issue in the demonstration was to make sure that children in the demonstration group were not harmed by the option of subsidized guardianship, we compared children randomly assigned to the two groups on a variety of measures. Overall, we found few statistically significant differences between children in the demonstration group and children in the cost neutrality group. The majority of children in both groups reported a high level of comfort and connection with the families with whom they were living. The first section of this chapter examines the results of the experiment and presents the outcomes of children in both groups.

³⁹ The Ns for all weighted data have been rounded to the nearest 100.

An additional 55 children who were offered guardianship but were not part of the random assignment experiment were interviewed. Their data are excluded from analyses of differences between the treatment and cost neutrality groups.

Much of the debate about subsidized guardianship has revolved around its relative advantage or disadvantage when compared with adoption. The majority of families in the demonstration group chose to adopt rather than assume subsidized guardianship. Still, subsidized guardianship was the selected option for about one-quarter of the children in the demonstration group. The second section of the chapter examines differences between children who were adopted and those who went into subsidized guardianship.

5.1 Comparisons Between the Demonstration and Cost Neutrality Groups

There were few differences between the demonstration and cost neutrality groups on the key measures of permanency, stability, safety and general well being. Children in the two groups were remarkably similar in their outcomes. In this section we describe the characteristics and outcomes for all interviewed children who were randomly assigned to the demonstration and cost neutrality conditions. Significant differences between the two groups are discussed where present. Tables illustrating the breakdown by demonstration and cost neutrality groups for nonsignificant differences are found in Appendix A.

5.1.1 Demographics

With the implementation of random assignment to the two study conditions, there should be few differences between the demonstration and cost neutrality groups on pre-existing characteristics. Indeed, children in the demonstration and cost neutrality groups did not differ significantly with respect to gender or age. The average age of the children interviewed was 12.3 years of age. Forty-eight percent of the children were male and 52 percent were female.

The majority of children, 65 percent, were living with caregivers who were kin to them. Similar numbers of children in the demonstration and cost neutrality groups lived with kin.

The largest percentage of children in each group—nearly half—identified their grandmother as their caregiver when asked about their relationship with the individual interviewed for the caregiver interview (see Table 5-1). There were no significant differences between the demonstration and cost neutrality groups in who was identified as caring for the child. In 11 percent of the cases, children identified the caregiver as their “mother.” However, in only 22 percent of these cases (unweighted N=5) was this person the child’s biological mother according to the DCFS database. In other cases, the identified “mother” was the child’s adoptive

mother (73 percent), foster mother (4 percent), or guardian (<1 percent). Likewise, in only 35 percent of the case where the child identified the caregiver as the “father” (unweighted N=3) was the caregiver the biological father with whom the child had been reunified.

Table 5-1. Living arrangements

Child’s report of relationship of caregiver to child	Total (%)
Grandmother	47
Grandfather	2
Mother	11
Father	3
Aunt	17
Uncle	<1
Caregiver	20
Total %	100%
Weighted N	4100
Unweighted N	1017

Fewer than 10 percent of the children had lived with their current caregivers less than 2 years and the average length of time with their caregiver was 5.9 years (see Table 5-2). One-quarter of the children had lived with their caregiver for 8 or more years. There were no significant differences in how long children in the two groups had been with their current caregivers. On average, children in the cost neutrality group had been in foster care somewhat longer (6.5 years) than children in the demonstration group (6.0 years), a statistically significant difference ($t=3.08$, $p<.01$).

Table 5-2. Length of time with caregiver

Length of time with caregiver According to DCFS	Total (%)
< 1 year	4
1 year to less than 2 years	6
2 years to less than 5 years	27
5 years to less than 8 years	39
8 years or more	24
Total %	100%
Average length of time with caregiver	5.9 years
Weighted N	3,800
Unweighted N	994

5.1.2 Permanency

There was a statistically significant difference between the cost neutrality and demonstration groups in the number of interviewed children who achieved a permanent relationship through adoption, subsidized guardianship, or reunification. Seventy-four percent of the interviewed children in the demonstration group were in permanent relationships, compared to 64 percent of children in the cost neutrality group ($X^2=4.29$, $p<.05$). Table 5-3 presents the permanency status of all children interviewed for the study.

Table 5-3. Permanency status by assignment group

Permanency Status^a	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Adoption	51	61
Subsidized guardianship	17	--
Reunification	5	3
Foster care	26	36
Total %	100	100
Weighted N	1900	2200
Unweighted N	489	528

^a $X^2=36.93$, $p<.0001$

While more children in the cost neutrality group (61 percent) were adopted than children in the demonstration group (51 percent), more children overall in the demonstration group achieved permanency with the available option of subsidized guardianship. About one-quarter (26 percent) of the children in the demonstration group remained in foster care, while more than one-third (36 percent) of the cost neutrality group remained in foster care. These numbers differ from the permanency rates presented in chapter 4 because chapter 4 includes all children of interviewed caregivers, including those under age 9.

For those children who remained in foster care at the time of the final interview, there were no significant differences in the percentage of children who said that they wanted their current home to be their permanent one. The majority of children (73 percent) wanted their home to be permanent. The reasons that they cited for either wanting the home to be permanent did not differ based on assignment status. The most common reasons children cited for wanting their current home to be permanent were that they would be safe (89 percent), they would have someone to depend on (83 percent), and they would be part of the family (79 percent). Table 5-4 presents all the reasons children identified for wanting their current home to be made permanent.

Table 5-4. Foster care children’s reasons why they want their current home to be permanent

Why want home to be permanent	Total(%)
I would be safe	87
I would have someone I can depend on	83
I would be part of the family	79
I would be with my brothers and sisters	63
I wouldn’t have to move anywhere	65
I wouldn’t have a caseworker anymore	50
Some other reason	35
Weighted N	1000
Unweighted N	226

Note: Responses do not total 100 percent as multiple responses were allowed. Percentages reflect only affirmative responses.

A relatively small number of children (unweighted N=91) in foster care did not want their current home to be their permanent one (see Table 5-5). While there were some differences in the pattern of responses between children in the demonstration and cost neutrality groups, none of the differences were statistically significant, due in part to the small number of children in either the demonstration (N=45) or cost neutrality groups (N=46) who did not want their home to be permanent. The majority of children (64 percent) said that they did not want their home to be

permanent because they wanted to live with their biological parents. This reason was closely followed by “some other reason” (56 percent), indicating that our response categories did not sufficiently capture foster children’s reasons for not wanting their current home to be permanent. One of the limitations of the ACASI method is the inability to ask open-ended questions. With ACASI, all response options must be presented on the screen.

Table 5-5. Foster care children’s reasons why they do not want their current home to be permanent

Why do not want home to be permanent	1.1.1.1.1.1.2 (%)	<u>Total</u>
I want to live with my mother or father	64	
I wouldn’t get to see my mother or father as often as I want to	31	
I don’t want to live with [current caregiver]	35	
I wouldn’t live with my brothers or sisters	23	
I don’t feel safe here	13	
Some other reason	56	
Weighted N	400	
Unweighted N	91	

Note: Responses do not total 100 percent as multiple responses were allowed.

5.1.3 Stability

There were no statistically significant differences between the demonstration and cost neutrality groups on measures of household stability. Most (95 percent) had lived with the same family for the past year. Twenty-nine percent saw someone move into the household since they had moved in. Thirty-three percent of the children had changed schools in the past year.

There were no differences between the demonstration and cost neutrality groups in the number who thought that they would continue to live with their caregiver in the next year. The great majority (90 percent) of the children in each group shared the belief that their home was a stable one. For those children who thought they would be living with someone else, the greatest number in both groups (46 percent) stated that they would be living with a parent (see Table 5-6).

Table 5-6. Child's identification of alternate living plan

If not caregiver, who will be living with next year	(%)
Parent(s)	46
Another relative	23
Foster parent	19
Someone else	20
By self alone	22
Weighted N	500
Unweighted N	112

Note: Responses do not total 100 percent as multiple responses were allowed.

Children not only felt that their current homes were stable, they also indicated that they felt close to the families with whom they were living. Eighty-six percent said that they liked the people they lived with all or most of the time and 90 percent said that they felt like part of the family all or most of the time. Again, there were no differences between the demonstration and cost neutrality groups.

5.1.4 Safety

On issues of safety, there was only one statistically significant difference between the demonstration and cost neutrality groups. More children in the demonstration group (95 percent) than in the cost neutrality group (88 percent) said that they could count on other adults in the household to protect them ($X^2=5.83$, $p<.05$). Most of the children in both groups (96 percent) said that they could count on their caregiver to make sure that no one hurt them. There were no differences between the two groups with respect to their feelings of safety in their neighborhoods. While the majority of children (76 percent) said that they felt safe all or most of the time in their neighborhood, 19 percent felt unsafe part of the time and 4 percent never felt safe.

Thirty-six percent of children reported ever being spanked or hit by adults in their home and there was no statistically significant difference between the demonstration and cost neutrality groups. There were also no differences between the demonstration and cost neutrality groups in whether physical punishment ever resulted in a mark, bruise, cut or welt. Seventeen percent of the children who reported ever being hit said that a mark had ever been left.

A minority of children (10 percent of the demonstration group and 7 percent of the cost neutral group) reported ever being scared of someone who lived in their home. An even smaller number (4 percent overall) reported that the adults in their home ever hit each other.

5.1.5 General well-being

Several measures of general well-being also found no statistically significant differences between the demonstration group and the cost neutrality group. These include scales measuring self-efficacy, depression, connectedness to the community, social support from caregiver, support from others in the home, support from family outside the home, physical health and substance abuse. These measures indicated that the children overall experienced good physical and mental health and relatively high levels of support from different sources.

Questions asking children about their caregivers' relationships with their biological mother found no difference between the demonstration and cost neutrality groups. Three-quarters of the children reported that their caregiver saw or spoke to their biological mother.⁴⁰ Eighty-eight percent indicated that their caregiver and biological mother "got along OK." Seventy-nine percent of the children who said that their mother was alive said that they saw her at least sometimes. There were no differences between the demonstration and cost neutrality groups on the quality of children's relationships with their biological mother, for those who ever saw their mothers.

Children reported that their caregivers communicated with their biological fathers in 50 percent of cases.⁴¹ Seventy-five percent of children said that their caregiver and their father "got along OK," and there were no significant differences between the two groups. There were also no statistically significant differences between the demonstration and cost neutrality groups in children's reports of ever seeing their fathers or in the quality of the children's relationship with their fathers, for those who had at least a minimal relationship with their father.

⁴⁰ About 12 percent of cases were excluded from the analysis (unweighted N=126). These excluded cases include those where children reported that the caregiver was their biological mother (unweighted N=11), where their mother was deceased (unweighted N=66), where they did not know if she was alive or deceased (unweighted N=25), where they did not know whether their caregiver had a relationship with their mother (unweighted N=9), or where they declined to answer the question (unweighted N=15).

⁴¹ About 27 percent of cases were excluded from the analysis (unweighted N=276). These excluded cases include those where children reported that the caregiver was their biological father (unweighted N=5), where their father was deceased (unweighted N=150), where they did not know if he was alive or deceased (unweighted N=92), where they did not know whether their caregiver had a relationship with their father (unweighted N=15) or where they declined to answer the question (unweighted N=14).

5.1.6 Summary and Conclusion About Differences Between the Demonstration and Cost Neutrality Groups

The random assignment of children to either the demonstration group where they were eligible to participate in subsidized guardianship or the cost neutrality group, where they were not, had no overall impact on the children's feelings of stability, safety or their general well-being. The primary significant difference was the greater rate of permanency for children in the demonstration group, with 74 percent of the interviewed children in the demonstration group in permanent relationships and out of the foster care system, compared to 64 percent of the children in the cost neutrality group. Nearly all the children in the cost neutrality group (95 percent) who were in permanent relationships had been adopted (the other 5 percent had been reunified with a parent), whereas 69 percent of the permanency group of demonstration children had been adopted and 24 percent were in subsidized guardianship. We can conclude that participation in the demonstration group did not have a negative effect on outcomes for children as reported by the children themselves.

According to state policy, subsidized guardianship was only to be considered by the caseworker once adoption had been ruled out as a permanency option. However, at the time this policy was developed, there was little evidence about whether subsidized guardianship resulted in different outcomes for children than adoption. The analyses in the next section examine what differences—if any—exist between children whose caregivers chose subsidized guardianship and those who chose adoption.

5.2 Comparisons Between the Subsidized Guardianship and Adoption

In this section, we examine whether being adopted or in subsidized guardianship differentially effected children's feelings of permanency and stability. Some advocates of adoption have argued that subsidized guardianship is less permanent than adoption. If this is the case, children in guardianship may feel less a part of the family than children who have been adopted. Subsidized guardianship may have some advantages over adoption, however. Unlike adoption, subsidized guardianship does not require the legal severing of the parental ties to the child. Therefore, children in guardianship arrangements may maintain a closer relationship to their biological parents than children who are adopted.

