

## **Executive Summary**

### **National Survey of Child and Adolescent Well-Being**

The Children's Bureau of the Administration on Children, Youth and Families, U.S. Department of Health and Human Services, has undertaken the National Survey of Child and Adolescent Well-Being (NSCAW) to learn about the experiences of children and families who come in contact with the child welfare system. NSCAW is gathering information associated with over 6,200 children from public child welfare agencies in a stratified random sample of 92 localities across the United States. The first national longitudinal study of its kind, NSCAW is examining the characteristics, needs, experiences, and outcomes for these children and families. The study, authorized under the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996<sup>[1]</sup>, will also provide information about crucial program, policy, and practice issues of concern to the Federal government, state and local governments, and child welfare agencies.

#### **One Year in Foster Care Wave 1 Data Analysis Report**

This report focuses on a subset of over 700 children who have been in foster care for one year. The information provided here was collected from child welfare workers; current relative, foster parent, or group caregivers; and the children themselves. In authorizing the study, special concerns of Congress included the length of time that children spend in foster care and other out-of-home care settings, as well as how children fare developmentally during these experiences. For this reason, this subset of an additional 700 children was added to the core NSCAW sample of 5,500 children entering the child welfare system (and the study) at the point of contact with Children's Protective Services (CPS). The One Year in Foster Care (OYFC) component of the NSCAW study is intended to identify important processes and outcomes involved in the provision and experience of out-of-home care. Out-of-home care includes conventional foster care, kinship foster care, group care, residential treatment, and other settings.

At one year, these children are being assessed at an opportune time, as Federal child welfare law calls for a decision to be made about the permanent plan (i.e., reunification, adoption, guardianship) of children in foster care and discourages stays beyond one year without "compelling reasons." This report provides the first national look at the characteristics of this particular sample of children in foster care for one year.

This report is also significant because it is based on the individual case-level data from NSCAW. The two previous reports (U.S. DHHS, June 2001) looked at state- and county-level child welfare services characteristics. For this reason, the data collection and analytical methods and measures are thoroughly detailed. Although this report seeks to identify key findings from these baseline data, a comprehensive analysis of these data was not possible due to the sheer size of the dataset. Further analyses can be generated from these data, which are available to the research community in the National Data Archive on Child Abuse and Neglect (NDACAN) at Cornell University.

## **Primary Research Questions and Key Findings**

The research provides answers to basic questions that are critical to an understanding of this population:

### **Who are the children in foster care one year after entry?**

**Children's age and race.** Children included in the study range in age from infants to just over 15 years old:

- 24% are between 1 and 2 years old,
- 17% are between 3 and 5 years old,
- 32% are between 6 and 10 years old, and
- 27% are 11 years old and older.

African-American children make up the largest group (45%), with fewer white children (31%). The remainder are American Indian/Alaskan Native (6%), Asian/ Hawaiian/Pacific Islander (2%), or "other" (7%). Seventeen percent of the children are identified as of Hispanic ethnicity.

**Type and multiplicity of abuse.** Most children (60%) in the OYFC population were placed in out-of-home care with neglect as the most serious type of maltreatment. About half of these were neglected through failure to provide; the other half, through failure to supervise. The most serious types of abuse for the rest were identified as follows:

- 10%, physical abuse;
- 8%, sexual abuse;
- 14%, emotional, moral/legal, or educational abuse, or abandonment; and
- 8% for reasons other than abuse or neglect (e.g., for mental health services or domestic violence).
- Many OYFC children have experienced more than one type of abuse. Analysis of other types of abuse or neglect experienced by these children showed that their being neglected (either failure to provide or failure to supervise) was often concurrent with another type of abuse or neglect. Children who experienced sexual abuse as the most serious type of maltreatment were the most likely of any children to also experience other kinds of abuse.

**Type of placement.** Forty-four percent of OYFC children are in non-kin foster homes, and about one-quarter (24%) are in kinship foster homes. Seven percent are in group homes or residential programs. One-quarter of OYFC children who were sampled had gone home by the time of the interview. This is probably attributable to a timely one-year case-review hearing that is followed by reunification. Among all children still in care (that is, omitting the latter 25%), the proportions are as follows: non-kin foster homes—58%, kinship foster homes—32%, group homes—9%. Children in all age groups are more likely to have been placed in a non-kin foster home than in any other type of setting, with kinship care being the second most common placement type. Similarly, children in all race groups, except Hispanic, are more likely to have been placed in non-kin foster homes than in any other type of placement. Hispanic children are placed in non-kin foster homes and kin care settings in nearly equal proportions. In addition, all children, regardless of the most serious abuse type, are more likely to have been placed in a foster home, although children with sexual maltreatment as the most serious abuse type are the most likely of all abuse categories to have been placed in group homes.

**Child health.** Caregivers were asked about children's health problems that "lasted or reoccurred." Over one-quarter of the OYFC children have some type of recurring physical or mental health problem. Eleven percent reported general mental and physical health problems, 12% reported some type of gastrointestinal illness, 4% reported a difficulty beginning prenatally or at birth. Four percent have a cardiovascular disorder, and 7% of the OYFC children have a neurological, endocrine, or blood disorder.

**Children's functioning on developmental measures.** Children's functioning was assessed with multiple standardized developmental measures. Children in out-of-home care tend to fall marginally below the norm compared with the general population on nearly every measure, including measures of cognitive capacities, language development, behavioral problems, and academic achievement.

Although these lower scores are reason for concern, such scores are somewhat more common among poor children, which are the group of children most involved with child welfare services. The NSCAW OYFC children have particularly low social skills, with almost two-fifths rated as having "fewer social skills." Their daily living skills are also low. Problem behavior is very high among children in all types of placement. Children in group care have the most social and cognitive problems, as do children with sexual abuse as the most serious abuse type, but these differences are substantially attributable to their older age.

**Overall child social and cognitive development.** Two aggregate measures of child social and cognitive development were created utilizing the scores from the standardized measures. One computed the proportion of clinical scores each child had, and the other computed an overall z-score. The z-score has a mean of 0 and a standard deviation of 1. Standard scores are particularly useful when comparing performance on a variety of measures each having a different mean and standard deviation. The proportion of clinical scores provides a basis for contrasting how OYFC children are faring compared with children in the general population, whereas the overall z-score provides a continuous measure for comparing the social and cognitive development among children in this study. Analyses of these two measures indicated that, in general, children in group care have lower social and cognitive development, whereas children in kin-care settings have higher social and cognitive development. Children with sexual maltreatment as the most serious abuse type also tend to fare worse than those with other abuse types.

## **Who are the current caregivers, and what kind of environment do the children live in?**

**Caregiver age.** Current caregivers tend to be middle-aged or older; almost two-thirds (62%) are aged 40 or older. Caregivers in kin-care settings are more likely to be aged 60 or older than are caregivers in non-kin foster homes or group homes, and caregivers in group homes are much more likely to be under age 40 than caregivers in foster homes or kin-care settings. This greater proportion of older caregivers is very different from another nationally representative sample, the National Survey of America's Families (NSAF), a nationally representative survey of the characteristics of households with at least one member under age 65. Only 2% of parents in all NSAF households were older than 54. The age of current caregivers is somewhat less different than those NSAF households that are caring for children whose mother lives elsewhere.

**Caregiver race.** Most caregivers are black/non-Hispanic (42%) or white/non-Hispanic (36%). Another 15% of current caregivers are Hispanic. The race of the caregivers does not significantly differ between kin and non-kin caregivers. In both kin-care settings and non-kin foster homes, the race of the caregiver generally matches the race of the child. More than three-in-four children are living with a caregiver of the same race/ethnicity. Children of *other* races are the exception to this trend; they are almost as likely to be living with a black/non-Hispanic (24%), white/non-Hispanic (26%), or Hispanic (21%) caregiver as they are an *other* race caregiver (30%).

**Marital status.** Caregivers are almost as likely to be single as married (45% vs. 53%). Single caregivers break down as follows: 20% never married, 13% divorced, 6% separated, and 6% widowed. More non-kin caregivers are married than kin caregivers (73% vs. 55%).