5.2.1 Demographics

There was no statistically significant difference in the gender of children who went into guardianship or were adopted (see Table 5-7). Adopted children were somewhat younger than children in guardianship. Both children in guardianship and those who were adopted had been with their caregivers similar lengths of time at the time of the interview, about 6.7 years.

Table 5-7. Demographics and living arrangements by status

Demographics and living arrangement	Status	
	Subsidized Guardianship (%)	Adoption (%)
Gender		
Male	46	45
Female	54	55
Total %	100	100
Average age of child^a	13.12	12.32
Average years with caregiver according to state database	6.68	6.67
Caregiver relationship to child^b		
Kin	79	60
Non-kin	21	40
Total %	100	100
Weighted N	900	4100
Unweighted N*	152	616

^at=2.34, p<.01

^bX²=7.05, p<.01.

*Due to missing values, unweighted Ns vary from 608-616 in the adoption group.

In our sample of interviewed children, 79 percent of the children in guardianship were with kin, compared to 60 percent of the children who were adopted, a statistically significant difference. Subsidized guardianship is a program designed primarily for HMR placements, so kinship status is closely tied to guardianship. Foster parents who were not kin were strongly encouraged to adopt children rather than pursue subsidized guardianship. In order for nonkin to obtain guardianship, state policy required not only that adoption be ruled out as a possible permanency option but that children be at least 12 years of age. Exceptions were occasionally made to allow guardianship for younger children by unrelated caregivers.

5.2.2 Permanency

We found no differences between children in subsidized guardianship and those who had been adopted regarding their feelings of permanency and belonging in the family (see Table 5-8).

Table 5-8. Feelings about current living arrangements by status

Feelings about living arrangement	Permanency Status	
	Subsidized Guardianship (%)	Adoption (%)
Like people live with all or most of the time	88	88
Feel like part of the family all or most of the time	92	89
Think will live with caregiver next year	93	93
Weighted N	900	4100
Unweighted N*	152	614

Note: Percentages only include affirmative responses.

*Due to missing values, unweighted Ns vary from 149-152 in the guardianship group and from 609-614 in the adoption group.

Most children, whether in guardianship or adopted, indicated that they liked the family they were living with, they felt like part of the family most or all of the time and thought they would live with their caregiver next year.

Children in subsidized guardianship and those who had been adopted were both asked how things had changed since their relationship had become permanent. There were no statistically significant differences in the responses given by those in guardianship or adoption (see Table 5-9).

Table 5-9. How things have changed since guardianship or adoption by permanency status

Changes since guardianship/adoption	Permanency Status	
	Subsidized Guardianship (%)	Adoption (%)
How child feels since caregiver became guardian/adopted		
Happy	88	82
Sad	4	5
Not happy or sad	8	13
Total %	100%	100%
How have things changed since guardianship/adoption?*		
I feel like this is where I'll live until I'm grown	64	71
I feel like I have someone to depend on	70	73
I feel safer	68	78
I feel like I'm part of the family	57	66
I don't see my mother as often as I want to	22	28
I don't see my brothers or sisters as often as I want to	17	23
Nothing has changed	24	13
Weighted N	800	3600
Unweighted N**	135	568

*Multiple responses were allowed. Percentages only include affirmative responses.

**Due to missing values, unweighted Ns vary from 134-135 and from 566-568 in the adoption group.

The majority of children (over 80 percent in each group) said that they were happy that they had been adopted or were in guardianship. Children indicated generally positive changes resulting from either guardianship or adoption, with smaller numbers indicating negative changes, such as not seeing their biological family more frequently. Overall, the pattern of responses indicate that more adopted children felt that there were changes in their relationships since permanency was established than did children in guardianship. Though the differences are not statistically significant, more adopted children said that they felt their home was where they would live until they were grown, that they felt safer, and that they felt like part of the family.

These results do not necessarily mean that adopted children felt safer and more secure than children in guardianship but rather that they experienced a greater sense of change between pre- and post-permanency. Nearly one-quarter of the children in subsidized guardianship compared with 13 percent of the children who had been adopted said that nothing had changed as a result of the change in their legal permanency status. The larger percentage of children in

subsidized guardianship living with kin offer one explanation for these differences. When children are already living with kin before permanency is established, changes in legal permanency status may not result in significant changes in the sense of permanency and belonging from the perspective of the child. A similar pattern of results is seen when examining how children feel their lives when they have been adopted by kin versus non-kin. While the sample size is small and there are not statistically significant differences between these two groups of children, the pattern of results suggests a greater feeling of change for non-kin adoptions than for children experiencing adoption by kin.

5.2.3 Safety

There were no statistically significant differences between children in guardianship and those who had been adopted in their feelings of safety (see Tables 5-10 and 5-11). Thirty-one percent of children who were in guardianship and 41 percent of adopted children said that they were ever hit or spanked by an adult in their home. Of those who had ever been hit, 11 percent of the children in guardianship and 20 percent of the children who were adopted said that being hit ever left a mark.

Table 5-10. Safety issues by permanency status: Physical punishment

Safety	Status	
	Subsidized Guardianship (%)	Adoption (%)
Adults in home ever hit or spank child	31	41
Weighted N	900	4000
Unweighted N	151	609
Hitting ever leaves a mark	11	20
Weighted N	300	1600
Unweighted N	44	239

Note: Percentages only include affirmative responses.

The great majority of children (98 percent of children in guardianship and 96 percent of children who were adopted) said that they could count on their caregiver to make sure that they were safe (see Table 5-11). Most of the children who had other adults living in the home also said that they could count on these adults to protect them from harm. A majority of children (68 percent of children in guardianship and 72 percent of adopted children) said that they felt safe in their neighborhood most or all of the time.

Table 5-11. Safety issues by permanency status

Safety	Status	
	Subsidized Guardianship (%)	Adoption (%)
Child can count on caregiver to make sure no one hurts him/her	98	96
Ever scared of someone in the home	14	10
Adults in home ever hit each other	2	5
Child feels safe in neighborhood when outside		
All of the time	43	41
Most of the time	25	31
Sometimes	20	19
Hardly ever	3	4
Never	9	5
Total %	100	100
Weighted N	900	4100
Unweighted N*	152	615
Child can count on other adults in home to make sure no one hurts him/her**	93	95
Weighted N	500	2600
Unweighted N	101	418

Note: Percentages may not total 100 percent due to rounding and only include affirmative responses.

**Due to missing values, unweighted Ns vary from 150-152 in the subsidized guardianship group and from 609-615 in the adoption group.

*Includes only cases where the child says there are other adults living in the home.

5.2.4 Relationship with Biological Parents

While subsidized guardianship or adoption do not appear to effect children's feelings of permanency or safety differentially, the permanency decision families make to assume one of these options over another may effect children's relationships with their biological parents. Because subsidized guardianship does not require the severing of parental ties, this type of relationship may be better suited to families who want to maintain a relationship with the child's biological mother or father. We first asked children about their perceptions of their guardian or adopted parents' relationship with their biological parents and then asked about their own relationship with their birth parents.

Unlike the comparisons between subsidized guardianship and adoption on measures of permanency, stability and safety, we found that there were significant differences between the two groups with respect to the relationships caregivers had with the child's biological parents (see Table 5-12).

Table 5-12. Caregivers' relationship with child's biological parents

Relationship with biological mother and father*	Permanency Status	
	Subsidized Guardianship (%)	Adoption (%)
Caregiver ever sees or talks to biological mother ^a	85	75
Caregiver and mother get along OK ^b	96	89
Weighted N	780	3300
Unweighted N**	134	543
Caregiver ever sees or talks to biological father ^c	68	53
Caregiver and father get along OK	86	77
Weighted N	680	2520
Unweighted N**	123	436

Note: Percentages only include affirmative responses.

^a $X^2=4.16$, $p<.05$

^b $X^2=7.01$, $p<.01$

^c $X^2=4.61$, $p<.05$

*Cases where child says biological mother or father is deceased or child does not know if biological parents caregiver communicate are excluded.

**Due to missing values, unweighted Ns vary slightly by question

These differences between subsidized guardianship and adoption are driven largely by kin status. As noted earlier, 79 percent of the guardians are kin, compared with 60 percent of the adoptive parents. Table 5-13 controls for kinship status and looks at differences between guardianship and adoption between kin and nonkin. When analyzing differences for kin, there are no significant differences between children in adoption and those in subsidized guardianship. Unfortunately, the number of non-kin guardians is very small so determinations about the effect of guardianship on non-kin relations are not possible to make. However, the comparisons in table 5-13 make it clear that there are great differences between kin and nonkin: Kin like and talk to each other more than non-kin and whether the permanency status is subsidized guardianship or adoption makes much less difference. For example, children report that 89 percent of kin guardians and 87 percent of kin adoptive parents talk to the child's biological mother. In contrast, only 57 percent of nonkin guardians and 53 percent of nonkin guardians talk to the child's biological mother.

Table 5-13. Caregivers' relationship with child's biological parents: Kin vs. Nonkin

Relationship with biological mother and father*	Kin		Nonkin	
	Subsidized Guardianship (%)	Adoption (%)	Subsidized Guardianship (%)	Adoption (%)
Caregiver ever sees or talks to biological mother	89	87	57	53
Caregiver and mother get along OK	97	94	89	78
Weighted N	700	2200	100	1200
Unweighted N**	112	394	22	149
Caregiver ever sees or talks to biological father	69	59	59	39
Caregiver and father get along OK	90	81	63	69
Weighted N	600	1900	100	900
Unweighted N**	102	323	21	113

Note: Percentages only include affirmative responses.

*Cases where child says biological mother or father is deceased or child does not know if biological parents caregiver communicate are excluded.

**Due to missing values, unweighted Ns vary slightly by question.

Because of the great overlap between kinship status and subsidized guardianship and the influence that kin has on relationships with the child's biological parents, the remainder of this section on relations with biological parents focuses exclusively on differences that subsidized guardianship or adoption make in children's lives when they are living with kin. While the effect of guardianship on children living with nonrelated caregivers is also of interest, the number of interviewed children with nonkin guardians in the sample (N=30) is too small for valid statistical comparisons.

Overall, children reported that their kin guardians or adoptive parents did maintain a relationship with the child's biological parents (see Table 5-14). There were no statistically significant differences between the two groups. More children noted that they felt that their guardians or adoptive parents got along with their biological parents than noted that they actually spoke to one another. This indicates that although relationships between guardians/adoptive parents and the children's biological parents may not necessarily be close, they are at least not hostile. It is interesting to note that the majority of kin caregivers had a relationship with the child's biological parents. One concern often cited about adoption is the potential to cause conflict and strain in family relations when parental ties are legally severed and kin adopt a child. However, this does not appear to be the case in this study.

Appendix D

Tables 5-14 and 5-15 presents the frequency with which children living with kin saw their biological mother and father. The majority of children in both groups said that they say their mother at least sometimes. Again, the legal severing of the parental relationship in cases of kin adoption does not seem to greatly diminish children’s contact with their mothers and most do have a relationship with her. More children in guardianship (43 percent) saw their biological mother everyday or almost everyday compared with children who had been adopted (29 percent). This difference was marginally significant ($p < .10$). There were no differences in the amount children wanted to see their mothers, with about two-thirds in both groups saying that they wished they saw their mother more.

Table 5-14. Child’s relationship with biological mother: Kin

Frequency of child seeing biological mother	Permanency Status	
	Subsidized Guardianship (%)	Adoption (%)
Child ever sees biological mother	84	77
Frequency of seeing mother		
Everyday or almost everyday	43	29
About once a week	24	20
Once or twice a month	9	14
Less than once a month	8	14
Never	16	23
Total %	100	100
Weighted N	700	2400
Unweighted N*	122	437
Child would like to see mother:**		
More	64	62
Same amount	28	31
Less	8	7
Total %	100	100
Weighted N	700	2200
Unweighted N	113	392

*Due to missing values, unweighted Ns vary from 430-437 in the adoption group.

**Excludes cases where the child says that the caregiver is the biological mother.

Children in subsidized guardianship were marginally more likely than children who had been adopted to say that they ever saw their biological father ($p < .10$). About half of the adopted children and 64 percent of those in guardianship ever saw their father (see Table 5-15).

Table 5-15. Child's relationship with biological father: Kin

Frequency of child seeing biological father	Permanency Status	
	Subsidized Guardianship (%)	Adoption (%)
Child ever sees biological father	64	50
Frequency of seeing father		
Everyday or almost everyday	16	18
About once a week	10	11
Once or twice a month	22	10
Less than once a month	15	10
Never	36	51
Total %	100	100
Weighted N	700	2400
Unweighted N*	122	437
Child would like to see father**:		
More	72	66
Same amount	13	31
Less	15	13
Total %	100	100
Weighted N	600	1800
Unweighted N	103	318

*Due to missing values, unweighted Ns vary from 121-122 in the subsidized guardianship group and from 424-437 in the adoption group.

**Excludes cases where the child says that the caregiver is the biological father.

Children who ever saw their biological mothers generally indicated that they had a good relationship with her, regardless of permanency status (see Table 5-16). Seventy-one percent of children in guardianship and 60 percent of adopted children said that they did fun things with their mother all or most of the time. Sixty-five percent of children in guardianship and 61 percent of adopted children also said that they talked to their biological mother about important things in their life. Relatively few children (6 percent of children in guardianship and 13 percent of adopted children) said that they were ever afraid of their mother. While none of these differences between children in guardianship and those adopted are statistically significant, the general pattern of results suggests a more somewhat positive relationship between child and biological mother for cases of subsidized guardianship than in cases of adoption. Still, the relationship was positive for the majority of children who had been adopted.

Table 5-16. Child's relationship with biological mother: Kin

Child's relationship with biological mother ¹	Permanency Status	
	Subsidized Guardianship (%)	Adoption (%)
Does fun things with mother		
All or most of the time	71	60
Sometimes	23	23
Hardly ever	1	6
Never	5	11
Total %	100	100
Talks to mother about important things in child's life		
All or most of the time	65	61
Sometimes	18	18
Hardly ever	7	8
Never	10	12
Total %	100	100
Child is afraid of mother		
All or most of the time	2	4
Sometimes	1	2
Hardly ever	4	7
Never	93	87
Total %	100	100
Weighted N	600	1900
Unweighted N	96	354

¹Excludes children who never see their mothers.

**Due to missing values, unweighted Ns vary from 94-96 in the subsidized guardianship group and from 352-354 in the adoption group.

There were also no significant differences between adopted children and those in subsidized guardianship in their relationship with their biological father, for those children who were living with kin (see Table 5-17). Again, terminating legal parental rights in cases of kinship adoption did not seem to have a negative effect on children's relationships with the fathers, as compared with subsidized guardianship. Notably fewer children in subsidized guardianship said that they did fun things with their biological fathers or talked to them about important things than did with their biological mothers.

Table 5-17. Child's relationship with biological father: Kin

Child's relationship with biological father*	Permanency Status	
	Subsidized Guardianship (%)	Adoption (%)
Does fun things with father		
All or most of the time	56	59
Sometimes	20	22
Hardly ever	5	7
Never	19	13
Total %	100	100
Talks to father about important things in child's life		
All or most of the time	50	45
Sometimes	20	26
Hardly ever	5	9
Never	24	21
Total %	100	100
Child is afraid of father		
All or most of the time	10	7
Sometimes	<1	4
Hardly ever	<1	6
Never	89	84
Total %	100	100
Weighted N	500	1200
Unweighted N**	76	212

* Excludes children who never see their fathers.

**Due to missing values, unweighted Ns vary from 70-76 in the subsidized guardianship group and from 211-212 in the adoption group.

5.2.5 Child's Relationship with Caregiver and Others in the Household

The child's relationship with the caregiver was measured on a few different dimensions: On a 3-point scale measuring positive caregiving by the caregiver, plus measures of the caregiver's criticism of the child and conflict between the caregiver and child. We found no difference on these caring measures for either guardians or adoptive parents (see Table 5-18). Analyses looking only at kin also found no differences between subsidized guardianship and adoption.

Table 5-18. Child's relationship with caregiver

Relationship with caregiver measures	Permanency Status	
	Subsidized Guardianship (Mean)	Adoption (Mean)
Child turns to caregiver for support (5 pt. scale, 1=more caring)	1.67	1.72
Caregiver is critical of child (5 pt. scale, 1=more critical)	3.69	3.51
Caregiver and child fight (5 pt. scale, 1=more conflict)	4.26	4.33
Weighted N	900	4100
Unweighted N*	151	616

*Due to missing values, unweighted Ns vary from 150-151 in the subsidized guardianship group and from 599-616 in the adoption group.

We also found no significant difference between the two groups in the amount of social support they received from other adults in their home (see Table 5-19). However, there is a difference in the amount of support children feel that they receive from outside the home. Although the levels of support were high for both groups, children in subsidized guardianship felt that they received more support from these other relatives than children who had been adopted (see Table 5-19). This difference persists even when controlling for kinship status of caregiver. Kin itself is not significant predictor of amount of support from family outside the home.

Table 5-19. Social support inside and outside home

Social support inside and outside home	Permanency Status	
	Subsidized Guardianship (Mean)	Adoption (Mean)
Child can count on other adults in home (other than caregiver) for support (5 pt. scale, 5=more support)	4.11	4.43
Weighted N	600	2600
Unweighted N	102	424
Child can count on other family outside the home for support (5 pt. scale, 5=more support) ^a	4.67	4.17
Weighted N	800	3500
Unweighted N	136	541

^at=2.13, p<.05.

5.2.6 General Well-Being

Several measures of general well-being also found no statistically significant differences between the subsidized guardianship and the cost adoptive groups. These include scales measuring self-efficacy, depression, connectedness to the community, and physical health. These findings held constant when controlling for kinship status of the caregiver.

We also found few differences between the guardianship and adoption groups on measures of school attitudes and performance (see Table 5-20). Both groups of children felt that school was very important to them and generally felt positive about their performance. Children who were in guardianship reported significantly higher grade point averages than children who had been adopted.⁴² Children in guardianship were also less likely to say that they had been suspended from school, though this difference was only marginally significant ($p < .10$).

Table 5-20. School Performance

Performance measures	Permanency Status	
	Subsidized Guardianship	Adoption
	(Mean)	(Mean)
Positive feelings toward school (3 pt. scale, 1=more positive)	1.07	1.10
Grade Point Average ^a	2.79	2.59
	(%)	(%)
Plan to attend college	96	93
Ditched school in past 30 days	12	10
Ever suspended from school	34	43
Weighted N	900	4100
Unweighted N*	152	615

Note: Percentages only include affirmative responses.

*Due to missing values, unweighted Ns vary from 148-152 in the subsidized guardianship group and from 600-615 in the adoption group.

^a $t=2.25$, $p > .05$

There was a statistically significant difference between the adoption and subsidized guardianship groups on pregnancy rates for girls age 12 and older. However, pregnancy overall was a very low prevalence behavior and the number of girls over 12 in the subsidized guardianship group is very small (N=52) so statistical significance should be interpreted cautiously. Six percent of the girls who had been adopted reported having ever been pregnant

⁴² This relationship holds constant when controlling for the effect of age.

Appendix D

(unweighted N=12), but less than 1 percent (unweighted N=1) of the girls in subsidized guardianship reported ever being pregnant. There were no differences in the percentage of boys in the two groups who reported ever making someone pregnant (see Table 5-21).

Table 5-21. Prevalence of pregnancy for children ages 12 and older

Risk behaviors	Permanency Status	
	Subsidized Guardianship (%)	Adoption (%)
Ever been pregnant ^a	<1	6
Weighted N	300	1200
Unweighted N	52	178
Ever gotten someone pregnant	7	7
Weighted N	300	1200
Unweighted N	52	187

Note: Percentages only include affirmative responses.

^aX²=3.94, p<.05

There was a marginally significant differences (p<.10) between subsidized guardianship and adoption on ever drinking alcohol as reported by children over 12 (see Table 5-22). 17 percent of children over 12 in the adoption group and 8 percent of children in the subsidized guardianship group reported ever drinking alcohol. There were no significant differences between the two groups in using illegal drugs.

Table 5-22. Prevalence of alcohol and illegal substance use for children ages 12 and older

Substance abuse	Permanency Status	
	Subsidized Guardianship (%)	Adoption (%)
Ever drank alcohol	8	17
Ever used drugs to get high	4	5
Weighted N	600	2400
Unweighted N*	105	370

Note: Percentages only include affirmative responses.

*Due to missing values, unweighted Ns vary from 366-370 the adoption group.

When looking at children of all ages, there were no significant differences between the two in measures of substance abuse or having friends who were substance-users (see Table 5-23). There were also no significant differences in the number of children who said they had either runaway or been thrown out or locked out of their current home.

Table 5-23. Prevalence of risk behaviors by permanency status: All children

Risk behaviors	Permanency Status	
	Subsidized Guardianship (%)	Adoption (%)
Ever smoked a cigarette	13	19
Ever drank alcohol	6	11
Ever used drugs to get high	3	3
Have friends who smoke cigarettes	22	21
Have friends who drink alcohol	15	15
Have friends who use drugs to get high	7	10
Ever run away from current family	6	11
Ever thrown out or locked out of current home	3	2
Weighted N	900	4100
Unweighted N*	152	615

Note: Percentages only include affirmative responses.

*Due to missing values, unweighted Ns vary from 142-152 in the subsidized guardianship group and from 600-615 in the adoption group.

5.2.7 Conclusion

Overall, children appear to feel content, stable and safe in their households, regardless of whether they achieved permanency through subsidized guardianship or through adoption. The majority of children who are living with kin report that they and their families maintain a relationship with the child's biological parents. Children who are adopted by kin continue to see and maintain a relationship with their biological parent at nearly the same rate as children in subsidized guardianship. This suggests that concerns that adoption by kin damage family relations may be overstated. Unfortunately, the number of nonkin guardians is too small to determine whether guardianship among nonkin makes a difference in relations with the child's family of origin.

Children report a positive relationship with their caregivers, regardless of whether they were adopted or are in subsidized guardianship. Children also report high levels of support from other adults inside the home, and from other family members living outside the home. There are no significant differences between children who have been adopted and those in subsidized guardianship in their overall well-being.

The evaluation randomly assigned families to the demonstration or cost neutrality groups. Families in the former group were allowed the option of adoption or subsidized guardianship.

Appendix D

The absence of statistically significant differences between the subsidized guardianship and adoption groups on all but a few measures does not mean that these two options would necessarily result in equivalent outcomes for every family. Random assignment to the conditions of adoption or guardianship would be necessary to make that determination. Rather, the findings suggest that when families select the option of subsidized guardianship as the right option for their family, the children do as well as the children in families who chose adoption. And, when families choose kinship adoption over subsidized guardianship, relationships with biological parents are not likely to be disrupted. Children in foster care want to belong to families. They want permanent relationships. Whether permanency is achieved through subsidized guardianship or adoption is much less important in the eyes of the child.

6 THE ROLE OF SUPPORT NETWORKS

A major evaluation goal of the subsidized guardianship demonstration is to determine whether it provides a permanency option for enhancing the stability and well-being of children and their families. Research studies have found social support networks to improve the functioning of children and families. This chapter will examine the extent to which support networks are related to study children's stability and well-being.

For the purposes of this analysis, three dimensions of "support networks" will be examined. The first dimension is guardianship, since guardians are most likely to come from the child's extended family network. An important research question is, "What are the outcomes among children in guardianships relative to children in adoptive arrangements?" The second dimension is kin, since relatives are more often the primary sources of support from the extended family. And, the third dimension is social support, which are the sources of assistance that might also come from non-relatives or concerned community organizations. Consequently, the following questions will be addressed in this chapter:

1. Are children placed with guardians more or less likely to exhibit stability and well-being than children placed in adoptive homes?
2. Are children in kin placements more or less likely to exhibit stability and well-being than children placed with non-relatives?
3. Are children with strong social support networks more or less likely to exhibit stability than children with weak social support?

The key dependent variables of this analysis are child stability and well-being measures, while the primary independent variables are: permanency status (subsidized guardianship or adoption), kinship status, and social support. The analysis is based on data collected from demonstration and cost neutrality caregivers during the follow-up interviews.⁴³

⁴³ Since children are the primary unit of study, the data are based on the sample weights for children and not for the caregivers who were the respondents in this chapter. Thus, when references are made about caregiver attitudes or traits, the proper terminology should be "children in guardianship (or adoptive) placements, or in kin or nonkin arrangements, whose caregivers report...or have some characteristic." The reader is reminded that chapter 5 discussed child's well-being and stability from the child's perspective.

6.1 Subsidized Guardianships Versus Adoption

As discussed earlier, there is a continuing debate about the relative merits of subsidized guardianship versus adoption. This section provides further assessment of the extent to which guardianship placements are correlated with more or less favorable attributes than adoptive arrangements.

First we will explore how guardianships compare with adoptive placements on their demographic characteristics. Children placed with guardians are older than those placed with adoptive parents. Three-fourths of the children in guardianship placements are 10 years old or more, compared to half of the children placed in adoptive homes. Similarly, guardian caregivers are older than adoptive caregivers. Two-thirds of the children with guardians have caregivers who are 50 years old or more, compared to over half of the children with adoptive caregivers. Guardianship caregivers are more likely to be headed by single parents than adoptive caregivers. Seventy-two percent of the guardianship children have caregivers without spouses, compared to 62 percent of the adopted children whose caregivers had no spouses (see Table 6-1).