**Education.** The education of the current caregivers typically is high school or less (56%). An additional 24% of caregivers have earned an associate's degree or certificate from a vocational/technical school. Another 14% have received a bachelor's degree or higher. In general, non-kin caregivers have slightly higher educational achievement than kin caregivers. Almost two-thirds (63%) of group home caregivers have a bachelor's degree or higher. Once again using the NSAF to make national comparisons, group home caregivers are noticeably different from other households, tending most frequently to have more than a high school degree. Kinship caregivers and household where the child's mother lives elsewhere tend to be most similar, which is not surprising considering that these households, by definition, might also be classified as a kinship-care situation.

**Employment.** Similar proportions of current caregivers work fulltime or do not work (41% and 36%, respectively). About one in six works part-time. In all, then, more than half of caregivers work full- or part-time. There is no significant difference in employment status between kin and non-kin caregivers.

**Experience as foster parent.** Almost half of all caregivers have fewer than three years experience as a foster parent. There is a significant difference between kin and non-kin foster caregivers in this area, with non-kin foster caregivers having more experience. More than half of kin caregivers have had one year or less of experience as a foster parent, whereas over one-third of non-kin foster caregivers have had six or more years experience as foster parents.

**Mental and physical health.** Self-rated mental and physical health status is roughly equal for kin and non-kin caregivers. Older caregivers report better mental health, whereas younger caregivers report better physical health.

**Composition of household.** The average number of household members in kin-care and non-kin foster homes together is 5.2. This includes an average of 2.1 adults and 3.1 children. The average number of household members in the kinship care homes is 4.5. This includes an average of 2.1 adults and 2.4 children. Non-kin foster homes have, on average, one more household member than kinship care homes (mean=5.6). This is because of the greater number of children (the number of adults is the same); non-kin foster homes include an average of 2.1 adults and 3.4 children. About one-in-three children in non-kin foster homes lives in a household with five or more children, significantly more than in kin-care settings.

**Observed caregiving environment.** To assess the caregiving environment in non-kin foster homes and kin-care settings, scores on the NLSY version of Home Observation Measure of the Environment (HOME-SF) measure (which is based on the interviewer's observation) were examined. Among children less than 3 years old, those in non-kinship care had significantly higher scores than children in kinship care. This may indicate that children less than 3 years old in foster care are in a more favorable environment than children of this age in kinship care (a higher score indicates a better caregiving environment). There are no other significant differences in mean HOME-SF scores based on placement type of kinship and non-kinship care. However, there is indication that caregivers aged 35 to 44 caring for children less than 3 provide more favorable environments than caregivers aged 55 years and older caring for children of this age. It also appears that caregivers aged 35 to 44 caring for children between the ages of 6 to 10 provide a more favorable environment than older caregivers who care for children of this age. In addition, for children of all ages, results show that black caregivers had lower total HOME-SF scores than white caregivers. Among children ages 3 to 6 and 6 to 10, black caregivers had lower total HOME-SF scores than caregivers of *other* races.

**Relatedness and closeness.** On average OYFC children report feeling positive about their caregivers, reporting a high sense of relatedness, though children in group care report this relatedness to a lesser degree than those in kinship care. Overall, OYFC children tend to feel at least slightly closer to their secondary caregivers. Children in foster care for one year tend to report feeling less close to their caregiver than children sampled in the Adolescent Health study. Yet, OYFC children tend to work on school projects and talk about personal problems and school issues with their primary caregiver more often than do adolescents in the general population.

**Physical and community environment.** Assessments of the physical environment using select observations in the HOME-SF show that the difference between kin and non-kin caregivers is not significant for any single, physical-environment indicator. These indicators include, for example, whether the home appears clean and not overly cluttered and whether the neighborhood is esthetically pleasing. However, the overall average physical-environment score is significantly higher (a higher score indicates a better physical environment) among kin caregivers of children between the ages of 6 to 10. There are no significant differences among types of placement for total community environment.

**Exposure to maltreatment.** Analysis of children's exposure to maltreatment and violence by their current caregiver indicates that a small proportion of children may be experiencing harsh discipline but that most are experiencing more routine forms of care in non-kin foster homes and kinship care settings: For example, 10% to 14% have seen someone get yelled at or have been yelled at by their current caregiver; and approximately 4% or fewer have observed a theft, an

adult point a knife or gun at someone, an arrest, or a shooting. Children in kinship and non-kinship foster care experienced similar levels of these incidents. (There were too few cases to confidently compare group home care with other types of placements.)