Table 6-1. Demographic characteristics by permanency status

Demographic Characteristics	Permanency Status	
	Subsidized Guardianship (%)	Adoption (%)
Age of Child^a		
Under 10 years old	26	54
10 years and over	74	46
Total %	100%	100%
Weighted N	1,300	7,600
Unweighted N	319	1,654
Age of Caregiver^b		
Under 50 years old	34	45
50 years and over	66	55
Total %	100%	100%
Weighted N	1,300	7,500
Unweighted N	318	1,640
Presence of Spouse^c		
With spouse	28	38
No spouse	72	62
Total %	100%	100%
Weighted N	1,300	7,600
Unweighted N	319	1,654

^a $X^2=36.46$, $p<.001$

^b $X^2=3.76$, $p<05$

^c $X^2=6.10$, $p<.01$

Appendix D

Next we explore if guardianships are similar to or different from adoptive placements regarding their socio-economic status. On three measures of social class, there are no statistically significant differences between them. Children in guardianships have caregivers with similar educational attainment, employment status and family income as children with adoptive caregivers (see Table 6-2).

Table 6-2. Socio-economic status by permanency status

Socio-Economic Status	Permanency Status	
	Subsidized Guardianship (%)	Adoption (%)
Caregiver Educational Attainment		
No college	67	63
Some college or more	33	37
Total %	100%	100%
Weighted N	1,300	7,600
Unweighted N	319	1,650
Caregiver Employment Status		
Not employed	62	57
Employed	38	43
Total %	100%	100%
Weighted N	1,300	7,600
Unweighted N	319	1,650
Family Income of Caregiver		
Under \$20,000	47	45
\$20,000 and over	53	55
Total %	100%	100%
Weighted N	1,200	6,900
Unweighted N	286	1,544

From the caregiver’s perspective, are children in guardianship homes more or less stable than children in adoptive homes? A “child stability” variable was developed as an index based on responses to the following five questions:

1. How many times has (child) moved since last year?
2. Has (child) spent more than two weeks at a time in any other household since last year?
3. Including current school, how many different schools has (child) attended since last year?
4. How much longer do you think (child) will be living with you?
5. Besides (child’s) parents, are there other people in (child’s) family who would be able to take care of (child) in case you became ill or could not afford to keep (child)?

Caregivers who provided responses that reflected few residential moves, no long stays in other households, few changes in school, expectations of long-term living commitment, and the availability of additional caregivers were coded in the index as reflecting higher degrees of child stability than caregivers providing other responses.⁴⁴ Over half (56 percent) of the children with guardians have high levels of stability, compared to about half (48 percent) of the children in adoptive homes. Yet, since these differences are only marginally significant, children in guardianships are about as stable as children in adoptive placements. (See Table 6-3)

Table 6-3. Child stability by permanency status

Child Stability^a	Guardianship	Adoption
Low stability	44	52
High stability	56	48
Total %	100%	100%
Weighted N	1,300	7,600
Unweighted N	318	1,654

^a $X^2=2.69, p=.10$

How does the well-being of the children in guardianships compare with the well-being of children in adoptive homes? The following attributes of child well-being were examined: anti-social behavior, emotional health, physical health, child disability, and educational performance. An “anti-social behavior” index was developed by assigning higher negative scores to responses of caregivers who reported their children “often” engaged in the following actions:

- Had temper tantrums,
- Had physical fights with other children,
- Refused to do chores,
- Ran away,
- Had physical fights with adults,
- Destroyed or damaged property on purpose, or
- Had stolen or shoplifted.

Children in guardianship arrangements exhibited less anti-social behavior than children in adoptive homes. One-fourth of the children in guardianships were reported by their caregivers to exhibit “many” problems, compared to one-third of the children in adoptive placements (see Table 6-4).

⁴⁴ The criteria for high stability were affirmative answers for all five categories; all others were coded as low stability.

Table 6-4. Child well-being by permanency status

Well-Being	Permanency Status	
	Subsidized Guardianship (%)	Adoption (%)
Anti-Social Child Behavior^a		
Few problems	76	68
Many problems	24	32
Total %	100%	100%
Weighted N	1,300	7,200
Unweighted N	313	1,509
Emotional Health		
Few problems	63	67
Many problems	37	33
Total %	100%	100%
Weighted N	1,300	7,600
Unweighted N	314	1,646
Physical Health		
Good or Excellent	91	90
Fair or Poor	9	10
Total %	100%	100%
Weighted N	1,300	7,600
Unweighted N	317	1,647
Child Disability		
No disability	66	66
Has disability	34	34
Total %	100%	100%
Weighted N	1,300	7,500
Unweighted N	315	1,639

^a $X^2=4.18, p<.05$

Another measure of well-being was child's emotional health. Caregivers were asked whether certain dispositions were displayed by children: never, sometimes, or often. An index of the child's negative emotional health was developed by assigning higher scores to responses of caregivers who reported that their children "often" manifested the following dispositions:

- Moody,
- Hostile or aggressive,
- Sad or depressed, or
- Nervous or worried.

The following three items were also incorporated into this index by assigning higher scores to responses of caregivers who said that their children "sometimes" or "never" manifested the following dispositions:

- Loving,
- Cheerful, or
- Playful

Appendix D

However, the data revealed there were no significant differences in emotional health between children in guardian or adoptive placement. Children in guardianships exhibited a similar extent of negative (or positive) emotional health as children in adoptive homes. Similarly, there were no significant differences in the physical health or disability of children in guardian or adoptive arrangements (see Table 6-4).

On the other hand, all three measures of educational performance—child’s grades, changes in child’s grades and educational aspirations for children—yielded significant differences between children in guardianship and adoptive placements. Adoptive parents reported higher grades for their children than guardians. Six out of ten (59 percent) children with adoptive parents have caregivers who reported their child’s grades were “good or excellent,” compared to about half (49 percent) of the children with the guardians. Similarly, adoptive parents were more likely than guardians to report improvement in their child’s grades, since they were placed with them. Fifty-two percent of children with adoptive parents have caregivers who reported improvement in their child’s grades, compared to 40 percent of children with guardians. Moreover, adoptive parents had higher educational expectations for their children than guardians. Sixty-five percent of the children in adoptive homes have caregivers who expected their children to attend or complete college, compared to 53 percent of the children with guardians (see Table 6-5).

Table 6-5. Educational performance by permanency status

Educational Performance	Permanency Status	
	Guardianship (%)	Adoption (%)
Child's Grades^a		
Poor or Average	51	41
Good or Excellent	49	59
Total %	100%	100%
Weighted N	1,200	6,600
Unweighted N	296	1,363
Changes in Grades^b		
Same or Worse	60	48
Better	40	52
Total %	100%	100%
Weighted N	1,200	6,600
Unweighted N	297	1,364
Aspirations for Child^c		
HS grad or less	47	35
Some College	23	27
Finish College	30	38
Total %	100%	100%
Weighted N	1,200	7,000
Unweighted N	282	1,500

^a $X^2=6.42$, $p<.01$

^b $X^2=5.31$, $p<.05$

^c $X^2=6.32$, $p<.05$

In sum, on the three measures of educational performance, children in adoptive home had more favorable characteristics than children with guardians. However, children with guardians were reported to exhibit less anti-social behavior than children in adoptive homes. Yet, on the remaining three measures of well-being—emotional health, physical health, and child disability--there were no significant differences between them. Thus, significant differences between children in guardianships and adoptive homes were found on four of the seven measures of well-being. One could conclude that there are almost as many similarities in well-being between children in guardian and adoptive placements as there are differences. It is also possible that some of these differences may well be related to age, since there were 61 percent more children in subsidized guardianship over ten years of age than in adoption.

It is also important to assess the correlation between permanency status and kinship status. As expected, children with guardians are more likely to be placed with kin than children in adoptive homes. About two-thirds (65 percent) of the children in guardian placements are with kin, compared to only 36 percent of the children in adoptive homes (see Table 6-6). The next section will examine the relationship between kinship status and demographic characteristics.

Table 6-6. Kinship status by permanency status

Kinship Status^a	Guardianship	Adoption
With non-kin	35	64
With kin	65	36
Total %	100%	100%
Weighted N	1,300	7,600
Unweighted N	319	1,652

^aX²=20.45, p<.01

6.2 Kin Status Versus Demographic Characteristics and Socio-Economic Status

This section looks at all caregivers of children still in foster care, as well as those who have achieved permanency. Because of the high percentage of kin in subsidized guardianship, we expect to see similarities with the frequencies presented earlier comparing children in subsidized guardianship and adoption.

In our study samples, children placed with kin are older than children with non-kin. Sixty-two percent of the children with kin are 10 years or more, compared to 49 percent of children with non-kin. Kin caregivers are also older than non-kin caregivers. Sixty-two percent of the children in kin placements have caregivers who are 50 years or more, compared to 49 percent of the children in non-kin arrangements. Kin households are more likely than non-kin households to be headed by single parents. Three-fourths of the children in kin families have caregivers without spouses, compared to over half of the children in non-kin families (see Table 6-7).

Table 6-7. Demographic characteristics by kinship status

Demographic Characteristics	Kinship Status	
	With Kin (%)	With Non-Kin (%)
Age Of Child^a		
Under 10 years	38	51
10 years and over	62	49
Total %	100%	100%
Weighted N	5,600	8,000
Unweighted N	1,208	1,641
Age of Caregiver^b		
Under 50 years	38	51
50 years and over	62	49
Total %	100%	100%
Weighted N	5,600	8,000
Unweighted N	1,214	1,627
Presence of Spouse^c		
With no spouse	73	56
With spouse	27	44
Total %	100%	100%
Weighted N	5,600	8,000
Unweighed N	1,217	1,640

^a $X^2=13.80$, $p<.01$

^b $X^2=18.11$, $p<.01$

^c $X^2=33.80$, $p<.01$

Kin and non-kin placements comparisons also parallel subsidized guardian/adoptive parent on socio-economic status. Non-kin caregivers have higher educational attainment than kin caregivers. Forty-three percent of the children in non-kin families have caregivers with some college education, compared to 27 percent of the children with kin caregivers. Similarly, non-kin families have higher income than kin families. Six out of ten children in non-kin placements have family incomes of \$20,000 or more, compared to four out of ten of children in kin arrangements. Moreover, non-kin caregivers are more likely to be employed than kin caregivers. Half (47 percent) of the children in non-kin homes have caregivers who are working, compared to 39 percent of the children with kin caregivers. In sum, non-kin families are more likely to have higher social and economic status than kin families (see Table 6-8). The next section will assess the stability and well-being of children in kin and non-kin families.

Table 6-8. Socio-economic status by kinship status

Socio-Economic Status	Kinship Status	
	With Kin (%)	With Non-Kin (%)
Caregiver Educational Attainment^a		
No college	73	57
Some college or more	27	43
Total %	100%	100%
Weighted N	5,600	8,000
Unweighted N	1,217	1,641
Caregiver Employment Status^b		
Not employed	61	53
Employed	39	47
Total %	100%	100%
Weighted N	5,600	8,000
Unweighted N	1,217	1,641
Family Income of Caregiver^c		
Under \$20,000	59	37
\$20,000 and over	41	63
Total %	100%	100%
Weighted N	5,300	7,300
Unweighted N	1,137	1,525

^a $X^2=18.39$, $p<.01$ ^b $X^2=4.46$, $p<.01$ ^c $X^2=22.91$, $p<.01$

6.3 Kin Status Versus Stability and Well-Being

Are there differences in stability between children in kin and non-kin homes? In spite of their lower socioeconomic status, children with kin have more stable placements than children with non-kin families. Half of the children in kin families have high levels of stability, compared to about one-third of the children in non-kin families (see Table 6-9).

Table 6-9. Child stability by kinship status

Child Stability ^a	With Kin	With Non-Kin
Low stability	51	65
High stability	49	35
Total %	100%	100%
Weighted N	5,600	8,000
Unweighted N	1,211	1,639

^a $X^2=13.36$, $p<.01$

How do these placements compare on the following four measures of well-being: anti-social behavior, emotional health, physical health, and child disability? There are no significant differences between children in kin or non-kin placements with respect to anti-social behavior, emotional health or physical health. Children with kin have similar favorable (or

unfavorable) attributes as children with non-kin on these three measures of well-being. However, there is a significant relationship between kinship status and child disability. Forty-one percent of the children with non-kin have caregivers who reported that their child had some emotional or physical disability, compared to 29 percent of the children with kin caregivers. However, it is important to note that, since this is a cross-sectional analysis, it is not possible to determine the temporal sequence of these disabilities. It is likely, for example, that the disabilities may have existed among many of the children prior to their placement in foster care (see Table 6-10).

Table 6-10. Child well-being by kinship status

Well-Being	Kinship Status	
	With Kin (%)	With Non-Kin (%)
Anti-Social Behavior		
Few problems	72	67
Many problems	28	33
Total %	100%	100%
Weighted N	5,300	7,500
Unweighted N	1,148	1,492
Emotional Health		
Few problems	65	63
Many problems	35	37
Total %	100%	100%
Weighted N	5,500	8,000
Unweighted N	1,151	1,621
Physical Health		
Good or excellent	91	90
Fair or poor	9	10
Total %	100%	100%
Weighted N	5,500	8,000
Unweighted N	1,208	1,636
Child Disability^a		
No disability	71	59
With disability	29	41
Total %	100%	100%
Weighted N	5,500	8,000
Unweighted N	1,201	1,630

^a $\chi^2=17.06, p<.01$

How do children in kin and non-kin arrangements compare on the following three measures of educational performance: child's grades, changes in child's grades and educational aspirations for children? Whether they are with or without kin, children are likely to have similar levels of grades. Fifty-eight percent of the children with kin have caregivers who reported that their grades were "good or excellent," compared to 54 percent of the children with non-kin. Similarly, children with kin were just as likely as children without kin to have improved their

grades, since they were placed with their current caregivers. Fifty-two percent of the children with kin have caregivers who reported that their child’s grades were “better,” compared to 46 percent of the children with non-kin caregivers.

On the other hand, non-kin caregivers had higher educational aspirations for their children than kin caregivers. Sixty percent of the children placed with non-kin have caregivers who expected them to attend or finish college, compared to 54 percent of the children placed with kin caregivers. In sum, on two measures of educational performance—child’s grades and changes in grades—there were no significant differences between children with kin or non-kin. However, on the remaining educational measure—aspirations for child—non-kin caregivers had higher educational aspirations than kin caregivers. Overall, significant differences between children with kin and non-kin were found on only two of the seven well-being measures (see Table 6-11).

Table 6-11. Educational performance by kinship status

Educational Performance	Kinship Status	
	With Kin (%)	With Non-Kin (%)
Child’s Grades		
Poor or Average	42	46
Good or Excellent	58	54
Total %	100%	100%
Weighted N	4,800	6,900
Unweighted N	1,058	1,337
Changes in Grades		
Same or Worse	48	54
Better	52	46
Total %	100%	100%
Weighted N	4,800	6,900
Unweighted N	1,057	1,342
Aspirations for Child^a		
HS grad or less	46	40
Some College	27	24
Finish College	27	36
Total %	100%	100%
Weighted N	3,200	4,900
Unweighted N	753	1,029

^a $X^2=5.47$, $p<.05$

6.4 Social Support

To what extent is social support correlated with greater stability of children in foster care placements? A “social support” variable was developed as an index by combining responses to three questions:

1. Are there other people who live with you who regularly care for and supervise (child)?
2. Are there any relatives or friends outside your household who regularly care for and supervise (child)?
3. Besides (child’s) parents, are there other people in (child’s) family who would be able to take care of (child) in case you became ill or could not afford to keep (child)?

Affirmative responses to all these questions which indicated that other caregivers were available to care for the children, were coded as “high” social support. All other responses were coded as “low” social support. There is a significant relationship between social support and child stability. Children in families with high levels of social support have more stability than children in families with low levels of social support (61 percent versus 36 percent). Thus, families with strong support networks are likely to exhibit more child stability than families with weak support networks (see Table 6-12).

Table 6-12. Child stability by social support

Child Stability^a	Low Support	High Support
Low stability	64	39
High stability	36	61
Total %	100%	100%
Weighted N	11,040	2,508
Unweighted N	2,307	541

^a $X^2=33.51, p<.01$

In the earlier discussion in this chapter, kinship status was found to be significantly related to child stability. However, further analysis revealed that there was no significant relationship between kinship status and social support. Eighteen percent of the children with kin had high levels of social support, compared to 19 percent of the children with non-kin. Thus, it is important to determine whether social support has an effect on the relationship between kinship status and stability. According to the data in Table 6-13, kinship status is not significantly related to stability when children are in high support families. Among children in high support families, 66 percent of the children with kin have high levels of stability, compared to 58 percent of the

children placed with non-kin. On the other hand, kinship status is significantly related to stability in low support families. Among children in low support families, 46 percent of the children with kin have high levels of stability, compared to only 29 percent of the children placed with non-kin. (See Table 6-14). In short, children in families with high social support have similar levels of stability, whether they are placed with kin or non-kin. In families with low social support, however, children placed with kin have more stability than those placed with non-kin. Consequently, kinship status is a stronger predictor of child stability among children who are in families with weak social support networks.

Table 6-13. Child stability by kinship status in high social support families

Child stability in high support families	With Kin	With Non-Kin
Low stability	34	42
High stability	66	58
Total %	100%	100%
Weighted N	1,000	1,500
Unweighted N	221	319

Table 6-14. Child stability by kinship status in low social support families

Child stability in low support families ^a	With Kin	With Non-Kin
Low stability	54	71
High stability	46	29
Total %	100%	100%
Weighted N	2,100	6,500
Unweighted N	471	1,318

^a X²=16.09, p<.01

6.5 Conclusions

The primary goal of this chapter was to assess the extent to which support networks are related to child stability and well-being. Three dimensions of support networks were examined: guardianships, kin networks and social support. The following questions were addressed:

1. Are children placed with guardians more or less likely to exhibit stability and well-being than children placed in adoptive homes?
2. Are children in kin placements more or less likely to exhibit stability and well-being than children placed with non-relatives?
3. Are children with strong support networks more or less likely to exhibit stability than children with weak social support?

Appendix D

How do children placed with guardians compare with children placed in adoptive homes regarding stability and well-being? Children have similar levels of stability whether they are placed with guardians or adoptive parents. However, among three measures of well-being—emotional health, physical health, and child disability—there were no significant differences between children placed in guardianships or adoptive homes. On the other hand, children placed with guardians had less anti-social behavior than children with adoptive parents. On all three measures of educational performance—child’s grades, changes in child’s grades and educational aspirations for children—there were significant differences between children in guardianships and adoptive placements. On these performance measures adoptive parents reported higher grades, greater improvement in grades, and had higher educational aspirations for their children than guardians. Overall, there were significant differences on four of the seven measures of well-being. Thus, there was almost as many similarities as differences in well-being between children in guardianships and adoptive homes.

How do children placed with kin compare with children placed with non-kin with respect to stability and well-being? Children with kin caregivers have more stable living arrangements than children placed with non-kin. On three measures of well-being—anti-social behavior, emotional health, and physical health—there were no significant differences between children living with kin or non-kin. However, children placed with kin were reported to have fewer disabilities than children placed with non-kin. Yet, it is possible that many of these disabilities may have existed prior to placement in foster care. Moreover, on two measures of educational performance—child’s grades and improvement in grades—there were no significant differences between children placed with kin or non-kin. But non-kin caregivers had higher educational aspirations for their children than kin caregivers. Overall, there were significant differences between children with kin or non-kin on only two of the seven measures of well-being. Thus, there were more similarities than differences between children placed with kin and non-kin.

Appendix D

How is child stability related to social support networks? Children placed in families with strong social support have more stable living arrangements than children placed in families with weak social support. But children in families with strong social support have the same levels of stability—whether they are placed with kin or non-kin. On the other hand, in families with low social support, children placed with kin have more stability than those placed with non-kin. Thus, kinship status is a strong predictor of stability among children in families with weak social support networks.

7 FINDINGS AND IMPLICATIONS

The study, using a classical experimental design, assessed measured differences between groups of children randomly assigned to a demonstration group, where subsidized guardianship was available as a permanency option for children and a cost neutrality group, where only preexisting options for permanency were allowed. The research questions assessed differences between these two groups to measure the impact of the demonstration.

As the demonstration was being implemented, several other questions became apparent. On the Federal level, debates about the role of kin as foster parents escalated. The quality of kin foster homes was being scrutinized. Within Illinois, a debate between advocates for adoption and advocates for guardianship ignited as the initiative to complete guardianships began to succeed. Is it good policy to allow children to go into subsidized guardianship, when they could be adopted instead? Is adoption a more permanent outcome for a child, and who should make this decision -- the caseworker, the family or the court? Although the study was not designed to directly assess the impact of relative care or subsidized guardianship vs. adoption, the data provide the opportunity to explore these issues.

This chapter summarizes the principal findings of the evaluation of the subsidized guardianship demonstration. Findings described in this report are presented in 7.1. Practice and policy implications identified in both the interim and this final analysis are presented in 7.2.

7.1 FINDINGS

FINDING 1: Subsidized guardianship increases permanent placements for children.

The Illinois Subsidized Guardianship Waiver Demonstration was designed to move more children out of foster care and into permanent relationships. It was successful in doing so. At the time of the follow-up interview, 74 percent of children in the demonstration group were in permanent placements, compared to 70 percent of children in the cost neutrality group ($p < .001$).

Guardianship not only increased the percent of children moving to permanency, it also sped up the rate of permanency. For those children in the demonstration group the relative

Appendix D

rate of achieving permanency is 25 percent higher. The difference in permanency rates was greatest for older children, ages 6 to 13. Providing the option of subsidized guardianship clearly paved the way for obtaining permanency for older children.

FINDING 2: The option of subsidized guardianship supplants children being adopted.

While providing the option of subsidized guardianship did increase the overall permanency rates for children in the demonstration group, it also supplanted adoption for the demonstration group. At the time of the initial interview there were no significant differences between the adoption rates for children in the demonstration (28 percent) and cost neutrality (28 percent) groups. However, at follow-up, there was significant difference between the adoption rate for the demonstration group (53 percent) and the comparison group (59 percent).

For the demonstration group, where subsidized guardianship was an option, the majority of caregivers still selected adoption over guardianship—in fact, adoption was selected over guardianship 3 to 1. Still, offering subsidized guardianship as an option did decrease the number of adoptions in the demonstration group. Nevertheless, younger children were still more likely to be adopted. The question then becomes whether selecting guardianship over adoption results in different outcomes for children.

FINDING 3: Subsidized guardianship effectively protects children at risk of child abuse or neglect.

On measures of safety, there were no significant differences between the demonstration and cost neutrality groups according to administrative data, and data collected from caregivers and the children themselves. Overall, there were very few subsequent reports of child abuse or neglect in adoptive or subsidized guardianship placements. It was less than 1 (one) percent in both the demonstration and comparison groups.

From the child's perspective, subsidized guardianship placements are just as safe as adoptive placements. The great majority of children interviewed said they could count on their caregiver to make sure they were safe.

Appendix D

FINDING 4: The demonstration did not decrease the rate of disruption of permanent placements.

After following the children for two years, there were very few disruptions. According to the Illinois administrative data system, most children who had been adopted or entered subsidized guardianship remained in those placements at the time of the follow-up interview. However, there were a very small percentage of children (1%) who had moved out of their permanent placement for a variety of reasons. The weighted total number of disruptions was just 99 (based on an unweighted total of 38). Similar percentages of disruptions occurred within the cost neutrality (1.1%) and demonstration (1.2%) groups. Nearly two thirds (60%) of the guardianship disruptions resulted from the dissolution of the placement, most at the request of the caregiver. In contrast, most of the adoption disruptions (78%) resulted from the death or incapacitation of the caregiver.

FINDING 5: In measures of stability, safety, and well-being, subsidized guardianship and adoption are equivalent placements for children.

In regard to well-being from the caregivers' perspective, children are doing just as well in subsidized guardianship, as adoption. Where differences existed, some favored adoption and others favored guardianship. Measures of child stability found higher rates of stability in guardianship families according to the caregiver interview. Moreover, children in guardianship were reported to have fewer anti-social behaviors than children who had been adopted. However, children who had been adopted fared better on measures of educational performance. On other measures of physical and emotional health there were no significant differences between the adoption and subsidized guardianship families.

From the child interview data, there were also few significant differences between children who had been adopted and those in guardianship on measures of permanency, safety, relationship with primary caregiver or others in the household, and in their emotional and physical health. Where the very few significant differences were found, they tended to support better outcomes for children in guardianship.

Overall, there were few differences between the adoption and guardianship groups. The majority of children in both groups reported that they were happy they had been adopted or were in guardianship; they felt like part of the family; and they felt supported by their caregivers.

Appendix D

FINDING 6: Kin settings are as stable as non-kin placements; if there is a weak support network, kin placements are more stable.

For children that must be placed in out-of-home substitute care, the quality of kinship foster care has been a concern raised by policymakers. The demonstration targeted children in both kin and non-kin placements for at least two years and with the same caregiver for one year. As the demonstration continued, a majority of children moved to permanent settings. Seventy-two percent of placements of children with kin became permanent, compared to 64 percent with non-kin. Children living with kin, whether in HMR or permanent status, are as stable as children living with non-related caregivers. An equivalent percentage of kin and non-kin caregivers described settings of high stability and reported few moves for the children, few changes in school, expectations of long-term living commitment and the availability of additional caregivers as support.

The concerns about the quality of settings, especially about the safety and well-being of the children are elevated when families are exiting the supervision of DCFS and into permanent living arrangement. Families leaving the system must be more self-reliant, since caseworkers will no longer visit their homes regularly. For homes considered to have weak social support, children placed with kin were more stable than those placed with non-kin.

FINDING 7: Kin will adopt.