**What are children's experiences in out-of-home care and their expectations for the future?**

***Children's view of current living situation.*** Children aged 6 and older were asked about their experiences in out-of-home care, including how they viewed their current living situation, their thoughts about where they would live in the future, and their views of their biological parents. In general, a positive picture of foster care arrangements emerged as most children like the people they are living with (90%) and say they feel like a part of the family (92%). Very few (11%) have attempted to run away from their current placement. Over half state that the neighborhood and the school they are currently attending are better than those in which they had previously lived or that they had attended (54% and 59%, respectively).

***Feelings toward and contact with their biological parents.*** However, these positive feelings toward their current arrangements are coupled with a strong desire to have more contact with and perhaps to live with their biological parents again. Half (50%) want their current placement to be their permanent home. Thirty-six percent want their current caregivers to adopt them. Over half (58%) believe that they will live with their parents again and three-quarters believe that "things will be different this time" if they were to live with their parents. Over half (60%) see their biological mother twice a month or less. And 41% reported never seeing their biological father. However, over half of the children reported wanting to see their mother and father more often (65% and 60%, respectively).

***Feelings about placement by placement type and age.*** The children in group home placements are generally less satisfied with their placement than the children in kinship or non-kinship foster care—more of these children do not like the people they live with and do not want their current arrangement as a permanent home. Children in kinship care see their parents more frequently than children in the other two placement types. In addition, among children aged 11 and older, those in kinship care are less likely to have tried to run away than those in group care or non-kin foster homes.

**What are the risk factors facing a family prior to placement? What are the services that children and their primary caregivers receive?**

***Risk factors at time of placement.*** Child welfare workers were asked to identify some risk factors that the family might have experienced prior to the placement. About 60% of the families had between 3 and 5 of the 7 risk factors examined, with a mean of 3.4. The lack of a second supportive caregiver was the most common risk factor present at the time of placement. The presence of the risk factors examined does not vary significantly by the race of the child, most serious type of abuse, or placement type. Age, however, is significant with regard to some of the risk factors. The families of children aged 1 to 2 are more likely to have had low social support, those with children aged 1 to 5 are more likely to have had a caregiver with a history of abuse, and those with older children are more likely to have had previous reports of maltreatment.

***Types of services needed and provided to caregivers and children.*** Child welfare workers were asked what types of services were needed by and provided to permanent primary caregivers (e.g., biological parents). Medicaid was the primary service to which they referred biological parents, with income assistance, day care, mental health services, and substance abuse services also

commonly needed. Families also needed help with employment issues, domestic violence, legal services, housing, and health care services.

Of three primary services that are often provided to families involved with the child welfare system, only 15% of families received intensive family preservation services and only 16% received other home- or community-based services. They were most likely to have actually received (rather than simply be referred to) non-intensive in-home services (52%).

***Child mental health.*** Caregivers were asked about specialty mental health services children had received for emotional, behavioral, learning, attention, or substance abuse problems in the twelve months prior to the interview. Twenty-three percent of OYFC children have received at least one specialty mental health service in the past twelve months, with private professional help (13%) and day treatment (12%) being the services most commonly received for these problems. Bivariate analyses indicate that older children, children in group care, children with higher proportions of clinical scores, and children with a clinical CBCL score are significantly more likely to have received a specialty mental health service. Logistic regression confirms the results with regard to children in group care and children with higher proportions of clinical scores, and further indicates that white children are significantly more likely than black children to have received a specialty mental health service. This belies the arguments that mental health services are given to all children in foster care as a routine part of their service package or that they are given in a random or haphazard fashion. At the same time, many children in out-of-home care with significant behavior problems are not receiving mental health services.

***Supplementary or special education services.*** Responses to questions asked of the child's caseworker, the child's non-permanent caregiver, and the child's teacher were examined to assess the supplementary and special education services that children in out-of-home care need and are receiving. Overall, 36% of OYFC children currently in out-of-home care with a clinical or borderline score on at least one of nine standardized measures have received special education services, and 92% have received supplementary or special education services. A logistic regression model including the younger (age 1 to 5) children indicated that children in kinship care are significantly less likely than children in non-kin foster care to receive supplementary or special education services. A similar analysis of the older (age 6 to 15) children indicated that only the gender of the child is significant, with males having a higher likelihood of receiving supplementary or special education services. When examining only receipt of special education services (i.e., leaving out more general supplementary services like assessment, tutoring and counseling), the model for the younger children indicated that children aged 1 to 2 are significantly more likely than children aged 3 to 5 to receive special education services, and Hispanic children are significantly more likely than black children to receive such services. For the older children, those in group care are significantly more likely than those in non-kin foster care or kinship care to receive special education services.

Referral for services. Child welfare workers reported referring children to necessary services most of the time. When referrals were not made, it was because the child already was receiving the service or for some other *unspecified reason*.

#### **To what extent are reunification plans in place?**

***Status of reunification plan.*** Based on data from child welfare workers, there is a current plan for reunification for about one-quarter (24%) of the children who have been in foster care for one year, with another quarter of the children already having returned home. For almost all of these children with a current plan, the plan is to reunify with their mother or father (87% and 10%, respectively). For those children with *no* current reunification plan, child welfare workers were

asked if reunification efforts had *ever* been made with anyone in the child's family. The data show that such efforts have been made for 84% of the OYFC children still in out-of-home care (for whom there is not a current reunification plan). Approximately one-in-twelve OYFC children (8%) have never had a reunification plan.

**Status of plan by child characteristics.** Completed reunification or presence of a current reunification plan does not appear to differ significantly based on the child's age or race. With regard to age, however, the youngest children appear to have fewer reunification plans than the children in the three older age groups, which would be consistent with the foster care caseload dynamics research, indicating that younger children are much more likely to have reunification plans changed to adoption. Children with a most serious abuse type of failure to supervise are more likely to have a current reunification plan (or completed reunification) than children with a most serious abuse type of failure to provide. Examining the presence of a current reunification plan alone (i.e., not including those with completed reunification), out-of-home placement type is a significant factor, with children in group homes significantly more likely to have a current reunification plan than children in kin care settings (children in non-kin foster homes and children in kin care settings do not differ significantly with regard to presence of a current reunification plan). There do not appear to be major differences by age, race, placement type, or most serious type of abuse with regard to whether reunification efforts were *ever* made.

**Foster parents' thoughts and feelings about adoption.** The majority of foster parents (68%) have considered adopting the child if that becomes an option in the future. The most common factors contributing to the foster parents' desire to adopt are their feelings of love and affection for the child and the feeling that the child is part of their family. The most common factor discouraging those foster parents who have considered adopting the child from wanting to do so is that the biological parents' rights have not been relinquished or terminated; however, almost one-fifth of these foster parents identify no factors discouraging them from adopting. The majority (85%) of foster parents who have considered adopting the child have spoken to their caseworker about this, and 89% of those who have spoken to their caseworker indicate the caseworker's response to be encouraging or strongly encouraging.

#### **What are the characteristics of child welfare workers?**

**Child welfare worker age and race.** Most child welfare workers are relatively young, with more than half under 40 years old. About 46% are white, 32% are black, 11% are of Hispanic ethnicity, and 12% identify themselves as *other*. The child welfare worker's race is highly related to the race of the children with whom they work; that is, most black, white, and Hispanic child welfare workers work with black, white, and Hispanic children, respectively. Looked at from the other perspective, almost half of black children have a black child welfare worker, while most white, Hispanic, and children of *other* races have white welfare workers. There is not a strong relationship between child welfare workers' race and age.

**Education.** The educational preparation of child welfare workers varies widely. About 60% have a bachelor's degree, and about 40% of those have their bachelor's in social work. Just over 20% have a master's in social work, but another 16% have a master's in another discipline. Black, white, and Hispanic child welfare workers are most likely to have a Bachelor's degree in something other than social work than any other type of degree. Child welfare workers of "other" races are most likely to have a master's degree in something other than social work than any other type of degree.