Conventional wisdom in child welfare says that relatives will not adopt because they fear disrupting relationships with family and because they feel they already have “blood” ties with the child. Most caregivers interviewed, whether the children were in permanent or foster care status, disagreed that adoption by a relative stirs up too much trouble in the family. Similarly, nine of ten caregivers agreed also that “adoption gives children greater security, even if they are related by blood.” Relatives, when given the opportunity to participate in permanency planning for their children in foster care, will adopt. At the time of the follow-up interview, similar percentages of children living with kin (55 percent) and non-kin (57 percent) had been adopted. As an aside, more than three-quarters of children who were adopted by kin or were in subsidized guardianships with kin reported that they maintained a relationship with their biological mother.

7.2 Implications

These findings suggest a number of implications for future policy considerations and service delivery. Beyond the findings, the data collected raised several new questions and highlighted aspects of the demonstration that provide useful lessons for other jurisdictions considering replication. Three of the most important themes are presented below.

7.2.1 Subsidized Guardianship Supports Increased Permanency For Children In Foster Care

Subsidized guardianship does what Illinois policymakers expected it to do. It increases the rate of permanency and provides an additional option for families who do not want to or cannot consider adoption. Subsidized guardianship did supplant adoptions in the demonstration group. However, while some children might have been adopted in the absence of subsidized guardianship, others would have lingered in foster care.

Subsidized guardianship was especially successful with older children who are typically more difficult to place in adoptive homes or who are not interested in breaking their legal ties with their birth parents. In the demonstration, younger children were still more likely to be adopted. For those concerned that adoption should be the first choice for younger children, monitoring of this trend is necessary. If a higher percentage of younger children begin to exit through subsidized guardianship, it will be important to determine whether this is a result of family interest or systemic barriers to completing adoption.

7.2.2 The Child Welfare System Must Translate This New Alternative Into Practice And Philosophy

The devil's in the details. For such a large system, philosophy must be carefully crafted into clear and consistent policy and procedures. Several areas identified during the evaluation include: the interpretation of the adoption rule-out; preparing families for permanency; ASFA expedited timeframes for permanency, and effective implementation strategies.

The adoption rule-out. The adoption rule-out as defined in DCFS policy, gives priority to the advantages of the legally binding nature of adoption. Adoption must be explored and eliminated as a possibility before subsidized guardianship can be considered. Interpretation

Appendix D

of the adoption rule-out varies by region, child welfare position, and personal values. The question of who should rule out adoption—caseworkers, the court or the family—is a lingering one for the state to consider.

Underlying this question are issues of how to define permanency and whether permanency should be decided by families, the courts, or caseworkers. From the child and caregiver perspective, subsidized guardianship is just as permanent as adoption. There were no differences between the demonstration and cost neutrality groups in the number of children who thought that they would continue to live with their caregiver in the next year. The great majority (90 percent) of the children in each group shared the belief that their home was a stable one.

Is perception of a lasting relationship adequate grounds for permanency? The child's perception that they are part of the family in conjunction with a confirmation of safety was evident. The children interviewed reported that they just wanted to feel safe; to have someone to depend on, and to be part of a family. The children still in foster care reiterated this desire at the time of the follow-up interview. The majority of children (72 percent) wanted their home to be permanent. The reasons they cited for wanting the home to be permanent did not differ significantly from children in adoption or subsidized guardianship. The most common reason children cited for wanting their current home to be permanent were that they would be safe (89 percent), they would have someone to depend on (83 percent), and they would be part of the family (79 percent). If subsidized guardianship meets these goals for the child, it seems prudent to support this option for children.

Caseworkers were not as clear. Their attitudes were mixed. It appears that caseworkers still perceive adoption to be the preferred permanency alternative, but there is uncertainty about the effect of the options on children. While a clear majority of the workers agreed that guardianship is as permanent for children as adoption, an even greater percentage believed that adoption gives greater security than guardianship. It appears that workers place greater value on the relationship created by adoption, although they do not necessarily believe that adoption is more permanent. This uncertainty complicates the application of the adoption rule out policy.

There were also differing opinions among court officials. For example, outside the Chicago area, the court can complete a guardianship in 1 month, while the process of terminating parental rights in preparation for adoption takes a minimum of 6 months. Judges interviewed expressed comfort with this “fast-track” alternative to adoption, as long as caseworkers carefully

“ruled out” adoption as an option for the family. Other court representatives, especially hearing officers in Cook County, suggested that ‘adoption rule out’ was not necessary, since subsidized guardianship should stand alone as a permanency option. The churning of philosophy between individual families, caseworkers and court needs conformity.

Early on in the demonstration, DCFS realized that families were not provided full information about their options. They chose to issue permanency guides to all families to be sure they had adequate information about each permanency option. The revised decision guide for families states that families who do not want the birth parents rights to be terminated or who are hopeful that the birth family will ultimately get the child back, can “rule out adoption” and consider subsidized guardianship.⁴⁵ These guidelines support the notion that families play an integral role in deciding guardianship vs. adoption. For some, adoption rule-out has evolved from a rigid decision tree pressing families to adopt, to a process that allows families to pick a comfortable goal. For others this is not the case. The court still serves as a gatekeeper to ensure that adoption has been considered and that a thoughtful choice has been made.

The adoption rule-out should be modified to allow relatives a bigger voice in permanency decisions. Much of what we learned suggests that families, with the involvement of caseworkers and court personnel, make good decisions about the best permanency option for children in their care.

Families must be prepared for permanency, while the children are still in foster care. To help insure the success of subsidized guardianship and adoption families need preparation prior to discharging a child from state custody. In focus groups with caseworkers, many spoke of needing training in getting families ready for permanency. Some families, especially those that had been in the system for many years were caught off guard after permanency. They were surprised that caseworkers would no longer visit the home. Some agencies reported that families were calling them for continued services. While families wanted to have children maintain contact with birth parents some were concerned about maintaining children’s safety. DCFS directed the families to post-guardian services, a contract handled by other agencies. However, counseling and discussion about accessing community resources and handling other crises must begin while the DCFS is actively involved with children in the state’s custody. This “independent living” training for families needs to be emphasized as part of caseworkers’ responsibility for foster care cases.

⁴⁵ “Making the Adoption/Guardianship Decision” Published by DCFS, 6/2000

The subsidy agreement for adoption or guardianship outlines family and Department expectations. Preparation for permanency culminates with this agreement. The subsidy agreement serves as a vital tool to transition the family into permanency. It describes the subsidy amount and delineates any services the child is eligible for after the case is closed. Families and caseworkers need a comprehensive understanding of developing subsidy agreements, how to work together to include necessary provisions, and how to prepare for future needs. One component of the agreement allows for establishing directions for standby guardianship, if necessary. Standby guardianship allows a continuous transfer of the custody of the child in the event the caregiver is unable to continue care for the child. This is particularly critical in maintaining stability for children placed with older guardians.

Effective implementation strategies. Attention to implementation issues can impact the outcome of an initiative. Illinois had previously tried to implement the DRA (Delegated Relative Authority) for kin. During the first round of interviews both families and caseworkers spoke of misinformation and poor communication about the initiative. This was described by many as a contributing factor to the failure of the earlier initiative.

Based on this experience, DCFS took a very inclusive approach with the implementation of subsidized guardianship. For oversight, a coordinating committee was set up with representatives of the different units at DCFS, as well as representatives from each region participating in the demonstration. In addition, a Research Advisory Committee (RAC) was established at the time of submission of the proposal to the Federal Government. The RAC, convened by the African –American Family Commission, received a budget from DCFS to follow and advise the implementation of the demonstration. The RAC set up two committees to explore implementation and evaluation issues.

The RAC was a fast connection to and from the child welfare community. Invitees from DCFS, universities, community agencies and caregivers participated. The researchers were invited to sit on the committee so that evaluation efforts were consistent with community values and communicated changes in demonstration procedures and to capture feedback from casework staff, court personnel and caregivers. Forums were held periodically in all three sites of the demonstration to get feedback from private agencies, caregivers and regional DCFS staff about how the demonstration was proceeding. This pressure encouraged DCFS to keep the community advised of procedural changes and fine tune operations throughout the process. . The Commission took leadership in promoting the distribution of up to date descriptive information about

Appendix D

subsidized guardianship, emphasizing its difference from adoption. A locality or state that attempts such a major shift must allocate staff and dollar resources for the implementation.

Several issues were identified during implementation that required correction by DCFS. These included:

- Families and workers confused about permanency alternatives
- Differences between adoption and subsidized guardianship that would deter families from considering the option
- Regional differences in policy that had to be coordinated
- Training of all caseworkers in a short period, after the demonstration had already begun
- Updates and changes in procedures and policies issued after caseworkers are trained
- Making sure that families have current procedural information

These were all challenges to a large bureaucracy where change involved thousands of public and private staff persons and caregivers. The communication mechanisms put into place helped to clarify many of these issues.

ASFA Expedited Timeframes for Permanency. ASFA now puts pressure on the system to make permanency decisions in a shorter time frame. Recently DCFS has changed the eligibility rule for adoption and subsidized guardianship to conform to ASFA. While the time has been shortened, the steps toward permanency have not been changed. Caseworkers and families making decisions still prioritize reunification as the primary goal for children. When it is not an option, adoption and then guardianship are pursued. The same decisions, the same factors to explore; just faster. Study findings suggested that permanency goals were achieved faster for some children as the demonstration progressed. This suggests that the system got more efficient as workers completed training and got more comfortable with the new option. If training and information dissemination to parents and the community continues, there is reason to believe that further training and time will create more efficiencies .

On the other hand, observations of large child welfare bureaucracies suggest that some workers gravitate to the quick and easy. As successful as subsidized guardianship appears, there are still skeptics. Some still believe that subsidized guardianship is not the best alternative for young children or children placed with non-kin. Subsidized guardianship does not require TPR; subsidized guardianship is perceived to be easy to undo. For ASFA, a subsidized guardianship can be completed more likely within an 18-month window than an adoption. A

concern is that it will become a path of least resistance to move some children into guardianship without giving appropriate attention to adoption.

7.2.3 Enduring Success Will Require An Appropriate Network Of Post-Placement Services

The tremendous increase in permanencies, both adoptions and subsidized guardianships, requires continued availability and access to services for the families created by these options. The service needs of families do not stop when permanency is obtained. After-care service provisions are increasingly important to prevent dissolution of subsidized guardianship and adoption. The state has put their emphasis on both specialized preservation services for families at risk of breaking up and on services provided through local area networks (LANs). LANs were developed and funded throughout the state so communities could individualize services offered, based on the other resources available in the community.

Adequate services must be available to prevent dissolution of subsidized guardianship and adoption. Results from the data collection include interview report from 2001 and administrative data through 2002. Permanent settings could have endured for a maximum of five years. Over this period of time, a minimal number of families experienced dissolution. However, there were other sub-populations who warrant further tracking: older caregivers with health concerns, and children and teenagers with disabilities.

First, consider the group of older caregivers. Thirteen percent of all caregivers were reported to be over 65 years of age. The age of caregivers for children in subsidized guardianship is significantly greater than those of children adopted. For children adopted or who completed subsidized guardianship early in the demonstration, standby guardianship was not emphasized. Later in the initiative, it was discussed more broadly and, according to many court personnel, invoked more often. As caregivers age, health concerns can become more serious or chronic and may affect placement stability. Co-guardianships were also considered by some courts, allowing two family members to share the responsibility. One possibility is to explore contacting families who completed permanency early on in the demonstration to discuss the option of adding a standby guardian to the agreement.

Children adopted and in subsidized guardianship were identified by caregivers as having special needs, 34 percent in both groups. Emotional health and anti-social behaviors were

Appendix D

particularly apparent with teenagers. While for many, the subsidy agreement included the promise of services; these services were restricted to pre-existing conditions. Better identification of these needs prior to developing the agreement and a mechanism for providing subsequent services for new problems might prevent dissolution for both adopted and guardianship families.

Practice has assumed that children in permanent placements will have continual support after they reach the age of majority. Several notes of caution appear in the interview data with caregivers. Around a quarter of caregivers that adopted children disagreed that “you are responsible for adopted children after age 18.” Half of subsidized guardians disagreed that “you are responsible for children in subsidized guardian after age 18.” These answers suggest that transition services for youth should be offered to all youth, regardless of their plan or placement.

Moreover, the economically disadvantaged status of most caregivers, regardless of type of placement, reveals that these families may need to receive many vital services. In short, public policies should be designed to enhance the positive functioning of children in a variety of living arrangements by providing strong social and economic support, lessening the chance of dissolution of permanent placements.

In Summary. Illinois, under the federal waiver authority, demonstrated that the practice of guardianship, especially to relatives is a valuable policy option for children in the foster care system. Practitioners have talked about this option for years. Its time has come and Illinois has shown that subsidized guardianship can work. Implementation procedures and follow-up services are critical to its success. Implementation must not only focus on the children and families being served, but on the large organization of professionals delivering the services. Policy must continue to evolve and develop as more is learned about subsidized guardianship. For families now in permanency, post-permanency services are vital.

APPENDIX A

[of Appendix D]

Differences Between the Demonstration and Cost
Neutrality Groups for Children
Interviewed with ACASI

Appendix A: Differences Between the Demonstration and Cost Neutrality Groups for Children Interviewed with ACASI

Table A-1. Demographics by assignment group

	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Gender		
Male	47	48
Female	53	52
Total %	100%	100%
Age of Child		
9 to 10 years	28	29
11 to 14 years	50	51
15 to 18 years	23	20
Total %	100%	100%
Average Age	12.4	12.3
Weighted N	1,900	2,200
Unweighted N	489	528

Table A-2. Living arrangements by assignment group

	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Child lives with kin*	67	65
Weighted N	1,900	2,200
Unweighted N	487	526
Child's report of relationship of caregiver to child		
Grandmother	44	49
Grandfather	2	2
Mother	12	11
Father	3	3
Aunt	19	15
Uncle	<1	<1
Caregiver	20	20
Total %	100%	100%
Weighted N	1,900	2,200
Unweighted N	489	528
Length of time with caregiver according to DCFS		
< 1 year	5	4
1 year to less than 2 years	5	6
2 years to less than 5 years	25	29
5 years to less than 8 years	41	37
8 years or more	25	24
Total %	100%	100%
Average length of time	6.0 years	5.8 years
Weighted N	1,700	2,100
Unweighted N	477	517

Note: Percentages may not total 100 percent due to rounding.

*Percentages include only affirmative response.

Table A-3. Foster care children's feelings about permanency by assignment group

Feelings about permanency	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Want current home to be permanent	71	74
Weighted N	600	800
Unweighted N	139	179
Why want home to be permanent		
I would be safe	93	87
I would have someone I can depend on	80	84
I would be part of the family	85	75
I would be with my brothers and sisters	59	66
I wouldn't have to move anywhere	68	64
I wouldn't have a caseworker anymore	50	49
Some other reason	29	39
Weighted N	400	600
Unweighted N	95	131
Why do not want home to be permanent		
I want to live with my mother or father	61	66
I wouldn't get to see my mother or father as often as I want to	26	36
I don't want to live with [current caregiver]	24	44
I wouldn't live with my brothers or sisters	16	28
I don't feel safe here	7	19
Some other reason	58	54
Weighted N	200	200
Unweighted N	45	46

Note: Multiple responses were allowed and percentages include only affirmative responses.

Table A-4. Stability by assignment group

Stability in living arrangements	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Lived with same family for past year	94	96
Weighted N	1,900	2,200
Unweighted N	489	528
Someone else moved into the household	27	30
Weighted N	1,900	2,200
Unweighted N	488	521
Changed schools in the past year	30	36
Weighted N	1,900	2,200
Unweighted N	484	518
Think will live with caregiver next year	90	90
Weighted N	1,800	2,100
Unweighted N	476	517
If not caregiver, who will be living with next year^a		
Parent(s)	49	43
Another relative	26	20
Foster parent	12	28
Someone else	24	15
By self alone	16	29
Weighted N	300	200
Unweighted N	64	48

Note: Percentages include only affirmative responses.

^aMultiple responses were allowed.

Table A-5. Feelings about current living arrangements by assignment group

Feelings about living arrangements	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Like people live with all or most of the time	87	85
Feel like part of the family all or most of the time	90	91
Weighted N	1,900	2200
Unweighted N	487	526

Note: Percentages include affirmative responses.

Table A-6. Safety issues by assignment group

Safety	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Adults in home ever hit or spank child		
Never	69	61
Hardly ever	17	23
Sometimes	9	12
Often	6	4
Total %	100%	100%
Weighted N	1,900	2,200
Unweighted N	483	524
	19	16
Hitting ever leaves a mark*		
Weighted N	600	800
Unweighted N	150	190
Ever scared of someone in the home*		
	10	7
Weighted N	1,900	2,100
Unweighted N	485	521
Adults in home ever hit each other*		
	4	5
Weighted N	1,900	2,200
Unweighted N	484	521
Child can count on caregiver to make sure no one hurts him/her*		
	96	96
Weighted N	1,900	2,200
Unweighted N	485	526
Child can count on other adults in home to make sure no one hurts him/her^{1*}		
	95	88
Weighted N	1,300	1,300
Unweighted N	342	326
Child feels safe in neighborhood when outside		
All of the time	47	49
Most of the time	31	25
Sometimes	15	17
Hardly ever	3	4
Never	4	4
Total %	100%	100%
Weighted N	1,900	2,200
Unweighted N	487	527

¹Includes only cases where the child says there are other adults living in the home.

*Percentages include only affirmative responses. $X^2=5.83, p<.05$

Table A-7. Well being by assignment group

Well being scale	Assignment group	
	Demonstration Mean	Cost neutrality Mean
Self-efficacy (4 pt. scale, 1=greater efficacy)	1.70	1.75
Weighted N	1,800	2,100
Unweighted N	467	505
Depression (4 pt. scale, 1=less depression)	1.70	1.73
Weighted N	1,900	2,100
Unweighted N	476	509
Connectedness to the community (12 pt scale, 0=no connection)	6.45	6.56
Weighted N	1,900	2,200
Unweighted N	489	528

Table A-8. Social support by assignment group

Social support scale	Assignment group	
	Demonstration Mean	Cost neutrality Mean
Support from caregiver (5 pt. scale, 1=more support)	1.74	1.72
Weighted N	1,900	2,100
Unweighted N	485	519
Support from others in home (5 pt. scale, 5=more support)	4.35	4.21
Weighted N	1,300	1,300
Unweighted N	342	326
Support from family outside the home (5 pt. scale, 5=more support)	4.48	4.48
Weighted N	1,600	1,900
Unweighted N	422	461
Support from friends (5 pt. scale, 1=more support)	1.89	1.90
Weighted N	1,700	2,000
Unweighted N	446	486

Table A-9. Physical health by assignment group

Physical health	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Child's description of health		
Excellent	62	62
Good	31	33
Fair	6	4
Poor	1	<1
Total %	100%	100%
Weighted N	1,900	2,200
Unweighted N	488	525
Child is sick a lot*	9	8
Weighted N	1,900	2,200
Unweighted N	489	524
Child has been to the doctor in the past year*	84	82
Weighted N	1,800	2,100
Unweighted N	472	507
Child has been to the dentist in the past year*	78	74
Weighted N	1,800	2,100
Unweighted N	473	506
Child usually has enough food to eat*	98	99
Weighted N	1,900	2,200
Unweighted N	489	525

*Percentages include only affirmative responses.

Table A-10. Substance abuse by assignment group

Substance abuse	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Child has ever smoked a cigarette	17	15
Weighted N	1,900	2,200
Unweighted N	484	522
Child has ever drunk alcohol	12	10
Weighted N	1,900	2,200
Unweighted N	482	521
Child has ever used illegal drugs	4	4
Weighted N	1,900	2,200
Unweighted N	486	527

Note: Percentages only include affirmative responses.

Table A-11. Caregiver's relationship with child's biological mother

Relationship with biological mother	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Caregiver ever sees or talks to biological mother*	75	75
Weighted N	1,600	1,900
Unweighted N	425	466
Caregiver and mother get along OK	88	87
Weighted N	1,500	1,800
Unweighted N	410	445

Note: Percentages only include affirmative responses.

*Cases where child says biological mother is deceased (or does not know if the mother is alive or deceased) are excluded.

Table A-12. Child's relationship with biological mother

Relationship with biological mother	Assignment group	
	Demonstration (%)	Cost neutrality (%)
	79	78
<u>Child ever sees biological mother</u>		
Weighted N	1,700	2,000
Unweighted N	437	473
Does fun things with mother		
All or most of the time	64	58
Sometimes	20	26
Hardly ever	7	6
Never	8	10
Total %	100%	100%
Weighted N	1,300	1,500
Unweighted N	336	369
Talks to mother about important things in child's life		
All or most of the time	61	60
Sometimes	16	22
Hardly ever	7	5
Never	15	13
Total %	100%	100%
Weighted N	1,300	1,500
Unweighted N	337	368
Child is afraid of mother		
All or most of the time	2	3
Sometimes	3	5
Hardly ever	5	7
Never	89	86
Total %	100%	100%
Weighted N	1,300	1,500
Unweighted N	340	367

Note: Cases where child says biological mother is deceased (or does not know if the mother is alive or deceased) are excluded.

Table A-13. Caregiver and child's relationship with biological father

Relationship with biological father	Assignment group	
	Demonstration (%)	Cost neutrality (%)
	50	50
Caregiver ever sees or talks to biological father*		
Weighted N	1,400	1,600
Unweighted N	359	382
Caregiver and father get along OK		
	77	73
Weighted N	1,200	1,500
Unweighted N	326	354

Note: Percentages include only affirmative responses.

- Cases where child says biological father is deceased (or does not know if the father is alive or deceased) are excluded.

Table A-14. Child's relationship with biological father

Relationship with biological father	Assignment group	
	Demonstration (%)	Cost neutrality (%)
Child ever sees biological father^a	63	57
Weighted N	1,400	1,600
Unweighted N	368	389
Does fun things with father		
All or most of the time	55	56
Sometimes	21	28
Hardly ever	6	5
Never	18	11
Total %	100%	100%
Weighted N	900	1,000
Unweighted N	229	212
Talks to father about important things in child's life		
All or most of the time	45	49
Sometimes	23	27
Hardly ever	9	7
Never	24	17
Total %	100%	100%
Weighted N	900	1,000
Unweighted N	228	212
<u>Child is afraid of father</u>		
All or most of the time	4	4
Sometimes	4	6
Hardly ever	5	10
Never	87	81
Total %	100%	100%
Weighted N	900	1,000
Unweighted N	230	211

Note: Cases where child says biological father is deceased (or does not know if the father is alive or deceased) are excluded.

APPENDIX B

[of Appendix D]

Statistical Analysis

Appendix B: Statistical Analysis

Survival Analysis

Survival analysis (using SAS PROC PHREG) was used to identify child characteristics that predict the relative rate at which children in the subsidized guardianship demonstration achieve permanency (reunification, adoption, or subsidized guardianship).

To understand the results of the survival analysis it is necessary to review how the assignment to the demonstration was implemented. Starting in the calendar quarter ending with September 1996, all children who met the requirements for subsidized guardianship from three DCFS regions were identified and information about those children was extracted from the DCFS computer system. From that set, a stratified random sample of children was selected for the demonstration. The strata were defined by combinations of DCFS region and type of foster care. In addition, the probability of selecting a child decreased as the age of the child increased. As a result, older children are under-represented in the demonstration. Children assigned to the demonstration were randomly assigned to be eligible for or not eligible for subsidized guardianship. The information on whether a child was assigned to the demonstration and, if so, whether the child was to be eligible for subsidized guardianship, was then posted on the DCFS computer system.

Subsidized guardianship had not been offered prior to the time of the first quarter sample. As a result, the sample from the first quarter included children who may have been in foster care for much longer than the required two-year minimum or may have been with their provider for much longer than the required one-year minimum.

For the following four calendar quarters (quarters 2 through 5) the same procedure was used to select children for the demonstration. However, only children who met the requirements for subsidized guardianship within the previous quarter were identified for sampling. As a result, the number of children assigned to the demonstration in the first quarter sample was much greater than the number in the later quarters. For quarters 6, 7, and 8, DCFS decided to assign all children who met the requirements for subsidized guardianship to the demonstration rather than selecting a sample. Therefore, older children are not under-represented for these quarters.

A subsample of the children in the demonstration was selected for data collection through interviews with the child's provider and the child (if over 8). The results from those interviews are

Appendix D

discussed in other sections of this report. The data for the survival analysis came from administrative records and cover all children assigned to the demonstration.

There was a delay of several months from when the data for children that met the requirements for subsidized guardianship was extracted from the DCFS computer system to when the list of those assigned to the demonstration was available to DCFS caseworkers. For the survival analysis, the date at which a child was “assigned to the demonstration” was the date on which the information that a child had been or not been assigned to have the option of subsidized guardianship was posted on the DCFS computer system and was available to DCFS caseworkers. A child's situation might have changed between when the child's data was extracted from the DCFS system and when the assignment to the demonstration was posted back on the system. There were 8,079 children sampled for the demonstration. After removing children who had achieved permanency after their data was extracted from the DCFS computer system but before the assignment to the demonstration and removing a relatively small number of children who were no longer eligible for subsidized guardianship or who had missing data for some variables used in the analysis, there were 5,799 children available for the survival analysis.