## **How are case characteristics related to agency characteristics?**

***Number of risks present at time of placement.*** Child welfare services are local in nature and those locations may be significantly related to service configurations. Using information collected from both the census and interviews with child welfare managers, we examined a few questions about the relationship between agency and PSU characteristics and service delivery. Results indicated that with regard to the number of risks present in the household at the time placement, children in rural PSUs had significantly more risks than did those in urban PSUs. In addition, children in non-poor PSUs had significantly more risks than did those in poor PSUs.

***Child welfare worker characteristics.*** Two child welfare worker characteristics—their highest degree and their race—also had notable differences across PSU types. It seems that county-administered agencies employ child welfare workers with more advanced degrees, as they have significantly more child welfare workers with MSWs and other master's degrees and significantly fewer with BSWs and other bachelor's degrees than do state-administered agencies. Although non-poor PSUs have significantly fewer child welfare workers with BSWs, they have significantly more with MSWs, as well as significantly more with other bachelor's degrees; poor counties have significantly more child welfare workers with other master's degrees. Small or medium, rural, and non-poor PSUs are all less diverse than their counterparts with regard to the race of their child welfare workers, as they have significantly fewer black and "other" race child welfare workers than large, urban, and poor PSUs. Small or medium and rural PSUs also have fewer Hispanic child welfare workers.

***Child Race/Hispanicity.*** In addition to having less ethnically and racially diverse child welfare workers, in our data, the small or medium and rural PSUs also have less ethnically and racially diverse clientele, with small or medium PSUs having significantly fewer black children in the child welfare system than large PSUs and rural PSUs having both fewer black children and fewer Hispanic children than urban PSUs. Child race/Hispanicity also differs significantly based on agency administration, as state-administered agencies appear to have less ethnically diverse clientele (i.e., fewer Hispanic children) than county-administered agencies.

## **Implications for Child Welfare Services**

The vast majority of children who have spent one year in out-of-home care have substantial social and cognitive impairments. These impairments cut across age groups and types of placements. Prior local developmental studies show continuing educational and developmental problems for children who have been in foster care, whether or not they remain in foster care (see, e.g., Kerman, Wildfire, & Barth, 2002; Taussig et al., 2001). This report indicates the magnitude of the remediation challenges that children in foster care present to the nation's service providers. Some of that remediation is underway, as these children are experiencing high levels of supplementary and special education and mental health services.

This study also finds a child welfare system caring for quite troubled children and youth with caregivers and child welfare workers who are diverse but lack much formal training or education in the work they are doing. Although this study cannot assess the capacity of out-of-home care providers to meet the needs of the children they care for, the relatively large family sizes, low education, and older age of caregivers suggests that these homes will require considerable support in order to help generate these important gains. At the same time, out-of-home

placements are experienced by the children and youth as supportive and positive, with the exception of group home care, which is clearly less favored.

The children who remain in foster care at one year are a diverse group with regard to their backgrounds and experiences. Among children in this sample, the largest groups are infants and adolescents who came into care because they were neglected. More older children were sexually abused, physically abused, or came in for other reasons. The severity of abuse is consistently high across age groups. Almost all children had a reunification plan, at one time, but the majority of the younger children no longer have reunification plans—more attention needs to be paid to expeditious development of reunification and permanency plans for adolescents and children in group care.

Parents are believed to be receiving a wide range of general human services and child welfare services and are viewed by the child welfare workers as having access to the services that they need for reunification. These data suggest that when providing services to parents of children in foster care fails, the services that are most often unsuccessful—and so recognized by child welfare workers—are housing, substance abuse, and mental health treatment. Data from parental reports in the NSCAW CPS study will help to confirm this view of services.

NSCAW will continue to follow the life course of these children to learn whether these long-term threats to their well-being and high levels of developmental difficulties will manifest themselves in greater problems or will be mitigated. Data collection at 30 and 48 months after placement will provide a clearer understanding of the permanency status for these children and the signs of health and well-being of this vulnerable population.

---

<sup>[1]</sup> Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Sec. 429A, National Random Sample Study of Child Welfare (PL No. 104-193).