The variables used in the survival model are:

- YearsAtRisk: the dependent variable, otherwise referred to as Time, the time in years from the date of assignment to the date of permanency, the child's 18th birthday, or Marsh 31,2002 (the date of the administrative data file), which ever is earlier. Children who had not achieved permanency by age 18 or the last date in the administrative data were treated as censored.
- Censored: 1 if the time variable (YearsAtRisk) is censored (no permanency achieved or 18th birthday reached before permanency), otherwise 0. Used as the censoring variable for overall permanency.
- SGH: 1 for a subsidized guardianship outcome, otherwise zero. Used as the censoring variable when modeling subsidized guardianship.
- ADO: 1 for adoption, otherwise zero. Used as the censoring variable when modeling adoption.
- Age: modeled using two variables, AgeA = age at assignment to the demonstration. AgeB = Max (0, Age – 10). The combination of these two variables models age effects as a linear trend with a change in slope at age 10. Age 10 was selected as the change point based on several preliminary analyses.
- Race: The child's race, coded as white, black, and other represented by two dummy variables: WH = 1 if white, 0 if black, and –1 if other race; BL = 1 if black, 0 if white, and –1 if other race.

Appendix D

- Gender: Male = 1 if male and -1 if female.
- Quarter of Assignment: represented by a dummy variable ($Q1 = 1$ if the child was assigned in the first quarter, else $Q1 = -1$) and a continuous variable for a linear trend over time ($AssignQ = \text{Sample quarter} - 1$. $AssignQ$ ranged from 0 to 7).
- Group: $Group = 1$ if the child was eligible for subsidized guardianship and $Group = -1$ if the child was not eligible for subsidized guardianship.
- Prior: Prior time in foster care was calculated as follows: Calculate $Pcare = (\text{Date at assignment} - \text{Date at first placement in foster care}) / (\text{Date at assignment} - \text{Date at birth})$. For all children with the same age, rank $Pcare$ from smallest to largest. Prior is a relative rank of $Pcare$, ranging from 0 for less prior care than all other children of the same age to 1 for more prior care than all children of the same age. For the presentation of results, the prior time variable was categorized as "Less prior care" ($Prior \leq 0.5$) and "More prior care" ($Prior > 0.5$).
- HMR: $HMR = 1$ if the child was in the home of a relative (HMR) at the time of assignment, otherwise $HMR = -1$.
- DCFS Region: Region was represented by two variables, $ESL = 1$ for region 4A (East St. Louis), 0 for region 1B (Peoria) and -1 for region 6C (Chicago). $PEO = 1$ for region 1B, 0 for region 4A, and -1 for region 6C.

The children in the analysis are clustered in the sense that children from the same family or with the same provider may have similar experiences and will not be independent, as assumed by survival analysis. Under reasonable assumptions, the clustering will affect the standard error estimates of the parameters (and the associated p-values). SAS PROC PHREG provides the COVS(AGGREGATE) option to obtain estimates of the standard errors and p-values corrected for the clustering.⁴⁶ For the survival analysis results described below, the clusters were defined by family. In a preliminary analysis, similar results were obtained when using clusters defined by provider. Because the COVS() option does not work with time dependent variables the steps described in the next paragraph were used to identify the final model.

The best model was identified by including all main effects and two-way interactions in a model for predicting the rate of achieving permanency, adoption, or subsidized guardianship. Chi-square tests, using the COVS() option, were defined to assess the significance of each main effect or interaction. Sequentially, the least significant interaction and/or main effect was removed from the model and the model was refit until all effects were significant at the 5% level. However, main effects that were not significant at the 5% level were not removed if they were part of an interaction that was significant at the

⁴⁶ Using the COVS option, PHREG calculates a sandwich estimator of the variance-covariance matrix

Appendix D

5% level. When a factor was removed, all variables associated with the factor were removed. For example: race was represented by two variables (WH and BL) and quarter of assignment was represented by two variables (Q1 and AssignQ). The interaction of race and quarter of assignment was represented by four variables (WH*Q1, WH*AssignQ, BL*Q1, and BL*AssignQ). If the interaction of race by assignment quarter was not significant, all four variables were removed from the model. This factor was retained if it was significant at the 5% level. In effect, the final model was obtained by a manual stepwise elimination of non-nested factors.

For any factors or interactions that were significant at the 5% level, a time dependent factor (Time*(variables for the factor or interaction)) was added to the model. Because the COVS() option does not work with time dependent variables, the COVS() option was removed. With the COVS() option removed, the "nominal significance" of a factor as estimated by PHREG is generally more significant than the correct value (when using the COVS() option). Starting with the model with the time-dependent factors, factors were sequentially removed until all remaining factors were either significant at the 1% nominal level or were nested within other factors that were significant at the nominal 1% level. Because all factors in the model were significant at the 5% level before adding the time dependent terms, it appears reasonable to consider all terms in the final model as significant at the 5% level. Significance levels in the tables below should be considered approximate.

Table B-1 shows the parameters that are significant at the nominal one percent level when predicting rate of achieving permanency. Table B-2 shows the parameters that are significant at the nominal one percent level when predicting adoption rate, and Table B-3 shows the parameters that are significant at the nominal one percent level when predicting rate of accepting subsidized guardianship. When modeling subsidized guardianship, the analysis was restricted to children who were offered subsidized guardianship.

The model results are presented using survival plots (SAS PROC LIFETEST). For the survival plots, continuous variables were recoded to categorical variables to present the results. Age at assignment was recoded to: 2 to 5, 6 to 9, 10 to 11, 12 to 13, and 14 to 17. Time in foster care prior to assignment was recoded to "Less prior care" (Prior \leq 0.5) and "More prior care" (Prior $>$ 0.5). Although the effect of sample quarter was anticipated to be primarily a difference between the first quarters and later quarters, the survival plots suggested that the differences were between the first three quarters and quarters 4 through 7. The curve for quarter 8 was more similar to that for the first three quarters than the later quarters. However, there were relatively few respondents assigned in quarter 8. To be more consistent with the model assumptions (assuming a trend over time), the quarter 8 results were grouped with the later quarters, creating a category for quarters 4 through 8.

Table B-1. Factors that are significant at the nominal one percent level when predicting permanency.

Factor	Chi-Square	DF	Pr > ChiSq	Variable	Estimate	Std Err	Chi-Square	Pr > ChiSq
Group	54.03	1	<.0001	Group	0.1107	0.0151	54.03	<.0001
Age	10.01	2	0.0067	AgeA	0.0296	0.0128	5.33	0.0210
				AgeB	-0.1184	0.0374	10.01	0.0016
AssignQtr	159.06	2	<.0001	Q1	0.1407	0.0580	5.88	0.0153
				AssignQ	0.2413	0.0254	90.58	<.0001
Prior	15.06	1	0.0001	Prior	0.4459	0.1149	15.06	0.0001
HMR	23.60	1	<.0001	HMR	0.2294	0.0472	23.60	<.0001
Time*Age	86.90	2	<.0001	Time*AgeA	-0.0319	0.0062	26.26	<.0001
				Time*AgeB	-0.0379	0.0204	3.44	0.0635
Time*AssignQtr	100.30	2	<.0001	Time*Q1	-0.0372	0.0278	1.80	0.1799
				Time*AssignQ	-0.1039	0.0141	54.48	<.0001
Time*Prior	12.60	1	0.0004	Time*Prior	-0.1970	0.0555	12.60	0.0004

Table B-2. Factors that are significant at the nominal one percent level when predicting adoption.

Factor	Chi-Square	DF	Pr > ChiSq	Variable	Estimate	Std Err	Chi-Square	Pr > ChiSq
TAge	20.74	2	<.0001	AgeA	-0.5749	0.1622	12.57	0.0004
				AgeB	-0.1372	0.0675	4.13	0.0422
TAssignQ	132.22	2	<.0001	Q1	0.2757	0.0705	15.29	<.0001
				AssignQ	0.2971	0.0307	93.65	<.0001
TPrior	41.80	1	<.0001	Prior	0.8821	0.1364	41.80	<.0001
THMR	12.71	1	0.0004	HMR	-7.0849	1.9873	12.71	0.0004
TAge_HMR	12.54	1	0.0004	AgeA_HMR	0.5660	0.1598	12.54	0.0004
Treg_Age	17.56	4	0.0015	PEO_AgeA	0.0457	0.0237	3.71	0.0541
				PEO_AgeB	-0.0139	0.0763	0.03	0.8552
				ESL_AgeA	-0.0764	0.0258	8.74	0.0031
				ESL_AgeB	0.0175	0.0904	0.04	0.8469
Treg	38.68	2	<.0001	PEO	-0.3752	0.1701	4.87	0.0274
				ESL	0.9099	0.1684	29.21	<.0001
TXAge	5.23	2	0.0731	Time*AgeA	0.1902	0.0895	4.51	0.0336
				Time*AgeB	-0.0332	0.0273	1.47	0.2246
TXAssignQ	79.10	2	<.0001	Time*Q1	-0.0735	0.0328	5.01	0.0252
				Time*AssignQ	-0.1198	0.0166	52.33	<.0001
TXPrior	27.96	1	<.0001	Time*Prior	-0.3467	0.0656	27.96	<.0001
TXHMR	7.30	1	0.0069	Time*HMR	3.0208	1.1182	7.30	0.0069
TXAge_HMR	6.66	1	0.0098	Time*AgeA_HMR	-0.2292	0.0888	6.66	0.0098
TXreg	15.95	2	0.0003	Time*PEO	0.0283	0.0550	0.26	0.6068
				Time*ESL	-0.1777	0.0619	8.24	0.0041

Table B-3. Factors that are significant at the nominal one percent level when predicting subsidized guardianship.

Factor	Chi-Square	DF	Pr > ChiSq	Variable	Estimate	Std Err	Chi-Square	Pr > ChiSq
TAge	17.31	2	0.0002	AgeA	0.1454	0.0438	11.01	0.0009
				AgeB	-0.1100	0.1038	1.12	0.2892
TAssignQ	5.49	2	0.0643	Q1	0.2055	0.1904	1.16	0.2805
				AssignQ	-0.0134	0.0837	0.03	0.8727
THMR	0.01	1	0.9328	HMR	0.0165	0.1960	0.01	0.9328
TAssignQ_HMR	10.31	2	0.0058	Q1_HMR	-0.1591	0.1902	0.70	0.4028
				AssignQ_HMR	0.0754	0.0835	0.81	0.3670
TXAge	15.37	2	0.0005	Time*AgeA	-0.0105	0.0190	0.30	0.5809
				Time*AgeB	-0.1127	0.0522	4.67	0.0308

Logistic Regression

For the round 2 respondents, logistic regression was used to assess whether the difference in permanency between the demonstration and cost-neutrality group was statistically significant after adjusting for age. For this analysis, age was defined as age at assignment, as in the survival analysis. However, about one-quarter of the respondents had no date at which their assignment was posted to the DCFS computer system. For these children the age at assignment was based on the quarter of assignment. Age categories, used in the logistic regression, were defined as: 2 to 5, 6 to 9, 10 to 11, 12 to 13, and 14 to 17. The dependent variable is a flag indicating whether the child had achieved permanency at the time of the follow-up interview (coded as "Y" and "N"). The KidGrp variable equaled one for the cost-neutrality group and two for the demonstration group. The model was fit using WesVar. Portions of the WesVar output follow.

Table B-4. Logistic regression results

MODEL(S):	perm = kidgrp agecat[5] perm = kidgrp
NUMBER OF REPLICATES :	50
MODEL :	perm = kidgrp agecat[5]
Class Variable Index :	agecat.1 : 10 to 11 agecat.2 : 12 to 13 agecat.3 : 14 to 17 agecat.4 : 2 to 5 agecat.5 : 6 to 9
MISSING :	2 (UNWEIGHTED) 9.196735 (WEIGHTED)
NONMISSING :	2725 (UNWEIGHTED) 8069.803265 (WEIGHTED)
Success = records with dependent value equal to	Y : 1927 (UNWEIGHTED) 5696.447762 (WEIGHTED)
Failure = records with dependent value equal to	N : 798 (UNWEIGHTED) 2373.355503 (WEIGHTED)
ITERATIONS REQUIRED FOR FULL SAMPLE :	5
MAXIMUM ITERATIONS FOR REPLICATE SAMPLE :	5
-2 LOG LIKELIHOOD FOR FULL SAMPLE :	9042.11889
-2 LOG LIKELIHOOD FOR MODEL CONTAINING INTERCEPT ONLY :	9777.13008

PARAMETER	PARAMETER ESTIMATE	STANDARD ERROR OF ESTIMATE	TEST FOR H0: PARAMETER=0	PROB> T
INTERCEPT	0.7917	0.5136	1.5414	0.1296
kidgrp	0.2634	0.1232	2.1387	0.0375
agecat.1	-0.3441	0.4260	-0.8077	0.4232
agecat.2	-1.4565	0.2751	-5.2938	0.0000
agecat.3	-2.0697	0.2318	-8.9277	0.0000
agecat.4	0.0557	0.4012	0.1389	0.8901

TEST	F VALUE	NUM. DF	DENOM. DF	PROB>F
OVERALL FIT	25.0699	5	45	0.0000
kidgrp	4.5742	1	49	0.0375
agecat[5]	28.3019	4	46	0.0000